

## WASHINGTON NATIONAL ACTIVE Care® THE SUPPLEMENTAL SOLUTION

SUPPLEMENTAL HEALTH INSURANCE

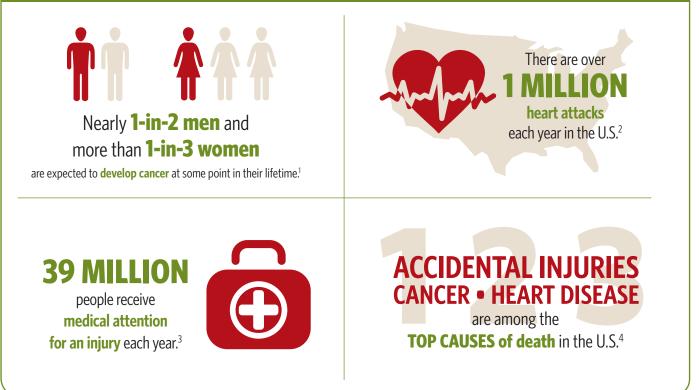
Life is worth living well.

## IT CAN'T HAPPEN TO ME...RIGHT?

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.

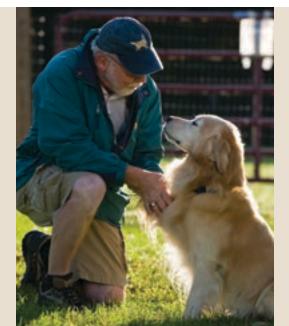
## **CONSIDER THE FACTS:**



<sup>1</sup>American Cancer Society, *Cancer Facts & Figures 2018*, 2018 p. 2. <sup>2</sup>American Heart Association, *Heart Disease and Stroke Statistics 2018 At-a-Glance*, 2018. <sup>3</sup>Centers for Disease Control and Prevention, *Emergency Department Visits*, https://www.cdc.gov/nchs/fastats/emergency-department.htm, May 3, 2017. <sup>4</sup>Centers for Disease Control and Prevention, *Leading Causes of Death*, https://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm, March 17, 2017.

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

- Benefits are paid directly to you—in 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 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!



## 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:**

Cancer	V	
Heart attack	V	
Heart bypass and stent	V	
Stroke	V	
Alzheimer's disease	V	
Diabetic complications	V	
Hospital and ICU stays	V	
Surgery and follow-up care	V	
Accidental injuries	V	
Doctor office wellness visits	~	



#### **STEP 1** Choose your family members to be covered.

✓ Yourself □ Your spouse □ Your child(ren)

■ \$5K ■ \$10K ■	\$20K	■ \$30K	■ \$40K	■ \$50K	■ \$60K	■ \$70K	<b>■</b> \$100k	
STEP 3 Choose your covera	ige.							
□ CANCER	Receive the <b>LUMP-SUM BENEFIT</b> amount when you are diagnosed with cancer. This coverage also pays benefits for:							
	<ul> <li>Skin cancer</li> <li>Localized cancer ("carcinoma in-situ")<sup>1</sup></li> <li>Annual care</li> </ul>			<ul> <li>Hospital stays<sup>2</sup></li> <li>Lump-sum recurrence</li> </ul>				
	RADIATION & CHEMOTHERAPY UPGRADE When you select the cancer coverage, you can add extra benefits for radiation, injected chemotherapy and oral chemotherapy. Radiation and injected chemotherapy benefits have no lifetime maximums. The oral chemotherapy benefit is payable for up to 36 months of treatment.							
HEART & STROKE	Receive the <b>LUMP-SUM BENEFIT</b> amount when you are diagnosed with a heart attack or stroke. This coverage also pays benefits for:							
	<ul> <li>Coron</li> <li>Stent<sup>1</sup></li> <li>Annua</li> </ul>		and angioplasty <sup>i</sup>	<ul> <li>Hospital st</li> <li>Transient i</li> <li>Lump-sum</li> </ul>	schemic attack (T	<b>IA)</b> '		
CRITICAL CONDITIONS*	Expand your <b>LUMP-SUM BENEFIT with this coverage,</b> payable when you experience a major organ transplant, coma, paralysis and/or blindness. This coverage also pays benefits for:							
	<ul> <li>Deafn</li> </ul>	imer's disease <sup>1</sup> ess <sup>1</sup> tic amputation <sup>1</sup>		<ul><li>Hospital st</li><li>End-stage</li></ul>	-			
□ HOSPITAL*	Receive benefits for doctor office wellness visits, accidental injuries and sicknesses—whenever and wherever you require treatment. Benefits are paid in addition to the "hospital stays" benefit in the cancer and/or heart & stroke coverage for:							
		r office wellness ttient surgeries	visits	•	nd ICU stays <sup>2</sup> re facility stays	Not availabl	e in Arkansas.	
□ ACCIDENT*	Receive benefits that help you pay costs associated with accidental injuries. Benefits help cover:							
	<ul><li>Fractu</li><li>Joint r</li></ul>	<ul> <li>Accidental death and dismemberment</li> <li>Fractures and dislocations</li> <li>Joint replacement</li> <li>Lacerations and burns</li> </ul>			<ul> <li>Doctor office visits</li> <li>Ligament, tendon and cartilage surgeries</li> <li>Ruptured disc and hernia surgeries</li> <li>Eye surgeries</li> </ul>			
		gency room and u	Irgent care visits					

\*TO SELECT THESE OPTIONS, YOU MUST FIRST CHOOSE THE **CANCER** AND/OR **HEART & STROKE** COVERAGE.

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

<sup>1</sup>This benefit pays a reduced lump-sum benefit. <sup>2</sup>This benefit pays per day for up to three days.

## **BENEFIT SPOTLIGHT**

## RECURRENCE BENEFIT for cancer and heart & stroke

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

- According to the American Cancer Society, cancer survivors are at risk for recurrence of the original cancer and the development of new cancers.<sup>1</sup>
- More than a fourth of all heart attacks<sup>2</sup> and nearly one-quarter of strokes<sup>3</sup> are recurrences.

With Washington National Active Care, you'll be protected if you have a recurrence. One year after you have not received or needed treatment for a cancer, heart attack or stroke diagnosis, your recurrence lumpsum benefit begins to grow—to a maximum of 50% after five years. You'll have coverage for a recurrence diagnosis even if your other insurance stops paying.



## HOSPITAL BENEFITS WORK FOR YOU

#### Hospital benefits cover you:

- Every year—even when you're healthy—for doctor office wellness visits.
- Wherever you're treated, whether it's a hospital, ICU or rehab facility.
- For outpatient surgeries.

These benefits are available to you for everyday care and in the event of accidents or sicknesses.

<sup>1</sup>American Cancer Society, *Cancer Treatment and Survivorship Facts & Figures, 2016 -2017, 2017, p. 25.* <sup>2</sup>Centers for Disease Control and Prevention, *Heart Attack, https://www.cdc.gov/heartdisease/ heart\_attack.htm, August 18, 2017.* 

<sup>3</sup>American Heart Association, Heart Disease and Stroke Statistics-2017 Update, 2017, p. e230.

### BENEFITS WHEN YOU NEED THEM. MONEY BACK WHEN YOU DON'T!

- □ Cash Value option
- Return of Premium option

Choose the benefit that can return your premiums to you. With this option, you can **receive a check for all of your paid premiums** minus claims incurred.

There is an additional cost for this option. Subject to state availability. Not available in Iowa.

## MULTIPLE COVERAGE TYPES IN ONE SOLUTION

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 **\$100,000** for each major diagnosis—plus cash benefits and recurrence benefits—the policy's value for you goes on and on.



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—all in ONE CONVENIENT POLICY.

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

### 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. 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 your: 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.<sup>1</sup> Diagnosis of a specified critical illness during the waiting period which is the first 30 days after the coverage effective date.<sup>2</sup> Participating or attempting to participate in an illegal act, or working at an illegal job.3 Being legally intoxicated,4 or so intoxicated that mental or physical abilities are seriously impaired,<sup>5</sup> 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.<sup>6</sup> 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.<sup>2</sup> Being exposed to<sup>7</sup> 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.<sup>8</sup> Alcoholism, drug abuse, or chemical dependency.<sup>9</sup> 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 for loss 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.<sup>10</sup> Mental disorder having a behavioral or psychological disorder, disease or syndrome, without demonstrable organic origin. No benefits are pavable 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.<sup>11</sup> A pregnancy of a dependent child will not be covered.<sup>12, 13</sup> 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 speedway.<sup>2, 14</sup> Travel/location while being more than 40 miles outside the territorial limits of the United States or Canada.<sup>15</sup> 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.<sup>10</sup> Hazardous activities which are hang-gliding, bungee jumping, parachuting, sailgliding, parasailing, 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 racecourse or speedway.<sup>2, 14</sup> 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.15

#### Policy form series (may vary by state): WNIC1068 Rider form series (may vary by state): R1069, R1077ROP, R1077CV, R1070, R1072 and R1073

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#### 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<sup>16</sup> 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<sup>16</sup> period preceding the Effective Date of coverage. A pre-existing condition can exist even though a diagnosis has not yet been made.

A Hospital is not a bed, unit, or facility that functions as a/an: 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.

<sup>1</sup>In Arkansas, Delaware, Iowa, West Virginia, Wisconsin, "having or being diagnosed with any other disease, sickness or incapacity, unless the disease or condition was caused, complicated or aggravated by the specified critical illness."

<sup>2</sup>Not applicable in Oklahoma.

<sup>3</sup>In Nebraska, "we shall not be liable for any loss to which a contributing cause was your commission of or attempt to commit a felony or to which a contributing cause was your being engaged in an illegal occupation."

<sup>4</sup>In Oklahoma, "being under the influence"

<sup>5</sup>In Alaska, "or so intoxicated that mental or physical abilities are seriously impaired" is not applicable.

<sup>6</sup>In Alabama, "being intoxicated or under the influence of any narcotic unless administered on the advice of a physician." <sup>7</sup>In Nebraska, "being exposed to" is not applicable.

<sup>8</sup>In Oklahoma, "while serving in the military or an auxiliary unit attached to the military or working in an area of war whether voluntarily or as required by an employer. Washington National Insurance Company will return, at your request, the prorated premium paid for you for any period you are not insured by this policy while you are in such service.

<sup>9</sup>In Oklahoma, "chemical dependency" is not applicable.

- <sup>10</sup>In Oklahoma, "Operating, learning to operate, serving as a crew member on aircraft."
- <sup>11</sup>In Iowa, if the insured elects to have a cesarean section then it is not considered a complication of pregnancy.
- <sup>12</sup>In lowa, unless the loss is due to complications of pregnancy then it will be paid the same as for any other covered sickness. If the dependent child elects to have a cesarean then it is not considered a complication of pregnancy.
- <sup>13</sup>In Oklahoma, loss due to complications of pregnancy will be paid the same as for any other covered sickness.
- <sup>14</sup> In Nebraska, "as a rider in or driving any motor-driven vehicle in an organized race, stunt show or speed test, or while testing any vehicle on any racecourse or speedway." <sup>15</sup>Not applicable in Texas.

<sup>16</sup>In Delaware, "six (6)-month period"

