



Critical illness insurance

Critical illness insurance may help you cover expenses not covered by your health insurance.

It's a cash payment you receive if you ever experience a serious illness like cancer, a heart attack, or a stroke, giving you the financial support to focus on recovery.

Who is it for?

Critical illness insurance is a supplemental policy for people who already have health insurance. It provides you with an additional payment to cover expenses like deductibles, treatments, and living costs.

What does it cover?

Critical illnesses include strokes, heart attacks, Parkinson's disease and cancer. Our policies can cover over 30 major illnesses, helping you stay financially stable by paying you a lump sum if you're diagnosed with one of them.

Why should I consider it?

Health coverage is becoming more expensive, with higher co-pays, premiums, and deductibles. Critical illness insurance is an affordable way to supplement and pay for additional expenses that your health insurance doesn't cover. Our policies typically provide payments for the first and second time you're diagnosed with a covered illness.

Plus, critical illness insurance is portable and payments are made directly to you.

You will receive these benefits if you meet the conditions listed in the policy.



Critical costs

John is hospitalized after a heart attack, and has to cover the cost of five days as an inpatient.

Average heart attack hospitalization expense: **\$53,000**

Average Major Medical deductible: **\$1,500**

Major Medical covers 80% of the cost after the deductible is met, but John's still responsible for 20%: **\$10,300**.

Total out-of-pocket amount for John (deductible + coinsurance): **\$11,800**.

John has a **\$10,000** Guardian Critical Illness policy, which covers the majority of these out-of-pocket expenses.

This example is for illustrative purposes only. Your plan's coverage may vary. See your plan's information on the following pages for specific amounts and details.



Your critical illness coverage

CRITICAL ILLNESS

Benefit Amount(s)	Employee may choose a lump sum benefit of \$5,000 to \$25,000 in \$5,000 increments.	
CONDITIONS	PERCENTAGE OF LUMP SUM	
	1st OCCURRENCE	2nd OCCURRENCE
Cancer Type 1 (Invasive)	100%	50%
Heart Attack	100%	50%
Kidney Failure	100%	50%
Organ Transplant	100%	50%
Stroke	100%	50%
Cancer Type 2 (Non-Invasive)	25%	0%
Coronary Artery Bypass Graft	25%	0%
Spouse/Domestic Partner Benefit	50% of employee's lump sum benefit	
Child Benefit- children age Birth to 26 years	50% of employee's lump sum benefit	
Benefit Reductions: Benefits are reduced by a certain percentage as an employee ages	50% at age 70	
Guarantee Issue/ Conditional Issue	We Guarantee Issue up to: 15-39 \$5,000 40-54 \$5,000 55-69 \$5,000 For a spouse: 15-39 \$2,500 40-54 \$2,500 55-69 \$2,500 For a child: \$2,500 A "No" response to the conditional medical question(s) (on your enrollment form) enables employees to elect up to \$25,000 and spouses to elect up to \$12,500 and Child to elect up to \$12,500. Full evidence of insurability is required above these amounts. Dependent Guarantee & Conditional Issue amounts are limited to 50% of the amount purchased by the employee.	
Portability: Allows you to take your Critical Illness coverage with you if you terminate employment.	An insured may port Critical Illness coverage only after being insured by this plan for "a state specific amount of time." An insured's ported certificate ends at age 70.	
Pre-Existing Condition Limitation: 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/6 months treatment free/12 months after	
Total Amount Payable	During your lifetime, this plan will not pay more than 300% of the lump sum benefit for all critical illnesses combined.	
Benefit Waiting Period: We do not pay benefits for a critical illness that occurs during the benefit waiting period.	Cancer:	30 Days
	Non-Cancer:	30 Days

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.

Bi-Weekly Deduction	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-99 [†]
\$5,000 Benefit Amount											
Employee \$5,000	\$0.20	\$0.33	\$0.55	\$0.95	\$1.60	\$2.75	\$4.58	\$7.10	\$10.63	\$16.18	\$23.73
Spouse \$2,500	\$0.10	\$0.17	\$0.28	\$0.48	\$0.80	\$1.38	\$2.29	\$3.55	\$5.32	\$8.09	\$11.87
Child \$2,500	\$0.15	\$0.15	\$0.15	\$0.15	\$0.15	\$0.15	\$0.15	\$0.15	\$0.15	\$0.15	\$0.15
\$10,000 Benefit Amount											
Employee \$10,000	\$0.40	\$0.65	\$1.10	\$1.90	\$3.20	\$5.50	\$9.15	\$14.20	\$21.25	\$32.25	\$47.45
Spouse \$5,000	\$0.20	\$0.33	\$0.55	\$0.95	\$1.60	\$2.75	\$4.58	\$7.10	\$10.63	\$16.18	\$23.73
Child \$5,000	\$0.30	\$0.30	\$0.30	\$0.30	\$0.30	\$0.30	\$0.30	\$0.30	\$0.30	\$0.30	\$0.30
\$15,000 Benefit Amount											
Employee \$15,000	\$0.60	\$0.98	\$1.65	\$2.85	\$4.80	\$8.25	\$13.73	\$21.30	\$31.88	\$48.53	\$71.18
Spouse \$7,500	\$0.30	\$0.49	\$0.83	\$1.43	\$2.40	\$4.13	\$6.87	\$10.65	\$15.95	\$24.27	\$35.59
Child \$7,500	\$0.45	\$0.45	\$0.45	\$0.45	\$0.45	\$0.45	\$0.45	\$0.45	\$0.45	\$0.45	\$0.45
\$20,000 Benefit Amount											
Employee \$20,000	\$0.80	\$1.30	\$2.20	\$3.80	\$6.40	\$11.00	\$18.30	\$28.40	\$42.50	\$64.70	\$94.90
Spouse \$10,000	\$0.40	\$0.65	\$1.10	\$1.90	\$3.20	\$5.50	\$9.15	\$14.20	\$21.25	\$32.35	\$47.45
Child \$10,000	\$0.60	\$0.60	\$0.60	\$0.60	\$0.60	\$0.60	\$0.60	\$0.60	\$0.60	\$0.60	\$0.60
\$25,000 Benefit Amount											
Employee \$25,000	\$1.00	\$1.63	\$2.75	\$4.75	\$8.00	\$13.75	\$22.88	\$35.50	\$53.13	\$80.88	\$118.63
Spouse \$12,500	\$0.50	\$0.82	\$1.38	\$2.38	\$4.00	\$6.88	\$11.44	\$17.75	\$26.57	\$40.44	\$59.32
Child \$12,500	\$0.75	\$0.75	\$0.75	\$0.75	\$0.75	\$0.75	\$0.75	\$0.75	\$0.75	\$0.75	\$0.75

[†]Benefit reductions may apply. See plan details.

EXCLUSIONS AND LIMITATIONS

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS FOR CRITICAL ILLNESS:

We do not pay benefits for a first ever occurrence of a Critical Illness that occurs less than 3 months after the first ever occurrence of a different Critical Illness for which this plan paid benefits. If the insured has exhibited symptoms or received treatment within the past 12 months for a Critical Illness, we do not pay benefits for the second ever occurrence of that Critical Illness. We do not pay benefits for a third or later occurrence of a Critical Illness.

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.

Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees 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.

If the plan is new (not transferred): 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 employee, in a specified time period prior to coverage in this plan, consults with

a physician, receives treatment, or takes prescribed drugs. No benefit will be paid until the earlier of the treatment free period or a specified time period after the effective date. 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.

Evidence of Insurability is required on all late enrollees and enrollees over age 69 (not applicable in FL). 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.

Contract # GP-1-CI-14

Guardian's Critical Illness Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. This policy provides limited benefits health insurance only. It does not provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services.
Policy Form # GP-1-LAH-12R; GP-1-CI-14