



What is it?

Critical illness insurance is a supplemental health product that may provide benefits if you or your covered dependent suffers a covered illness.

Why is this coverage valuable?

Unexpected expenses can add up after a critical illness. This coverage provides cash to pay health insurance deductibles, transportation, childcare, and anything else you and your family need while you receive treatment and recover.

Your critical illness coverage

Eligibility description	All full-time employees
Contribution	You pay the cost of your coverage.
Employee coverage amount	\$10,000, or \$20,000
Spouse/domestic partner coverage amount	\$5,000, or \$10,000 up to 50% of employee benefit amount
Dependent children coverage	You can elect Critical Illness Insurance for your dependent children in the amount of \$2,500, or \$5,000 (up to 50% of the employee coverage amount) when you choose coverage for yourself.
Preexisting condition	Not applicable
Covered conditions	
Heart attack	100%
Arterial/vascular disease	25%
Stroke	100%
Major organ failure (heart, lung, liver, pancreas, or intestine)	100%
End state renal (kidney) failure	100%
Invasive cancer	100%
Noninvasive cancer (in situ)	30%
Supplemental conditions	
AIDS	100%
Advanced COPD	100%
Accidental injuries benefit	
Severe burns, permanent paralysis, or traumatic brain injuries (includes coma)	100%
Additional childhood conditions	
Cerebral palsy	100%
Cleft lip, cleft palate	100%
Cystic fibrosis	100%
Down syndrome	100%
Muscular dystrophy	100%



Spina bifida	100%
Type 1 diabetes	100%
Health assessment/wellness benefit	
You receive a cash benefit every year you and any covered family members complete a single covered exam or screening.	\$100
Additional plan benefits	
Portability	Included

Benefit exclusions

Like any insurance, your critical illness policy does have exclusions. The list below provides common exclusions but isn't meant to be exhaustive of all exclusions or limitations that may be part of your policy. See your policy for full details. The policy may not cover covered conditions or loss caused or contributed to by:

- Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit a felony, participation in a felony, or committing a felony
- War or any act of war, declared or undeclared
- Participation in a riot, insurrection, or rebellion of any kind, active participation in a riot, insurrection, or rebellion, voluntary participation in a riot, insurrection, or rebellion, or participation in a riot or insurrection
- A covered condition sustained while residing outside the U.S., U.S. territories, Canada, or Mexico for more than 12 months

Benefits won't be payable if the insured person is incarcerated in any type of penal or detention facility. A benefit for heart attack or sudden cardiac arrest isn't payable if the event occurs during a medical procedure. This is an incomplete list of benefit exclusions. A complete list is included in the policy. State variations apply.

State-specific language

Massachusetts: A person must be covered by a health plan. If a person and any dependents to be enrolled aren't covered by such a plan, they may not enroll for critical illness insurance.



Critical illness rate information

Option	Monthly rate
Employee and spouse/domestic partner rate	See rate tables below.
Child(ren) rate	\$4.72 per \$1,000 in covered benefit

Employee and spouse/domestic partner monthly rate:

Age range (attained age)	Premium monthly rate
17 – 24	\$0.316
25 – 29	\$0.412
30 – 34	\$0.493
35 – 39	\$0.621
40 – 44	\$0.887
45 – 49	\$1.319
50 – 54	\$1.834
55 – 59	\$2.437
60 – 64	\$3.416
65+	\$4.776



Additional Details

Cash Benefits

Each critical illness or event is treated as a separate covered condition. If you or a covered loved one is diagnosed with a critical illness or event, you receive a lump-sum cash benefit. This is in addition to any other insurance coverage you may have.

Notice of Claim should be provided to Lincoln Financial Group within 20 days of the diagnosis, and Proof of Claim is due within 90 days of the diagnosis.

You can receive benefits more than once: Multiple benefits are payable for different conditions or for new diagnoses of previously paid conditions, as long as you meet the time limits between conditions.

- Same covered condition: We will pay a benefit for the same covered condition more than once if:
 - the diagnosis is more than 12 months apart
 - the insured person is treatment-free for at least 12 months
Treatment-free does not include routine follow-up visits or medications designed to prevent recurrence. You should continue to visit your medical provider regularly and follow all provider guidance to prevent recurrence.
- Different covered conditions: We will pay a benefit for a different covered condition after 6 months from the previous covered condition diagnosis. Exceptions include:
 - invasive cancer (if within 6 months of a noninvasive cancer diagnosis, the difference between the two benefits will be paid); and
 - heart attack or sudden cardiac arrest (if within 6 months of arterial/vascular disease or mitral/aortic valve disease, the difference between the two benefits will be paid).

Critical Illness Health Assessment Benefit

- You and each covered family member receive an annual cash benefit for completion of a covered screening. This is in addition to what your health insurance may cover. The covered screenings—such as electrocardiograms, mammograms, colonoscopies, pap smears and stress tests—are focused on the early diagnosis and treatment of critical illnesses to improve outcomes. Click [here](#) to see the list of eligible screenings.
- This benefit is also available to covered family members/life partners.
- Receive a cash benefit of \$100 per person per plan year. Limit of 6 per family per year.
- Learn [how to submit a claim](#).

Portability

- You can continue your insurance if you leave your job. This benefit is available for any reason other than nonpayment of premium.
- Employees have the option to port coverage regardless of age. However, the duration of coverage once you leave your job is the greater of age 70 or 12 months from your last day of employment.
- To take advantage of this benefit, contact Lincoln Financial Group Customer Service at 1-800-423-2765 within 31 days of losing coverage.

Note: See the policy for details and specific requirements for each of these benefits.

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Additional Details

Cash Benefits

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