





Critical Illness Insurance	 Aflac Group
Plan Benefit or Provision	Aflac Group
A.M. Best	A+ (Superior)
HSA Compliant	Yes
Situs State	NJ
Benefit Amount	\$10,000 or \$20,000
Guaranteed Issue	\$20,000 employee and \$10,000 spouse with 10% employee participation in CI Coverage during initial enrollment
Pre Existing Conditions Clause	A "Pre existing Condition" means a sickness or physical condition for which, within the 6 month period prior to an Insured Person's Effective Date, medical advice was given or treatment was recommended or treatment was received from a licensed health care provider. We will not pay benefits for any Pre existing Condition starting within 6 months after the Insured Person's Effective Date. A claim for benefits for loss starting after 6 months from an Insured's Effective Date will not be reduced or denied on the grounds that it is caused by a Pre existing Condition. A Critical Illness will no longer be considered Pre existing at the end of 6 consecutive months starting and ending after an Insured's Effective Date.
Portable	Yes, coverage is portable without a change in the premium amount charged when an employee leaves, if the following conditions are met: 1. The group master policy remains in force. 2. The employee continues to pay their premiums. Coverage can be continued through a monthly bank draft or quarterly, semi annual, or annual direct billing. 3. The employee must contact Aflac Group, in writing, within 31 days of leaving employment.
Benefit Reduction	Not Applicable
Waiting Period	None
Eligibility	1. Aflac's Group Critical Illness plan may be issued to applicants ages 18 through 69 on payroll, union and large accounts. Both the spouse and the primary insured must meet the age requirement to be covered. Dependent children who are unmarried and under age 26 can be covered under the policy. 2. If you have a current Medicaid Eligibility Card New Jersey law prohibits the sale of this policy to you. 3. If you (and, if family coverage is applied for, everyone to be insured) are not currently covered under a plan providing for comprehensive hospital and medical services and supplies a policy will not be issued.
Domestic Partners	Spouse means the person legally married to you or your civil union partner who is 18 years of age or older. Under NJ law, Spouse includes the employee and another person of the opposite sex in a legal marriage; the employee and another person in a legal civil union partnership under NJ law; or partners in same sex relationships, regardless of title, from other jurisdictions, that provide substantially all of the rights and benefits of marriage.
Child(ren) Coverage	Dependent children who are unmarried and under age 26 can be covered under the policy. You can add the information here about the children cost
Wellness/ Health Screening Benefit	An Insured & Spouse may receive a maximum of \$50 for any one covered screening test per calendar year. This benefit is not paid for dependents.
Rate Guarantee	2 Year
Waiver of Premium	Not Applicable
Participation Requirements	Waived



Critical Illness Insurance	
Benefits	
Heart Attack	100% of the amount listed in the Policy Schedule
Major Organ Transplant	100% of the amount listed in the Policy Schedule
Stroke	100% of the amount listed in the Policy Schedule
End Stage Renal Failure	100% of the amount listed in the Policy Schedule
Cancer Invasive	100% of the amount listed in the Policy Schedule
Skin Cancer	Not Applicable
Benign Brain Tumor	Not Applicable
Carcinoma in Situ	25% of the amount listed in the Policy Schedule
Prostate Cancer	100% of the amount listed in the Policy Schedule
Coma	Not Applicable
Complete Loss of Hearing	Not Applicable
Complete Loss of Sight (Blindness)	Not Applicable
Paralysis	Not Applicable
Advanced Alzheimer's Disease	Not Applicable
Coronary Artery By Pass Surgery	25% of the amount listed in the Policy Schedule
Additional Benefits	
Second Event Initial Critical Illness Benefit	If an Insured collects full benefits for a critical illness under the plan and later has one of the remaining covered illnesses, then we will pay the full benefit amount for any additional illness when the following conditions are met: The two dates of diagnosis must be separated by at least 6 months (or at least 6 months Treatment Free for Cancer), and the additional critical illness is not caused by or contributed to by a critical illness for which benefits have been paid.
Second Event Cancer Critical Illness Benefit	If an Insured collects full benefits for Cancer under the plan and later has a Second Cancer event we will pay the full benefit amount for any additional Cancer event when the following conditions are met: At the second date of diagnosis must be at least 6 months (6 months Treatment Free for Cancer).
Additional Riders	Heart and Additional Benefits (Paralysis, Severe Burns, Coma, Loss of Speech, Loss of Sight and Loss of Hearing).
Recurrence Benefit	If an insured receives full benefit for a covered condition and is later diagnosed with the same condition, we will pay the full benefit again. Occurrences must be separated by at least 12 months.