



GUARDIAN®

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Group Policy#: 00522587

# FINANCIAL SERVICES INSTITUTE INC

ALL ELIGIBLE MEMBERS

Active FSI Membership required to initiate and maintain coverage

## CRITICAL ILLNESS PLAN HIGHLIGHTS

Here you'll find summary information about your Member Critical Illness Benefit Plan.

Benefit information illustrated within this material reflects the plan covered by Guardian as of 03/01/2016

**Critical Illness Benefit Summary**

**Group Policy #: 00522587**

**About Your Member Benefits:**

It takes a lot to beat a serious illness. Unfortunately, it can also cost a lot. When you or a family member suffers a serious illness like a stroke or heart attack, Critical Illness Insurance can help with expenses that medical insurance doesn't cover like deductibles or out of pocket costs, or services like experimental treatment. Critical Illness supplements your medical and your disability income insurance. The lump sum benefit is paid when you need it most, upon diagnosis, so you can rest assured that you will have funds to offset upcoming out of pocket costs, and that you'll have the flexibility to elect treatments with less worry about the cost. Review your options and enroll today!

**What Your Benefits Cover:**

**CRITICAL ILLNESS**

**Benefit Amount(s)**

Member may choose a lump sum benefit of \$10,000 to \$50,000 In \$5,000 increments.

**CONDITIONS**

|                    | <b>1st OCCURRENCE*</b> | <b>2nd OCCURRENCE*</b> |
|--------------------|------------------------|------------------------|
| Cancer             |                        |                        |
| Invasive Cancer    | 100%                   | 50%                    |
| Carcinoma In Situ  | 30%                    | 0%                     |
| Benign Brain Tumor | 75%                    | 0%                     |
| Skin Cancer        | \$250 per lifetime     | Not Covered            |
| Vascular           |                        |                        |
| Heart Attack       | 100%                   | 50%                    |
| Stroke             | 100%                   | 50%                    |
| Heart Failure      | 100%                   | 50%                    |
| Arteriosclerosis   | 30%                    | 0%                     |
| Other              |                        |                        |
| Organ Failure      | 100%                   | 50%                    |
| Kidney Failure     | 100%                   | 50%                    |

**ADDITIONAL CONDITIONS**

|                            | <b>1st OCCURRENCE ONLY*</b>      |
|----------------------------|----------------------------------|
| Addison's Disease          | 30%                              |
| ALS (Lou Gehrig's Disease) | 100%                             |
| Alzheimer's Disease        | 50%                              |
| Coma                       | 100%                             |
| Huntington's Disease       | 30%                              |
| Loss of Hearing            | 100%                             |
| Loss of Sight              | 100%                             |
| Loss of Speech             | 100%                             |
| Multiple Sclerosis         | 30%                              |
| Parkinson's Disease        | 100%                             |
| Permanent Paralysis        | 50% for 1 limb, 100% for 2 limbs |
| Severe Burns               | 100%                             |

**Spouse Benefit**

50% of employee's lump sum benefit

CRITICAL ILLNESS

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|--|--|
| <b>Benefit Reductions:</b> Benefits are reduced by a certain percentage when Member reaches age 70   | 50% at age 70  |
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| <b>*Guarantee Issue:</b> The 'guarantee' means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when you sign up for coverage during the initial enrollment period.             | Employee Guarantee issue up to \$25,000<br>Spouse Guarantee Issue up to \$12,500<br><br>For a child: All Amounts |
| <hr/>  |  |
| <b>*Pre-Existing Condition Limitation:</b> A pre-existing condition includes any condition for which you, in the specified time period prior to coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs. | 3 months prior, 12 months after Member's coverage eff date   |
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| Cancer Vaccine Benefit   | \$50 per lifetime for receiving a cancer vaccine   |
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## Critical Illness Cost Illustration

To determine the most appropriate level of coverage, you should consider your current basic monthly expenses and expected financial needs during a critical illness.

**Note: Your premium will not increase as you age**

| Issue Age                      | Monthly Premiums Displayed |                               |          |          |          |                 |
|--------------------------------|----------------------------|-------------------------------|----------|----------|----------|-----------------|
|                                | < 30                       | Election Cost Per Age Bracket |          |          |          |                 |
|                                |                            | 30-39                         | 40-49    | 50-59    | 60-69    | 70 <sup>†</sup> |
| <b>\$10,000 Benefit Amount</b> |                            |                               |          |          |          |                 |
| Member \$10,000                | \$9.12                     | \$11.96                       | \$20.90  | \$36.88  | \$55.90  | \$107.20        |
| Spouse \$5,000                 | \$4.62                     | \$6.06                        | \$10.60  | \$18.73  | \$28.40  | \$54.30         |
| <b>\$15,000 Benefit Amount</b> |                            |                               |          |          |          |                 |
| Member \$15,000                | \$13.62                    | \$17.86                       | \$31.20  | \$55.03  | \$83.40  | \$160.10        |
| Spouse \$7,500                 | \$6.87                     | \$9.01                        | \$15.75  | \$27.81  | \$42.15  | \$80.75         |
| <b>\$20,000 Benefit Amount</b> |                            |                               |          |          |          |                 |
| Member \$20,000                | \$18.12                    | \$23.76                       | \$41.50  | \$73.18  | \$110.90 | \$213.00        |
| Spouse \$10,000                | \$9.12                     | \$11.96                       | \$20.90  | \$36.88  | \$55.90  | \$107.20        |
| <b>\$25,000 Benefit Amount</b> |                            |                               |          |          |          |                 |
| Member \$25,000                | \$22.62                    | \$29.66                       | \$51.80  | \$91.33  | \$138.40 | \$265.90        |
| Spouse \$12,500                | \$11.37                    | \$14.91                       | \$26.05  | \$45.96  | \$69.65  | \$133.65        |
| <b>\$30,000 Benefit Amount</b> |                            |                               |          |          |          |                 |
| Member \$30,000                | \$27.12                    | \$35.56                       | \$62.10  | \$109.48 | \$165.90 | \$318.80        |
| Spouse \$15,000                | \$13.62                    | \$17.86                       | \$31.20  | \$55.03  | \$83.40  | \$160.10        |
| <b>\$35,000 Benefit Amount</b> |                            |                               |          |          |          |                 |
| Member \$35,000                | \$31.62                    | \$41.46                       | \$72.40  | \$127.63 | \$193.40 | \$371.70        |
| Spouse \$17,500                | \$15.87                    | \$20.81                       | \$36.35  | \$64.11  | \$97.15  | \$186.55        |
| <b>\$40,000 Benefit Amount</b> |                            |                               |          |          |          |                 |
| Member \$40,000                | \$36.12                    | \$47.36                       | \$82.70  | \$145.78 | \$220.90 | \$424.60        |
| Spouse \$20,000                | \$18.12                    | \$23.76                       | \$41.50  | \$73.18  | \$110.90 | \$213.00        |
| <b>\$45,000 Benefit Amount</b> |                            |                               |          |          |          |                 |
| Member \$45,000                | \$40.62                    | \$53.26                       | \$93.00  | \$163.93 | \$248.40 | \$477.50        |
| Spouse \$22,500                | \$20.37                    | \$26.71                       | \$46.65  | \$82.26  | \$124.65 | \$239.45        |
| <b>\$50,000 Benefit Amount</b> |                            |                               |          |          |          |                 |
| Member \$50,000                | \$45.12                    | \$59.16                       | \$103.30 | \$182.08 | \$275.90 | \$530.40        |
| Spouse \$25,000                | \$22.62                    | \$29.66                       | \$51.80  | \$91.33  | \$138.40 | \$265.90        |

<sup>†</sup>Benefit reductions may apply. See plan details.

### Manage Your Benefits:

Go to [www.GuardianAnytime.com](http://www.GuardianAnytime.com) to access secure information about your Guardian benefits. Your on-line account will be set up within 30 days after your plan effective date.

## \*EXCLUSIONS AND LIMITATIONS

### A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS FOR CRITICAL ILLNESS:

We will not pay benefits for the First Occurrence of a Critical Illness if it occurs less than 3 months after the First Occurrence of a related Critical Illness for which this Plan paid benefits. By related we mean either: (a) both Critical Illnesses are contained within the Cancer Related Conditions category; or (b) both Critical Illnesses are contained within the Vascular Conditions category. We will not pay benefits for a Second occurrence (recurrence) of a Critical Illness unless the Covered Person has not exhibited symptoms or received care or treatment for that Critical Illness for at least 12 months in a row prior to the recurrence. For purposes of this exclusion, care or treatment does not include:

(1) preventive medications in the absence of disease; and (2) routine scheduled follow-up visits to a Doctor.

We do not pay benefits for claims relating to a covered person: taking part in any war or act of war (including service in the armed forces) committing a felony or taking part in any riot or other civil disorder or intentionally injuring themselves or attempting suicide while sane or insane.

Members must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for Members on temporary assignment: (a) exceeding 1 year; or (b) in an area under travel warning by the US Department of State, subject to state specific variations.

During the exclusion period, this Critical Illness plan does not pay charges relating to a pre-existing condition. If this plan is transferred from another insurance carrier, the time an insured is covered under that plan will count toward satisfying Guardian's pre-existing condition limitation period. A pre-existing condition includes any condition for which an Member, in a specified time period prior to coverage in this plan, consults with a physician, receives treatment, or takes prescribed drugs. Please refer to the plan documents for specific time periods. State variations may apply.

Guardian's Critical Illness plan does not provide comprehensive medical coverage. It is a basic or limited benefit and is not intended to cover all medical expenses. It does not provide "basic hospital," "basic medical," or "medical" insurance as defined by the New York State Insurance Department.

Health questions are required on late enrollees. This coverage will not be effective until approved by a Guardian underwriter.

*The policy has exclusions and limitations that may impact the eligibility for or entitlement to benefits under each covered condition. See your certificate booklet for a full listing of exclusions & limitations..*

*If Critical Illness insurance premium is paid for on a pre-tax basis, the benefit may be taxable. Please contact your tax or legal advisor regarding the tax treatment of your policy benefits..*

**NOTE:** This summary is for illustrative purposes only and is an approximation. If any discrepancies between this summary and your premium payment or the coverage certificate exist, the payment record and coverage certificate prevails. Your Association has selected Guardian to provide Critical Illness coverage to eligible Members & dependents according to plan terms which have been mutually agreed upon. As an eligible Member, you can purchase this coverage at the group premium levels illustrated above.