Life is worth living well.

Perhaps you hear words like “cancer” and “heart attack” and automatically assume diseases like these happen only to someone older. But the truth is, today’s most common major illnesses and injuries can affect anyone at any time. And an unexpected health event can be a heavy physical and financial burden.

Limitations and exclusions

Throughout this brief, limits may be placed on the policy and its benefits, without notice. Washington National guarantees any rider form series (may vary by state): R1069, R1077ROP, R1077CV, R1077SW, R1077C, R1077C2, R1077HE, R1077HEA, R1077HEB, R1077HEC, R1077HED, R1077HEF, R1077HEG, R1077HEH.

CONSIDER THE FACTS:

1-in-2 men
1-in-3 women
38 MILLION each year.

CANCER • HEART DISEASE

TOP THREE causes of death
1,300,000 each year in the U.S.

Approximately 4 million people suffer heavy physical and financial burdens caused by cancer and heart disease every year. Half of adult Americans have a pre-existing condition. That’s why critical illness insurance is so important. You can get back to your active lifestyle and enjoy the best things in life!

Washington National Active Care helps you face the future with more confidence.

• Benefits are paid directly to you—not cash—so you don’t have to spend your savings, use your retirement fund or go into debt.

• You receive all benefits in addition to other insurance you may have.

• Benefits can help you with copays, coinsurance and any coverage gaps that may be left by your major medical insurance.

• Benefits are guaranteed renewable as long as you pay premiums when due.

• You can get back to your active lifestyle and enjoy the best things in life!

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Policy form series (may vary by state): WHIC5M
Rider form series (may vary by state): R1077C1, R1077C2, R1077C7, R1077C8, R1077C9, R1077C10, R1077C11

Washington National Insurance Company
Home Office
1616 17th Street, N.W., Suite 400
Washington, D.C. 20036

Home Office
400 North Capital Street, N.W., Suite 2000
Washington, D.C. 20001

Washington National Insurance Company of New York
Home Office
1 Lafayette Square, 9th Floor
New York, NY 10036

Washington National Insurance Company of Maryland
Home Office
7120 Roscliff Drive
Baltimore, MD 21224

WASHINGTON NATIONAL
ACTIVE care™
THE SUPPLEMENTAL SOLUTION

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Because your life is worth living well, there’s.

**WASHINGTON NATIONAL ACTIVE CARE™**
**THE SUPPLEMENTAL SOLUTION**

You strive to make the right choices to ensure a healthy, active lifestyle and a secure financial future. Yet one day you may face a health crisis—whether it’s a result of an accident or a major illness. Give yourself and your family the extra protection provided by Washington National Active Care supplemental insurance.

**BENEFITS ARE PAID DIRECTLY TO YOU FOR COVERED:****

- Heart attack
- Heart bypass and stent
- Stroke
- Diabetic complications
- Alzheimer’s disease
- Hospital and ICU stays
- Hospital and ICU stays
- Surgery and follow-up care
- Hospital and ICU stays
- Doctor office wellness visits

When you have Washington National Active Care, you receive cash benefits for up to:

- 17 critical illnesses.
- 14 different types of accidental injuries.
- 7 other important categories.

With critical illness lump-sum payments up to $500,000 for each major diagnosis—plus cash benefits and recurrence benefit—the policy’s value for you goes on and on.

**MULTIPLE COVERAGE TYPES IN ONE SOLUTION**

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**BENEFIT SPOTLIGHT**

- **RECURRENT BENEFIT**
  - for cancer and heart & stroke

  When you’ve been through a critical illness, the disease could come back.

  - Cancer survivors are twice as likely to develop cancer again in the future.
  - More than a third of heart attacks and one-quarter of strokes are recurrences.

  With Washington National Active Care, you’ll be protected for the future. On the day after you have not received needed treatment for a cancer, heart attack, or stroke diagnosis, your recurrence benefit begins to grow—a maximum of 50% after 5 years. These benefits have a recurrence diagnosis within 1 year of initial diagnosis, up to a maximum of one year.

- **HOSPITAL BENEFITS WORK FOR YOU**

  Hospital benefits cover you:
  - Every day you’re in the hospital—whether it’s a heart attack,
  - Skilled-care facility stays
  - All in one solution.
  - Hospital ICU stays
  - Critical-care facility stays
  - Hospital and ICU stays

  Choose the supplemental solution with benefits for cancer, heart attack, stroke, other critical illnesses and accidents, as well as hospital, ICU and skilled care facility stays—a full solution in one convenient policy.

Choose the benefit that best complements your portfolio. With this policy, you can choose a mix of all of your paid premiums ever paid back.

There is an additional cost for this option. Subject to state availability.

**BENEFITS WHEN YOU NEED THEM:**

- Cash value option
- Return of premium option

**Choose the benefit that best complements your portfolio. With this policy, you can choose a mix of all of your paid premiums ever paid back.**

There is an additional cost for this option. Subject to state availability.

Choose the benefit that can return your premiums to you. With this policy, you can choose a mix of all of your paid premiums ever paid back.

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Life is worth living well.

You receive all benefits you face the future with more confidence. Washington National Active Care helps.

Benefits can help you with copays, coinsurance and any coverage gaps that may be left by your major medical insurance. That may be necessary even though a diagnosis has not yet been made.

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1-in-2 men
1-in-3 women

38 MILLION people receive medical attention for an injury each year.

Top THREE causes of death

CANCER • HEART DISEASE

IT CAN’T CONSIDER THE FACTS:

ACCIDENTAL INJURIES
CANCER • HEART DISEASE

TOP THREE causes of death between ages 35-74

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WASHINGTON NATIONAL
THE SUPPLEMENTAL SOLUTION

You strive to make the right choices to ensure a healthy, active lifestyle and a secure financial future. Yet one day you may face a health crisis—whether it’s a result of an accident or a major illness. Give yourself and your family the extra protection provided by Washington National Active Care supplemental insurance.

BENEFITS ARE PAID DIRECTLY TO YOU FOR COVERED:

1. Cancer
   - Heart attack
   - Heart bypass and stent
   - Stroke
   - Diabetic amputation
   - Accidental injuries
   - Doctor office wellness visits

2. Heart & Stroke
   - Doctor office wellness visits
   - Annual care

3. Critical Conditions
   - Doctor office wellness visits
   - Annual care
   - Cancer
   - Transient ischemic attack (TIA)
   - Diabetes amputation

4. Hospital
   - Doctor office wellness visits
   - Annual care
   - Cancer
   - Heart attack
   - Stent
   - Coronary artery bypass and angioplasty

5. Accident
   - Doctor office wellness visits
   - Annual care
   - Doctor office wellness visits
   - Skilled care facility stays
   - Doctor office wellness visits
   - Skilled care facility stays
   - Doctor office wellness visits
   - Skilled care facility stays

This chart is intended to illustrate benefits. It is not an application for insurance. To select the supplement with benefits for cancer, heart attack, stroke, other critical illnesses and accidents, as well as hospital, ICU and skilled care facility stays, call your Independent licensed agent.

IN ONE SOLUTION

MULTIPLE COVERAGE TYPES

When you have Washington National Active Care, you receive cash benefits for up to:

1. 17 critical illnesses.
2. 14 different types of accidental injuries.
3. 7 other important categories.

With critical illness lump-sum payments up to $100,000 for each major diagnosis—plus cash benefits and recurrence benefits—the policy’s value for you goes on and on.

BENEFIT SPOTLIGHT

RECURRENT BENEFIT
For cancer and heart & stroke

- When you’ve been through a critical illness, the disease could come back.
- Cancer survivors are twice as likely to develop cancer again in the future.
- More than a third of all heart attacks and one-quarter of strokes are recurrences.

With Washington National Active Care, you’ll be protected from the second hit. Once you suffer, you have not received or needed treatment for a cancer, heart attack, or stroke diagnosis, your recurrence benefit begins to grow—a maximum of 50% after 5 years. You’ll have coverage for a recurrence diagnosis even if your other insurance stops paying.

MONEY BACK WHEN YOU DON’T!

- Choose the benefit that can return your premiums to you.
- There’s an additional cost for this option.

Choose the supplemental solution with benefits for cancer, heart attack, stroke, other critical illnesses and accidents, as well as hospital, ICU and skilled care facility stays, call your Independent licensed agent.

This example illustrates Washington National Active Care when all coverage types are selected.

TO SELECT YOUR OPTIONS, YOU MUST FIRST CHOOSE THE CANCER, HEART & STROKE, AND CRITICAL CONDITIONS.

- Choose your family members to be covered.
- Choose your lump-sum benefit amount for cancer, heart & stroke and critical conditions.
- Choose your LUMP-SUM BENEFIT amount for cancer, heart & stroke and critical conditions.
- Choose the benefit that can return your premiums to you.

For amounts and full descriptions, please see the accompanying benefit dictionary.

Benefits may be subject to monthly or lifetime maximums and benefit-duration limits. See the policy for details. Premiums are based on the level of coverage selected.

This benefit pays per day for up to 3 days. This example illustrates Washington National Active Care when all coverage types are selected.

Choose the benefit that can return your premiums to you. With lifetime limits you can always check for all of your paid premiums even claims remain.

Because your life is worth living well, there’s...
Choose your family members to be covered.

Step 1: Choose your family members to be covered.

Step 2: Choose your Lump-Sum Benefit amount for Cancer, Heart & Stroke and Critical Conditions.

Step 3: Choose your coverage.

The supplemental solution is designed to provide additional protection for serious health events. It’s available only to individuals who have purchased Active Care, our comprehensive, no-deductible health insurance policy. For more information, visit active.washingtonnational.com.

This chart is intended to illustrate benefits. It is not an application for insurance. For amounts and full descriptions, please see the accompanying benefit dictionary.

Benefits may be subject to monthly or lifetime maximums and benefit-duration limits. See the policy for details. Premiums are based on the level of coverage selected.

To select your options, you must first choose the Cancer, Heart & Stroke, and Critical Conditions coverage. Benefits are paid per diagnosis, subject to any applicable benefit limits.

Step 4: Choose the supplemental solution with benefits for cancer, heart attack, stroke, other critical illnesses and accidents, as well as hospital, ICU and skilled care facility stays. See the policy for details. Premiums are based on the level of coverage selected.

Step 5: Choose the supplemental solution with benefits for cancer, heart attack, stroke, other critical illnesses and accidents, as well as hospital, ICU and skilled care facility stays.

Choose the benefit that can return your premiums to you. With this option, you can review the costs for all of your paid premiums (cancer claims included). There is an additional cost for this option. Subject to state availability.

Multiple Coverage Types in One Solution

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Benefit Spotlight

Recurrence Benefit for Cancer and Heart & Stroke

When you’ve been through a critical illness, the disease could come back.

• Cancer survivors are twice as likely to develop cancer again in the future.
• More than 1 out of 10 heart attacks and one-quarter of strokes are recurrent.

With Washington National Active Care, you’ll be protected from each of these events. Once you’ve faced a cancer, heart attack, or stroke, you’re protected. Because each benefit begins to grow—at a maximum of 50% after 5 years. You’ll have coverage for a recurrence diagnosis even if your other insurance stops paying.
Life is worth living well.

Perhaps you hear words like “cancer” and “heart attack” and automatically assume diseases like these happen only to someone older. But the truth is, today’s most common major illnesses and injuries can happen at any age. And an unexpected health event can be a heavy physical and financial burden.

Consider the Facts:

- **1,300,000 people suffer a heart attack each year in the U.S.**
- **38 million people receive medical attention for an injury each year.**

**ACCIDENTAL INJURIES**

Cancer + Heart Disease are the TOP THREE Causes of death between ages 20-64.

**Prevention Tips:**

1. **Avoid risky behaviors.** Don’t engage in dangerous activities like sky diving or off-road racing.
2. **Stay healthy.** Eat a balanced diet, exercise regularly, and avoid smoking.
3. **Use safety equipment.** Wear seat belts, bike helmets, and other protective gear when appropriate.

**Limitations and Exclusions:**

1. **Pre-existing Conditions:** Policy will not pay for pre-existing conditions or treatment for diseases existing before the effective date of coverage.
2. **Preventive Treatments:** No benefits are payable for treatment for preventive treatments prescribed without a diagnosis of a covered sickness or injury.
3. **Procedures:** Benefits are not payable for procedures included in any riders or as a result of a normal delivery.

**Definitions:**

- **Pre-existing Condition:** Means the existence of symptoms documented by a doctor or other health provider.
- **DEFINITIONS:**
  - **High Risk Life:** Any person with a history of cancer, heart disease, or stroke.
  - **Specified Critical Illness:** A diagnosis made by a licensed doctor or other health provider.

**Supplemental Solutions:**

- **Cancer + Heart Disease**: Includes modern treatments for cancer, heart disease, diabetes, stroke, and other related conditions.
- **Worldwide Coverage**: Coverage is available worldwide, including as a rider in or driving any motor-driven vehicle in a race, stunt show, or speed test, or while testing any vehicle on any race, stunt show, or speed test.

**Washington National Insurance Company**

800-888-8000 | WashingtonNational.com

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WASHINGTON NATIONAL
ACTIVE care SM
THE SUPPLEMENTAL SOLUTION

BENEFIT DICTIONARY
KY, TN, SD and WY

SUPPLEMENTAL HEALTH INSURANCE
LUMP-SUM BENEFIT amount for CANCER, HEART & STROKE and CRITICAL CONDITIONS.

- $5K
- $10K
- $20K
- $30K
- $40K
- $50K
- $60K
- $70K
- $100K

- CANCER

<table>
<thead>
<tr>
<th>BENEFIT</th>
<th>AMOUNT</th>
<th>DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lump-sum benefit</td>
<td></td>
<td>Pays a lump sum benefit for a diagnosis of a specified critical illness. The lump-sum benefit is not payable for skin cancer, any specified critical illness diagnosed or treated before the effective date of the policy or during the waiting period.</td>
</tr>
<tr>
<td>Cancer</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Carcinoma in-situ</td>
<td>25%</td>
<td></td>
</tr>
<tr>
<td>Recurrence benefit</td>
<td>Up to 50% of the lump-sum benefit</td>
<td>Provides a recurrence benefit for any subsequent diagnosis of cancer or heart/stroke based on the coverage selected, if: the recurrence of the covered condition is diagnosed more than 12 months after any previous diagnosis; no treatment has been required or received treatment during the 12 months between the diagnoses. Treatment does not include maintenance medications and follow-up visits to a Physician. This benefit builds to 50% of the lump sum benefit after 61 months.</td>
</tr>
<tr>
<td>Skin cancer benefit</td>
<td>$300</td>
<td>Pays a one time amount of $300 when an insured is diagnosed with melanoma or non-melanoma skin cancer.</td>
</tr>
<tr>
<td>Annual care benefit</td>
<td>$75 per year</td>
<td>When you are under the continued care of a physician for a specified critical illness diagnosis, we will pay a $75 benefit beginning with the first anniversary after the payment of the lump sum benefit and is payable each year on the date of the payment of the lump sum benefit and will not exceed a total of five (5) consecutive annual payments per insured.</td>
</tr>
<tr>
<td>Inpatient hospital benefit</td>
<td>$300 per day</td>
<td>Provides for inpatient hospital confinement $300 per day for up to 3 days. This benefit will be calculated based on the number of days that the hospital charges you for room and board. A “day” means a 24-hour period. This benefit has a limit of 3 periods of confinement per calendar year with a lifetime maximum of $15,000.</td>
</tr>
</tbody>
</table>

1Not available in Wyoming.
2In Wyoming, cancer only coverage is not an option. Heart & stroke and critical conditions must be selected with this coverage.
3The lump-sum benefit amount payable will not exceed 100%.

RADIATION & CHEMOTHERAPY UPGRADE
This optional rider is available if cancer coverage is selected.

<table>
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<td>Radiation</td>
<td>$200 per day</td>
<td>Pays $200 per day for radiation treatment, up to $5,000 per year, with no lifetime maximum.</td>
</tr>
<tr>
<td>Injected chemotherapy</td>
<td>$200 per day</td>
<td>Pays $200 per day for injected chemotherapy treatment, up to $5,000 per year, with no lifetime maximum.</td>
</tr>
<tr>
<td>Oral chemotherapy</td>
<td>$300 per month</td>
<td>Pays $300 per month for oral chemotherapy for up to 36 months.</td>
</tr>
</tbody>
</table>
### BENEFIT AMOUNT DETAILS

<table>
<thead>
<tr>
<th>BENEFIT</th>
<th>AMOUNT</th>
<th>DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lump-sum benefit*</td>
<td></td>
<td>Pays a lump-sum benefit for a diagnosis of a specified critical illness. The lump-sum benefit is not payable for any specified critical illness diagnosed or treated before the effective date of the policy or during the waiting period.</td>
</tr>
<tr>
<td>Heart attack</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Stroke</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Coronary artery bypass</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Angioplasty</td>
<td>25%</td>
<td></td>
</tr>
<tr>
<td>Stent</td>
<td>25%</td>
<td></td>
</tr>
<tr>
<td>Transient ischemic attack (TIA)</td>
<td>25%</td>
<td></td>
</tr>
<tr>
<td>Recurrence benefit</td>
<td>Up to 50% of the lump-sum benefit</td>
<td>The policy provides a recurrence benefit for any subsequent diagnosis of heart/stroke based on the coverage selected, if: the recurrence of the covered condition is diagnosed more than 12 months after any previous diagnosis; no treatment has been required or received treatment during the 12 months between the diagnoses. Treatment does not include maintenance medications and follow-up visits to a Physician. This benefit builds to 50% of the lump sum benefit after 61 months.</td>
</tr>
<tr>
<td>Annual care benefit</td>
<td>$75 per year</td>
<td>When you are under the continued care of a physician for a specified critical illness diagnosis, we will pay a $75 benefit beginning with the first anniversary after the payment of the lump sum benefit and is payable each year on the date of the payment of the lump sum benefit and will not exceed a total of five (5) consecutive annual payments per insured.</td>
</tr>
<tr>
<td>Inpatient hospital benefit</td>
<td>$300 per day</td>
<td>Provides for inpatient hospital confinement $300 per day for up to 3 days. This benefit will be calculated based on the number of days that the hospital charges you for room and board. A “day” means a 24-hour period. This benefit has a limit of 3 periods of confinement per calendar year with a lifetime maximum of $15,000.</td>
</tr>
</tbody>
</table>

*The lump-sum benefit amount payable will not exceed 100%.
CRITICAL CONDITIONS

<table>
<thead>
<tr>
<th>BENEFIT</th>
<th>AMOUNT</th>
<th>DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lump-sum benefit¹</td>
<td></td>
<td>Pays a lump-sum benefit for a diagnosis of a specified critical illness: Alzheimer’s, blindness, coma, deafness, diabetic amputation (above the ankle)², major organ transplant (human heart, human lung, human liver, human kidney or human bone marrow), paralysis (2 or more limbs and lasting 90 days or more), and end stage renal failure. The lump-sum benefit is not payable for specified critical illness diagnosed or treated before the effective date of the policy or during the waiting period.</td>
</tr>
<tr>
<td>Permanent blindness</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Paralysis</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Coma</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Major organ transplant (when an insured undergoes transplant surgery)</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Major organ transplant (when an insured is registered with the Organ Procurement and Transplantation Network (OPTN))</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Diabetic amputation²</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Alzheimer’s disease</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Permanent deafness</td>
<td>25%</td>
<td></td>
</tr>
<tr>
<td>End-stage renal failure</td>
<td>25%</td>
<td></td>
</tr>
<tr>
<td>Inpatient hospital benefit</td>
<td>$300 per day</td>
<td>Provides for inpatient hospital confinement $300 per day for up to 3 days. This benefit will be calculated based on the number of days that the hospital charges you for room and board. A “day” means a 24-hour period. This benefit has a limit of 3 periods of confinement per calendar year with a lifetime maximum of $15,000.</td>
</tr>
</tbody>
</table>

¹The lump-sum benefit amount payable will not exceed 100%.
²Not available in Tennessee.
### HOSPITAL

**INPATIENT HOSPITAL BENEFIT AMOUNT DETAILS**

<table>
<thead>
<tr>
<th>BENEFIT</th>
<th>AMOUNT</th>
<th>DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient hospital benefit</td>
<td>$200 per day; $400 per day for ICU</td>
<td>Provides for inpatient hospital confinement in a regular hospital room ($200 per day) or in an intensive care unit ($400 per day) for up to 3 days. This benefit will be calculated based on the number of days that the hospital charges you for room and board. A “day” means a 24-hour period. This benefit has a limit of 3 periods of confinement per calendar year with a lifetime maximum of $15,000.</td>
</tr>
<tr>
<td>Skilled-care facility benefit</td>
<td>$200 per day</td>
<td>Provides a skilled care facility benefit when an insured is confined to a skilled nursing facility by physician’s order due to a covered sickness or a covered accident following an inpatient hospitalization and when considered disabled. In order to be considered disabled under the rider the insured must be unable to perform 2 or more activities of daily living (ADLs) – such as bathing, dressing, eating, and toileting—see the rider for additional information. After an elimination period of 7 days the rider will pay $200 per day for up to 14 days. There is a limit of 1 period of confinement per calendar year.</td>
</tr>
<tr>
<td>Outpatient surgical benefit</td>
<td>$200</td>
<td>Outpatient surgery is also provided when required due to covered sickness or a covered accident in the amount of $200. This is limited to 1 outpatient surgery per calendar year.</td>
</tr>
<tr>
<td>Physician’s office visit benefit</td>
<td>$75 one time per calendar year</td>
<td>Physician’s office visit provides $75 one time per calendar year for the following exams/test: annual physical exam, mammogram; breast ultrasound; pap smear (lab and procedure); biopsy; flexible sigmoidoscopy; hemocult stool specimen; chest x-ray; CEA (blood test for colon Cancer); CA 125 (blood test for ovarian Cancer); PSA (blood test for prostate Cancer); thermography; colonoscopy; virtual colonoscopy; ThinPrep; stress test on a bicycle or treadmill; fasting blood glucose test; blood test for triglycerides; serum cholesterol test to determine level of HDL and LDL; electrocardiogram (EKG); Carotid Doppler; Echocardiogram; Lipid panel (total cholesterol count).</td>
</tr>
<tr>
<td>BENEFIT</td>
<td>POLICYOWNER</td>
<td>SPOUSE (IF COVERED)</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>-------------</td>
<td>---------------------</td>
</tr>
<tr>
<td>Accidental death benefit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accidental death</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Motorized vehicle or pedestrian</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Common-carrier</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Dismemberment benefit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>One finger or toe</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>More than one finger and/or toe</td>
<td>$1,500</td>
<td>$1,500</td>
</tr>
<tr>
<td>One eye¹, hand, foot, arm, or leg</td>
<td>$7,500</td>
<td>$7,500</td>
</tr>
<tr>
<td>More than one eye, hand, foot, arm, or leg</td>
<td>$25,000</td>
<td>$25,000</td>
</tr>
<tr>
<td>Joint Replacement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hip, knee or shoulder</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>Fracture</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hip or thigh</td>
<td>$1,200</td>
<td>$1,200</td>
</tr>
<tr>
<td>Vertebrae</td>
<td>$1,100</td>
<td>$1,100</td>
</tr>
<tr>
<td>Pelvis</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>Skull (depressed)</td>
<td>$900</td>
<td>$900</td>
</tr>
<tr>
<td>Leg</td>
<td>$800</td>
<td>$800</td>
</tr>
<tr>
<td>Foot, ankle, or knee cap</td>
<td>$600</td>
<td>$600</td>
</tr>
<tr>
<td>Forearm or hand</td>
<td>$600</td>
<td>$600</td>
</tr>
<tr>
<td>Lower jaw</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td>Shoulder blade, collar bone, or sternum</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td>Skull (simple)</td>
<td>$400</td>
<td>$400</td>
</tr>
<tr>
<td>Upper arm or upper jaw</td>
<td>$400</td>
<td>$400</td>
</tr>
<tr>
<td>Facial Bones</td>
<td>$400</td>
<td>$400</td>
</tr>
<tr>
<td>Vertebrael processes</td>
<td>$200</td>
<td>$200</td>
</tr>
<tr>
<td>Coccyx, rib, finger, toe, or nose</td>
<td>$200</td>
<td>$200</td>
</tr>
<tr>
<td>Dislocation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hip</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>Knee (not knee cap)</td>
<td>$800</td>
<td>$800</td>
</tr>
<tr>
<td>Shoulder</td>
<td>$600</td>
<td>$600</td>
</tr>
<tr>
<td>Foot or ankle</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td>Hand</td>
<td>$400</td>
<td>$400</td>
</tr>
<tr>
<td>Lower jaw</td>
<td>$300</td>
<td>$300</td>
</tr>
<tr>
<td>Wrist</td>
<td>$200</td>
<td>$200</td>
</tr>
<tr>
<td>Elbow</td>
<td>$200</td>
<td>$200</td>
</tr>
<tr>
<td>Finger or toe</td>
<td>$200</td>
<td>$200</td>
</tr>
</tbody>
</table>

¹In Tennessee, “loss of sight”
### Benefit Policy

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Policyowner</th>
<th>Spouse (If Covered)</th>
<th>Child(Ren) (If Covered)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Laceration</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Combined length: over 2&quot;</td>
<td>$100</td>
<td>$100</td>
<td>$100</td>
</tr>
<tr>
<td><strong>Injuries requiring surgery</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eye injury</td>
<td>$100</td>
<td>$100</td>
<td>$100</td>
</tr>
<tr>
<td><strong>Tendon or ligament</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tear, sever or rupture</td>
<td>$300</td>
<td>$300</td>
<td>$300</td>
</tr>
<tr>
<td><strong>Ruptured disc</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>During first year you are insured</td>
<td>$100</td>
<td>$100</td>
<td>$100</td>
</tr>
<tr>
<td>After first year you are insured</td>
<td>$300</td>
<td>$300</td>
<td>$300</td>
</tr>
<tr>
<td><strong>Torn cartilage</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>During first year you are insured</td>
<td>$100</td>
<td>$100</td>
<td>$100</td>
</tr>
<tr>
<td>After first year you are insured</td>
<td>$300</td>
<td>$300</td>
<td>$300</td>
</tr>
<tr>
<td><strong>Hernia</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>During the first year you are insured</td>
<td>$100</td>
<td>$100</td>
<td>$100</td>
</tr>
<tr>
<td>After first year you are insured</td>
<td>$300</td>
<td>$300</td>
<td>$300</td>
</tr>
<tr>
<td><strong>Burn</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$500</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td><strong>Emergency care services</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$250 per covered accident per insured</td>
<td>$250 per covered accident per insured</td>
<td>$250 per covered accident per insured</td>
</tr>
<tr>
<td><strong>Physician's office visit benefit</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$30 limit 2 per covered accident per insured</td>
<td>$30 limit 2 per covered accident per insured</td>
<td>$30 limit 2 per covered accident per insured</td>
</tr>
</tbody>
</table>

1. If your hernia is a herniated disc, we will pay the ruptured disc benefit in lieu of the hernia benefit.
LIMITATIONS AND EXCLUSIONS:

The inpatient hospital benefit is limited to three periods of confinement per calendar year and has a lifetime maximum of $15,000. The annual care benefit is payable beginning with the first anniversary after the payment of the lump-sum benefit and is payable each year up to a total of five consecutive annual payments. The recurrence benefit pays a percentage of the lump-sum benefit for a subsequent diagnosis of cancer, heart attack or stroke (based upon coverage selected) when the subsequent diagnosis is more than 12 months after the previous diagnosis and there has been no treatment received during the 12 month period. The critical illness policy will not pay benefits for loss contributed to, caused by, or resulting from: having or being diagnosed with any other disease, sickness or incapacity, even if the disease or condition was caused, complicated or aggravated by the specified critical illness. Diagnosis of a specified critical illness during the waiting period which is the first 30 days after the coverage effective date. Participating or attempting to participate in an illegal act, or working at an illegal job. Being legally intoxicated, or so intoxicated that mental or physical abilities are seriously impaired. Being under the influence of any illegal drugs, or being under the influence of any narcotic, unless such narcotic is taken under the direction of and as directed by a physician. Injuring or attempting to injure yourself intentionally, regardless of mental capacity. Committing or attempting to commit suicide, regardless of mental capacity. Participating in any sporting event for pay or prize money. Being exposed to war or any act of war, declared or not, or participating in or contracting with the armed forces (including Coast Guard) of any country or international authority. Alcoholism, drug abuse, or chemical dependency. No benefits are payable for a pre-existing condition during the first 12 months after the effective date of coverage.

The following limitations and exclusions are in addition to the policy’s and apply to the critical conditions rider. The inpatient hospital benefit is limited to three periods of confinement per calendar year and has a lifetime maximum of $15,000. We will not pay benefits for loss contributed to, caused by, or resulting from: renal failure caused by a traumatic event, including surgical traumas. A heart transplant that is not a human heart; a bone marrow transplant that is not human bone marrow. If the insured’s paralysis is related to a stroke and the policy paid a lump-sum benefit, the lump-sum benefit will not be payable under the rider. No benefit is payable for diabetic amputations below the ankle. Amputation of a single toe or toes, or any partial foot amputations are not payable. No benefits are available for an organ donor under the rider. Coma does not include one that is medically induced.

The following limitations and exclusions are in addition to the policy’s and apply to the hospital indemnity rider. The inpatient hospital benefit is limited to three periods of confinement per calendar year and has a lifetime maximum of $15,000. The skilled-care facility benefit is payable when considered disabled as defined under the policy and has an elimination period of 7 days after which the benefit provides for up to 14 days of confinement and is limited to 1 confinement per calendar year. We will not pay benefits contributed to, caused by, or resulting from: cosmetic or elective surgery that is not for the diagnosis or treatment of covered sickness or covered accident based upon generally accepted medical practice and is not medically necessary. Complications from any cosmetic or elective surgery. Treatment for dental care or dental procedures, unless treatment is the result of a covered accident. Flying including operating, learning to operate, serving as a crew member on or jumping or falling from any aircraft including those which are not motor-driven. Mental disorder having a behavioral or psychological disorder, disease or syndrome, without demonstrable organic origin. No benefits are payable for a separate charge made for the newborn’s stay in a nursery as a result of a normal delivery. No benefits are payable for any services provided or charges made in an observation unit. Normal pregnancy that occurs within the first 24 months after the effective date of coverage. Loss due to complications of pregnancy will be paid the same as for any other sickness. A cesarean section is not considered a complication of pregnancy. A pregnancy of a dependent child will not be covered. Racing including riding in or driving any motor-driven vehicle in a race, stunt show or speed test, or while testing any vehicle on any race course or roadway. Travel/location while being more than 40 miles outside the territorial limits of the United States or Canada. Vision exams or vision procedures, unless treatment is the result of a covered accident or a covered sickness. The following limitations and exclusions are in addition to the policy’s and apply to the radiation and chemotherapy benefit rider. There is a calendar-year maximum of $5,000 for the radiation and injected chemotherapy benefits. No benefits are payable for preventive treatments prescribed without a diagnosis of cancer. The rider does not pay for continued maintenance medication for the purposes of keeping cancer from recurring.

The following limitations and exclusions are in addition to the policy’s and apply to the accidental death and dismemberment rider, we will not pay benefits for loss contributed to, caused by, or resulting from: flying including operating, learning to operate, serving as a crew member on, or jumping or falling from any aircraft including those which are not motor-driven. Hazardous activities which are hang-gliding, bungee jumping, parachuting, sailgliding, paragliding, parakiting or mountaineering. Racing including as a rider in or driving any motor-driven vehicle in a race, stunt show or speed test, or while testing any vehicle on any race course or roadway. Having any disease, bodily or mental illness or degenerative process. We also will not pay benefits for any related medical treatments or diagnostic procedures. While traveling, being in an accident which occurs more than 40 miles outside the territorial limits of the United States or Canada, except under the accidental death benefit.

DEFINITIONS

PRE-EXISTING CONDITION: Means the existence of symptoms that would cause an ordinarily prudent person to seek diagnosis, care or treatment within a twelve (12) month period preceding the effective date of the coverage of the insured or a condition for which medical advice or treatment was recommended by a physician or received from a physician within a twelve (12)-month period preceding the effective date of coverage. A pre-existing condition can exist even though a diagnosis has not yet been made.6

A hospital is not a bed, unit or facility that functions as a: a/c
skilled nursing facility, nursing home, extended care facility, convalescent home, rest home or a home for the aged, sanatorium, rehabilitation center, place primarily providing care for alcoholics or drug addicts or facility for the care and treatment of mental disease or mental disorders.

1In South Dakota, “unless”
2In Kentucky, “or so intoxicated that mental or physical abilities are seriously impaired” is not applicable.
3Not applicable in South Dakota.
4Not applicable in Tennessee.
5In Tennessee, a non-elective cesarean is considered a complication.
6Not available in Wyoming.
7In Wyoming, six (6) month period

PREMIUMS ARE BASED ON THE LEVEL OF COVERAGE SELECTED. THIS BENEFIT DICTIONARY IS A BRIEF SUMMARY OF THE BENEFITS PROVIDED. PLEASE CONSULT THE POLICY ITSELF TO DETERMINE GOVERNING CONTRACTUAL PROVISIONS.