

*When The Unexpected Strikes  
Are You Prepared?*



**Group Cancer Indemnity**

# Cancer strikes unexpectedly

- In 2004 563,700 Americans are expected to die from cancer, more than 1,500 people per day!\*
- In the United States, cancer causes 1 of every 4 deaths. This is the second leading cause of death, exceeded only by heart disease.\*
- The chances of survival are good with the 5 year survival rate for all cancers combined being 63%.\* As survival rates increase so does the cost of treatment. Are you prepared?

*Cancer can be emotionally devastating to victims and their families. There are also other factors . . .*

## What about out-of-pocket expenses?

Your hospitalization insurance may be good, but will it pay for all **cancer expenses**?

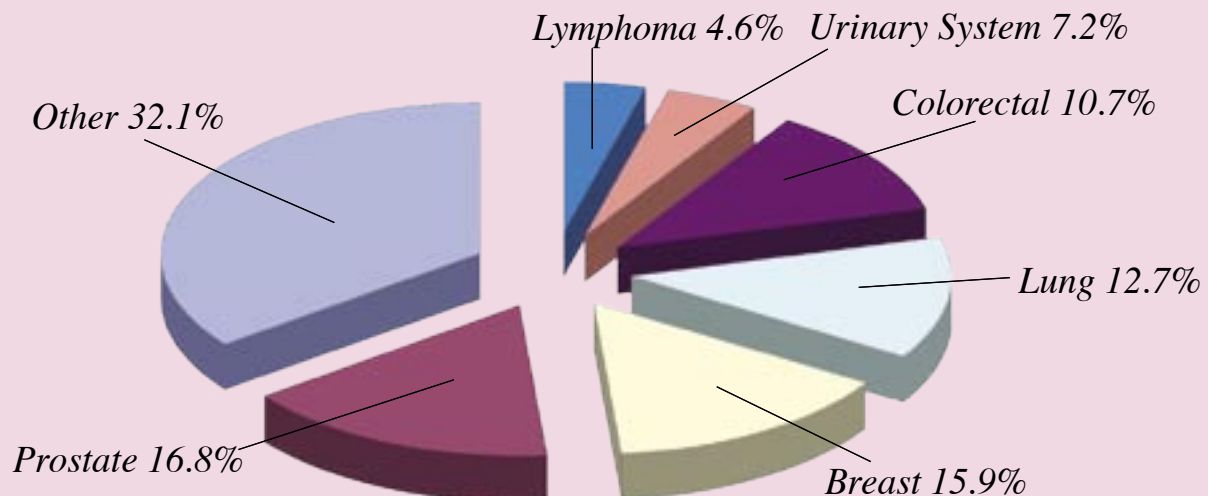
Hospital and major medical policies are not designed to pay for all **costs** associated with cancer.

Most medical policies have deductibles, co-payments and reductions for usual and customary charges. While these are common non-covered charges they may amount to considerable charges. There may be other exclusions and limitations as well. Can you afford these additional expenses?

The National Institutes of Health estimate that hospital and medical costs represent only **34%** of the true total cost of the treatment of cancer. Therefore, **66%** of cancer-related costs are **indirect** and not covered by major medical or hospital insurance policies.\*

*Benefits from the Group Cancer Indemnity Plan are paid directly to you, regardless of other insurance benefits, to use as you see fit.*

### ESTIMATED CANCER DIAGNOSIS\*



# AMERICAN PUBLIC LIFE INSURANCE COMPANY

## Group Cancer Indemnity Product - Form GCI 732

### Description of Benefits

#### BASE POLICY

	Benefit Amounts		
	Premier	Deluxe	Ultimate
<b>FIRST OCCURRENCE BENEFIT</b>			
Pays a lump sum benefit upon initial diagnosis of Cancer. This benefit is payable only once per lifetime per Insured. This benefit is not payable for the first occurrence of skin cancer or Cancer in Situ.	\$1,500	\$3,000	\$5,000
<b>INPATIENT BENEFITS</b>			
<b><u>Hospital Inpatient Benefits</u></b> The confinement must: be as a result of Cancer or treatment of Cancer; and be for at least 24 hours; and be at the direction of or under the supervision of a Physician. This benefit is payable for a maximum of 180 days per period of continuous confinement. The benefits double for days 11 through 180.	\$ 375 days 1-10 \$ 750 days 11-180	\$ 500 days 1-10 \$1,000 days 11-180	\$ 750 days 1-10 \$1,500 days 11-180
<b><u>Extended Care Facility Confinement Benefit</u></b> Pays a daily indemnity benefit for each day an Insured Person is confined as an inpatient in an Extended Care Facility. The confinement must: be as a result of Cancer or the treatment of Cancer; and follow a Hospital confinement of at least three days; and be for at least 24 hours; and be at the direction of or under the supervision of a Physician. This benefit is payable for a maximum of 30 days per period of continuous confinement.	\$ 200	\$ 250	\$ 350
<b>OUTPATIENT BENEFITS</b>			
<b><u>Chemotherapy, Radiation or Immunotherapy Outpatient Treatment Benefit</u></b> Pays an indemnity benefit for each day an Insured Person receives any combination of the following treatments for Cancer in a Physician's office or an outpatient facility; administration of chemotherapy or other cancericidal chemical substances approved by the AMA and the FDA; or administration of immunotherapy drugs approved by the AMA and FDA; or radiation therapy. This benefit is payable 12 times per calendar year per Insured. This benefit does not pay for medications or other substances administered orally.	\$ 400	\$ 600	\$ 800
<b><u>Short Stay Hospital Treatment Benefit</u></b> Pays an indemnity benefit when an Insured Person receives treatment for Cancer in a Hospital or Hospital emergency room for a period of less than 24 hours. This benefit is payable only for treatment that is not covered by any of the other benefits of this policy, including Surgery Benefits. Chemotherapy, radiation therapy and Immunotherapy treatments are not covered under this benefit. This benefit is payable two times per calendar year per Insured.	\$ 150	\$ 250	\$ 400
<b><u>Physician's Office Visit Benefit</u></b> Pays an indemnity benefit for Physician's office visits that are the result of Cancer. This benefit is only payable when no other benefits are payable under this policy for the treatment or testing received during the Physician's office visit. This benefit is payable up to six times per calendar year per Insured. Chemotherapy, Radiation therapy and Immunotherapy treatments are not covered under this benefit.	\$ 40	\$ 80	\$ 100
<b>SURGICAL BENEFITS</b>			
<b>Pays an indemnity benefit for surgery performed as a result of Cancer or the treatment of Cancer. The benefits are as follows:</b>			
<b><u>Surgery in a Hospital or Surgical Facility</u></b> This benefit is payable when an Insured Person has surgery in a Hospital or a surgical facility. This benefit is payable four times per calendar year per Insured Person.	\$ 400	\$ 600	\$ 800
<b><u>Surgery in a Physician's Office</u></b> This benefit is payable when an Insured Person has surgery in a Physician's office. This benefit is payable once per day and up to 24 times per calendar year for each Insured Person.	\$ 50	\$ 75	\$ 100
<b><u>Skin Cancer Surgery Benefit</u></b> This benefit is payable when an Insured Person has surgery in a Physician's office as a result of Skin Cancer or the treatment of Skin Cancer. This benefit is payable once per day and up to 24 times per calendar year for each Insured Person. This is the only benefit payable under this policy for the treatment of Skin Cancer.	\$ 50	\$ 75	\$ 100

**AMERICAN PUBLIC LIFE INSURANCE COMPANY**  
**Group Cancer Indemnity Product - Form GCI 732**  
**Description of Benefits**

**BASE POLICY (continued)**

	Benefit Amounts		
	Premier	Deluxe	Ultimate
<b>ORAL MEDICATIONS BENEFIT</b>			
<b>Oral Chemotherapy Drug Benefit</b> This benefit is payable for an Insured Person's prescribed oral chemotherapy drugs. The prescribed oral chemotherapy drugs must be necessary for the treatment of Cancer. This benefit is payable 12 times per calendar year per Insured. This benefit is not payable for the cost of oral chemotherapy drugs billed by a Hospital or clinic during an inpatient confinement or as an outpatient.	\$ 50	\$ 100	\$ 100
<b>Supportive and Protective Drug Benefit</b> This benefit is payable when an Insured Person is prescribed medication (other than chemotherapy or immunotherapy drugs) that is intended to treat Cancer or the effects of Cancer treatment. This benefit is payable once per month per Insured. This benefit is not payable for the cost of drugs billed by a Hospital or clinic during an inpatient confinement or as an outpatient.	\$ 25	\$ 50	\$ 50
<b>OUTPATIENT DIAGNOSTIC IMAGING BENEFIT</b>			
Pays an indemnity benefit for the Insured Person for Cancer related diagnostic imaging performed on an outpatient basis in a Hospital outpatient facility, an MRI facility or other such outpatient facility. This benefit is payable once per calendar year per Insured. This benefit is not payable for the tests listed under the Preventive Care Benefit.	\$ 75	\$ 150	\$ 300
<b>PREVENTIVE CARE BENEFIT</b>			
Pays an indemnity benefit for an Insured Person once per calendar year for one of the following Cancer screening tests: mammography, PSA, flexible sigmoidoscopy, colonoscopy, CA-125, pap smear, chest X-ray or hemocult stool specimen.	\$ 60	\$ 60	\$ 60

**OPTIONAL RIDERS**

	Benefit Amounts		
	Premier	Deluxe	Ultimate
<b>HOSPITAL INTENSIVE CARE RIDER</b>			
<b>Intensive Care Unit Confinement Benefit</b> Pays a daily indemnity benefit for each full day of ICU confinement. This benefit is payable for a maximum of 30 days per period of continuous confinement. Two or more stays in an ICU are considered the same stay if they are separated by less than 30 days and are due to the same or related cause. The benefit reduces by 50% after the Insured Person's 70th birthday.	\$ 600	\$ 600	\$ 600
<b>Ambulance Benefit</b> Pays up to \$100 for ambulance charges for transportation to a Hospital where the Insured Person is admitted to an ICU within 24 hours of arrival. This benefit reduces by 50% after the Insured Person's 70th birthday.	\$ 100	\$ 100	\$ 100
<b>HEART ATTACK AND STROKE RIDER</b>			
Pays a daily indemnity benefit for confinement in a Hospital as a result of a heart attack or stroke. This benefit is payable for a maximum of 60 days per period of confinement per Insured Person. The benefits reduce 50% after the Insured Person's 70th birthday.	\$ 400	\$ 400	\$ 400

## WORKSITE RATES\*

### All Ages

<u>Base Plan</u>	<u>Employee</u>	<u>Employee &amp; Children</u>	<u>Family</u>
Premier	\$18.30	\$22.00	\$34.80
Deluxe	\$25.15	\$30.15	\$47.75
Ultimate	\$34.80	\$41.75	\$66.10

### Optional Riders

Intensive Care Rider	\$ 5.60	\$ 6.70	\$10.65
Heart/Stroke Rider	\$ 2.75	\$ 3.30	\$ 5.25

\*Worksite rates are applicable for normal group enrollments and intended to be used in groups where an employer/employee, or contracting company/contractor, relationship exists. Rates for non-trade association groups are available on request and may only be used when such non-trade association meets the approval of American Public Life underwriting guidelines.

## About Our Company

American Public Life, rated A- (excellent) by A.M. Best,\* is domiciled in Oklahoma with operating offices in Jackson, Mississippi. The company was founded in 1945 and is currently licensed to transact business in 25 states. In July 2000, American Public was acquired by the American Fidelity Corporation and became part of the American Fidelity Group.

For many years the Company has focused on Worksite Marketing and specialized in voluntary supplemental insurance products. These products include Cancer, Specified Disease, Intensive Care, Accident, Medical Supplement, Whole Life Insurance, Disability Income and Dental.

This specialty marketing approach has enabled the Company to develop support and service systems that are specifically directed toward handling this unique type of business. The Company has earned a reputation of prompt and effective administration and service to its payroll accounts and individual policyholders.

The Company offers a variety of insurance plans, allowing a participant to choose the plan with benefits and premiums that suit the individual need and budget of the employee. Employees then have an option, rather than the "take it or leave it" proposition.

American Public Life provides coverage for thousands of employees of school systems, city governments, county/parish governments, state governments and commercial businesses.

\**Best Week*, January 26, 2004 (A- is 4th out of 15, with 1 being the highest).

## *Eligibility*

A person who works either under contract to or as a Full Time Employee for the Policyholder, or is a member in or employed by the association, is eligible for insurance provided they qualify for coverage as defined in the Master Application.

## *Limitations and Exclusions*

**Only Loss for Cancer:** This Certificate pays only for loss resulting from definitive Cancer treatment including direct extension, metastatic spread, or recurrence. Proof must be submitted to support each claim. This Certificate also covers other conditions or diseases directly caused by Cancer or the treatment of Cancer. This Certificate does not cover any other disease, sickness or incapacity, which existed prior to the diagnosis of Cancer, even though after contracting Cancer it may have been complicated, aggravated or affected by Cancer or the treatment of Cancer. This Certificate pays for loss resulting from the treatment of Skin Cancer only as described in the Skin Cancer Surgery Benefit provision. No other benefits are payable under this Certificate for the treatment of Skin Cancer.

**Pre-Existing Condition Limitation:** No benefits are payable for any loss incurred during the first two years of this Certificate as the result of a Pre-Existing Cancer or Skin Cancer, as defined in this Certificate. Pre-Existing Conditions specifically named or described as excluded in any part of this contract are never covered.

**Waiting Period:** This policy contains a 30 day Waiting Period. If any Insured Person has Cancer or Skin Cancer diagnosed before the end of the 30 day period immediately following the Insured Person's effective date, coverage for that person will apply only to loss that is incurred after two years from the effective date of such person's coverage. If any Insured Person is diagnosed as having Cancer or Skin Cancer during the 30 day period immediately following the effective date, the Insured may elect to void the Certificate from the beginning and receive a full refund of premium.

If this Certificate replaced Specified Disease Cancer coverage from another company that terminated within 30 days of the effective date of this Certificate, the 30 day waiting period will be waived for those Insured Persons that were covered under the prior coverage. However, the Pre-Existing Condition Limitation paragraph will still apply.

**Pre-Existing Condition:** Pre-Existing condition means:

1. any condition that is diagnosed as Cancer or Skin Cancer subsequent to the Insured Person's effective date of coverage, which exhibited the existence of symptoms which would cause an ordinarily prudent person to seek medical diagnosis or treatment during the 5 year period prior to the Insured Person's effective date of coverage; or
2. any condition that is diagnosed as Cancer or Skin Cancer for which medical advice or treatment was recommended by or received from a Physician or surgeon during the 5 year period prior to the Insured Person's effective date of coverage.



**American Public Life  
Insurance Company**

**A member of the American Fidelity Group®**

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*This brochure does not constitute the full contract and is intended to provide basic information about American Public Life Insurance Company's Group Cancer Indemnity product, GCI 732. For specific details, please consult an actual policy and its provisions.*