

Aetna Critical Illness Plan

Cash benefits for life's what-ifs



“A big help when I needed it most”

Donna's story*

"When my mom was diagnosed with cancer years ago, I knew the risk was real for me. And after seeing the financial impact it had, I signed up for Aetna's Critical Illness Plan. It was reassuring to have that extra financial protection in place.

So when I received my own cancer diagnosis, it helped to know that I could get the care I needed without wiping out our finances.

The lump sum I received covered my medical deductible and helped pay the mortgage and other bills while I was getting treatment. Not worrying so much about money let me concentrate on fighting my disease. And the claims process was so simple — right on Aetna's website.

And now, my family and I are relieved that we can focus on our health — not our finances."



Donna's total payout **with** the
was

*This is an example. Member results and experiences will vary by plan. Example assumes employee-only coverage and no portion of deductible met.

The Aetna Critical Illness Plan is offered by Aetna Life Insurance Company (Aetna).



THIS IS A SUPPLEMENT TO HEALTH INSURANCE AND IS NOT A SUBSTITUTE FOR MAJOR MEDICAL COVERAGE.

This plan provides limited benefits. It pays fixed-dollar benefits for covered services without regard to the health care provider's actual charges. The benefits payments are not intended to cover the full cost of medical care. You are responsible for making sure the providers' bills get paid. These benefits are paid in addition to any other health coverage you may have.

This material is for information only. Insurance plans contain exclusions and limitations. Not all health services are covered, and coverage is subject to applicable laws and regulations, including economic and trade sanctions. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features, rates, eligibility and availability may vary by location and are subject to change. Aetna does not provide care or guarantee access to health services. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna® plans, refer to **aetna.com**.

This plan has exclusions and limitations. Refer to the actual Booklet-Certificate and schedule of benefits to determine which services are covered and to what extent. The following is a partial list of services and supplies that are generally not covered. However, the plan may contain exceptions to this list based on state mandates or the plan design purchased.

Exclusions: Benefits under the Policy will not be payable for any critical illness, that is diagnosed or for which care was received outside the United States and its territories, or for any loss caused in whole or in part by or resulting in whole or part from the following: 1. Suicide or attempt at suicide, intentional self-inflicted injury or sickness, any attempt at intentional self-inflicted injury, injury caused by a self-inflicted act or sickness, while sane or insane; except when resulting from a diagnosed disorder in the most current version of the Diagnostic and Statistical Manual (DSM) 2. Being under the influence of a stimulant (such as amphetamines or pitrates), depressant, hallucinogen, narcotic or any other drug intoxicant, including those prescribed by a physician that are misused by the insured person; except when resulting from a diagnosed disorder in the most current version of the DSM 3. Engaging in an assault, felony, illegal occupation or other criminal act 4. Any act of war, whether declared or not, or voluntary participation in a riot, rebellion or civil insurrection. **Financial Sanctions Exclusion** If coverage provided by this policy violates or will violate any US economic or trade sanctions, the coverage is immediately considered invalid. For example, Aetna companies cannot make payments or reimburse for health care or other claims or services if it violates a financial sanction regulation. This includes sanctions related to a blocked person or entity, or a country under sanction by the United States, unless permitted under a valid written Office of Foreign Assets Control (OFAC) license. For more information on OFAC, visit <http://www.treasury.gov/resource-center/sanctions/Pages/default.aspx>. **ATTENTION MASSACHUSETTS RESIDENTS:** As of January 1, 2009, the Massachusetts Health Care Reform Law requires that Massachusetts residents, eighteen (18) years of age and older, must have health coverage that meets the Minimum Creditable Coverage standards set by the Commonwealth Health Insurance Connector, unless waived from the health insurance requirement based on affordability or individual hardship. For more information call the Connector at 1-877-MA-ENROLL (1-877-623-6765) or visit the Connector website (www.mahealthconnector.org). THIS POLICY, ALONE, DOES NOT MEET MINIMUM CREDITABLE COVERAGE STANDARDS. If you have questions about this notice, you may contact the Division of Insurance by calling 1-617-521-7794 or visiting its website at www.mass.gov/doi.

Policy forms issued in Oklahoma include: GR-96843, GR-96844.

Policy forms issued in Idaho include: GR-96843.

Policy forms issued in Missouri include: GR-96844 01.

