

Let's talk life.®



Critical Illness Insurance

(Lump-Sum Critical Illness/Specified Disease Insurance)

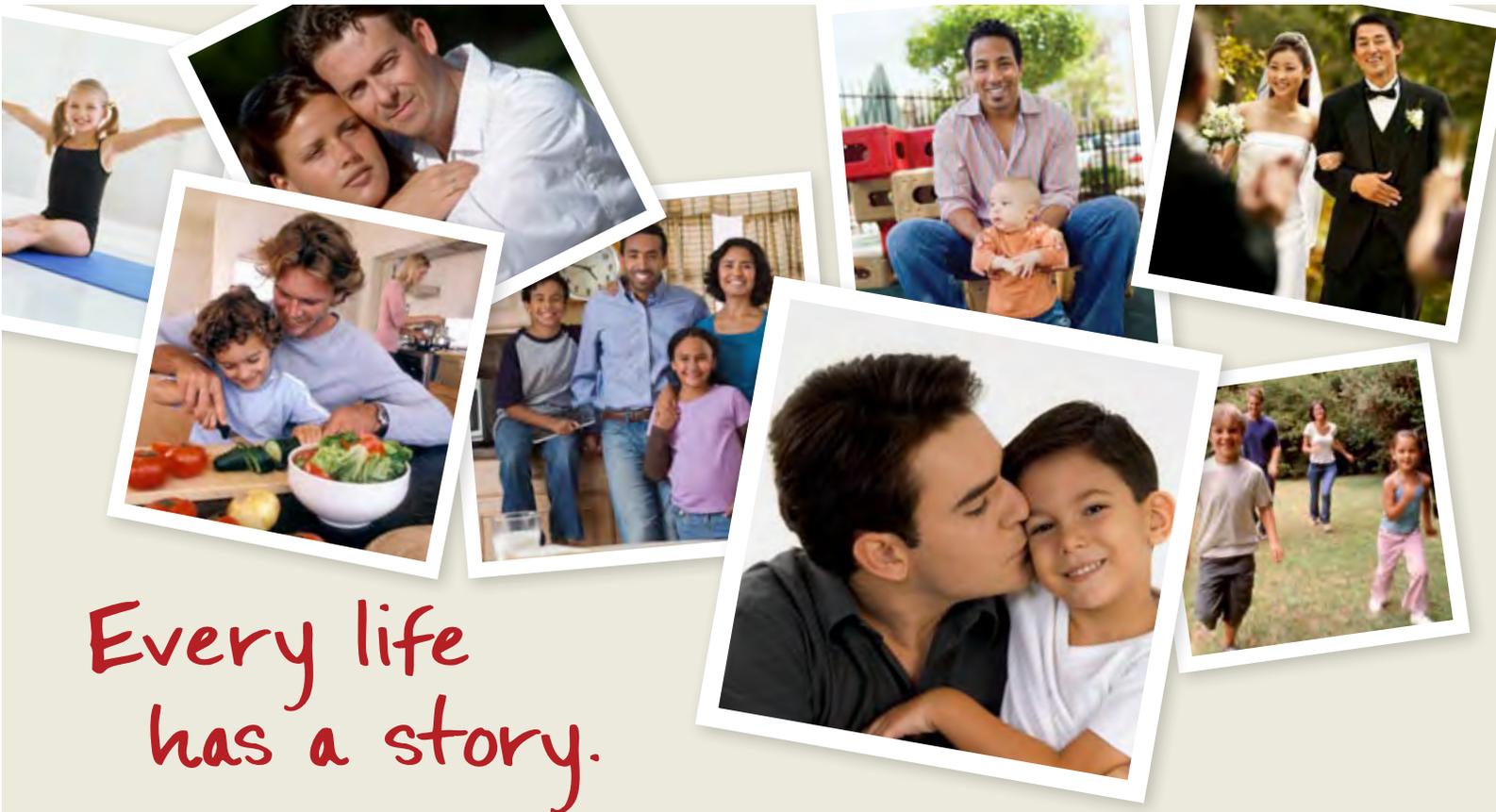
CBO

Trustmark

INSURANCE COMPANY

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Years
of Trust



Every life has a story.

You have a picture of the way you want your life to go.

Now imagine if something happens that not only changes your picture, it changes your life story.

That's when Trustmark Critical Illness insurance can help. It can help you live your story, your way – even when your health gets in the way.

Life can change in an instant.

Facing a critical illness is difficult. There is so much to think about – from deciding between your treatment options to managing your family's everyday needs to maintaining your financial and emotional stability.

Trustmark Critical Illness insurance can provide immediate financial relief from the overwhelming expenses of a serious illness, such as a heart attack, stroke or cancer.¹ It pays a lump-sum cash benefit when you are diagnosed² with a covered illness easing your financial worries.

In short, Trustmark Critical Illness insurance can provide a financial cushion to help you manage your illness, your way. It's that simple.



¹ Please consult your policy/group certificate for specific covered conditions.

² As defined by policy/group certificate. Most states define eligibility as first diagnosis. First diagnosis means the first time a physician identifies a covered condition from its signs or symptoms. If you've been diagnosed with a covered condition prior to having coverage, you may not be eligible for a benefit.

Why do you need it?

Take a moment now, to think about life as you know it. Then ask yourself this: If you were diagnosed with a critical illness, how would you manage life during your recovery?

- Who will care for your children? And your home?
- What are your treatment options? Are there other doctors, specialists or hospitals outside your neighborhood available to you?
- If you were unable to work during your recovery, would you need additional funds?

What's covered?²

- Heart attack
- Stroke
- Renal (kidney) failure
- Blindness
- ALS (Lou Gehrig's disease)
- Transplant of a major organ
- Paralysis of at least two limbs
- Coronary artery bypass surgery (25% benefit)³
- Invasive cancer (excludes most skin cancer)³
- Carcinoma in situ (25% benefit)³

²Please consult your policy/group certificate for specific covered conditions and details.

³If the insured receives the benefit for coronary artery bypass surgery or carcinoma in situ, the remaining benefit will be available for another covered condition, or subsequent benefit if included. Most skin cancer is excluded.

Health Screening Benefit

To help you stay well, the Health Screening Benefit pays the cost of one screening test per calendar year (\$100 maximum). Some of the many screening tests covered include:

- Low dose mammography
- Pap smear (women over 18)
- Serum cholesterol
- Prostate specific antigen
- Stress test
- Colonoscopy
- Bone marrow
- Chest X-ray

Pre-Existing Limitation⁴

In most states, no benefit will be paid for any condition caused by or resulting from a pre-existing condition, which vary by state.

⁴Pre-existing condition limitations may vary by state. ⁵As defined by policy/group certificate. Most states define eligibility as first diagnosis. First diagnosis means the first time a physician identifies a covered condition from its signs or symptoms. If you've been diagnosed with a covered condition prior to having coverage, you may not be eligible for a benefit. ¹Separation periods between diagnoses may apply. Not available in all states. Except in NH, the Double Benefit rider will be offered in states where the Subsequent Condition Benefit riders are not available. Please consult your policy/group certificate for complete details.

Think About It
Every 90 seconds someone in the U.S. files for bankruptcy in the aftermath of a serious illness. Three-quarters of them were insured.¹

¹The American Journal of Medicine, August 2009.

How do you know if your treatment is right? Best Doctors[®] can help.

Best Doctors[®] is a company that provides medical decision support through an online network of more than 50,000 world-class medical specialists. Whether you need help resolving conflicting diagnoses, finding a specialist or knowing what questions to ask, Best Doctors can help when you need it most. Membership is automatic at no additional cost to you while your coverage is in force.

Subsequent condition benefit[†]

Pays a lump-sum cash payment when you are diagnosed⁵ with any and every covered condition included in your policy. There are no limits to the number of payouts for each insured family member and no reduction in payouts for later-diagnosed conditions. (Coronary artery bypass surgery and carcinoma in situ benefit payouts will not reduce any subsequent benefits.)





Benefits you'll appreciate

- **Single Cash Benefit** – Choose a benefit from \$5,000 to \$100,000. Benefit amounts vary by state. Please consult your policy/group certificate for details.
- **Guaranteed Renewable** – Guaranteed active coverage to age 100, as long as premiums are paid. Your premium may change if the premium for all policies in your class changes.
- **Level Premiums** – Enjoy rates that don't increase because of age.
- **Hospitalization/treatment** – Not required to collect benefit. You receive benefit payment after diagnosis.
- **Family Coverage** – Apply for your spouse, children and dependent grandchildren.
- **Best Doctors®** – Receive the one-on-one support of Best Doctors, a leader in connecting you to the medical information you may need for covered conditions.
- **Portability** – Take your coverage with you and pay the same premium even if you change jobs or retire.
- **Convenient Payroll Deduction** – No bills to watch for. No checks to mail. A direct bill option is available when you change jobs or retire.

It's your story. Help protect it with Critical Illness insurance.

Use this chart to take notes when you meet with a benefits counselor:

Coverage for me:	<input type="text"/>
Coverage for my spouse:	<input type="text"/>
Coverage for my children:	<input type="text"/>
Coverage for my family:	<input type="text"/>
Cost per pay period:	<input type="text"/>
Date deductions start:	<input type="text"/>

Trustmark

Voluntary Benefit Solutions®

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Underwritten by Trustmark Insurance Company

Rated A- (EXCELLENT) A.M. Best¹

400 Field Drive • Lake Forest, IL 60045

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Most insurance policies contain exclusions, limitations and terms for keeping them in force. Your representative will be glad to provide you with costs and complete details. See Plan CACI-82001, HS-12000, SC511 and other optional riders for your state and exact terms and provisions.

This critical illness/specified disease insurance policy/group certificate provides supplemental health insurance coverage, which pays a limited, lump-sum benefit for specified diseases only. It is not a substitute for medical expense insurance, major medical expense insurance or a health benefit plan alternative. It does not provide comprehensive medical coverage. It is not intended to pay all medical costs associated with the specified diseases and is not designed to provide coverage for other medical conditions or illnesses. It is also not a Medicare Supplement policy, nor is it a policy of worker's compensation.

Please refer to your policy/group certificate and outline of coverage, if applicable, for complete information. Limitations on pre-existing conditions may apply. In NH and NY, this is a specified disease policy. In MA, you must have a health benefit plan in order to purchase this insurance.

¹An A.M. Best rating is an independent opinion of an insurer's financial strength and ability to meet its ongoing insurance policy and contract obligations. Trustmark is rated A- (4th out of 16 possible ratings ranging from A++ to Suspended).

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