#### TRUSTMARK INSURANCE COMPANY

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# CRITICAL ILLNESS and CANCER PROTECTION POLICY SUPPLEMENTAL COVERAGE

## OUTLINE OF COVERAGE RETAIN FOR YOUR RECORDS

This limited health benefits plan does not provide comprehensive medical coverage. It is a basic or limited benefits policy and is not intended to cover all medical expenses. This plan is not designed to cover the costs of serious or chronic illness.

Policy Form: CACIIND-82001P

Policy Title: Critical Illness and Cancer Protection Policy

- (1) **NOTICE** -- This policy is designed only as a supplement to a comprehensive health insurance policy and should not be purchased unless you have this underlying coverage. It should not be purchased by persons covered by Medicaid.
- (2) **READ THE POLICY CAREFULLY --** This outline of coverage provides a very brief description of the important features of the policy. Please note that this outline is not intended to be a part of the insurance contract. Only the actual policy provisions are final and binding. The policy itself sets forth in detail your rights and obligations as well as those of the insurance company. PLEASE READ THE POLICY CAREFULLY!
- (3) CRITICAL ILLNESS AND CANCER PROTECTION COVERAGE -- Policies of this category are designed to provide, to persons insured, restricted coverage that pays benefits ONLY when certain losses occur as a result of the following critical illnesses or cancers:
  - Amyotrophic Lateral Sclerosis (ALS) (Lou Gehrig's Disease)
  - Blindness
  - Coronary Artery Bypass Surgery
  - Heart Attack
  - Paralysis of at least Two Limbs
  - Stroke
  - Renal Failure
  - Transplant of a Major Organ
  - Invasive Cancer
  - Carcinoma in Situ

NOTE: for use with Critical Illness and Cancer combined coverage

**BENEFITS** – Except for carcinoma in situ and coronary artery bypass surgery, the policy will pay the full benefit amount when a diagnosis of invasive cancer and each of the conditions listed above as covered critical illnesses is made so long as 90 consecutive days have elapsed between dates of diagnosis. Also, 90 days must have elapsed since payment is made for a recurring condition. The benefit amount is limited to one full benefit amount for invasive cancer and one full

benefit amount for each defined condition listed above as a covered critical illness. There are no deductible or copayment provisions.

A partial benefit amount is payable for a diagnosis of both carcinoma in situ and coronary artery bypass surgery and each condition will only be paid once during each covered person's lifetime.

The diagnosis must be made by a physician after the effective date and after the waiting period.

Another full benefit amount will be paid for recurrence of the same covered condition so long as payment was previously made under the policy for such condition, 12 months have elapsed between dates of diagnosis and 90 consecutive days have elapsed between dates of diagnosis for a different covered condition for which payment is made under this policy, and for invasive cancer, the covered person has been treatment free for at least 12 consecutive months.

No benefit payment will be paid for recurrence of carcinoma in situ or coronary artery bypass surgery.

Note: For use with Critical Illness and Cancer combined coverage with subsequent condition with recurring condition including invasive cancer benefit rider.

(4) **LIMITATIONS** -- The policy does not pay benefits for any other critical illness invasive cancer or carcinoma in situ critical illness, or invasive cancer or carcinoma in situ not specified in the policy.

#### (5) **EXCLUSIONS**

### NOTE: THESE EXCLUSIONS ARE FOR CANCER/CRITICAL ILLNESS COVERAGE COMBINED

No benefits will be paid for:

A diagnosis made between the date of application and the effective date;

A pre-existing condition in the first 12 months after the effective date, or during the waiting period; Basal cell carcinoma and squamous cell carcinoma of the skin;

Melanoma that is diagnosed as Clark's level I or level II or Breslow's classification less than 0.75mm:

Premalignant tumors or polyps;

Use of any alcohol, drug, narcotic, or hallucinogen not prescribed for the insured by a physician, or not used in the manner prescribed by the physician while committing a felony at the time of loss:

Any disease, sickness or incapacity not specified in the policy;

More than one diagnosis occurrence after the effective date and after the waiting period, except as otherwise specified in the policy;

Transient Ischemic Attacks, Reversible Ischemic Neurological Deficit, and attacks of Vertebrobasilar Ischemia:

Balloon Angioplasty, laser relief or other like procedures;

Any invasive cancer, carcinoma in situ or critical illness resulting from:

The covered person's commission of, or attempt to commit, a felony;

Self-inflicted injury, while sane or insane;

The covered person's committing or attempting to commit suicide;

The covered person engaging in an illegal occupation;

War or act of war, declared or undeclared;

The covered person's participation in a riot.

### (6) PRE-EXISTING CONDITION LIMITATION

No benefit amount or partial benefit amount will be paid for any condition caused by or resulting from a pre-existing condition during the first twelve (12) months after the covered person's coverage effective date.