CHS PROTECTION PLUS CANCER, HEART ATTACK & STROKE INSURANCE

CHS Protection Plus
Cancer, Heart Attack & Stroke Insurance

UNDERWRITTEN BY:
Guarantee Trust Life Insurance Company
ADH3-12

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WHY CANCER, HEART ATTACK & STROKE INSURANCE?

If you were diagnosed with cancer or suffered a heart attack or a stroke, the last thing you would want to worry about is your finances. Cancer, Heart Attack and Stroke coverage from Guarantee Trust Life Insurance Company (GTL) can help you receive the financial peace of mind that allows you to focus on what really matters most — your recovery.

Because out-of-pocket medical expenses are on the rise, GTL’s CHS Protection Plus Plan was designed to pay cash benefits directly to you and pays regardless of any other insurance coverage you may have should you or a covered family member be diagnosed with cancer, suffer a heart attack or have a stroke.

THE CASH BENEFITS FROM YOUR POLICY CAN BE USED TO:

- Supplement Lost Income
- Pay for Experimental Treatments and Surgeries
- Take a Recuperative Trip or Vacation
- Cover Medical Co-Payments and Deductibles
- Allow for Extra Time Off of Work
- Provide Cash for Car and Mortgage Payments

DID YOU KNOW?

53% of the costs associated with cancer are non-medical, indirect costs?¹

[¹ Association of American Cancer Institutes, Cancer Research is Saving Lives, 2015.]
Under this plan, a lump sum amount will be paid directly to you* regardless of any other health care coverage you may have, upon the First Diagnosis of Cancer** or if you suffer a heart attack or stroke. Benefit amounts are flexible, and can range from $10,000 to $75,000, in increments of $5,000 depending on your specific needs. Also, the benefits are eligible to restore through GTL’s New Recurrence Benefit option.

| ISSUE AGES  | 0 – 85 years  
(age at last birthday) |
|-------------|------------------|
| COVERAGE    | Individual, Single Parent, Couple and Family  
(Each Covered Person(s) will be covered by the same Lump Sum Benefit amount.) |
| BENEFIT AMOUNTS | Minimum face amount is $10,000  
Maximum face amount is $75,000  
(In increments of $5,000) |

**See Policy definition**


*DID YOU KNOW*

Each year over a million people in the U.S. have a heart attack.²

1 in 2 men and 1 in 3 women will be diagnosed with cancer during their lifetime.³

*In most states there is a 30 day waiting period, beginning on the issue date of the policy.

(Waiting period is not applicable in MO, MT, SD.)


HOW CHS PROTECTION PLUS WORKS...

CHOOSE THE POLICY THAT’S RIGHT FOR YOU:

1. LUMP SUM CANCER POLICY:
You will receive a lump sum benefit amount paid directly to you upon the First Diagnosis of Cancer as defined in your policy. With GTL’s New Recurrence Benefit (see the following page for specifics) that’s included with your coverage, benefits restore after you have been in a period of remission for at least one (1) full year from a previously diagnosed cancer and for which benefits have been paid under this policy.

(Recurrence Benefit Included)

2. LUMP SUM HEART ATTACK AND STROKE POLICY:
You will receive a lump sum benefit amount paid directly to you upon suffering a heart attack5 or a stroke6, as defined in your policy. The Lump Sum Heart Attack and Stroke policy also includes GTL’s Recurrence Benefit and a Coronary Angioplasty or Coronary Artery Bypass Surgery Benefit* which will pay you ten percent of the selected Lump Sum Heart Attack and Stroke benefit amount should a Covered Person have Coronary Angioplasty or Coronary Artery Bypass Surgery.

(Recurrence Benefit Included)

*PLEASE NOTE: The Recurrence Benefit does not apply to the Coronary Angioplasty or Coronary Artery Bypass Surgery. Benefits are payable one time during the life of your policy and do not reduce the Lump Sum Heart Attack and Stroke benefit amount. Also, this benefit is not payable if the Coronary Angioplasty or Coronary Artery Bypass Surgery is performed as a direct result of a heart attack which immediately preceded the procedure or surgery.

RECURRENT BENEFIT APPLIES TO:

- Lump Sum Cancer
- Lump Sum Heart Attack & Stroke Policy

POLICY DEFINITIONS FOR THE FOLLOWING:

Cancer[4] means: a malignant tumor which meets the diagnosis criteria of malignancy established by the American Board of Pathology after a study of the histocytologic architecture or pattern of the suspect tumor, tissue or specimen. It is characterized by the uncontrolled growth and spread of malignant cells and the invasion of body tissue by such malignant cells. Cancer includes leukemia and Cancer In Situ. Excluded are Cancers such as: 1) Pre-malignant tumors or polyps; 2) Skin cancer, except malignant melanoma. See definition of First Diagnosis of Cancer in your policy.

Heart Attack[5] means: an acute myocardial infarction (irreversible injury and death of a portion of the myocardium or heart muscle) detected by the rise and/or fall of cardiac biomarkers (preferably troponin) with at least one value above the 99th percentile of the upper reference limit (URL) together with evidence of myocardial ischaemia with at least one of the following: Symptoms of ischaemia; ECG changes indicative of new ischaemia [new ST-T changes or new left bundle branch block (LBBB)]; Development of pathological Q waves in the ECG; Imaging evidence of new loss of viable myocardium or new regional wall motion abnormality. Heart Attack does not include any other disease or injury involving the cardiovascular system. Cardiac arrest not caused by a myocardial infarction is not a heart attack.

Stroke[6] means: an acute cerebrovascular accident or incident, which results in paralysis or other measurable objective neurological deficit lasting more than 24 hours. A cerebrovascular accident is a sudden, unexpected interference in the brain function caused by insufficient blood flow to part of the brain. Stroke does not mean a head injury, transient ischemic attack or chronic cerebrovascular insufficiency.
GTL’S RECURRANCE BENEFIT

APPLIES TO THE LUMP SUM CANCER POLICY AND LUMP SUM HEART ATTACK AND STROKE POLICY

After you receive your lump sum payment your benefits are eligible to restore with the Recurrence Benefit.

The Recurrence Benefit is a percentage* of the Lump Sum Benefit paid when cancer reoccurs after you have been in a period of remission for at least one (1) full year from a previously diagnosed cancer and for which benefits have been paid under this policy (See chart below for details).

For the Lump Sum Heart Attack and Stroke Plan recurrence must be at least one (1) full year from the date the Lump Sum Benefit was paid (The Recurrence Benefit percentages are shown in the chart below).

*DID YOU KNOW?
Every year, about 795,000 people in the United States have a stroke. About 610,000 of these are first or new strokes. About 30% of people who survive a stroke go on to have another.7

About two-thirds of people with cancer are expected to live at least five years after diagnosis.8


YEARS OF RECURRENCE

<table>
<thead>
<tr>
<th>YEARS OF RECURRENCE</th>
<th>10%</th>
<th>25%</th>
<th>50%</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2-3</td>
<td>4</td>
<td>5+</td>
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Optional Riders

Choose Your Optional Supplemental Riders:

1. **Intensive Care Rider**: The Intensive Care Rider pays an indemnity benefit of $150 per unit per day for confinement in an Intensive Care Unit for any reason. The rider pays one half (1/2) the benefit amount for confinement in a step-down unit. Benefits are doubled if confinement occurs within 48 hours of an accident, in which you are the operator or passenger of an automobile, motor home, bus, motorcycle, or any truck with a load capacity of 2,000 or less or as a fare paying passenger on any vehicle, boat, ship, aircraft or train. Benefits are limited to 30 days of confinement in connection with any one hospital admission. Benefits for this rider reduce by 50 percent at age 70.

*Subject to a 30 day waiting period. Intensive Care Rider not available in Colorado.

2. **Return of Premium Rider**: We will return all premiums (less any claims paid) if you pass away prior to age 85.

**Return of Premium Rider not available in Iowa.

3. **Therapy and Wellness Rider**: GTL’s Therapy and Wellness Rider pays an indemnity benefit of $50 per calendar year for one (1) of the following tests:

<table>
<thead>
<tr>
<th>Mammogram</th>
<th>Chest X-Ray</th>
<th>Thermography</th>
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</thead>
<tbody>
<tr>
<td>Breast Ultrasound</td>
<td>MRI</td>
<td>Colonoscopy</td>
</tr>
<tr>
<td>Breast MRI (Magnetic Resonance Imaging)</td>
<td>Angiogram</td>
<td>Virtual Colonoscopy</td>
</tr>
<tr>
<td>CA15-3 (Blood Test for Breast Cancer Tumor)</td>
<td>Electrocardiogram</td>
<td>Serum Protein Electrophoresis</td>
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<tr>
<td>PAP Smear</td>
<td>Heart Catheterization</td>
<td>Echocardiogram</td>
</tr>
<tr>
<td>Thin Prep</td>
<td>CEA (Blood Test for Colon Cancer)</td>
<td>Blood Test to Confirm Elevated Cardiac Enzymes</td>
</tr>
<tr>
<td>Biopsy</td>
<td>CA 125 (Blood Test for Ovarian Cancer)</td>
<td>Neuroimaging Studies</td>
</tr>
<tr>
<td>Flexible Sigmoidoscopy</td>
<td>PSA (Blood Test for Prostate Cancer)</td>
<td>Thallium Scan</td>
</tr>
<tr>
<td>Hemoccult Stool Specimen (Lab Confirmed)</td>
<td>Testicular Ultrasound</td>
<td>Cat Scan</td>
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</table>

In most states there is a 30 day waiting period, beginning on the issue date of the policy.
EDUCATIONAL SERVICES BENEFIT:
Pays an indemnity benefit of $50 per session for a self-management education and counseling program provided to educate you and your primary caregiver, when needed, to care for your needs as the result of Covered Condition(s) for which you have received other benefits under this policy. This benefit is limited to 12 sessions per calendar year.

HEARING, OCCUPATIONAL, PHYSICAL & SPEECH THERAPY BENEFIT:
Pays an indemnity benefit of $25 for each day hearing, occupational, physical and/or speech therapy is needed as a result of a Covered Condition(s) for which you have received other benefits under this policy.

MENTAL HEALTH BENEFIT:
Pays an indemnity benefit of $50 per session for counseling for mental and nervous disorders or emotional disease or disorder needed as the result of a Covered Condition(s) for which you have received other benefits under this policy. This benefit is limited to 5 sessions per calendar year.

HEALTHY LIFESTYLE BENEFIT:
Pays an indemnity benefit of $25 per calendar year for making healthy lifestyle choices. This benefit is payable if you participate in a smoking cessation program or join a weight loss or physical fitness program. This benefit is payable once per calendar year per covered person that is over the age of 17.

ALTERNATIVE CARE BENEFIT:

Integrative Assessment and Education Benefit: A one time benefit of $75 is payable for assessment and/or education services performed by an Accredited Practitioner.

Ameliorative Benefit*: We will pay an indemnity benefit of $25 per visit to an Accredited Practitioner, for up to 20 visits per calendar year for acupuncture, massage therapy, biofeedback and hypnosis.

Lifestyle Benefit*: We will pay an indemnity benefit of $25 per visit for up to 20 visits per calendar year to an Accredited Practitioner for the following types of alternative care: smoking cessation, yoga, meditation, relaxation techniques, Tai-Chi and nutritional counseling.

*Benefit payment subject to a Covered Person providing proof for Injury or Sickness.
Please see your insurance contract for specific details. The exclusions and limitations listed below are typical, but your state may have some differences.

**THE FOLLOWING EXCLUSIONS APPLY TO THE CANCER POLICY AND THE HEART ATTACK AND STROKE POLICY.**

**EXCLUSIONS:** *THIS POLICY DOES NOT COVER ANY LOSS CAUSED BY THE FOLLOWING:*

1. Any Cancer diagnosed before the Effective Date of your coverage under the Policy or when advice or treatment is received prior to the Effective Date and such advice or treatment results in the First Diagnosis of Cancer.

2. Any loss due to injury, disease or incapacity, unless related to or attributable to Cancer as defined.

3. Heart Attack or Stroke if first Diagnosed before the Effective Date of your coverage under this Policy if choosing the Heart Attack and Stroke Policy.

4. Coronary Angioplasty or Coronary Artery Bypass Surgery where medical advice to undergo such procedure or surgery was received before this Policy’s Effective Date.

5. Any loss due to injury, disease or incapacity, unless related to or attributable to Heart Attack or Strokes defined.

6. Any medical treatment, advice or diagnosis for Cancer or Heart Attack and Stroke during the Waiting Period (if any.) (Not applicable in MO, MT, SD.)

**THE FOLLOWING EXCLUSIONS APPLY TO THE INTENSIVE CARE BENEFIT RIDER AND THE THERAPY AND WELLNESS BENEFIT RIDER.***

**THESE RIDERS DO NOT COVER ANY LOSS CAUSED BY THE FOLLOWING:**

1. Intentionally self-inflicted Injury, violating or attempting to violate any duly enacted law.

2. Injury by acts of war, whether declared or not.

3. Attempted suicide while sane or insane.

4. Injury sustained while committing or attempting to commit a felony.

5. Injury sustained while voluntarily participating in a riot, or civil commotion or disturbance of any kind.

6. Loss resulting from being legally intoxicated or under the influence of alcohol as defined by the laws of the state in which the Injury occurs.

7. Loss resulting from being under the influence of any drugs or narcotic unless administered on the advice of a Doctor.

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**PRE-EXISTING CONDITION:** A pre-existing condition is a condition for which: (a) Medical advice or treatment was recommended by, or received from a Doctor, within the 24 month period before the Effective Date of the Covered Person’s coverage; or (b) symptoms existed which would cause an ordinarily prudent person to seek diagnosis, care or treatment within the 24 month period before the Effective Date of the Covered Person’s coverage.

A pre-existing condition is not covered unless the loss begins more than 24 months after the Effective Date of the Covered Person’s Coverage. (In NM, 6 month pre-existing condition limitation; in IN, MT, SD 12 month pre-existing limitation. For complete details of all provisions, please read your policy carefully.)

*(In most states; for complete details of all provisions, please read your policy carefully.)*

Insurance Underwritten by Guarantee Trust Life Insurance Company: Policy Series G1130/G1131 with rider series, RG10CTW, RG10IC, RG10ROPD

With more than seventy-nine years of experience in the insurance industry, Guarantee Trust Life Insurance Company has a proud heritage of providing excellent service and superior insurance products. Guarantee Trust Life Insurance is a mutual legal reserve company located in Glenview, IL, licensed to conduct business in 49 states and the District of Columbia.