Critical Illness

BI-WEEKLY PREMIUM

Employee

Benefit Amounts	<30	30-39	40-49	50-59	60-69	70+
$10,000	$2.35	$3.78	$7.20	$13.98	$23.72	$40.29
$20,000	$4.71	$7.57	$14.40	$27.97	$47.45	$80.58

Spouse

Benefit Amounts	<30	30-39	40-49	50-59	60-69	70+
$5,000	$1.18	$1.89	$3.89	$6.99	$11.86	$20.15
$10,000	$2.35	$3.78	$7.20	$13.98	$23.72	$40.29

Premiums	Premiums listed are for Attained Age and will increase as an insured ages
Child	Child cost is included with employee election.
Annual Open Enrollment	Included

Underwriting Requirements	Employee	Spouse	Child (ren)
Guarantee Issue	$20,000	$10,000	All child amounts are guaranteed

BENEFITS

	All Eligible Employees
Contribution/ Participation	Voluntary/Greater of 16% or 10 enrolled employees
Employee Critical Illness Benefit Amounts	Employee may choose a lump sum benefit of $10,000 or $20,000
Dependent Critical Illness Benefit Amount	Spouse: 50% of Employee benefit Child: 50% of Employee benefit

Cancer and benign tumors	First Occurrence	Second Occurrence
Bone Marrow Failure	100%	50%
Benign Brain or Spinal Cord Tumor	100%	0%
BRCA1 or BRCA2 Mutation	30%	Not applicable
Carcinoma In Situ	30%	0%
Invasive Cancer (Leukemia, Multiple Myeloma)	100%	50%
Skin Cancer	$250	Not applicable

Heart disorders	First Occurrence	Second Occurrence
Coronary Artery Disease (Stents, Angioplasty, Thrombectomy)	10%	0%
Coronary Artery Disease – requiring a bypass	50%	0%
Heart Attack	100%	50%
Heart Failure	100%	50%
Pacemaker	10%	0%

Lung and Vascular disorders	First Occurrence	Second Occurrence
Aneurysm	10%	0%
Pulmonary Embolism	30%	0%
Stroke - moderate	50%	25%
Stroke - Severe	100%	50%
Transient Ischemic Attack (TIA)	10%	0%

(continued)

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BENEFITS (continued)		
	All Eligible Employees	
Additional disorders	**First Occurrence**	**Second Occurrence**
Kidney Failure	100%	50%
Major Organ Failure (Liver, Pancreas, Lungs)	100%	50%
Additional disorders (continued)	**First Occurrence Only**	
Addison's disease	30%	
Coma	100%	
Loss of Hearing	100%	
Loss of Sight	100%	
Loss of Speech	100%	
Permanent Paralysis	100%	
Severe Burns	100%	
Neurological disorders	**First Occurrence Only**	
Alzheimer's disease – early Stage	50%	
Alzheimer's disease - advanced Stage	100%	
ALS (Lou Gehrig's)	100%	
Dementia - other causes	100%	
Huntington's disease	30%	
Multiple Sclerosis (MS) – early Stage	50%	
Multiple Sclerosis (MS) - advanced Stage	100%	
Myasthenia Gravis	30%	
Parkinson's disease – early Stage	50%	
Parkinson's disease - advanced Stage	100%	
Chronic disorders	**First Occurrence Only**	
Crohn's disease	30%	
Epilepsy	10%	
Lupus	30%	
Ulcerative Colitis	30%	
Childhood illnesses and disorders	**First Occurrence Only**	
Autism Spectrum Disorder	100%	
Cerebral Palsy	100%	
Cleft Lip or Cleft Palate	100%	
Clubfoot	100%	
Congenital Heart Defect	100%	
Cystic Fibrosis	100%	
Diabetes - Type 1	100%	
Down Syndrome	100%	
Hemophilia	100%	
Multisystem Inflammatory Syndrome (MIS)	100%	
Muscular Dystrophy	100%	
Spina Bifida	100%	
Health Screening Benefit	Provides a per year benefit for completing certain routine wellness screenings or procedures, per year (refer to plan highlights for listing). Employee $50; Spouse $50; Child $50	
Waiver of Premium	Included	
Dependent Age Limits	0 days to 26 years (26 if full time student)	

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BENEFITS (continued)

	All Eligible Employees
Pre-Existing Condition Limitation	12 month look back period, 12 month exclusion period, Continuity of Coverage
Benefit Reduction (of original amount)	No benefit reductions apply

PLAN HIGHLIGHTS

- **Guardian's Financial Strength:** Guardian has a long history of earning exemplary ratings from independent rating services which provide essential measures of a company's value as well as common ground for valid comparison. For additional details, visit our web site: **http://www.guardianlife.com/AboutGuardian/FinancialHighlights/Ratings/index.htm**
- Benefits are paid directly to the insured when they need it most. Expenditure for claim proceeds are not limited to cover medical expenses, funds can be used under the discretion of the insured for things such as childcare, transportation and to fill in gaps in their medical plan, like co-pays and deductibles.
- The Health Screening Benefit pays when an insured completes screenings such as mammography, colonoscopy, pap smear, PSA, serum cholesterol testing, completion of smoking cessation, and weight reduction programs. Benefits paid even if medical insurance is paying 100% of the cost.
- An insured must port Critical Illness coverage prior to age 70.
- Portability allows the insured to take the coverage with them even if employment has ended. Evidence of Insurability is not required.
- Guardian offers generous Guarantee Issue levels for groups with 25 or more lives.

IMPORTANT NOTES

Rates and premiums are based on the employee data submitted. Final rates and premiums are based on the plan and employee/dependent data provided on the enrollment forms. States specific requirements apply.

Rates Notes

- Spouse rate is based on employee's age bracket. Child rate is included with employee election. Dependent Critical Illness insurance will not take effect if a dependent, other than a newborn, is home confined, confined to the hospital or other health care facility or is unable to perform two or more Activities of Daily Living.
- If any discrepancies between the premiums on this proposal and your bill exist, your bill prevails.

Benefits Notes

- The policy has exclusions and limitations that may impact the eligibility for or entitlement to benefits under each covered condition. See the actual policy or contact your sales representative for full details.
- Dependent Guarantee Issue amounts are limited to 50% of the employee guarantee issue amount.
- Internal Use only – Recurrence schedule L

SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS

- The policy has exclusions and limitations that may impact the eligibility for or entitlement to benefits under each covered condition. There are limitations & special requirements for each condition. See the certificate of coverage or contact your sales representative for full details.
- This policy will not pay for a diagnosis of a listed critical illness that is made before the covered person's Critical Illness effective date with Guardian.
- We will not pay benefits for a Second occurrence (recurrence) of a Critical Illness unless the Covered Person has not exhibited symptoms or received care or treatment for that Critical Illness for at least 6 months in a row prior to the recurrence. For purposes of this exclusion, care or treatment does not include: (1) preventive medications in the absence of disease; and (2) routine scheduled follow-up visits to a Doctor.
- We do not pay benefits for a third or later occurrence of a Critical Illness.
- A pre-existing condition includes any condition for which an employee, in the twelve month period prior to coverage in this plan, consults with a physician, receives treatment, or takes prescribed drugs. Please refer to the plan documents for specific time periods. State variations may apply.
- If the plan is new (not transferred): During the exclusion period, this Critical Illness plan does not pay charges relating to a pre-existing condition. If this plan is transferred from another insurance carrier, the time an insured is covered under that plan will count toward satisfying Guardian's pre-existing condition limitation period. Please refer to the plan details for specific time periods. State variations may apply.
- We do not pay benefits for charges relating to a covered person: taking part in any war or act of war (including service in the armed forces) committing a felony or taking part in any riot or other civil disorder or intentionally injuring themselves or attempting suicide while sane or insane.
- In order to be eligible for coverage: Employees must be legally working: (a) in the United States or (b) outside the United States, for a US based employer, in a country or region approved by Guardian. Subject to state specific variations.
- Employees must be working full-time on the effective date of coverage; otherwise, coverage becomes effective after the completion of the specific waiting period.
- An applicant must enroll within 31 days of the coverage effective date. An annual open enrollment will occur each year during a time period specified by the policyholder. If the applicant enrolls outside of the annual open enrollment period they will be considered a late entrant and must answer health questions.

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SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS (continued)

Guardian Critical Illness Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Not all policies are available in all states and the coverage, terms and conditions for any policy may vary from state to state. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Coverage will not be effective until approved by a Guardian underwriter. This proposal is subject to satisfactory financial evaluation.

Please refer to certificate of coverage for full plan description. This proposal is not a contract, and merely describes certain features of the products discussed herein. In the event of a conflict between this proposal and any policy or certificate issued by Guardian, those documents and not this proposal control. This policy provides limited benefits health insurance only. It does NOT provide basic hospital, basic medical or major medical insurance Generic Policy Form # [CI-23-P]. The state approved form is the governing document.