



**Critical Illness Benefit**

CriticalAssistance Select® for Florida offers specified disease benefits to help with the costs associated with critical illness when you or your insured loved ones are initially diagnosed with the following conditions: cancer, heart attack, stroke and end-stage renal failure. It even provides benefits for major organ transplant surgery! These benefits are payable one time for each insured person.

Condition	Percentage of Benefit Amount
Cancer, Heart Attack, Stroke, End-stage Renal Failure or Major Organ Transplant Surgery	100%
Carcinoma In Situ <sup>1</sup> or Skin Cancer <sup>1</sup>	5%

**Subsequent Critical Illness Benefit**

This benefit is payable if the insured person is first diagnosed as having a subsequent and separate covered critical illness more than 60 days after the diagnosis of the first covered critical illness. For example: If you are first diagnosed with a heart attack, and then you are diagnosed for the first time with a stroke more than 60 days later, you will receive the benefit amount you selected for each illness. Benefits are payable one time for each insured person.

**Critical Illness Screening Benefit**

This benefit pays \$50 each year for each insured person for one of the following medical tests and procedures performed at the direction of a licensed physician:

chest X-Ray	colonoscopy	EKG	Pap smear
CA125 (test for ovarian cancer)	blood tests to confirm elevated cardiac enzymes	carcinoembryonic antigen test (CEA, test for colon cancer)	prostate-specific antigen test (PSA)
thallium scan	MUGA scan	mammography	neuroimaging studies
Hemoccult stool specimen	flexible sigmoidoscopy	stress echocardiograms	thermography

**Additional Information**

**Issue Age**

Employees and their spouses<sup>2</sup> age 18 and older are eligible for insurance. Your eligible dependent children from birth through age 25.

**Benefit Elections**

If you meet eligibility requirements, you can purchase insurance in \$5,000 increments up to \$20,000 for you and each eligible family member.

<sup>1</sup> Payment for these benefits is one-time only, but will be paid in addition to any other benefit in this policy.

<sup>2</sup> Spouse or equivalent as defined by governing state law.

## Renewability

This policy is guaranteed renewable for as long as you live. The premium for your policy may be changed only after you have been notified in advance and only if it is changed for all of the policies in your class.

## Conversion

If this is a two-parent family policy, the policyholder's spouse shall become the policyholder effective upon the policyholder's death. We will convert this policy to a one-parent family or individual policy, whichever applies, without evidence of insurability.

If you and your spouse dissolve your marriage by a valid decree of dissolution of marriage and your spouse was provided insurance under a two-parent family policy, then your former spouse can apply for and receive a policy providing insurance not greater than the terminated insurance. The policy will be issued to your former spouse without evidence of insurability.

To obtain the policy, your former spouse must make application to us within 60 days following the entry of the decree of dissolution of marriage. If such dissolution of marriage occurs, the policyholder of this policy at that time, shall retain that status. A dependent may be provided insurance under either policy, but not both.

An insured person whose dependency terminates and who desires to continue insurance as a policyholder under a separate policy may do so by notifying us in writing of the request. The dependent will have the right to continue insurance as a policyholder under a separate, equivalent policy without a requirement for evidence of insurability and without interruption of insurance. We must receive written notification of the request prior to 31 days after the anniversary of the policy effective date following the date the person is no longer considered a dependent.

## Important Policy Information

No benefits are payable for conditions other than the critical illnesses defined in the policy.

## Limitations and Exclusions

The policy does not pay benefits for losses caused by or as a result of the following:

- Conditions other than those due to covered critical illness, cancer in situ or skin cancer.
- An insured person being diagnosed with a covered Critical Illness during the Waiting Period.
- The insured person participating or attempting to participate in an illegal activity.
- The insured person intentionally causing self-inflicted injury.
- The insured person committing or attempting to commit suicide, whether sane or insane.
- The insured person's involvement in any period of armed conflict.
- Surgeries performed outside the United States or its territories.

## Termination of Insurance

Your insurance will end on the earliest of these dates:

- The premium due date as of which you fail to pay the premium. (You have 31 days after the due date to pay the premium.)
- The next premium due date after we receive written notice from you to cancel your policy.

Termination of the policy will have no effect on payment of benefits for a claim which begins before the policy is terminated. We may end the insurance if You make a fraudulent claim. Refer to your policy for complete termination details.

## Time Limit on Certain Defenses

After two years from the Insured's effective date of insurance, no statements in the application, except fraudulent misstatements, can be used to avoid the insurance or deny a claim for loss incurred or that starts after such two-year period.

## Pre-Existing Condition

Pre-existing condition means within the 12 month period prior to the effective date of this Policy:

- a condition for which medical advice or treatment was recommended or received; or
- the manifestation of symptoms which would cause an ordinarily prudent person to seek diagnosis, care or treatment.

**Waiting period is 30 days.**

**This Brochure is not complete with out an enclosed rate sheet.**

**Up to date information regarding our compensation practices can be found in the Disclosures section of our website: [www.tebcs.com](http://www.tebcs.com).**

This is a brief summary of CriticalAssistance Select® for Florida, Limited Benefit Specified Disease Insurance. Policy Form Series CP500710. Forms and form numbers may vary. This insurance may not be available in all jurisdictions. Limitations and exclusions apply. Refer to the policy, certificate and riders for complete details.

# CriticalAssistance Select<sup>®</sup> critical illness insurance

Underwritten by Transamerica Life Insurance Company, Cedar Rapids, Iowa.

LIFE

HEALTH

## Florida, Plan A, Monthly Rates with Benefit Reduction at 65

### Individual Coverage Amount

Issue Age	\$ 5,000	\$ 10,000	\$ 15,000	\$ 20,000	\$ 25,000	\$ 30,000	\$ 35,000	\$ 40,000	\$ 45,000	\$ 50,000
18-34	\$ 3.47	\$ 6.94	\$ 10.41	\$ 13.88	\$ 17.35	\$ 20.82	\$ 24.29	\$ 27.76	\$ 31.23	\$ 34.70
35-44	6.62	13.24	19.86	26.48	33.10	39.72	46.34	52.96	59.58	66.20
45-54	11.39	22.78	34.17	45.56	56.95	68.34	79.73	91.12	102.51	113.90
55-59	14.86	29.72	44.58	59.44	74.30	89.16	104.02	118.88	133.74	148.60
60-63	16.43	32.86	49.29	65.72	82.15	98.58	115.01	131.44	147.87	164.30

Issue Age	\$ 55,000	\$ 60,000	\$ 65,000	\$ 70,000	\$ 75,000	\$ 80,000	\$ 85,000	\$ 90,000	\$ 95,000	\$ 100,000
18-34	\$ 38.17	\$ 41.64	\$ 45.11	\$ 48.58	\$ 52.05	\$ 55.52	\$ 58.99	\$ 62.46	\$ 65.93	\$ 69.40
35-44	72.82	79.44	86.06	92.68	99.30	105.92	112.54	119.16	125.78	132.40
45-54	125.29	136.68	148.07	159.46	170.85	182.24	193.63	205.02	216.41	227.80
55-59	163.46	178.32	193.18	208.04	222.90	237.76	252.62	267.48	282.34	297.20
60-63	180.73	197.16	213.59	230.02	246.45	262.88	279.31	295.74	312.17	328.60

### 1 Parent Family

Issue Age	\$ 5,000	\$ 10,000	\$ 15,000	\$ 20,000	\$ 25,000	\$ 30,000	\$ 35,000	\$ 40,000	\$ 45,000	\$ 50,000
18-34	\$ 3.83	\$ 7.66	\$ 11.49	\$ 15.32	\$ 19.15	\$ 22.98	\$ 26.81	\$ 30.64	\$ 34.47	\$ 38.30
35-44	7.30	14.60	21.90	29.20	36.50	43.80	51.10	58.40	65.70	73.00
45-54	12.55	25.10	37.65	50.20	62.75	75.30	87.85	100.40	112.95	125.50
55-59	16.33	32.66	48.99	65.32	81.65	97.98	114.31	130.64	146.97	163.30
60-63	18.06	36.12	54.18	72.24	90.30	108.36	126.42	144.48	162.54	180.60

Issue Age	\$ 55,000	\$ 60,000	\$ 65,000	\$ 70,000	\$ 75,000	\$ 80,000	\$ 85,000	\$ 90,000	\$ 95,000	\$ 100,000
18-34	\$ 42.13	\$ 45.96	\$ 49.79	\$ 53.62	\$ 57.45	\$ 61.28	\$ 65.11	\$ 68.94	\$ 72.77	\$ 76.60
35-44	80.30	87.60	94.90	102.20	109.50	116.80	124.10	131.40	138.70	146.00
45-54	138.05	150.60	163.15	175.70	188.25	200.80	213.35	225.90	238.45	251.00
55-59	179.63	195.96	212.29	228.62	244.95	261.28	277.61	293.94	310.27	326.60
60-63	198.66	216.72	234.78	252.84	270.90	288.96	307.02	325.08	343.14	361.20

### 2 Parent Family

Issue Age	\$ 5,000	\$ 10,000	\$ 15,000	\$ 20,000	\$ 25,000	\$ 30,000	\$ 35,000	\$ 40,000	\$ 45,000	\$ 50,000
18-34	\$ 6.72	\$ 13.44	\$ 20.16	\$ 26.88	\$ 33.60	\$ 40.32	\$ 47.04	\$ 53.76	\$ 60.48	\$ 67.20
35-44	12.76	25.52	38.28	51.04	63.80	76.56	89.32	102.08	114.84	127.60
45-54	21.95	43.90	65.85	87.80	109.75	131.70	153.65	175.60	197.55	219.50
55-59	28.56	57.12	85.68	114.24	142.80	171.36	199.92	228.48	257.04	285.60
60-63	31.61	63.22	94.83	126.44	158.05	189.66	221.27	252.88	284.49	316.10

Issue Age	\$ 55,000	\$ 60,000	\$ 65,000	\$ 70,000	\$ 75,000	\$ 80,000	\$ 85,000	\$ 90,000	\$ 95,000	\$ 100,000
18-34	\$ 73.92	\$ 80.64	\$ 87.36	\$ 94.08	\$ 100.80	\$ 107.52	\$ 114.24	\$ 120.96	\$ 127.68	\$ 134.40
35-44	140.36	153.12	165.88	178.64	191.40	204.16	216.92	229.68	242.44	255.20
45-54	241.45	263.40	285.35	307.30	329.25	351.20	373.15	395.10	417.05	439.00
55-59	314.16	342.72	371.28	399.84	428.40	456.96	485.52	514.08	542.64	571.20
60-63	347.71	379.32	410.93	442.54	474.15	505.76	537.37	568.98	600.59	632.20