



Independence Critical Illness Insurance



This policy is underwritten by Independence American Insurance Company (IAIC), a member of The IHC Group. For more information about IAIC, visit www.independenceamerican.com. This policy is administered by The Loomis Company.

Independence Critical Illness Insurance

When facing a serious illness, the last thing you want to worry about is your finances.

Independence Critical Illness Insurance provides lump-sum payments when a covered critical illness is diagnosed, giving you cash to use however you want – medical bills, mortgages, daily living expenses and more.

What are the key features of Independence Critical Illness Insurance?

- ▶ Pays up to a \$100k lump-sum benefit per category on a first occurrence of a qualified critical illness
- ▶ Benefits are paid directly to you, to use as you see fit
- ▶ Coverage is available for the entire family – you, your spouse and your dependent children
- ▶ Use any doctor or hospital - receive the same, set benefit, no matter which healthcare provider you choose
- ▶ No deductible, coinsurance, or preauthorization required
- ▶ Covered benefits are paid in addition to benefits you receive from any other plan
- ▶ Receive multiple benefit payouts if you are diagnosed with more than one covered critical illness

Why consider an Independence Critical Illness Insurance policy?

Supplement high-deductible health plans – even the best health insurance may leave you with deductible and out-of-pocket costs to meet. Independence Critical Illness Insurance can provide additional support to cover those expenses.

Protect your way of life – being diagnosed with a critical illness may cause you to be temporarily unable to work. Lump-sum benefits are available to use how you wish – to pay your mortgage, rent, daycare costs, groceries or other life expenses.

Peace of mind – Nobody can truly plan for a critical illness but they are more common than we would like to think. Prepare for the unexpected with an Independence Critical Illness Insurance policy.

What conditions does the policy cover?

Independence Critical Illness Insurance provides coverage for the following critical illnesses, subject to plan exclusions and limitations:

- » Invasive Cancer
- » Cancer In Situ
- » Heart Attack
- » Stroke
- » Major Organ Failure
- » Coronary Artery Bypass Surgery
- » Coronary Angioplasty
- » End-Stage Renal Disease
- » Severe Burn
- » Coma
- » Paralysis

Who is eligible?

Coverage is available to the primary applicant age 18 through 64, their spouse ages 18 to 64, and dependent children under the age of 26. Coverage is guaranteed renewable until age 75.

Coverage Options

All benefits listed apply per covered person. The premiums will vary with the amount of the benefit selected. The maximum lifetime benefit is three times the benefit amount shown in the table below.

| | CI 20 | CI 40 | CI 60 | CI 80 | CI 100 |
|-------------------------------|----------|----------|----------|----------|-----------|
| Primary Insured/Spouse | \$20,000 | \$40,000 | \$60,000 | \$80,000 | \$100,000 |
| Child | \$10,000 | \$10,000 | \$10,000 | \$10,000 | \$10,000 |

The policy pays a lump-sum benefit upon first occurrence of a covered diagnosis or procedure, after the covered person's effective date of insurance, subject to a 30-day benefit-waiting period and pre-existing condition limitation.





How Benefits are Paid

1. Covered critical illness benefits are payable for a first ever occurrence, diagnosis or procedure. This is defined as the first time in a covered person's lifetime that they have experienced, been diagnosed with or undergone a specific procedure for a covered critical illness. *Definition may vary by state.*
2. An insured person may receive benefit payments up to the benefit amount selected from each of the three categories listed on page 5. The benefit payment under each category cannot exceed 100 percent of the benefit amount per category. Once 100 percent of the maximum benefit amount has been paid in all three categories for a covered person, coverage for that person terminates and no further benefits are payable to them.
3. A covered person cannot receive the same benefit twice.
4. A 180-day waiting period is required before benefits will be paid between categories of covered critical illnesses; the policy pays only one benefit payment from each of the three categories for any covered critical illnesses diagnosed in the same 180-day period.

Note that the 180-day limitation does not apply to benefit payments within the same category.

5. If more than one critical illness is diagnosed at the same time and within the same category, the benefit payment is based on the larger benefit amount of the conditions diagnosed.

| If you're diagnosed with: | The policy pays this: |
|--|--|
| CATEGORY I | |
| Invasive Cancer | 100% of your selected benefit amount if diagnosed more than 90 days after the effective date 10% of your selected benefit amount if diagnosed 31-90 days after the effective date |
| Cancer In Situ | 25% of your selected benefit amount if diagnosed more than 90 days after the effective date 2.5% of your selected benefit amount if diagnosed 31-90 days after the effective date |
| CATEGORY II | |
| Heart Attack (Myocardial Infarction) | 100% of your selected benefit amount |
| Stroke | 100% of your selected benefit amount |
| Major Organ Failure (Heart) Heart or combination failure including heart | 100% of your selected benefit amount |
| Coronary Artery Bypass Surgery | 25% of your selected benefit amount |
| Coronary Angioplasty | 10% of your selected benefit amount |
| CATEGORY III | |
| Major Organ Failure Not covered in Category II | 100% of your selected benefit amount |
| End-Stage Renal Disease | 100% of your selected benefit amount |
| Severe Burn | 100% of your selected benefit amount |
| Coma | 100% of your selected benefit amount |
| Paralysis | 100% of your selected benefit amount |

Pre-Existing Condition Limitation Definition

The policy contains a pre-existing condition limitation. We will not pay benefits for loss resulting from a pre-existing condition, unless such loss occurs 12 months or more after the effective date. A pre-existing condition is a condition for which medical advice, diagnosis, care, or treatment was recommended by or received from a physician within 12* months prior to the effective date or which manifested itself within 12 months prior to the effective date in a manner that would have caused a reasonably prudent person to seek diagnosis, care or treatment by a physician.

*6 months in WY

Waiting Period

Eligibility for benefits begins 30 days after the effective date of coverage.

Critical Illness Definitions

Below is an abbreviated summary of each covered critical illness definition. Full definitions vary by state. Please review the policy for the full definition and policy details.

Category I

Invasive Cancer

A malignant neoplasm characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue, including but not limited to leukemias and lymphomas.

Cancer in Situ

A cancer in which the tumor cells still lie within the tissue of origin without having invaded neighboring tissue. Diagnosis includes early prostate cancer, diagnosed as Stage 1 or equivalent staging, and melanoma not invading the dermis.

Category II

Heart Attack

An acute myocardial infarction resulting in the death of a portion of the heart muscle due to blockage of one or more coronary arteries and results in the loss of normal function to the heart.

Stroke

Brain tissue infarction due to acute cerebrovascular incident, embolism, thrombosis or hemorrhage. The basis of the diagnosis must include imaging documentation of new brain tissue infarction in association with acute onset of symptoms consistent with central nervous system neurological damage.

Major Organ Failure - involving or including the heart

Clinical evidence of major organ(s) failure, which includes the heart, that requires the malfunctioning organ(s) or tissue of the covered person to be replaced with an organ(s) or tissue from a suitable human donor (excluding another covered person) under generally accepted medical procedures. The organ(s) and tissues covered under this definition include the entire heart or a combination failure including the heart. In order for the major organ failure to be covered under this policy, the covered person must be registered by the United Network of Organ Sharing or the National Marrow Donor Program.

Coronary Artery Bypass Surgery

Heart surgery using a non-coronary blood vessel(s) (either artery or vein) to surgically bypass obstructions in a native coronary artery(ies).

Coronary Angioplasty

The actual undergoing of a percutaneous (through the skin) coronary intervention deemed medically necessary to correct a narrowing or blockage of one or more coronary arteries.

Critical Illness Definitions (continued)

Category III

Major Organ Failure—not involving the heart

Clinical evidence of major organ(s) failure which requires the malfunctioning organ(s) or tissue of the covered person to be replaced with an organ(s) or tissue from a suitable human donor under generally accepted medical procedures. The organs and tissues covered under this definition are: liver, kidney, small intestine, pancreas, pancreas-kidney, bone marrow, or lung. In order for the major organ failure to be covered under this policy, the covered person must be registered by the United Network of Organ Sharing or the National Marrow Donor Program.

End-Stage Renal Disease

The chronic and irreversible failure of both kidneys which requires periodic and ongoing dialysis.

Severe Burn

A cosmetic disfigurement on the surface of a body area that is a full-thickness or third-degree burn covering 20 percent or more of the body. A full-thickness or third-degree burn is the destruction of the skin through the entire thickness or depth of the dermis and possibly into underlying tissues, with loss of fluid and sometimes shock, by means of exposure to things such as, but not limited to: fire, heat, caustics, electricity or radiation.

Coma

A profound state of unconsciousness from which the covered person cannot be aroused to consciousness, even by external stimulation, lasting for a continuous period of at least 96 hours.

Paralysis

The complete and permanent loss of use of two or more limbs, through injury or illness, for a continuous period of at least 180 days.



Exclusions

The following is a list of services or charges not covered. Exclusions vary by state; check the policy for a full listing.

The policy will not pay any benefits for a critical illness caused in whole or in part from:

- A pre-existing condition
- The commission of or attempt to commit a felony
- Intentional self-inflicted injury or illness, including attempting or committing suicide
- Alcoholism or substance abuse, including being intoxicated or under the influence of an illegal substance or a narcotic (unless prescribed by a physician to the covered person). Intoxication is determined by the laws of the state where the incident occurred
- Service in the armed forces or auxiliary units
- Participating in a riot or insurrection
- Engaging in illegal occupation
- A covered person being under the influence of any controlled substance (except for narcotics given on the advice of a physician)
- A diagnosis of a critical illness outside the United States
- A heart attack due to an (old) myocardial infarction
- Any act of war, whether declared or not
- A diagnosis while coverage is not in force
- A diagnosis by a member of the covered person's immediate family
- A critical illness not specifically set forth in and covered under this policy, as shown in the schedule of benefits

Important Information

This brochure provides a very brief description of the important features of Individual Critical Illness Insurance Policy. This brochure is not the insurance Policy, and only the actual Policy provisions will control. The Policy itself sets forth, in detail, the rights and obligations of both the policyholder and the insurance company. It is, therefore, important that you READ THE POLICY CAREFULLY. For complete details, refer to the Individual Critical Illness Insurance Policy (IAIC CI POL 0120). The premiums will vary with the amount of the benefit selected. Independence Critical Illness Insurance is not available in all states. Availability in a state is subject to change.

THIS IS A LIMITED POLICY. THIS POLICY IS NOT MAJOR MEDICAL INSURANCE OR A MEDICARE SUPPLEMENT POLICY. THIS IS NOT LIFE INSURANCE. THIS POLICY IS NON-PARTICIPATING. THIS POLICY DOES NOT PROVIDE QUALIFYING HEALTH COVERAGE ("MINIMUM ESSENTIAL COVERAGE") THAT SATISFIES THE HEALTH COVERAGE REQUIREMENT OF THE AFFORDABLE CARE ACT. THE TERMINATION OR LOSS OF THIS POLICY DOES NOT ENTITLE YOU TO A SPECIAL ENROLLMENT PERIOD TO PURCHASE A HEALTH BENEFIT PLAN THAT QUALIFIES AS MINIMUM ESSENTIAL COVERAGE OUTSIDE OF AN OPEN ENROLLMENT PERIOD.



About Independence American Insurance Company

Independence American Insurance Company is domiciled in Delaware and licensed to write property and/or casualty insurance in all 50 states and the District of Columbia. Its products include short-term medical, hospital indemnity, fixed indemnity limited benefit, group and individual dental, and pet insurance. Independence American is rated A- (Excellent) for financial strength by A.M. Best, a widely recognized rating agency that rates insurance companies on their relative financial strength and ability to meet policyholder obligations (an A++ rating from A.M. Best is its highest rating). Located at 485 Madison Ave., Floor 14, New York, NY 10022.

About The Loomis Company

The Loomis Company (Loomis), founded in 1955, has been a leading Third Party Administrator (TPA) since 1978. Loomis has strategically invested in industry leading ERP platforms, and partnered with well-respected companies to enhance and grow product offerings. Loomis supports a wide spectrum of clients from self-funded municipalities, school districts and employer groups, to large fully insured health plans who operate on and off state and federal marketplaces. Through innovation and a progressive business model, Loomis is able to fully support and interface with its clients and carriers to drive maximum efficiencies required in the ever-evolving healthcare environment.

About The IHC Group

Independence Holding Company (NYSE: IHC), formed in 1980, is a holding company that is principally engaged in underwriting, administering and/or distributing group and individual specialty benefit products, including Medicare Supplement, disability, supplemental health, pet, and group life insurance through its subsidiaries (Independence Holding Company and its subsidiaries collectively referred to as "The IHC Group"). The IHC Group consists of three insurance companies (Standard Security Life Insurance Company of New York, Madison National Life Insurance Company, Inc. and Independence American Insurance Company). We also own the following agencies: (i) PetPartners Inc., our pet insurance administrator; (ii) IHC Specialty Benefits, Inc., a technology-driven full-service marketing and distribution company that focuses on small employer and individual consumer products through its call center, career agents, and Independence Brokerage Group; and (iii) The INSX Cloud Platform through My1HR, our wholly-owned Web-Based Entity. Our InsureTech division is comprised of our call centers, field and career agents, in-house MarTech artificial intelligence capabilities, and domains, including www.healthdeals.com; www.healthinsurance.org; www.medicareresources.org; www.petplace.com; and www.mypetinsurance.com.

