

Designed Especially for: **National Nurses United**



# Critical Illness and Cancer

This is Critical Illness and Cancer Insurance



## Receive a Benefit if You are Diagnosed With a Serious Illness

### A Critical Illness and Cancer Plan:

- Pays a lump sum benefit directly to you, unless otherwise designated
- Provides a benefit that can be used as you wish
- Pays in addition to any other coverage you may have
- Can cover you, your spouse and your children

**If you become seriously ill, you can rest easy with a ManhattanLife Critical Illness and Cancer plan.**

### You

- Or a member of your family are diagnosed with a covered critical illness, such as a heart attack, stroke or cancer
- File a claim for your critical illness and cancer benefit
- Receive a check for the covered amount to be used however you want

### What does critical illness and cancer coverage do?

CEREBRAL VASCULAR DISEASE	OTHER SPECIFIED ILLNESSES	CANCER	CARDIAC BENEFITS
<p>100% of the benefit amount paid upon treatment or proof of loss for a Stroke.</p> <p>10% of the benefit amount paid upon treatment or proof of loss for a Ruptured Brain Aneurysm.</p> <p>10% of the benefit amount paid upon treatment or proof of loss for a Transient Ischemic Attack.</p>	<p>100% of the benefit amount paid for one of the following illnesses or conditions</p> <ul style="list-style-type: none"> <li>• Benign Brain Tumor,</li> <li>• Major Organ Failure,</li> <li>• End- Stage Renal Failure,</li> <li>• Coma,</li> <li>• Severe Burns,</li> <li>• Permanent Paralysis,</li> <li>• Occupational HIV/ Hepatitis,</li> <li>• Loss of Sight,</li> <li>• Speech or Hearing as defined in the policy (certificate).</li> </ul>	<p>100% of the benefit amount paid upon treatment or proof of loss for Invasive Cancer.</p> <p>25% of the benefit paid upon treatment or proof of loss for a Non-Invasive Cancer. 30 Day waiting period for Cancer - Waived</p> <p>\$250 will pay upon diagnosis of non-melanoma Skin cancer.</p>	<p>100% of benefit amount paid upon treatment period or proof of loss for Myocardial Infarction or Sudden Cardiac Arrest.</p> <p>25% of benefit amount paid at diagnosis for Coronary Heart Disease.</p>

Policy: M-8021 | Well-Being Benefit: M-1775

Underwritten by ManhattanLife Insurance and Annuity Company

PF\_CI Sum 0524

[www.manhattanlife.com](http://www.manhattanlife.com)

# Plan Features



- Guarantee Issue for Employee, Spouse and Child(ren) coverage.
- Employee Coverage: \$10,000, \$20,000, or \$30,000.
- Spouse Coverage: \$5,000 - \$15,000 (50% of Employee's Benefit)
- Child(ren) Coverage: \$5,000 - \$15,000 (50% of Employee's Benefit)
- Wellness Screening: Pays a cash benefit of \$50 per insured when a member has one or more of the 21 covered screening tests. This screening benefit is payable once per covered person per calendar year.
- Recurrence benefit: Allows for one additional benefit payment in one benefit category if a person is diagnosed for a second time for the same illness after being treatment-free for at least 12 months.
- Waiver of premium: Premiums are waived if the primary insured is totally disabled for more than 180 days.

## Critical Illness and Cancer Rates

Displaying Bi-Weekly payroll deductions including Recurrence, Sudden Cardiac Arrest, Skin Cancer, and \$50 Wellness Screening Benefit.

Issue Age	Employee		
BENEFIT:	\$10,000	\$20,000	\$30,000
18-29	\$1.95	\$3.31	\$4.66
30-39	\$3.58	\$6.51	\$9.44
40-49	\$7.83	\$14.91	\$21.99
50-59	\$15.11	\$29.33	\$43.55
60-64	\$23.39	\$45.77	\$68.15
65-69	\$29.25	\$57.38	\$85.50

Issue Age	Employee & Spouse		
BENEFIT:	\$10,000	\$20,000	\$30,000
18-29	\$2.83	\$4.86	\$6.89
30-39	\$5.30	\$9.69	\$14.09
40-49	\$11.72	\$22.34	\$32.96
50-59	\$22.70	\$44.03	\$65.36
60-64	\$35.21	\$68.77	\$102.34
65-69	\$44.05	\$86.24	\$128.43

\*Spouse Amount is 50% of Employee Amount.

Issue Age	Employee & Children		
BENEFIT:	\$10,000	\$20,000	\$30,000
18-29	\$1.95	\$3.31	\$4.66
30-39	\$3.58	\$6.51	\$9.44
40-49	\$7.83	\$14.91	\$21.99
50-59	\$15.11	\$29.33	\$43.55
60-64	\$23.39	\$45.77	\$68.15
65-69	\$29.25	\$57.38	\$85.50

Issue Age	Family		
BENEFIT:	\$10,000	\$20,000	\$30,000
18-29	\$2.83	\$4.86	\$6.89
30-39	\$5.30	\$9.69	\$14.09
40-49	\$11.72	\$22.34	\$32.96
50-59	\$22.70	\$44.03	\$65.36
60-64	\$35.21	\$68.77	\$102.34
65-69	\$44.05	\$86.24	\$128.43

\*Child Amount is 50% of Employee Amount.

\*Spouse Amount is 50% of Employee Amount.  
Child Amount is 50% of Employee Amount.

Note: Final implementation rate may vary slightly due to rounding

This is not a complete disclosure of plan qualifications and limitations. Please access our website to obtain a completed list for the Critical Illness product at [disclosure.manhattanlife.com](http://disclosure.manhattanlife.com). Please review this information before applying for coverage. The amounts of benefits provided depend on the plan selected. Premiums will vary according to the selection made.

**Policy Form Numbers:** M-8021 (including state variations)

Underwritten by ManhattanLife Insurance and Annuity Company  
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