



Cancer Protector

Let's make this easy.


COMBINED
INSURANCE®

CANCER PROTECTOR

A new case of cancer is diagnosed in America every 21 seconds.¹ Cancer can strike anyone at any time regardless of age or lifestyle, yet too many people lack the protection they need to help pay the out-of-pocket costs associated with cancer treatment and recovery.

Combined Insurance's Cancer Protector can help fill in these gaps. This is protection that's clearly written and easy to understand, so you can be sure it's the right plan for you and your family.

1. American Cancer Society. Cancer Facts and Figures 2010

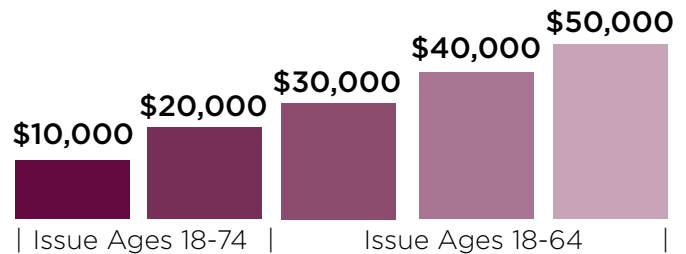
Will you be able to afford non-medical expenses such as...

- Excess cost of medical care if you have a loss of family income due to time off work
- Transportation expenses involved with necessary treatment
- Lodging and meals away from home for you and family members
- Domestic help such as child care, meals, laundry, and yardwork, etc.
- Deductibles and co-payments on your medical insurance

Even if you are covered by a major medical plan, an HMO, PPO, or Basic Hospital Coverage, the vast majority of medical plans simply do not cover all of the expenses incurred with this disease. You still need our Cancer Protector because it will provide additional cash when you need it most.

HERE'S HOW IT WORKS ...

If you should be diagnosed with or treated for covered cancer we will pay you a lump sum benefit of:



... depending on your needs and the plan you select.

Benefits are paid in addition to other insurance you may have.

How Cancer Protector pays...

After the waiting period, which is the first 30 days after the policy issue date, upon diagnosis and/or treatment of a covered cancer:

SECTION ONE*

We pay you 100% of the scheduled benefit amount you have selected, less any benefit paid in Section Two.

This benefit is payable once during the lifetime of the policy and once paid the policy will terminate.

SECTION TWO

We pay you a one-time benefit during the lifetime of the policy of 10% of the scheduled benefit amount for loss due to either Stage A Prostate Cancer or Carcinoma In-Situ.

The best part is this money is paid directly to you and can be used in any way you choose.

* Stage A Prostate Cancer and Carcinoma In-Situ are not covered under Section One.

Limitations and Exclusions

This is a cancer-only policy and does not pay benefits for loss from any other sickness or accidents.

No benefit is payable for loss resulting from:

1. Any intentionally self-inflicted injury; or
2. Skin Cancer (except malignant melanoma).

This policy provides benefits for the diagnosis and/or treatment of covered cancer.

“Covered Cancer” means leukemia or Hodgkin’s Disease or a malignant tumor treated by a physician that is characterized by uncontrolled cell growth and which results in a positive diagnosis, based upon a microscopic examination of the affected cells.

Section Two Benefit

A Section Two benefit will be provided for only one of the two conditions listed in Section Two. The policy does not terminate upon the payment of a Section Two Benefit. However, the benefit paid under Section Two (if any) will reduce the scheduled benefit amount payable under Section One.

PRE-EXISTING CONDITIONS

Loss caused by a pre-existing condition is not covered unless such loss begins after 24 months from the policy issue date.

“Pre-existing condition” means a condition for which you:

1. Received medical advice or treatment within 24 months before the policy issue date; or
2. Showed symptoms within 24 months prior to the issue date that would have caused an ordinarily prudent person to seek medical advice or treatment.

WAITING PERIOD

Loss caused by a waiting period condition is not covered unless such loss begins after 24 months from the policy issue date.

“Waiting period condition” means a condition for which, within 30 days after the issue date: you received medical advice or treatment or showed symptoms that would have caused an ordinarily prudent person to seek medical advice or treatment.

RENEWABILITY

Your right to renew the policy is guaranteed until payment of the Section One benefit, at which time the policy terminates. Benefits for loss under both Section One and Section Two of the policy are payable only once during the lifetime of the policy. Your policy will terminate immediately upon payment of the Section One benefit.

We can only change the premium for your policy if we change everyone in your class (for example: everyone in your state).

THIS IS VERY IMPORTANT:

If you are on or go on Medicaid, some or all of this policy’s benefits may be paid to the Medicaid agency.

NOTE: This brochure contains a brief description of policy benefits. See the policy (Form No. series 16522) for complete details of policy benefits and exclusions/limitations.

This is supplemental insurance. It is not a substitute for hospital or medical expense insurance, a health maintenance organization (HMO) contract, or major medical expense insurance.

5 ways Cancer Protector will take care of you and your family.

1. CAN HELP YOU (AND YOUR FAMILY)...

Pay some of the expenses you have due to a covered cancer.

2. GUARANTEED RENEWABLE

Until payment of the Section One benefit.

3. BENEFITS ARE PAID IN ADDITION TO ALL OTHER INSURANCE.

And benefits are paid directly to you or to whomever you choose.

4. CUSTOMIZED PROTECTION.

A variety of benefit levels to meet your needs.

5. NO REDUCTION IN BENEFITS ...

Because of your age.

CANCER PROTECTOR IS
THE CLEAR AND EASY PLAN THAT'S
RIGHT FOR YOUR FAMILY



Combined Insurance Company of America

Home Office: 111 East Wacker Drive, Suite 700, Chicago, IL 60601

Toll-Free: 800-225-4500 www.combinedinsurance.com