

CRITICAL ILLNESS INSURANCE COVERAGE THE POLICY PROVIDES LIMITED BENEFITS

BENEFITS PROVIDED ARE SUPPLEMENTAL AND ARE NOT INTENDED TO COVER ALL MEDICAL EXPENSES

OUTLINE OF COVERAGE

This coverage is designed only as a supplement to a comprehensive health insurance policy and should not be purchased unless you have this underlying coverage. Persons covered under Medicaid should not purchase it.

Read Your Policy Carefully — This outline of coverage provides a very brief description of the important features of coverage. This is not the insurance contract and only the actual policy provisions will control. The Policy itself sets forth in detail the rights and obligations of both the Owner ("You" or "Your") and Colorado Bankers Life Insurance Company ("We", "Our" or "Us"). It is, therefore, important that you READ YOUR POLICY CAREFULLY!

Critical Illness coverage is designed to provide, to persons insured, restricted coverage paying benefits ONLY when certain losses occur as a result of critical illnesses. Coverage is not provided for basic hospital, basic medical-surgical, or major medical expenses.

A. DESCRIPTION OF BENEFITS

1. Eligibility.

To be eligible for critical illness benefits under the Policy:

- (a) A Covered Person:
 - (1) must be Diagnosed with a Covered Condition,
 - (2) after the Waiting Period (see **Section C.1**), and while the Policy is in force, and satisfy the other rules under the Policy; and
- (b) A Request for benefits that complies with all of the rules for filing such a claim must be made to Us.

2. Benefit Amount for each Covered Condition.

- (a) Skin Cancer
A specific dollar amount is payable for Skin Cancer. This amount is shown in **Section B**.
- (b) Covered Conditions other than Skin Cancer
 - (1) Initial Occurrence
The amount payable for the Initial Occurrence of a Covered Condition other than Skin Cancer is the percentage of the Benefit Amount for the Covered Person, as shown for that Covered Condition in **Section B**.
The Primary Insured's Benefit Amount is shown in the application. The Insured Spouse's Benefit Amount is the same as the Primary Insured's

Benefit Amount. Each Insured Child's Benefit Amount is 25% of the Primary Insured's Benefit Amount.

Each Covered Persons' Critical Illness Insurance Benefit Amount decreases by 35% of the Benefit Amount at such Covered Person's age 65 and decreases an additional 15% of the Benefit Amount at such Covered Person's age 70. Premium is not reduced as a result of these decreases.

(2) Additional Occurrences

The amount payable for an Additional Occurrence of a Covered Condition other than Skin Cancer, after an Initial Occurrence, is the percentage of the Benefit Amount for the Covered Person as shown for that Covered Condition in **Section B**, adjusted using the following rules.

- (i) The amount payable for each Additional Occurrence will be reduced, if necessary, so that the amount payable for it, when added to prior Covered Conditions which have been paid or are payable, does not exceed 150% of the Benefit Amount for the Primary Insured.

The Policy is marketed under the Dearborn National® brand and the star logo and is underwritten by Colorado Bankers Life Insurance Company.

- (ii) Adjustments under **A.2(b)(2)(i)** above, are not affected by, and do not affect or apply to, the Skin Cancer benefit.

3. Other Eligibility and Benefit Amount Rules.

Benefits are payable only once for each Covered Condition. If one Covered Condition is caused by or contributes to another Covered Condition, We will pay only one benefit. The benefit payable will be the larger of the two. The total amount payable for an Initial Occurrence of a Covered Condition and all Additional Occurrences will not be greater than 150% of the Benefit Amount for any Covered Person. A detailed example of this payout is provided at the end of this Outline of Coverage.

Upon payment of 150% of the Benefit Amount for a Covered Person, such Covered Person's insurance will terminate. This is true even if the Skin Cancer benefit was never paid for such Covered Person.

B. AMOUNT PAYABLE FOR EACH COVERED CONDITION

1. Covered Conditions eligible for 100% of the Benefit Amount, as reduced by any prior amounts paid.

- (a) End Stage Renal Failure
- (b) Heart Attack
- (c) Invasive Cancer
- (d) Major Organ Transplant
- (e) Stroke
- (f) Terminal Illness

2. Covered Conditions eligible for 25% of the Benefit Amount, as reduced by any prior amounts paid.

- (a) Carcinoma in Situ
- (b) Major Heart Surgery

3. Covered Conditions eligible for 10% of the Benefit Amount, as reduced by any prior amounts paid.

- (a) Coronary Angioplasty

4. Skin Cancer Benefit.

The amount payable for Skin Cancer equals:
\$250.00 for the Primary Insured
\$250.00 for the Insured Spouse
\$75.00 for each Insured Child.

C. EXCLUSIONS AND LIMITATIONS

1. Waiting Period.

A loss for Invasive Cancer, Carcinoma in Situ or Skin Cancer, otherwise insured by the Policy, is not covered if it is Diagnosed within the 90 Day Cancer Waiting Period after the Covered Person's Coverage Start Date. A loss for any other Covered Condition otherwise insured by the Policy is not covered if it is Diagnosed within the 30 Day Non-Cancer Waiting Period after the Covered Person's Coverage Start Date.

2. Limitations.

No benefits will be payable for a Covered Condition if it results from any of the following:

- (a) being intoxicated or under the influence of alcohol, drugs or any narcotic (other than under the direction

of a Legally Qualified Physician);

- (b) suicide or injuries intentionally self-inflicted, whether sane or insane;
- (c) injury received during active participation in a riot or insurrection; or
- (d) the Covered Person's participation or attempted participation in a felony or illegal occupation.

D. GUARANTEED RENEWABLE FOR LIFE

You may keep the Policy in force by paying all premiums as due. Your premium can be changed if We change the premium on all policies in Your Policy's premium class.

E. PREMIUM

Premium is due in advance. We allow a 31-day grace period for payments of every premium after the first premium payment.

F. GENERIC ILLUSTRATION

Here is a detailed example showing how payment of an Initial Occurrence and multiple Additional Occurrence benefits would impact the Benefit Amount.

If the Primary Insured was Diagnosed with Carcinoma in Situ after the Waiting Period and the Primary Insured met the conditions of the Policy, We would pay 25% of the Benefit Amount. Thereafter, no more than a total of 125% of the Benefit Amount would be payable for any Additional Occurrences of a Covered Condition, other than Skin Cancer.

If the Primary Insured later was Diagnosed with Heart Attack and met all of the conditions of the Policy, We would pay 100% of the Benefit Amount. Thereafter, no more than a total of 25% of the Benefit Amount would be payable for any Additional Occurrences of a Covered Condition, other than Skin Cancer.

If the Primary Insured was then Diagnosed with Invasive Cancer and met all of the conditions of the Policy, We would pay 25% of the Benefit Amount, as that would be all that remains and the Policy would terminate.