

Transportation and Lodging Benefits

TRANSPORTATION BENEFITS

When you must travel over 80 miles from home for treatment, we will pay...

For each trip by plane, train or bus

ACTUAL CHARGES

ACTUAL CHARGES 15¢

PER MILE

For each trip by personal auto

30¢ PER MILE

NO LIFETIME LIMITS

FAMILY MEMBER TRANSPORTATION

For one member of your immediate family when you are hospital confined more than 80 miles from your home, we will pay...

ACTUAL CHARGES

15¢

PER MILE

For two one-way trips per confinement, by plane, train or bus

For each trip by personal auto (unless already paid under Transportation Benefit)

30¢

UP TO

\$40

ACTUAL

CHARGES

NO LIFETIME LIMITS

FAMILY MEMBER LODGING

UP TO \$20 For each day an adult member of your family requires lodging when you are confined to a hospital more than 80 miles from your home (maximum of 60 days per confinement)

NO LIFETIME LIMITS

National Cancer Institute - Designated Cancer Centers Hutchinson Center • U.C.L.A.

FAMILY HERITAGE Life Insurance Company Of America

A Southwestern/Great American Company

- ★ Part of the Southwestern/Great American Group of Companies-serving American families since 1868
- ★ 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
- * Persons with a history of non-melanoma skin cancer are covered for all types of cancer except skin cancer.
- * This policy provides coverage only for loss resulting from definitive cancer treatment.

The benefits described in this brochure are contained in policy series CA2-94.

> Three Summit Park Drive Cleveland, Ohio 44131 (216) 520-2800





- * Your benefits are paid directly to YOU (unless you instruct us otherwise)
- ★ Your premium does not increase with age Unlike other insurance plans, your premium does not automatically increase because you get older
- ★ 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
- ★ Your coverage is guaranteed renewable for life Only you can cancel your coverage
- ★ Your benefits are never reduced
- ★ All benefits are paid 100% in addition to ANY other coverage you own



BCC-94(IL)



First Occurrence Benefit

STANDARD \$750

Paid one time upon confirmed diagnosis of internal cancer (this is not paid for skin cancer)

PREFERRED

\$1,500

Breast Cancer Benefit

\$250

Paid one time upon confirmed diagnosis of internal breast cancer

\$500

Inpatient Benefits

HOSPITAL BENEFITS

\$100 For each day of Hospital Confinement \$200 for the first 69 days 15 30 Each day for Drugs and Testing Each day you are visited by your personal Physician 30 50 Each day you are provided specialized 100 **Nursing Service** UP 100 For each trip in an Ambulance up to two trips UP 200 per confinement (includes Air Ambulance) NO LIFETIME LIMITS

EXTENDED HOSPITAL BENEFIT

UP\$300

For each day following the 69th consecutive UP\$600 day of Confinement, we will pay charges...

9.000

A monthly benefit up to (replaces all other benefits after the 69th day)

18.000

NO LIFETIME LIMITS

GOVERNMENT HOSPITAL BENEFIT

\$100

For each day of Government **Hospital Confinement**

\$200

This benefit is paid in place of all other benefits except the First Occurrence, Breast Cancer, Transportation and Lodging Benefits.

NO LIFETIME LIMITS



Inpatient or **Outpatient Benefits**

SURGICAL BENEFITS

UP \$3,000

For each Operation based on the **\$6.000** schedule in your plan, whether

inpatient or outpatient (Unlimited number of operations)

UP 600 For Anesthesia during each operation, based on the schedule in your plan

UP 1,200

BLOOD, PLASMA AND PLATELETS

We will pay actual charges per unit

방 50

PROSTHESIS BENEFIT

UP 1,000

We will pay actual charges for **방 2.000** Prosthetic Devices surgically implanted within 3 years of your cancer surgery

NO LIFETIME LIMITS

TREATMENT BENEFIT

UP \$100 PER DAY

\$3,000

We will pay actual charges whether your treatment is inpatient or outpatient

★ Radiation

★ Chemotherapy ★ FDA Approved, New or

* Radium and Cesium Implants

Experimental Treatment

★ Cobalt

NO LIFETIME LIMITS

BONE MARROW TRANSPLANT BENEFIT

Paid one time for a human Bone Marrow Transplant (leukemia treatment only)

\$6,000

PREMIUMS PAID

CLAIMS PAID

REFUND

\$200

PER DAY

Home Benefits

TO\$25

EARLY DETECTION BENEFIT One Test annually per insured person

TO\$50

★ Mammography

★ Flexible Sigmoidoscopy

★ Hemocult Test

★ Pap Smear (test only)

NO LIFETIME LIMITS

HOME RECOVERY BENEFIT

\$20

For each of the first 30 days of Hospital Confinement (other than Government Hospital)

NO LIFETIME LIMITS

HOSPICE SERVICE BENEFIT

\$50

For each of the first 60 days of Hospice Service

\$100

25

For each of the next 120 days

50

\$40

Our program makes sense even if cancer NEVER strikes!

You are paid if you get sick or if you stay well.

We REFUND your premium every 25 years or at age 65, whichever comes first.

Your Money Back benefit begins building after only six years in the plan. The longer you keep your plan, the more your benefit will grow.

NO CLAIM

\$10.000

- 0 -

\$10.000

SMALL CLAIM

\$10,000 - 1,500

\$8.500

- 0 -

LARGE CLAIM

\$10,000

- 36,500

You will get ALL your money back less any claims paid to you.

Our Money Back feature works like this example . . .



Transportation and Lodging Benefits

TRANSPORTATION BENEFITS

When you must travel over 80 miles from home for treatment, we will pay...

For each trip by plane, train or bus

ACTUAL CHARGES

CHARGES

ACTUAL

15¢

For each trip by personal auto

30¢

NO LIFETIME LIMITS

FAMILY MEMBER TRANSPORTATION

For one member of your immediate family when you are hospital confined more than 80 miles from your home, we will pay...

ACTUAL CHARGES

15¢

For two one-way trips per confinement, by plane, train or bus ACTUAL CHARGES

For each trip by personal auto (unless already paid under Transportation Benefit) 30¢

NO LIFETIME LIMITS

UP TO \$20

FAMILY MEMBER LODGING

For each day an adult member of your family requires lodging when you are confined to a hospital more than 80 miles from your home

UP TO \$40

NO LIFETIME LIMITS

(maximum of 60 days per confinement)

National Cancer Institute - Designated Cancer Centers Hulchinson Center Mayo Clinic Johns Hopkins Ohio State University St. Jude University of Arizona M.D. Anderson University Ohio State University University Of Alabama Birmingham University Of Miami

FAMILY HERITAGE Life Insurance Company Of America

A Southwestern/Great American Company

- ★ Part of the Southwestern/Great American Group of Companies-serving American families since 1868
- ★ 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 with a history of non-melanoma skin cancer are covered for all types of cancer except skin cancer.
- This policy provides coverage only for loss resulting from definitive cancer treatment.

The benefits described in this brochure are contained in policy series CA2-94.

Three Summit Park Drive Cleveland, Ohio 44131 (216) 520-2800





Series™

- ★ Your benefits are paid directly to YOU (unless you instruct us otherwise)
- ★ Your premium does not increase with age
 Unlike other insurance plans, your premium
 does not automatically increase because you
 get older
- ★ 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
- ★ Your coverage is guaranteed renewable for life Only you can cancel your coverage
- * Your benefits are never reduced
- ★ All benefits are paid 100% in addition to ANY other coverage you own

FAMILY HERITAGE
Life Insurance Company Of America

BCCN-94(IL)



First Occurrence Benefit

\$750

Paid one time upon confirmed diagnosis of internal cancer (this is not paid for skin cancer)

PREFERRED

\$1,500

Breast Cancer Benefit

\$250

Paid one time upon confirmed diagnosis of internal breast cancer

\$500

Inpatient Benefits

110	00	ΙΤΔΙ	Prop. 10	- 6 7	-	1 mg m 2000
	$\sim \sim$		R	- 01		

		HOSFITAL BENEFITS		
\$	3100	For each day of Hospital Confinement for the first 69 days	\$200	(
	15	Each day for Drugs and Testing	30	1
	15	Each day you are visited by your personal Physician	30	
	50	Each day you are provided specialized Nursing Service	100	
JP TO	100	For each trip in an Ambulance up to two trips per confinement (includes Air Ambulance)	UP 200	

EXTENDED HOSPITAL BENEFIT

NO LIFETIME LIMITS

UP\$300

For each day following the 69th consecutive day of Confinement, we will pay charges...

9,000

A monthly benefit up to (replaces all other benefits after the 69th day)

18,000

NO LIFETIME LIMITS

GOVERNMENT HOSPITAL BENEFIT

\$100

For each day of Government Hospital Confinement

\$200

This benefit is paid in place of all other benefits except the First Occurrence, Breast Cancer, Transportation and Lodging Benefits.

NO LIFETIME LIMITS



Inpatient or Outpatient Benefits.

SURGICAL BENEFITS

For each Operation based on the schedule in your plan, whether

\$6,000

inpatient or outpatient

(Unlimited number of operations)

For Anesthesia during each operation,

based on the schedule in your plan

TO 1,200

BLOOD, PLASMA AND PLATELETS

We will pay actual charges per unit

UP 50

PROSTHESIS BENEFIT

TO 1,000

TO 600

We will pay actual charges for Prosthetic Devices surgically implanted within 3 years of your cancer surgery

NO LIFETIME LIMITS

TREATMENT BENEFIT

TO \$100 PER DAY

\$3,000

We will pay actual charges whether your treatment is inpatient or outpatient

TO \$200 PER DAY

★Radiation ★Radium and

★ Chemotherapy

Cesium Implants

★ FDA Approved, New or Experimental Treatment

★ Cobalt

NO LIFETIME LIMITS

BONE MARROW TRANSPLANT BENEFIT

Paid one time for a human Bone Marrow Transplant (leukemia treatment only)

\$6,000

RISE IN INCIDENCE OF CANCER 1974 - 1995 1,400,000 N 1,200,000 800,000 400,000 1974 1979 1984 1989 1995 Source: American Cancer Society Facts & Figures—1974-95



Home Benefits

TO \$25

EARLY DETECTION BENEFIT

One Test annually per insured person

10\$50

★ Mammography

★ Flexible Sigmoidoscopy

★ Hemocult Test

★ Pap Smear (test only)

NO LIFETIME LIMITS

\$20

HOME RECOVERY BENEFIT

For each of the first 30 days of Hospital Confinement (other than Government Hospital)

\$40

NO LIFETIME LIMITS

HOSPICE SERVICE BENEFIT

\$50 For each of the first 60 days of Hospice Service

\$100

For each of the next 120 days

50

Family Heritage takes GREAT protection one step further...

First Occurrence PLUS

STANDARD

\$150

Each policy anniversary date we will add to your First Occurrence Benefit

\$300

PREFERRED

1.500

We will continue to increase your First Occurrence Benefit each policy anniversary date up to a total additional benefit of...

3,000

This benefit is paid when the First Occurrence Benefit is paid.



Limitations and Exclusions

For Intensive Care Benefits Only

Children and 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 ICU Benefits for up to 7 days of 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
- during the first 30 days of life for children born within ten (10) months of the rider effective date

For Intensive Care and AD&D Benefits

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 not taken according to a physician's direction

The benefits described in this brochure are contained in policy series CA2-94.



Three Summit Park Drive Cleveland, Ohio 44131 (216) 520-2800



Jhe GREAT MERICAN

Series™

- ★ Your benefits are paid 100% IN ADDITION to ANY other coverage you own
- ★ Your benefits are paid **DIRECTLY TO YOU**, unless you instruct us otherwise
- ★ Your coverage is **GUARANTEED RENEWABLE** for life, only you can cancel your coverage
- ★ Your coverage BEGINS IMMEDIATELY on your effective date





Intensive Care Plan

Should you or any covered family member* be confined to an Intensive Care Unit FOR ANY REASON, we will pay...

INTENSIVE CARE BENEFITS

\$250

For each day of ICU** confinement

\$500

7,500

Maximum benefit per confinement

15,000

*Children and persons over age 74 receive 50% of the ICU Confinement Benefit.

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

NO LIFETIME LIMITS

AMBULANCE BENEFITS

#\$ **\$100**

For Ambulance Transportation we will pay actual charges per confinement

TO \$200

반 **400**

For Air Ambulance Transportation we will pay actual charges per confinement

TO 800

NO LIFETIME LIMITS

DOUBLE BENEFIT

Your confinement benefit doubles if you are confined as a result of an auto, truck, bus, plane or train accident...

\$500

For each day of ICU confinement

\$1,000

15,000

Maximum benefit per confinement

30,000

NO LIFETIME LIMITS

ICU benefits are payable first day for accident, second day for sickness.

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 17 million disabling injuries and will be the fourth largest cause of death
- ★ Accidents while working on a farm will account for over 230,000 disabling injuries this year
- ★ Motor vehicle accidents alone cause over 2 million disabling injuries and over 40,000 deaths

Source: National Safety Council Accident Facts—1993

DISMEMBERMENT BENEFIT

If you are injured in an accident and the injury causes loss of hand, foot or sight within 180 days of the accident...

 PREFERRED PLAN
 YOU
 YOUR SPOUSE
 YOUR CHILD

 SINGLE LDSS
 \$1,000
 \$1,000
 \$200

 DOUBLE LOSS
 \$2,000
 \$400

The amounts are 50% less for the Standard Plan

ACCIDENTAL DEATH BENEFIT

If you are injured in an accident and the injury causes death within 180 days of the accident...

YOU

YOUR SPOUSE

YOUR CHILD

PREFERRED PLAN

\$5,000

\$5,000

\$1,000

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

The amounts are 50% less for the Standard Plan

Highlights

- ★ Your benefits are paid 100% IN ADDITION to any other coverage
- **★ Your coverage is GUARANTEED RENEWABLE for life**
- ★ Your benefits are paid DIRECTLY TO YOU, unless you instruct us otherwise
- ★ Your coverage BEGINS IMMEDIATELY on your effective date