



APPLICATION

for **FIRST DIAGNOSIS** Cancer Insurance Plan

Underwritten by Monumental Life Insurance Company
Cedar Rapids, Iowa

Name: _____

Address: _____

City/State/Zip: _____

CA1000GPM

PLEASE COMPLETE THE FOLLOWING INFORMATION:

Yes! I want the First Diagnosis Cancer Insurance Plan with a benefit of \$10,000.00 if I am diagnosed with cancer. Please activate my coverage as soon as possible.

Date of Birth / /

Male Female

Are you or any dependents eligible for Medicare? Yes No

Telephone ()

Yes! I want to protect my family, too!

Spouse's Full Name

Date of Birth / /

I elect to be billed (if you do not select one of these options, we will bill you quarterly):

- Quarterly
- Semi-Annually
- Annually

Amount Enclosed \$ _____

Make Check Payable to: Monumental Life Insurance Company

NOTE: Please be sure to sign on back.

FIRST DIAGNOSIS CANCER PLAN MONTHLY COST:

Please check the coverage you want:

Choose One	Member Only	Member and Spouse
First Diagnosis Plan	<input type="checkbox"/> \$ 13.16/month	<input type="checkbox"/> \$ 21.04/month

PLEASE READ AND SIGN BELOW:

I hereby represent that to the best of my knowledge and belief, no person to be insured under this policy has received treatment* or been medically advised of Cancer (excluding Skin Cancer) Leukemia or Hodgkin's Disease, within the last 5 years.

*Treatment means medical and surgical care by a licensed provider to detect or cure Cancer. This includes examination, diagnostic procedures, surgery (including pre- and post-operative care), prescribed medication, and the application of remedies and therapy. It does not include any diagnostic procedures or examinations performed to monitor a previous removal or remedy of Cancer, provided there is no positive diagnosis of Cancer or of a recurrence of Cancer.

(Over, please)

It is understood that no benefits will be payable for expenses incurred during the first 12 months of coverage for any cancer diagnosed or treated within the first 30 days after the insured person's effective date of coverage (not applicable to the residents of WI).

Your coverage will be effective on the first day of the month following acceptance of your Application, provided your first premium is paid and you are not hospital confined on that date.

Are you or any dependents eligible for Medicare? Yes No

Applicant's Signature X _____

Date ____ / ____ / ____

Spouse's Signature (if applying) X _____

Date ____ / ____ / ____

Mail your completed Application Form and check or money order for initial payment in the enclosed postage-paid envelope or send to:

National Employee Benefit Companies, Inc. • P.O. Box 153085, Irving, Texas 75015-3085

IMPORTANT NOTICE TO PERSONS ON MEDICARE

This policy or certificate duplicates some Medicare Benefits

THIS IS NOT A MEDICARE SUPPLEMENT INSURANCE POLICY

This policy or certificate provides limited benefits, if you meet the policy conditions, for hospital and medical expenses only when you are treated for one of the specific diseases or health conditions listed in the policy or certificate. It does not pay your medicare deductibles or coinsurance and is not a substitute for a Medicare supplement insurance policy.

This policy or certificate duplicates Medicare benefits when it pays:

Hospital or medical expenses up to the maximum stated in the policy.

Medicare generally pays for most or all of these expenses.

Medicare pays extensive benefits for medically necessary services (regardless of the reason you need them).

These include:

- hospitalization
- physician services
- hospice
- other approved items and services.

Before You Buy This Policy:

Check the coverage in all health insurance policies you already have.

For more information about Medicare and Medicare supplement insurance, review the *Guide to Health Insurance for People with Medicare*, available from the insurance company.

For help in understanding your insurance, contact your state insurance department or state senior insurance counseling program.

A SHOPPER'S GUIDE TO CANCER INSURANCE

Should You Buy Cancer Insurance?

Cancer Insurance is Not a Substitute for Comprehensive Coverage.

Caution: Limitations On Cancer Insurance.

Prepared by the National Association of Insurance Commissioners

CANCER INSURANCE ...

Cancer insurance provides benefits only if you get cancer. No policy will cover cancer diagnosed before you applied for the policy. Examples of other specified disease policies are heart attack or stroke policies. The information in this booklet applies to cancer insurance, but could very well apply to other specified disease policies.

CANCER INSURANCE IS NOT A SUBSTITUTE FOR COMPREHENSIVE COVERAGE ...

Cancer treatment accounts for about 10% of U.S. health expenses. In fact, no single disease accounts for more than a small proportion of the American public's health care bill. This is why it is essential to have insurance coverage for all conditions, not just cancer.

If you and your family are not protected against catastrophic medical costs, you should consider a major medical policy. These policies pay a large percentage of your covered costs after a deductible is paid either by you or your basic insurance. They often have very high maximums, such as \$100,000 to \$1,000,000. Major medical policies will cover you for any accident or sickness, including cancer. They cost more than cancer policies because they cover more, but they are generally considered a better buy.

SHOULD YOU BUY CANCER INSURANCE? ... MANY PEOPLE DON'T NEED IT

If you are considering cancer insurance, ask yourself three questions: Is my current coverage adequate for these costs? How much will the treatment cost if I do get cancer? How likely am I to contract the disease?

If you have Medicare and want more insurance, a comprehensive Medicare supplement policy is what you need.

Low income people who are Medicaid recipients don't need any more insurance. If you think you might qualify, contact your local social service agency.

Duplicate Coverage is Expensive and Unnecessary. Buy basic coverage first such as a major medical policy. Make sure any cancer policy will meet needs not met by your basic insurance. You cannot assume that double coverage will result in double benefits. Many cancer policies advertise that they will pay benefits no matter what your other insurance pays. However, your basic policy may contain a coordination of benefits clause. That means it will not pay duplicate benefits. To find out if you can get benefits from both policies, check your regular insurance as well as the cancer policy.

Some Cancer Expenses May Not Be Covered Even by a Cancer Policy. Medical costs of cancer treatment vary. On the average, hospitalization accounts for 78% of such costs and physician services make up 13%. The remainder goes

for other professional services, drugs and nursing home care. Cancer patients often face large nonmedical expenses which are not usually covered by cancer insurance. Examples are home care, transportation and rehabilitation costs.

Don't be Misled by Emotions. While three in ten Americans will get cancer over a lifetime, seven in ten will not. In any one year, only one American in 250 will get cancer. The odds are against your receiving any benefits from a cancer policy. Be sure you know what conditions must be met before the policy will start to pay your bills.

CAUTION: LIMITATIONS OF CANCER INSURANCE

Cancer policies sold today vary widely in cost and coverage. If you decide to purchase a cancer policy, contact different companies and agents, and compare the policies before you buy. Here are some common limitations:

Some policies pay only for hospital care. Today cancer care treatment, including radiation, chemotherapy and some surgery, is often given on an outpatient basis. Because the average stay in the hospital for a cancer patient is only 13 days, a policy which pays only when you are hospitalized has limited value.

Many policies promise to increase benefits after a patient has been in the hospital for 90 consecutive days. However, since the average stay in a hospital for a cancer patient is 13 days, large dollar amounts for extended benefits have very little value for most patients.

Many cancer insurance policies have fixed dollar limits. For example, a policy might pay only up to \$1,500 for surgery costs or \$1,000 for radiation therapy, or it may have fixed payments such as \$50 or \$100 for each day in the hospital. Others limit total benefits to a fixed amount such as \$5,000 or \$10,000.

No policy will cover cancer diagnosed before you applied for the policy. Some policies will deny coverage if you are later found to have had cancer at the time of purchase, even if you did not know it.

Most cancer insurance does not cover cancer-related illnesses. Cancer or its treatment may lead to other physical problems, such as infection, diabetes or pneumonia.

Many policies contain time limits. Some policies require waiting periods of 30 days or even several months before you are covered. Others stop paying benefits after a fixed period of two or three years.

FOR ADDITIONAL HELP ...

If you are considering a cancer policy, the company or agent should answer your questions. You do not need to make a decision to purchase the policy the same day you talk to the agent. Be sure to ask how long you have to make your decision. If you do not get the information you want, call or write Office of the Commissioner of Insurance, 121 East Wilson Street, P.O. Box 7873, Madison, WI 53707-7873, (608) 266-0103

If you have a complaint against an insurance company or agent, write the Office of the Commissioner of Insurance at the address above, or call the Complaints Hotline, 800-236-8517.