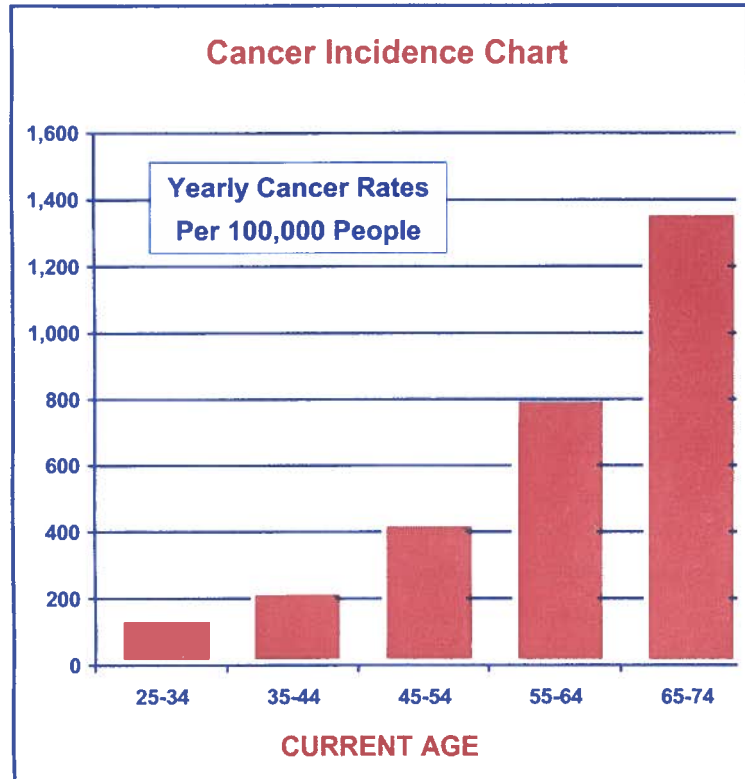


THE AMERICAN CANCER SOCIETY SAYS...



Cancer Can Strike Anyone...

- ♦ Over 1.3 million Americans will be diagnosed with internal cancer this year

Women

- ♦ 1 in 3 will get cancer in their lifetime
- ♦ 1 in 8 are diagnosed with breast cancer
- ♦ Leading cause of death ages 25-74

Men

- ♦ 1 in 2 will get cancer in their lifetime
- ♦ 1 in 5 are diagnosed with prostate cancer
- ♦ Second leading cause of death

Source: American Cancer Society
Facts & Figures—1997

Family Heritage is part of the Southwestern/Great American Group of Companies—serving American Families since 1868.

Family Heritage has **NEVER RAISED A RATE** on an existing policy!

This brochure is not the insurance contract. The policy explains in detail the rights and obligations of both Family Heritage and the insured. It is important to read your policy carefully.

The benefits described in this brochure are contained in policy series CA3-971A

FAMILY HERITAGE
Life Insurance Company Of America

P.O. Box 31420
Cleveland, Ohio 44131-0420
(216) 520-2800

LIBERTY

Series



Cancer Protection

Elite

FAMILY HERITAGE
Life Insurance Company Of America

POLICY ADVANTAGES

- Your benefits are paid **DIRECTLY TO YOU**, unless you instruct us otherwise.
- Your benefits are paid **IN ADDITION** to any other insurance you have.
- Your coverage is **GUARANTEED RENEWABLE** for life—only you can cancel.
- Your benefits are **NEVER REDUCED**.
- Your premium **DOES NOT INCREASE** with age.
- You **CANNOT BE SINGLED OUT** for a rate increase.
Your rates can be increased only if they are increased for all plans of this kind in your state.

FIRST OCCURRENCE BENEFITS

PREFERRED		ELITE
Paid one time per insured upon the confirmed diagnosis of...		
\$1,500	FIRST OCCURRENCE — internal cancer	\$2,250
\$500	BREAST CANCER — an additional	\$750
\$500	PROSTATE CANCER — an additional	\$750
First Occurrence Benefits are not paid for skin cancer.		

INPATIENT BENEFITS

PREFERRED		ELITE
HOSPITAL BENEFITS ♦ <i>No Lifetime Limits</i>		
\$300	For each day of Hospital Confinement for the first 69 days	\$450
\$100	For each day you are provided a Private Nurse	\$150
\$200	For each trip by Ambulance (two trips per confinement; includes air ambulance)	\$300
EXTENDED STAY BENEFIT ♦ <i>No Lifetime Limits</i>		
\$600	For each day following the 69th day of confinement	\$900
\$18,600	A monthly benefit	\$27,900
This benefit replaces all other benefits after the 69th day		

INPATIENT OR OUTPATIENT BENEFITS

PREFERRED		ELITE
SURGICAL BENEFITS ♦ <i>No Lifetime Limits</i>		
UP TO \$6,000	For each operation based on the schedule in your plan (unlimited operations)	UP TO \$9,000
UP TO \$1,200	For Anesthesia we will pay 20% of the amount paid for your covered surgery	UP TO \$1,800
BLOOD AND PLASMA BENEFIT ♦ <i>No Lifetime Limits</i>		
\$50	Per unit of whole blood, plasma, red cells, packed cells or platelets	\$75
PROSTHESIS BENEFIT ♦ <i>Lifetime maximum per insured person</i>		
\$1,000	For Prosthetic devices (includes external devices)	\$1,500
CANCER TREATMENT BENEFIT ♦ <i>No Lifetime Limits</i>		
\$150	For each day you receive inpatient or outpatient treatment <ul style="list-style-type: none"> • Radiation • Chemotherapy • Radium and Cesium Implants • Cobalt • FDA Approved, New or Experimental Treatment 	\$225
BONE MARROW TRANSPLANT BENEFIT		
\$6,000	Paid one time per insured for a bone marrow transplant from another person for the treatment of leukemia	\$00

TRANSPORTATION & LODGING BENEFITS

PREFERRED		ELITE
TRANSPORTATION BENEFITS ♦ <i>No Lifetime Limits</i>		
When you travel over 80 miles from home for treatment, we will pay...		
\$400	For each one-way trip by plane, train, or bus	\$600
\$40	Each trip by personal auto	\$60
FAMILY MEMBER TRANSPORTATION ♦ <i>No Lifetime Limits</i>		
For one member of your immediate family when you are hospital confined over 80 miles from home for treatment, we will pay...		
\$400	For each one-way trip by plane, train, or bus (two one-way trips per confinement)	\$600
If a child is hospital confined, we will pay this benefit for both parents		
\$40	Each trip by personal auto (Family Member Transportation by auto will not be paid if it is already paid under the Transportation Benefit)	\$60
FAMILY MEMBER LODGING ♦ <i>No Lifetime Limits</i>		
\$50	For each day that one member of your immediate family requires lodging while you are confined to a hospital more than 80 miles from your home, we will pay... (maximum of 60 days per confinement)	\$75

PROTECTION BENEFITS

PREFERRED		ELITE
EARLY DETECTION BENEFIT ♦ <i>No Lifetime Limits</i>		
\$40	One Test annually per insured person <ul style="list-style-type: none"> • Mammography • Flexible Sigmoidoscopy • Pap Smear • Hemocult Test • PSA Test (prostate screening test) 	\$60
HOSPICE SERVICE BENEFIT		
\$100	For each of the first 60 days of Hospice Service	\$150
\$50	For each of the next 120 days	\$75

FAMILY HERITAGE TAKES GREAT PROTECTION ONE STEP FURTHER...

PREFERRED		ELITE
FIRST OCCURRENCE PLUS		
\$400	Each policy anniversary date we will add to your First Occurrence Benefit	\$600
<i>MAXIMUM</i>		
\$8,000	This benefit will continue each year for the next 20 years up to a lifetime maximum benefit of...	\$12,000
Paid one time per insured person when the First Occurrence Benefit is paid		

ADDITIONAL POLICY INFORMATION

- ♦ Family plans cover you, your spouse, newborns from birth, and unmarried, dependent children to age 25.
- ♦ Children can convert to their own plan without evidence of insurability.
- ♦ Covers cancer first diagnosed 30 days after the effective date of your plan.
- ♦ Covers all types of cancer.

LIMITATIONS AND EXCLUSIONS

- ♦ Persons with a history of cancer prior to the coverage effective date or within 30 days thereafter will not be covered.
- ♦ Persons previously diagnosed with an elevated PSA (Prostate-Specific Antigen) Test result will not be covered for prostate cancer or its metastasis.
- ♦ Persons with a history of non-melanoma skin cancer are covered for all types of cancer except skin cancer. Persons with a history of any melanoma cancer will not be covered.
- ♦ This policy provides coverage only for loss resulting from definitive cancer treatment.



LIBERTY

Series

Protection for Intensive Care and Accidental Death & Dismemberment

- ◆ *Your benefits are paid **DIRECTLY TO YOU**, unless you instruct us otherwise.*
- ◆ *Your benefits are paid **IN ADDITION** to any other insurance you have.*
- ◆ *Your coverage is **GUARANTEED RENEWABLE** for life—only you can cancel.*
- ◆ *Your benefits **BEGIN IMMEDIATELY** on your effective date.*

The benefits described in this brochure are contained in policy series CA3-971A

FAMILY HERITAGE
Life Insurance Company Of America

P.O. Box 31420
Cleveland, Ohio 44131-0420
(216) 520-2800

PROTECTING FAMILIES IN TIME OF NEED

INTENSIVE CARE PLAN

STANDARD PREFERRED

INTENSIVE CARE BENEFIT ♦ No Lifetime Limits

For each day of confinement to an Intensive Care Unit* for any reason, we will pay...

\$250	You or your spouse	\$500
\$7,500	Maximum benefit per confinement	\$15,000
\$125	Your covered children	\$250
\$3,750	Maximum benefit per confinement	\$7,500

*Defined as providing the **highest level** of medical care for patients who are physically, critically ill or injured.

DOUBLE BENEFIT ♦ No Lifetime Limits

The ICU Confinement Benefit doubles if the confinement is a result of an auto, truck, bus, plane, or train accident

\$500	You or your spouse	\$1,000
\$15,000	Maximum benefit per confinement	\$30,000
\$250	Your covered children	\$500
\$7,500	Maximum benefit per confinement	\$15,000

AMBULANCE BENEFITS ♦ No Lifetime Limits

\$100	For Ambulance transportation we will pay per confinement	\$200
\$500	For Air Ambulance transportation we will pay per confinement . . .	\$1,000

Covers up to 30 days per confinement. Readmission 30 days after discharge begins a new confinement period.

ACCIDENTAL DEATH AND DISMEMBERMENT

- ♦ Accidents this year will cause over **20 million** disabling injuries and will be the **fifth** largest cause of death.
- ♦ Motor vehicle accidents alone cause over **2.6 million** disabling injuries and over **43,000** deaths.
- ♦ The economic impact of these accidents will exceed **\$400 billion** this year. This is about \$4,500 per household.

Source: National Safety Council Accident Facts-1997 Edition

DISMEMBERMENT BENEFITS

If injured in an accident and the injury causes loss of hand, foot, or sight within 90 days of the accident, we will pay...

<u>PREFERRED PLAN</u>	<u>YOU</u>	<u>YOUR SPOUSE</u>	<u>YOUR CHILD</u>
Single Loss	\$1,000	\$1,000	\$200
Double Loss	\$2,000	\$2,000	\$400
<u>STANDARD PLAN</u>			
Single Loss	\$500	\$500	\$100
Double Loss	\$1,000	\$1,000	\$200

ACCIDENTAL DEATH BENEFIT

If you are in an accident and the injury causes death within 90 days of the accident, we will pay...

	<u>YOU</u>	<u>YOUR SPOUSE</u>	<u>YOUR CHILD</u>
PREFERRED PLAN	\$5,000	\$5,000	\$1,000
STANDARD PLAN	\$2,500	\$2,500	\$500

We will pay the Death Benefit, less any amount paid under the Dismemberment Benefit resulting from the same loss.

Intensive Care Limitations and Exclusions Only

Persons over age 74 receive 50% of the ICU Confinement Benefit

Persons with a pre-existing heart condition:

- ♦ will not be paid ICU Benefits for a heart-related confinement
- ♦ will be paid benefits for up to 7 days of ICU confinement not related to a heart condition

This plan does not cover confinements:

- ♦ in units such as progressive care, intermediate care or step-down
- ♦ during the 12 months after your effective date for any condition diagnosed within 12 months prior to your effective date

Intensive Care and AD&D Limitations and Exclusions

This plan does not cover confinements or losses resulting from:

- ♦ a self-inflicted injury or suicide attempt
- ♦ a confinement or loss which began before your effective date
- ♦ involvement in an illegal act or job
- ♦ being legally intoxicated or under the influence of any narcotic or other illegal substance, unless taken according to a physician's direction