



Critical Care Protector

An insurance policy designed to pay as much as \$50,000 directly to you if you are diagnosed with or treated for any one of 12 specific critical conditions.



















Most of Us Think, "It Will Never Happen to Me"

But a critical condition like a heart attack, stroke or cancer can touch anyone, anywhere, anytime, and at any age... sometimes without any advance warnings or symptoms. These are the living facts.

790,000

About 790,000 people in the US have heart attacks each year.¹

795,000

More than 795,000 Americans suffer a stroke every year.¹

1/2&1/3

Half of American men, and one third of American women will develop cancer.²

Fortunately, because of modern medical treatment, more people are surviving critical conditions than ever before. But, there's more to living than just surviving.

¹ American Heart Association, Heart Disease and Stroke Statistics, January 2017.

² American Cancer Society, Cancer Facts and Figures, 2014.





Developing a Critical Condition Can Result in Sudden Out-of-Pocket Expenses Such As:

- Lost income for both patient and family members because of time off work
- Deductibles and co-payments on medical insurance
- Treatments not covered by medical insurance
- Private duty nursing

Well-Being of U.S. Households in 2021.

Expenses associated with physical or speech therapy

¹www.FederalReserve.gov, 2022 Report on Economic

Nearly one-third of Americans report being unable to cover a \$400 emergency medical expense without having to borrow or sell something.¹

1/3
OF AMERICANS

If you develop a critical condition, your main focus should be recovery, not how you will pay these and other unexpected costs.





Do You Qualify?

- Within the last 5 years have you taken any prescription medications for any sickness, injury or defect?
- CO How's your driving record?
- Do you currently have health coverage such as comprehensive hospital, surgical or medical health insurance that qualifies as "minimum essential coverage" in force?





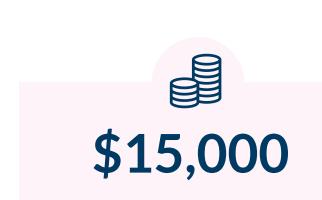


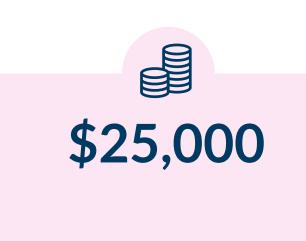
Here's How It Works

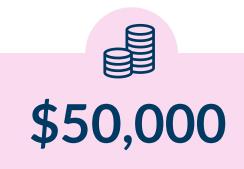
If you are diagnosed with or treated for one of the following 12 conditions we will pay you a lump sum benefit depending on your needs and the plan you select:

- Organ Transplant (heart, kidney, liver, lung, pancreas)
- Multiple Sclerosis
- Paralysis (two or more limbs)
- Dismemberment (two or more limbs)
- Severe Burns
- Blindness

- Heart Attack
- Heart Surgery
- Cancer (except skin cancer other than malignant melanoma)
- Stroke
- Brain Tumor (must require surgery)
- Kidney Failure







Benefits are paid in addition to other insurance you may have.

How much will I need to pay of the out-of-pocket expenses I may incur?

Though it is difficult to know exactly how much anyone will need, an emergency fund equal to 6 months to one year of annual income may be sufficient. You can always choose more or less, but this amount is a good place to start.







How Critical Care Protector Pays

Upon diagnosis and/or treatment of a covered condition:

SECTION ONE

We pay you 100% of the scheduled benefit amount you have selected, less any benefit paid in Section Two. This benefit is payable once during the lifetime of the policy, and once paid the policy will terminate.

100%

SECTION TWO

For loss due to either Stage A prostate cancer or carcinoma in situ, we pay you a one-time benefit during the lifetime of the policy of 25% of the scheduled benefit amount.

25%





Exclusions and Limitations

We have just told you what this policy will cover. However, it is important that you know what it does not cover.

- No benefit is payable under the policy for loss due to intentionally self-inflicted injury, or from skin cancer (except malignant melanoma)
- Loss caused by a Pre-existing Condition is not covered unless such loss begins at least 24 months after the policy issue date.
- A pre-existing condition is a condition not fully disclosed on the application, for which, within the 24 months before the policy issue date: you received medical advice or treatment, or showed symptoms.
- Upon payment of the Section One benefit the policy will terminate.

Reduction in benefits: When a Section One or Section Two covered loss occurs within the first 90 days of coverage, the Scheduled Benefit Amount payable under Sections One or Two will be 10% of the amount shown in the benefit schedule for that section.

This is a specified disease policy and does not pay benefits for loss resulting from any condition other than those named in this policy.



IMPORTANT: If a covered individual is a Medicaid recipient, policy benefits may be assigned and payable to your state Medicaid agency. Also, benefit payments you receive may count as income for Medicaid eligibility purposes.



How Critical Care Protector will work for you and your family:

- Can help you (and your family) pay expenses you have due to a critical condition
- Covers 12 critical conditions:
 - Organ Transplant (heart, kidney, liver, lung, pancreas)
 - Multiple Sclerosis
 - Paralysis (two or more limbs)
 - Dismemberment (two or more limbs)
 - Severe Burns
 - Blindness

- Heart Attack
- Heart Surgery
- Cancer (except skin cancer other than malignant melanoma)
- Stroke
- Brain Tumor (must require surgery)
- Kidney Failure

We pay cash benefits directly to you.











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How Critical Care Protector will work for you and your family:

- Guaranteed renewable until payment of the Section One benefit
- Benefits are paid in addition to all other insurance
- The service, strength and security of Combined Insurance. Making it easy for our customers to prepare for the unexpected

We pay cash benefits directly to you.









IMPORTANT This presentation contains a brief description of policy benefits (Form Series 16521). See the policy for complete details of benefits, exclusions and limitations. This presentation is only for use in the states referenced herein. State specific form numbers are shown below.

Combined Insurance Company of America, Chicago, IL | combinedinsurance.com CI-CRT-PRS-2_0723

This is supplemental insurance. It is not a substitute for hospital or medical expense insurance, a health maintenance organization (HMO) contract, or Major Medical expense insurance.