

Critical Illness Benefit Summary

Group Number: 00073733

A Critical Illness insurance plan through Guardian provides:

- A cash benefit for a range of covered serious illnesses such as Cancer, Stroke and Heart Attack, in addition to whatever your medical insurance may cover
- Payments are made directly to you and can be used for any purpose

About Your Benefits:

CRITICAL ILLNESS

Benefit Amount(s) Employee may choose a lump sum benefit up to \$30,000. Please see your cost illustration for a full list of available benefit amounts.

CONDITIONS

Cancer

	1st OCCURRENCE	2nd OCCURRENCE
Invasive Cancer	100%	100%
Carcinoma In Situ	30%	0%
Benign Brain or Spinal Tumor	100%	0%
Skin Cancer	\$250	\$0
BRCA 1 & BRCA 2	30%	Not Covered
Bone Marrow Failure (including Stem Cells)	100%	100%

Lung and Vascular Disorder

Aneurysm	10%	0%
Pulmonary Embolism	30%	0%
Stroke – Moderate	50%	50%
Stroke – Severe	100%	100%
Transient Ischemic Attack (TIA)	10%	0%

Heart Conditions

Coronary Artery Disease	10%	0%
Coronary Artery Disease – bypass needed	50%	0%
Heart Attack	100%	100%
Heart Failure	100%	100%
Pacemaker	10%	0%

Additional Conditions

Kidney Failure	100%	100%
Major Organ Failure	100%	100%
1st OCCURRENCE ONLY		
Addison's Disease	30%	
Coma	100%	
Loss of Hearing	100%	
Loss of Sight	100%	
Loss of Speech	100%	
Permanent Paralysis	100% for 1 or more limbs	
Severe Burns	100%	

Benefit information illustrated within this material reflects the plan covered by Guardian as of 11/12/2024

ALL OTHER FULL TIME EMPLOYEES Benefit Summary

The Guardian Life Insurance Company of America, New York, NY

Chronic Disorders

Crohn's Disease	30%
Epilepsy	10%
Lupus	30%
Ulcerative Colitis	30%

Neurological Disorders

Alzheimer's Disease – Early	50%
Alzheimer's Disease – Advanced	100%
ALS (Lou Gehrig's Disease)	100%
Dementia – other causes	100%
Huntington's Disease	30%
Multiple Sclerosis – Early	50%
Multiple Sclerosis – Advanced	100%
Myasthenia Gravis	30%
Parkinson's Disease – Early	50%
Parkinson's Disease – Advanced	100%

Childhood Illnesses and Disorders

Autism Spectrum Disorder	100%
Cerebral Palsy	100%
Cleft Lip/Cleft Palate	100%
Club Foot	100%
Congenital Heart Defect	100%
Cystic Fibrosis	100%
Diabetes – Type I	100%
Down Syndrome	100%
Hemophilia	100%
Multisystem Inflammatory Disease (MIS)	100%
Muscular Dystrophy	100%
Spina Bifida	100%

Spouse/Domestic Partner Benefit

May choose a lump sum benefit up to \$15,000. Please see your cost illustration for a full list of available benefit amounts.

Child Benefit- children age Birth to 26 years

50% of employee's lump sum benefit

Guarantee Issue: The 'guarantee' means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when you sign up for coverage during the initial enrollment period or the annual open enrollment period.

We Guarantee Issue up to: **\$30,000**

For a spouse:
\$ 15,000

For a child: All Amounts

Health questions are required if the elected amount exceeds the Guarantee Issue.

Portability: Allows you to take your Critical Illness coverage with you if you terminate employment.

Included

Pre-Existing Condition Limitation: A pre-existing condition includes any condition for which you, in the specified time period prior to coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.

Not Applicable

Waiver of Premium: If you become disabled due to a covered critical illness that is diagnosed after the employee's effective date, and you remain disabled for 90 days, we will waive the premium due after such 90 days for as long as you remain disabled.

Included

Condition Definitions

- BRCA1 or BRCA2 Mutation: occurs the date you're scheduled to undergo a mastectomy, or ovary or fallopian tube removal prior to a breast or ovarian cancer diagnosis as a preventive measure.
- Stroke - Moderate: requires clinical evidence of infarction of brain tissue, or intracranial or subarachnoid hemorrhage.
- Stroke - Severe: a permanent neurological deficit which persists at least 30 days after the event.
- Coronary Artery Disease: requires a diagnosis and severity level that requires one or more of the following procedures: atherectomy (rotation or laser), balloon angioplasty, laser angioplasty, stent implantation, thrombectomy (angiojet).
- Coronary Artery Disease - requiring a bypass: requires a diagnosis to be of such a severity that it requires one or more coronary artery bypass grafts.
- Heart Failure: requires a heart valve replacement or acceptance into the heart transplant waiting list.
- Kidney Failure: occurs on the earlier date of when renal or peritoneal dialysis begins, or the date you're accepted onto the kidney transplant waiting list of a recognized kidney transplant program in the United States.
- Major Organ Failure: occurs on the date you're accepted onto the liver, pancreas or lung transplant waiting list of a recognized transplant program in the United States.
- Crohn's Disease: benefit is available for the initial diagnosis of the disease, not the periodic flare-ups that may occur after the initial diagnosis.
- Epilepsy: requires initial diagnosis after at least two seizures, which are 24 hours apart and have no known trigger.
- Lupus: requires at least four symptoms be present at time of diagnosis. The benefit is available for initial diagnosis of the disease, not for periodic flare-ups that may occur after the initial diagnosis.
- Ulcerative Colitis: benefit is available for the initial diagnosis based on the results of a colonoscopy, not for periodic flare-ups that may occur after the initial diagnosis.
- Early-Stage Alzheimer's Disease: occurs on the date a physician diagnoses the progression which causes a loss of cognitive ability and functioning.
- Advanced Alzheimer's Disease: occurs on the date a physician diagnoses the cognitive decline to have progressed to the point that there's permanent inability to perform 2 or more Activities of Daily Living.
- Early-Stage Multiple Sclerosis (MS): must be diagnosed by a physician and confirmed by neurological exams, imaging studies, and analysis of cerebrospinal fluid.
- Advanced Stage Multiple Sclerosis (MS): requires neurological deficits for at least six months and confirmed by neurological exams, imaging studies, and analysis of cerebrospinal fluid.
- Early-Stage Parkinson's Disease: occurs on the date diagnosed by a physician with at least 1 symptom(s) affecting movement and the central nervous system.
- Advanced Parkinson's Disease: occurs on the date diagnosed by a physician and requires at least 3 or more symptom(s) affecting movement and the central nervous system.

Critical Illness Cost Illustration

To determine the most appropriate level of coverage, you should consider your current basic monthly expenses and expected financial needs during a Critical Illness.

Spouse/DP coverage premium is based on Employee age

Child cost is included with employee election.

Employee	Semi-monthly Premiums Displayed					
	< 30	30-39	40-49	50-59	60-69	70+
\$10,000	\$2.90	\$4.80	\$9.00	\$16.05	\$23.35	\$39.50
\$20,000	\$5.80	\$9.60	\$18.00	\$32.10	\$46.70	\$79.00
\$30,000	\$8.70	\$14.40	\$27.00	\$48.15	\$70.05	\$118.50
Benefit Amount Up To 50% of Employee Amount to a Maximum of \$15,000						
Spouse						
\$5,000	\$1.45	\$2.40	\$4.50	\$8.03	\$11.68	\$19.75
\$10,000	\$2.90	\$4.80	\$9.00	\$16.05	\$23.35	\$39.50
\$15,000	\$4.35	\$7.20	\$13.50	\$24.08	\$35.03	\$59.25

Manage Your Benefits:

Go to www.GuardianAnytime.com to access secure information about your Guardian benefits. Your on-line account will be set up within 30 days after your plan effective date.

Need Assistance?

Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 PM, EST. Refer to your member ID (social security number) and your plan number: 00073733.

ALL OTHER FULL TIME EMPLOYEES Benefit Summary

The Guardian Life Insurance Company of America, New York, NY

EXCLUSIONS AND LIMITATIONS

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS FOR CRITICAL ILLNESS:

We will not pay benefits for a Second occurrence (recurrence) of a Critical Illness unless the Covered Person has not exhibited symptoms or received care or treatment for that Critical Illness for at least 6 months in a row prior to the recurrence. For purposes of this exclusion, care or treatment does not include: (1) preventative medications in the absence of disease; and (2) routine scheduled follow-up visits to a doctor. If one illness causes or contributes to another illness, we'll pay benefits for only one of these illnesses. We'll pay for the illness that has the larger benefit. If the benefit amounts for the illness are the same, we'll let you choose which one we pay.

We do not pay benefits for claims relating to a covered person: taking part in any war or act of war (including service in the armed forces) committing a felony or taking part in any riot or other civil disorder or intentionally injuring themselves or attempting suicide while sane or insane.

Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding 1 year; or (b) in an area under travel warning by the US Department of State, subject to state specific variations.

This document is a summary of the major features of the referenced insurance coverage. It is intended for illustrative purposes only and does not constitute a contract. The insurance plan documents, including the policy and certificate, comprise the contract for coverage. The full plan description, including the benefits and all terms, limitations and exclusions that apply will be contained in your insurance certificate. The plan documents are the final arbiter of coverage. Coverage terms may vary by state and actual sold plan. The premium amounts reflected in this summary are an approximation; if there is a discrepancy between this amount and the premium actually billed, the latter prevails.

Guardian's Critical Illness plan does not provide comprehensive medical coverage. It is a basic or limited benefit and is not intended to cover all medical expenses. It does not provide "basic hospital," "basic medical," or "medical" insurance as defined by the New York State Insurance Department.

Health questions are required on late enrollees. This coverage will not be effective until approved by a Guardian underwriter.

This policy will not pay for a diagnosis of a listed critical illness that is made before the insured's Critical Illness effective date with Guardian.

The policy has exclusions and limitations that may impact the eligibility for or entitlement to benefits under each covered condition. See your certificate booklet for a full listing of exclusions & limitations.

If Critical Illness insurance premium is paid for on a pre tax basis, the benefit may be taxable. Please contact your tax or legal advisor regarding the tax treatment of your policy benefits.

Contract # CI – 23 - P