

Critical illness coverage

Helping to ease your stress and protect your finances



Illness can happen to anyone at any time, regardless of age. That's why it's important to be prepared. Knowing your family history and risk factors can help give you peace of mind, and so can critical illness coverage.

How the critical illness plan works

Critical illness coverage offers a lump-sum cash benefit for unexpected costs and supports recovery if you or a covered family member are diagnosed with a critical illness, like a heart attack or cancer.

You decide how to use the benefits to best support your recovery. Use them to help pay for:

- **Out-of-pocket medical costs**, like your deductible, copays, or coinsurance (your percentage of the costs).

Other medical costs, such as doctor bills, imaging, or rehabilitation.

Daily expenses, like rent, food, transportation, or help around the house.

Our critical illness coverage provides benefits for up to 18 critical illnesses, including heart attack, stroke, certain cancers, and major organ transplant. The coverage pays for the first diagnosis of certain illnesses after your coverage is effective.



Key plan features

- Cash benefit is paid directly to you in a lump-sum payment.
- No limitations for preexisting conditions.²
- Coverage is available for yourself, your spouse, and dependent children.
- You can take your coverage with you even if you leave your employer.³
- You can earn \$100 each year for having an eligible health screening, such as a mammogram or colonoscopy. Complete your health screening and call the Claims line at **800-604-4381**. We'll confirm your screening and then send you a check.



Mason's story — An example of critical illness coverage:

Here's how Mason's critical illness coverage supported him after a heart attack.

The life-changing event

When Mason felt pain in his chest and shortness of breath, he called 911 and went to the emergency room (ER). He was diagnosed with a heart attack.

Not-so-good-news

Two months after his heart attack, Mason's doctor recommended coronary artery bypass surgery, which he had the following week.

How Mason's coverage helped him

Mason received a **\$10,000** lump-sum benefit to cover heart attack expenses.

After his bypass surgery, he received an additional **\$2,500** benefit.*

He applied part of his **\$12,500** in benefits to pay for a health coach and gym membership after his surgery.

Keep in mind, the coverage details discussed here are only examples. Please check your individual plan details for exact coverage information.

*As part of the heart attack benefit, members receive an additional payment if they have a bypass.



Connected benefits make things easier for you to file a claim

When you have supplemental health coverage, you will have to submit a claim to be paid for your qualifying critical illness.

If you have a medical plan and critical illness coverage with us, we'll automatically let you know when you may have an eligible claim to file, based on the medical claims we see filed by your healthcare professionals. Just make sure you've created an account on the SydneySM Health mobile app or [anthem.com/ca](https://www.anthem.com/ca) and are signed up for email alerts.

¹ Restrictions may apply.

² Covered accidents or illness must occur after the effective date of coverage.

³ Not available in all states; insured will only be able to continue coverage while the policy is in-force with the policyholder, and the insured must pay premium if electing to continue coverage after leaving employer.

Sydney Health is offered through an arrangement with Caelon Digital Platforms, a separate company offering mobile application services on behalf of your health plan.

Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Anthem Blue Cross Life and Health Insurance Company are independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

Important: This is a fixed indemnity policy, NOT health insurance.

This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying for the cost of your care.

- The payment you get isn't based on the size of your medical bill.
- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

- **Visit [HealthCare.gov](https://www.healthcare.gov) or call 1-800-318-2596** (TY: 1-855-889-4325) to find health coverage options.
- To find out if you get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

- For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website ([naic.org](https://www.naic.org)) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.



Critical Illness Plans

With Skin Cancer Benefit

Critical Illness coverage provides the added layer of security you want and need when illness occurs— a lump-sum cash benefit to help pay for unexpected costs. You decide how to use the benefits : Help pay for out-of-pocket medical costs, prescriptions, hospital bills, X-rays, daily expenses, rent, food, or transportation.

Key features:

- Cash benefit is paid directly to you in a lump-sum, tax-free payment.
- Health screenings, such as a lipid panel or fasting glucose test.
- You can take your coverage with you even if you leave your employer.¹
- Benefits for covered spouse are 100% and children are 100% of the amount shown below
- You choose either \$10,000 or \$20,000 when you enroll

Cancer Benefits

Benefit	Amount	
Invasive Cancer	\$10,000	\$20,000
Non-Invasive Cancer	\$2,500	\$5,000
Benign Brain Tumor	\$10,000	\$20,000

Vascular Benefits

Benefit	Amount	
Heart Transplant	\$10,000	\$20,000
Heart Attack (Myocardial Infarction)	\$10,000	\$20,000
Stroke	\$10,000	\$20,000
Coronary Artery By-Pass Surgery	\$5,000	\$10,000
Aneurysm	\$10,000	\$20,000
Angioplasty/Stent	\$10,000	\$20,000

Neurological Benefits

Benefit	Amount	
Advanced Parkinson's Disease	\$10,000	\$20,000
Advanced Alzheimer's Disease	\$10,000	\$20,000
Amyotrophic Lateral Sclerosis	\$10,000	\$20,000
Advanced Multiple Sclerosis	\$10,000	\$20,000

Other Specified Illness Benefits

Benefit	Amount	
Coma	\$10,000	\$20,000
Paralysis	\$10,000	\$20,000
Major Organ Transplant	\$10,000	\$20,000
End Stage Renal Disease	\$10,000	\$20,000
Loss of Hearing	\$10,000	\$20,000
Loss of Speech	\$10,000	\$20,000
Loss of Vision	\$10,000	\$20,000
Bone Marrow Transplant	\$10,000	\$20,000

Recurrence Benefits

Benefit	Amount
Recurrence Waiting Period	6 months
Invasive Cancer	100% of Previously Covered Benefit
Benign Brain Tumor	100% of Previously Covered Benefit
Heart Transplant	100% of Previously Covered Benefit
Heart Attack (Myocardial Infarction)	100% of Previously Covered Benefit
Stroke	100% of Previously Covered Benefit
Coma	100% of Previously Covered Benefit
Major Organ Transplant	100% of Previously Covered Benefit

Childhood Conditions

Benefit	Amount	
Cystic Fibrosis	\$10,000	\$20,000
Muscular Dystrophy	\$10,000	\$20,000
Cerebral Palsy	\$10,000	\$20,000
Spina Bifida	\$10,000	\$20,000
Congenital Heart Disease	\$10,000	\$20,000

Other key features

Benefit	Amount	
Health Screening (per covered person, per calendar year)	\$100	
Skin Cancer benefit, per member, once per lifetime	\$250	
Additional occurrence of multiple conditions	Covered with 30 day separation period If both conditions are Vascular or both are Cancer. Otherwise, covered with no separation period.	
Pre-Existing Conditions Limitation	None	
Lifetime Benefit Maximum - Employee	\$250,000	\$500,000
Lifetime Benefit Maximum - Spouse	\$250,000	\$500,000
Lifetime Benefit Maximum - Children	\$250,000	\$500,000

How to file claims

You can file claims online at <https://supplemental-health.anthem.com> or you can print a claim form from that website and file it by mail or fax. Contact us with any questions: In California (800) 604-4381; in upstate New York (800) 608-3813; in downstate New York (800) 604-5379; if you are in any other state, please call (888) 828-2432.

\$10,000 Plan

Monthly Cost³ Non-Tobacco Rates

Employee Age	Employee	Employee + Spouse	Employee + Dependent Child(ren)	Employee + Family
18-24	\$7.80	\$15.56	\$15.17	\$24.15
25-29	\$8.84	\$17.51	\$16.21	\$26.10
30-34	\$9.39	\$18.61	\$16.76	\$27.20
35-39	\$10.69	\$21.14	\$18.06	\$29.73
40-44	\$13.94	\$27.87	\$21.31	\$36.46
45-49	\$20.21	\$41.14	\$27.58	\$49.73
50-54	\$26.05	\$53.52	\$33.42	\$62.11
55-59	\$32.99	\$68.19	\$40.36	\$76.78
60-64	\$44.84	\$93.25	\$52.21	\$101.84
65-69	\$62.87	\$130.15	\$70.24	\$138.74
70-74	\$84.81	\$175.47	\$92.18	\$184.06
75-79	\$108.48	\$223.77	\$115.85	\$232.36
80-84	\$125.88	\$259.63	\$133.25	\$268.22

Monthly Cost³ Tobacco Rates

Employee Age	Employee	Employee + Spouse	Employee + Dependent Child(ren)	Employee + Family
18-24	\$8.27	\$16.56	\$15.64	\$25.15
25-29	\$9.67	\$19.30	\$17.04	\$27.89
30-34	\$10.69	\$21.36	\$18.06	\$29.95
35-39	\$12.88	\$25.80	\$20.25	\$34.39
40-44	\$18.73	\$38.25	\$26.10	\$46.84
45-49	\$31.14	\$64.90	\$38.51	\$73.49
50-54	\$43.60	\$91.26	\$50.97	\$99.85
55-59	\$58.59	\$122.81	\$65.96	\$131.40
60-64	\$84.60	\$177.67	\$91.97	\$186.26
65-69	\$125.83	\$262.92	\$133.20	\$271.51
70-74	\$168.17	\$352.01	\$175.54	\$360.60
75-79	\$197.72	\$413.66	\$205.09	\$422.25
80-84	\$219.90	\$461.06	\$227.27	\$469.65

\$20,000 Plan

Monthly Cost ³		Non-Tobacco Rates			
Employee Age	Employee	Employee + Spouse	Employee + Dependent Child(ren)	Employee + Family	
18-24	\$11.35	\$22.75	\$22.25	\$35.45	
25-29	\$13.08	\$26.02	\$23.98	\$38.72	
30-34	\$14.03	\$27.87	\$24.93	\$40.57	
35-39	\$16.54	\$32.77	\$27.44	\$45.47	
40-44	\$22.70	\$45.50	\$33.60	\$58.20	
45-49	\$34.91	\$71.27	\$45.81	\$83.97	
50-54	\$46.48	\$95.79	\$57.38	\$108.49	
55-59	\$60.20	\$124.83	\$71.10	\$137.53	
60-64	\$83.77	\$174.62	\$94.67	\$187.32	
65-69	\$119.61	\$247.97	\$130.51	\$260.67	
70-74	\$163.35	\$338.33	\$174.25	\$351.03	
75-79	\$210.58	\$434.66	\$221.48	\$447.36	
80-84	\$245.34	\$506.28	\$256.24	\$518.98	

Monthly Cost ³		Tobacco Rates			
Employee Age	Employee	Employee + Spouse	Employee + Dependent Child(ren)	Employee + Family	
18-24	\$12.28	\$24.74	\$23.18	\$37.44	
25-29	\$14.75	\$29.60	\$25.65	\$42.30	
30-34	\$16.62	\$33.38	\$27.52	\$46.08	
35-39	\$20.91	\$42.10	\$31.81	\$54.80	
40-44	\$32.29	\$66.25	\$43.19	\$78.95	
45-49	\$56.78	\$118.78	\$67.68	\$131.48	
50-54	\$81.58	\$171.28	\$92.48	\$183.98	
55-59	\$111.41	\$234.06	\$122.31	\$246.76	
60-64	\$163.28	\$343.46	\$174.18	\$356.16	
65-69	\$245.55	\$513.51	\$256.45	\$526.21	
70-74	\$330.08	\$691.41	\$340.98	\$704.11	
75-79	\$389.05	\$814.44	\$399.95	\$827.14	
80-84	\$433.38	\$909.14	\$444.28	\$921.84	

Annual age redetermination on anniversary is calculated using date of birth on or before anniversary date.

Exclusions

A benefit is not payable for any covered illness that results from or is caused by:

- Suicide, attempted suicide or intentionally self-inflicted injury, whether sane or insane
- War or act of war, declared or undeclared
- A covered person's participation in a felony, riot or insurrection
- A covered person's engaging in any illegal occupation
- A covered person's service in the armed forces or units auxiliary to them

All exclusions may not be applicable, or may be adjusted, as required by state regulations in the situs state of a group.

General Limitations

Benefits under the policy are not payable for any covered illness:

- Diagnosed prior to the effective date of insurance for a covered person (except for newborn children)
- Diagnosed during an applicable Benefit Separation Period
- For which a covered person has already received a benefit payment under the policy, unless the covered illness is included in a Recurrence provision
- For which a covered person has already received a benefit payment under the Recurrence provision

In addition, benefits are not payable for any critical illness not included as a covered illness in a covered person's certificate.

THIS POLICY PROVIDES LIMITED BENEFITS FOR SPECIFIED DISEASES ONLY.

This limited benefit plan (1) does not constitute major medical coverage, and (2) does not satisfy the individual mandate of the Affordable Care Act (ACA) because the coverage does not meet the requirements of minimum essential coverage.

In New York: 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.

¹ Insured will only be able to continue coverage while the policy is in-force with the policyholder and the insured must pay premium if electing to continue coverage after leaving employer.

² Covered accidents or illness must occur after the effective date of coverage.

³ Actual deductions may vary slightly due to rounding and payroll frequency.

Group Critical Illness benefits provided by policy form SCI B XX18 P or state equivalent.