

Critical Illness Insurance

**BE PREPARED
FOR THE
UNEXPECTED**



Frequently Asked Questions

What is Critical Illness Insurance?

Critical Illness Insurance — **issued by The Prudential Insurance Company of America** — pays a lump-sum benefit amount, directly to the insured, upon the occurrence of a specified covered condition. The benefit can be used for any purpose, including to help any out-of-pocket medical expenses or non-medical expenses.

I already have comprehensive medical insurance and disability insurance coverages. Isn't this the same thing?

No. Critical Illness Insurance is not a comprehensive medical insurance or disability insurance coverage. This coverage does not replace those coverages or pay benefits in the same way. With Critical Illness Insurance, you receive a lump-sum benefit that can be spent however you like.

Must I use my lump-sum benefit only to pay medical bills?

No. There are no restrictions, and you do not have to account for how you spend the benefit. For example, you could help pay for co-pays/co-insurance, prescriptions, or treatments not covered by your health insurance. Or, if you or your spouse cannot work due to your covered condition, you could use these funds to help pay for day-to-day living expenses. Maybe you need to pay for child care or elder care, or for someone to do the cleaning, shopping, or home maintenance you would normally do.

How can I obtain Critical Illness Insurance?

AFSPA is pleased to offer a valuable coverage as part of your overall benefits package. Coverage is 100% member paid and available at affordable, age-banded rates. Proof of good health satisfactory to Prudential will be required.

What are the criteria for how benefits are paid?

To receive a benefit, all that is needed is a diagnosis. Proof of Critical Illness diagnosis satisfactory to Prudential will be required. There is no need to undergo treatment or provide proof of any expenses incurred as benefits are paid as a lump sum based on the elected level of coverage at the time the claim is approved.

Frequently Asked Questions (Cont'd)

What conditions are covered?

Benefits are payable when a covered person is diagnosed with a Critical Illness for the first time while a covered person, and that diagnosis occurs during the covered person's lifetime.

Invasive Cancer	100%
Heart Attack	100%
Major Organ Transplant	100%
Stroke	100%
Renal Failure	100%
Cancer in Situ	25%
Coronary Artery Bypass Surgery	25%

Do I have to answer medical questions to get this coverage?

You do have to answer a few medical questions and provide evidence of insurability for the Critical Illness Insurance.

Who is eligible for this coverage?

AFSPA members under age 65 are eligible to enroll for Critical Illness insurance. Members can also enroll their dependent spouses / domestic partners under age 65, as well as their dependent children under age 26. To be eligible to enroll, Members and their enrolling dependents must be participating in a medical plan to be eligible for critical illness insurance.

How much coverage can I get?

Members can enroll for Critical Illness benefit amounts from \$10,000 to \$100,000, in \$10,000 increments.

Is membership required?

Yes, membership is required to be eligible to enroll for this insurance.

Who receives the benefits?

Critical Illness benefits are payable directly to you, as per the terms of the policy.

How soon will my coverage begin?

Coverage is effective the 1st of the month following approval of your enrollment, subject to payment of the required premium contributions.

How do I enroll?

To enroll for this insurance, visit our online site to enroll at afspa.org/criticalillness or call 202-833-4910.

Do I have to pay my first premium when I enroll?

No premium contribution is required at time of enrollment. Your first premium contribution will be due following approval of your enrollment request.

Frequently Asked Questions (Cont'd)

What are the Plan Limitations?

The Critical Illness benefit amount will reduce from the amount in-force at age 64, to 65% at age 65; to 50% at age 70; and to 25% at age 75. Coverage terminates at age 80.

- Heart Attack does not include:
 1. heart attack that occurs during a surgical procedure;
 2. other acute coronary syndromes, including but not limited to angina; or
 3. heart attack due to either alcohol or drug abuse.
- The following are not Invasive Cancer:
 1. all cancers which are histologically classified as any of the following: pre-malignant, non-invasive, cancer in situ, borderline malignancy or low potential malignancy;
 2. all tumors of the prostate unless histologically classified as having a Gleason score of 7 or greater or having progressed to at least clinical TNM classification T2N0M0;
 3. chronic lymphocytic leukemia unless histologically classified as having progressed to at least Rai Stage II or above;
 4. any skin cancer other than malignant melanoma; or
 5. malignant melanomas classified as T1N0M0, for which a pathology report shows maximum thickness less than or equal to 1.0 millimeters using the Breslow method of determining tumor thickness.
- Major Organ Transplant means the undergoing as a recipient of a human-to-human transplant of bone marrow or of a complete heart, kidney, liver, lung or pancreas, or inclusion on the Organ Procurement and Transplantation Network waiting list for such a procedure. It does not include the transplant of any other organs, parts of organs, stem cells, tissues or cells.
- Liver Failure does not include disease due to:
 1. Alcohol;
 2. Drug abuse;
 3. Drug overdose (including, but not limited to, over-the-counter drugs); or
 4. Any hepatitis.
- Renal Failure does not include renal failure due to diabetes mellitus or hypertension.
- Stroke does not include transient ischemic attacks (“TIA”).

Frequently Asked Questions (Cont'd)

What is not covered by this plan?

General Exclusions: A Critical Illness or Procedure is not covered if it is caused by, contributed to by, or resulting from, directly or indirectly, any of these:

1. Attempted suicide, while sane or insane.
2. Intentionally self-inflicted injuries, or any attempt to inflict such injuries.
3. Travel or flight in any vehicle used for aerial navigation. This includes getting in, out, on or off any such vehicle. This does not apply if the person is riding as a fare paying passenger in an licensed aircraft provided by a common carrier and operating between definitely established airports.
4. Commission of a crime for which the covered person has been convicted under state or federal law.
5. Being under the influence of alcohol, or alcohol intoxication, as defined by the laws of the jurisdiction in which the Critical Illness occurred. Conviction is not required for a determination of being intoxicated.
6. Being under the influence or taking any drug, medication, narcotic, hallucinogen, barbiturate, amphetamine, gas or fumes, poison or any other controlled substance as defined in Title II of the Comprehensive Drug Abuse Prevention and Controls Act of 1970, as now or hereafter amended, unless prescribed by and administered in accordance with the advice of the covered person's doctor.

Critical Illness coverage is not comprehensive health insurance coverage (often referred to as "Major Medical Coverage").

It does not satisfy the individual mandate of the Affordable Care Act. It does not meet the requirements of minimum essential coverage as defined by federal law.

Group Critical Illness Insurance coverage is a limited benefit policy issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ. Prudential's Critical Illness Insurance is not a substitute for medical coverage that provides benefits for medical treatment, including hospital, surgical and medical expenses and does not provide reimbursement for such expenses. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions which may apply. If there is a discrepancy between this document and the Booklet-Certificate/Group Contract issued by The Prudential Insurance Company of America, the Group Contract will govern. A more detailed description of the benefits, limitations, and exclusions applicable are contained in the Outline of Coverage provided at time of enrollment. Please contact Prudential for more information. Contract provisions may vary by state. Contract Series: 114774.

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