



We've got you under our wing.

INTRODUCING

TWO NEW GROUP PRODUCTS

Group Accident Insurance & Group Lump Sum Critical Illness

These policies are excellent compliments to existing offerings.

Similar features to both these group policies include ...

- **Pays CASH** benefits directly to you if you or a family member has an accident. **24 hour coverage!**
- **Guaranteed Issue Benefit**-Everyone is eligible for coverage, regardless of accident/medical history. The guarantee Issue Benefit is *only* available during the initial enrollment or for new hires who meet their eligibility requirement.
- **Same day coverage**-Coverage is effective the date the employee signs the application and rates are locked in.
- **Portability**- Employees can keep their coverage at the same rate if they leave their employment.

GROUP ACCIDENT INSURANCE PLAN BENEFITS

This list is not all inclusive, complete details will be listed in your policy certificate.

Terminates at age 70

PLAN BENEFITS	Benefit Amount
Initial accident treatment	Up to \$125 ee/spouse & \$75 Child(ren)
Lump sum benefit	\$25-\$10,000
<i>Examples: Fractured Leg</i>	\$2,700 ee, \$2,400 spouse/child
Fractured Forearm/Hand/Wrist	\$2,250 ee, \$2,000 spouse/child
Tendons/Ligaments	\$400 (single repair) \$600 multiple repair
Lacerations	\$50 (under 2" long)
Follow-up treatment	\$25 (up to 6 treatments per accident)
Physical Therapy	\$25 (up to 6 treatments per accident)
Hospital Confinement	\$1,000 initial day (payable once/year/person)
Additional hospital stay	\$200 per day, up to 365 days
Intensive Care Stay	\$400 per day, up to 30 days
Crutches/leg brace/walker	\$100
Ground / Air Ambulance	\$100 / \$500
Accidental-Death	\$50,000 ee / \$10,000 spouse / \$5,000 child(ren)

Cost Illustration / Group Accident Monthly rates

Employee	\$ 16.21
Employee and Spouse	\$ 23.18
Employee and Dependent Children	\$ 30.90
Employee, Spouse & Dependent Children	\$ 37.87

For illustration purposes only

Group Lump Sum Critical Illness
\$10,000 Lump Sum Benefit
For the Covered Critical Illnesses Listed:

Illnesses Covered Under Plan:	% of Maximum Benefit
Heart Attack	100% of the Benefit
Stroke	100% of the Benefit
Major Organ Transplant	100% of the Benefit
Kidney Failure (End Stage)	100% of the Benefit
Cancer (Internal/Invasive)	100% of the Benefit
Carcinoma in situ (cancer that is in the natural/normal place. Confined to The site of origin without having invaded neighboring tissue.)	25% of Benefit
Coronary Artery Bypass Surgery	25% of Benefit

Plus..12 Additional Covered Surgeries and Procedures

Coronary Artery Bypass Surgery	100% of the Benefit
Mitral Valve Replacement or Repair	100% of the Benefit
Aortic Valve Replacement or Repair	100% of the Benefit
Surgical Treatment of Abdominal Aortic Aneurysm	100% of the Benefit
AngioJet Clot Busting, Balloon Angioplasty (or Balloon Valvuloplasty), Laser Angioplasty, Atherectomy, Stent Implantation, Cardiac Catheterization	10% of the Benefit
Automatic Implantable (or Internal) Cardioverter Defibrillator (AICD), Pacemakers	

At age 70, benefits reduced by 50%

First Occurrence Benefit: After the 30 day waiting period, a Lump Sum Benefit is payable upon initial diagnosis of a covered critical illness. Employee benefit amount is \$10,000/ \$5,000 spouse/ \$2,500 child.

Additional Occurrence Benefit: If an insured collects full benefits for a critical illness under the plan and later has one of the remaining covered illnesses, then Aflac will pay the full benefit amount for each additional illness. Occurrences must be separated by at least 6 months.

Re-Occurrence Benefit: If an insured collects full benefits for a covered condition and is later diagnosed with the same condition, Aflac will pay the full benefit again. The two dates of diagnosis must be separated by at least 12 months or for cancer, 12 months treatment free. Cancer that has spread (metastasized) even though there is a new tumor, will not be considered an additional occurrence unless the insured has gone treatment free for 12 months.

\$50 Health Screening Benefit: An insured and spouse may each receive \$50 for any one covered health screening test per calendar year.

Pre-existing Condition Limitation: We will not pay benefits for any condition or illness starting within 12 months of an insured's effective date which is caused by, contributed to, or resulting from a pre-existing condition.

Critical Illness Monthly Cost Illustrations:

Ages	18-29	30-39	40-49	50-59	60-69
Employee Non-Tobacco	\$6.65	\$10.05	\$19.75	\$32.18	\$50.45
Spouse Non-Tobacco	\$4.20	\$5.90	\$10.75	\$16.97	\$26.10
Employee Tobacco	\$9.85	\$16.05	\$39.65	\$62.65	\$99.15
Spouse Tobacco	\$5.80	\$8.90	\$20.70	\$32.20	\$50.45

(For illustration purposes only)