

# OPEN ENROLLMENT

We are pleased to announce an enrollment opportunity for Supplemental Health Benefits with Transamerica, for all eligible employees during **Open Enrollment!** These benefits can help you pay out of pocket expenses which medical insurance may not cover. \*No Medical Questions Required\*

#### **CRITICAL ILLNESS WITH CANCER**

#### What if I get sick?

You can receive a Lump Sum Cash Benefit when diagnosed with a sample covered illness below:

Cancer / Heart Attack / Cardiac Arrest / Stroke / Major Organ Failure End-Stage Renal Failure / Coronary Artery Disease / Parkinson's Disease Loss of Sight, Speech or Hearing / Severe Burns / Multiple Sclerosis Paralysis / Alzheimer's / Lupus / Major Organ Transplant

#### What is the benefit amount?

You can elect benefit face amounts of \$10,000, \$20,000 or \$30,000. Coverage can be purchased for your Spouse and Dependents at 50% of your amount.

#### Are there any other benefits?

There is an Annual Wellness Benefit of \$50 per calendar year for these sample tests and screens:

Blood Test / Colonoscopy / Endoscopy / Pap Smear / EKG / Mammogram Routine Health Check Up Exam / Dental Exam / Eye Exam / Hearing Test Stress Test / Skin Cancer Biopsy / Oral Cancer Screening

## **HOSPITAL INDEMNITY PLAN**

### What if I get sick?

You can receive a Lump Sum Cash Benefit when admitted into the hospital for a covered injury/illness including pregnancy.

#### What is the benefit amount?

Initial Hospital Admission: \$750 x 3 per year, per covered person
Daily Hospital Stay: \$150 x 60 days per confinement
Initial Intensive Care Unit Admission: \$1,500 once per year, per covered person
Daily Hospital Intensive Care Unit Stay: \$150 x 60 days per year
Coverage can be purchased for your Spouse and Dependents

### Are there any other benefits?

There is an Annual Wellness Benefit of \$50 per calendar year for these sample tests and screens:

Blood Test / Colonoscopy / Endoscopy / Pap Smear / EKG / Mammogram Routine Health Check Up Exam / Dental Exam / Eye Exam / Hearing Test Stress Test / Skin Cancer Biopsy / Oral Cancer Screening

(You can use the above for BOTH Annual Wellness Benefits)





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# **CRITICAL ILLNESS with CANCER PLAN**

Covered Illness/Injury	% of Face Amount Benefit Payable to Employee	Covered Illness/Injury	% of Face Amount Benefit Payable to Employee
Invasive Cancer Carcinoma in Situ (Non-Invasive)	100% 25%	Loss of Sight, Speech or Hearing	100%
Heart Attack / Sudden Cardiac Arrest / Coronary Invasive / Carotid Artery Disease	100%	Childhood Benefits: Down Syndrome, Cystic Fibrosis, Cerebral Palsy, Cleft Lip/Palate (50%)	100%
Stroke Transient Ischemic Attack	100% 10%	Multiple Sclerosis / Parkinson's Disease	100%
Bone Marrow Transplant / Alzheimer's Disease / Amyotrophic Lateral Sclerosis (ALS)	100%	Cerebral, Abdominal, Thoracic Aortic, Renal Aneurysm	25%
Coronary Artery Bypass Graft / Surgery	25%	Severe Burns	100%
Coronary Artery Angioplasty & Stent Insertion	10%	Paralysis	Up to 100%
Major Organ Transplant / End Stage Renal Failure	100%	Lupus, Primary Sclerosing Cholangitis, Benign Brain or Spinal Cord Tumor, Anthrax, Cholera, Bacterial Meningitis, Lupus	
Separate Skin Cancer Initial Recurrent	\$750 \$375		





## **HOSPITAL INDEMNITY PLAN**

Benefit	Payable Benefit to Employee	
Initial Hospital Admission	\$750 x 3 per year, per covered person	
Daily Hospital Stay	\$150 x 60 days per confinement; Waiver of Observation Unit Exclusion	
Initial Intensive Care Unit Admission	\$1,500 once per year, per covered person	
Daily Hospital Intensive Care Unit Stay	\$150 x 60 days per year	
Pre-Existing Condition Limitation / Waiting Period	None	

For more questions, please contact:
TriBen Insurance 888-264-2147 Extension 6

