

CancerSelect® Optional Selections

Hospital Intensive Care Rider

(Form No. XRE620 or CR501600)

Daily Benefit

You select your benefit for intensive care, cardiac care, burn unit, or neonatal care. Choose from \$100, \$200, \$300, \$400, \$500, \$600, \$700, \$800, \$900, or \$1,000 per day.

Step-Down Unit

Pays one-half the daily benefit for progressive care, sub-acute care, and intermediate care.

- ▶ Any covered accident or sickness.
- ▶ First-day coverage.

- ▶ Benefits continue for up to 30 days for sickness and up to 45 days for an accident, for each period of Intensive Care Confinement.
- ▶ Ambulance—Pays charges of up to \$2,000 per period of intensive care confinement.
(California and Oregon: benefits may be paid to the provider if balance due at time of claim.)
- ▶ Under family plans, newborns are covered from moment of birth; adopted children are covered from date of placement for adoption.
- ▶ Guaranteed renewable for life (benefits reduced 50 percent at age 70).
- ▶ No lifetime maximum.

Rider not available in Idaho, South Carolina, Tennessee, or Virginia.

Thirty More Specified Diseases Rider (Form No. XRC533 or CR501400)

- | | | | |
|------------------------|-------------------------|--------------------------------|------------------------|
| ▶ Addison's Disease | ▶ Legionnaires' Disease | ▶ Osteomyelitis | ▶ Tay-Sachs Disease |
| ▶ Botulism | ▶ Lou Gehrig's Disease | ▶ Polio | ▶ Tetanus |
| ▶ Brucellosis | ▶ Lupus Erythematosus | ▶ Q Fever | ▶ Toxic Shock Syndrome |
| ▶ Budd-Chiari Syndrome | ▶ Malaria | ▶ Reye's Syndrome | ▶ Trichinosis |
| ▶ Cystic Fibrosis | ▶ Meningitis | ▶ Rheumatic Fever | ▶ Tuberculosis |
| ▶ Diphtheria | ▶ Muscular Dystrophy | ▶ Rocky Mountain Spotted Fever | ▶ Typhoid Fever |
| ▶ Encephalitis Fever | ▶ Multiple Sclerosis | ▶ Sickle-Cell Anemia | ▶ Whooping Cough |
| ▶ Histoplasmosis | ▶ Myasthenia Gravis | | |

This rider has the following benefits for all of the above diseases in addition to the same benefits paid for cancer (*excludes reconstructive surgery, skin cancer, chemotherapy, waiver of premium, and hospital confinement*).

Hospital Confinement

You select \$100, \$200, or \$300 per day for up to 90 days per Period of Covered Hospital Confinement. Refer to extended benefits in the policy for confinement beyond the 90th day. No lifetime maximum.

Drugs and Medicine

Pays charges of up to \$250 per calendar year for drugs and medicines received out of the hospital. No lifetime maximum.

Medical Apparatus

Pays for rental charges of up to \$100 per month. No lifetime maximum. Rider not available in Idaho.



CancerSelect[®] Optional Selections *(continued)*

Cancer Home Recovery Rider (Form No. XRC534 or CR 501500)

Recovery Benefit

Pays the benefit amount selected (\$25, \$50, or \$75) multiplied by the number of days you were hospital-confined during your last covered Period of Hospital Confinement, or three times that amount if you choose outpatient surgery instead of surgery performed while hospital confined. No lifetime maximum.

Attending Physician

Pays for charges of up to \$30 per visit, two visits per week, during Recovery Period.* No lifetime maximum.

Drugs and Medicine

Pays for charges of up to \$15 per prescription directly related to recovery from cancer. \$300 maximum during each Recovery Period.* No lifetime maximum.

Local Transportation (Outpatient Treatment)

Pays \$15 for each outpatient radiation therapy or chemotherapy treatment received away from home during a Recovery Period* (limit one treatment per 24-hour period). No lifetime maximum.

Medical Apparatus

Pays for rental charges of up to \$100 per month during Recovery Period*, for a medical apparatus authorized by the attending physician for recovery from cancer. No lifetime maximum.

Physical Exams

Pays for exam charges of up to \$100 for a physical exam for the purpose of detecting a recurrence of each 12-month period when you have been positively diagnosed and treated for cancer and free of cancer treatment for six months. No lifetime maximum.

* *Recovery Period means the six months immediately following the last Period of Hospital Confinement, or date of outpatient surgery.*



CancerSelect[®] Optional Selections *(continued)*

Initial Diagnosis Rider

(Form No. XRC532 or CR501300)

Initial Diagnosis Benefit \$1,000

Pays a lump sum benefit of \$1,000, the first time any person covered under this rider is diagnosed with internal cancer (not skin cancer).

Graded Indemnity Benefit

Upon the initial diagnosis of internal cancer of the named Insured, pays an additional amount equal to \$20 multiplied by the number of whole months the rider has been in force. The building period ceases upon the initial diagnosis of internal cancer of the Insured or the Insured's attainment of age 65.

Rider not available in Kansas, Minnesota or Pennsylvania. Benefit not available for spouse or dependent children in any state.

Heart Disease, Heart Attack, and Stroke Rider

(Form No. XRHC0100 or CR501800)

In-Hospital Benefits

Hospital Confinement

You select your daily hospital benefit—\$100, \$200, \$300, \$400, or \$500 per covered Period of Hospital Confinement due to heart disease, heart attack, or stroke. No lifetime maximum.

Attending Physician

Pays for charges of up to \$45 on first day of confinement, \$30 each day thereafter. No lifetime maximum.

Private-Duty Nurse

Pays up to \$100 per day. No lifetime maximum.

Drugs and Medicines

Pays up to \$25 per day or \$250 per Period of Hospital Confinement, whichever is greater. No lifetime maximum.

Government or Charity Hospital

For a hospital where you are not required to pay for most services *(and in lieu of all other benefits)*:

- (1) Pays up to \$200 per day for first 10 days of covered confinement;
- (2) Pays up to \$125 per day thereafter until released. (In Iowa, Louisiana, or Missouri, residents will receive their hospital confinement benefit per day until released.) No lifetime maximum.

Oxygen

Pays charges for oxygen and related equipment—up to \$200 per covered Period of Hospital Confinement.

Electrocardiogram

Pays benefits of up to \$200 for each electrocardiogram performed while you are hospital-confined.

CancerSelect[®] Optional Selections *(continued)*

Heart Disease, Heart Attack, and Stroke Rider (cont.)

In- or Out-of-Hospital Benefits

Surgery

Pays up to \$3,000 for surgery (as shown in the schedule); includes post-operative care. No lifetime maximum.

Anesthesia

Pays up to 25% of the covered Surgery Benefit for anesthesia. No lifetime maximum.

Physical Therapy

Pays up to \$40 per treatment (limit one treatment per day) for up to 30 days for each occurrence in connection with a covered condition.

Non-Medical Benefits

Transportation

When non-local hospital confinement (more than 50 miles from your residence) is required, pays:

- ▶ Round-trip charges by common carrier or private vehicle allowance of \$.35 per mile (up to 700 miles round trip).
- ▶ Round-trip charges by common carrier for you or your spouse to accompany a child who is a covered person requiring non-local hospital confinement. This benefit is payable once per covered Period of Hospital Confinement. No lifetime maximum.

Family Member Lodging and Transportation

When non-local hospital confinement is required, pays:

- ▶ Charges not to exceed \$40 per day at a motel, hotel, or similar facility for the number of days of hospital confinement for an adult member of your family. Maximum benefit is \$2,400 per covered Period of Hospital Confinement.
- ▶ Round-trip charges by common carrier for the same adult. This benefit is paid once per covered Period of Hospital Confinement. No lifetime maximum.

Ambulance

Pays charges of up to \$2,000 per trip for admission to a hospital. Transportation in excess of 100 miles must be to the nearest hospital providing the necessary medical treatment. No maximum on the number of trips. *(In California and Oregon, benefits may be paid to the provider if balance is due at the time of claim, not available in Idaho.)*

CancerSelect[®] Optional Selections *(continued)*

Heart Disease, Heart Attack, and Stroke Home Recovery Rider (Form No. XRH0100 or CR501700)

During a Recovery Period, pays \$200 per week following a Period of Hospital Confinement; or \$100 per week following outpatient surgery *(not available in Idaho or Wisconsin)*.

Vital Organ Transplant Rider

(Form No. XRTC0100 or CR501900)

Provides benefits for a vital organ transplant due to an injury, sickness, disease, or physical condition first diagnosed while the coverage under this rider is in force.

Pays up to \$100,000 for expenses related to a vital organ transplant including surgical and anesthesia fees, hospital charges for hospital confinement where such transplant is performed, diagnostic evaluation and tests, immunosuppressive drugs, aftercare, transportation, and donor expenses. There is a \$1,000,000 lifetime maximum benefit *(not available in Idaho)*.

Cancer Screening Wellness Rider

(Form No. XRCS0100 or CR502000)

Pays \$100 per calendar year for tests performed to determine whether cancer exists in a Covered Person. Diagnosis of cancer is not required for benefits to be payable. This benefit is limited to one payment per calendar year per covered person *(not available in California, Maryland or Oregon)*.



Limitations and Exclusions

Limitations

All Riders

A claim may be reduced or denied or the riders voided as follows: 1) during the first 24 months if you make a material misrepresentation on the application; or 2) at any time if you make a fraudulent misstatement. (Item #2 does not apply in Georgia or North Carolina.)

Exclusions

CancerSelect Policy/Cancer Home Recovery Rider/Initial Diagnosis Rider

No benefits will be paid for: 1) any excluded form of cancer; 2) for a loss not due to cancer; or 3) for any person diagnosed with cancer during the 30-day waiting period. (Item #3 is not applicable in Arizona, Kansas, Michigan, Minnesota, Oklahoma, South Dakota, or Utah. In Georgia, Indiana, Missouri, North Carolina, and Tennessee, if the diagnosis occurs during the waiting period, benefits are payable after two years.)

Thirty More Specified Diseases Rider

No benefits will be paid for: 1) specifically excluded diseases or conditions; 2) a specified disease diagnosed or loss incurred prior to the end of the 30-day waiting period; 3) loss not directly due to a specified disease; or 4) waiver of premium of the policy when total disability is the result of a specified disease. (Item #2 does not apply in Arizona, Kansas, Michigan, Minnesota, Oklahoma, South Dakota, or Utah.)

Hospital Intensive Care Policy/Rider

Coverage will not be issued under this policy/rider to any person 65 years of age or older (64 or older in California). If such a person is named by error or misrepresentation, coverage shall be deemed void from the effective date, and any premiums paid for such coverage will be refunded. No benefits will be paid for loss resulting from: 1) specifically excluded disease or condition as endorsed; 2) an attempted suicide or an intentionally self-inflicted injury (while sane in Missouri); 3) any act of war, either declared or undeclared; 4) alcoholism or drug addiction; 5) mental or nervous disorders; 6) an overdose of drugs, narcotics, or hallucinogens, unless administered on the advice of a physician; 7) being under the influence of any intoxicant or narcotic, unless administered on the advice of a physician (narcotic only in Oklahoma); or 8) an injury received while engaging in an illegal occupation or activity.

Benefits will be reduced by 50 percent after attaining age 70. Only one daily indemnity benefit will be paid per day.



Limitations and Exclusions *(continued)*

Heart Disease, Heart Attack, and Stroke Rider/Heart Disease, Heart Attack, and Stroke Home Recovery Rider

The rider does not pay benefits for loss resulting from: 1) heart disease, heart attack, or stroke diagnosed or loss incurred prior to the end of the 30-day waiting period (does not apply in Arizona, Kansas, Michigan, Minnesota, Missouri, Oklahoma, or South Dakota; in Tennessee or Wisconsin, no coverage for the first two years); 2) loss not directly due to a heart disease, heart attack, or stroke (not applicable in Arkansas, Delaware, Iowa, Virginia, and Wisconsin); 3) any disease or condition caused, complicated, worsened, affected by, or as a result of heart disease, heart attack, or stroke (not applicable in Arkansas, Delaware, Illinois, Iowa, Missouri, Virginia, or Wyoming).

Cancer Screening Wellness Rider

This rider contains a 30-day waiting period. The benefit is not payable for any person during the first 30 days from the effective date of coverage (does not apply in Arizona).

Vital Organ Transplant Rider

Under the Vital Organ Transplant Rider, no benefits will be paid for loss resulting from sickness, disease, or physical condition diagnosed during the 30-day waiting period. (Does not apply in Arizona, Kansas, Minnesota, Missouri, Oklahoma, or South Dakota; in Maryland, North Carolina, Tennessee, and Wisconsin, excludes loss during the first two years from a sickness, disease, or physical condition diagnosed during the 30-day waiting period. Rider not available in Idaho.)

Pre-existing Condition

Under the Hospital Intensive Care Policy, no benefits will be paid for loss from a pre-existing condition during the first two years after the effective date of coverage. Under the Vital Organ Transplant Rider, no benefits will be paid for loss resulting from a pre-existing condition during the first 12 months beginning on the effective date of the Rider.

Definition of Hospital

"Hospital" does not include a facility or that part of a facility that is primarily for convalescent, rest, nursing care, hospice care, care for the aged, drug addicts, alcoholics, or custodial or educational care.

Alabama statute 22.21.7 prohibits any insurance company from paying to the Insured any amounts due the hospital by any covered person without positive validation from the appropriate hospital officials.

Renewability

These riders are guaranteed renewable for as long as you live. The premium for your policy and/or rider(s) may be changed only after you have been notified in advance and only if it is changed for all of the policies and/or rider(s) in your class.

CancerSelect® is underwritten by:

Transamerica Life Insurance Company

Home Office: Cedar Rapids, IA

Life Investors Insurance Company of America

Home Office: Cedar Rapids, IA

Monumental Life Insurance Company

Home Office: Baltimore, MD

Not Licensed in New York.

Your insurer will be the company with which you complete and application and which issues your policy.

Administrative Office:

1400 Centerview Drive

Little Rock, AR 72211

(888) 763-7474



INSURANCE
MARKETPLACE
STANDARDS
ASSOCIATION®

MEMBERSHIP
PROMOTES
ETHICAL MARKET
CONDUCT FOR
INDIVIDUAL LIFE
INSURANCE AND
ANNUITIES