Is Critical Illness Insurance for You? A Questionnaire

Many people are hearing about critical illness insurance for the first time. A natural question is whether this coverage is right for you and your family, and how much coverage you may need. This simple questionnaire can help answer these questions.

1.	What type of medical insurance do you have? ☐ HMO			
	☐ PPO or Ins	ured Plan		
	 a. If HMO: Would you plan to seek treatment for a critical illness (like cancer, heart attack, or stroke) from a Doctor or specialist, Hospital, or Clinic not part of the HMO? (If yes, enter 15) b. If PPO or Insured Plan: *What is your medical insurance's maximum out-of-pocket expense (deductible plus your co-payment maximum)? (Enter the number of \$1,000 units) x 3 = 			
0	or stroke) from a E your home? (If yes, enter 5)	o seek treatment for a crit Poctor, Specialist, Hospita	al or Clinic more than 1	
2.	Do you have immediate family members living more than 250 miles from home?			
	(If yes, enter the number of	of family members)	x2=	
3.	Is your home adapted for a person whose activity is limited for medical reasons? (If no, enter 5)			
4.	To represent income lost due to a 3 month disability. Enter a value from this table:			
	Your Annual Income	Value if <u>No</u> Short Term Disability Income Coverage	Value if there is Short Term Disability	
	Under \$25,000	6	3	
	\$25,000 - \$50,000	9	5	
	\$50,000 - \$75,000	15	7	
	\$75,000 +	30	15	
5.	Do you contribute to a 401K Plan or similar retirement savings (if applicable)? If yes, enter 3.			
6.	Does your employer provide matching contributions to your 401(K) Plan (if applicable)? If yes, enter 1.			
	TOTAL point value			

Your need: in general, multiply your point value times \$1,000 to find your need for critical illness coverage. You may also consider adding \$5,000 to \$10,000 for family quality-of-life needs, extra out-of-pocket costs for prescriptions, etc.