

*Battling cancer can be physically and emotionally exhausting, but it doesn't have to take a toll on your finances. With **ASCE Group \$3,500 First Diagnosis Cancer Insurance**, you'll have access to the following benefits if you are diagnosed with cancer:*

- Yearly \$75 cash benefit for preventive cancer screening once every 12 months, available immediately with a diagnostic screening
- \$3,500 given to you the first time you are diagnosed with cancer (except skin cancer)
- Use cash benefits any way you like: to help pay for medical payments, travel, family—anything to help make your recovery easier and more comfortable
- \$50 a day for hospital stays 1st through day 90 of confinement per illness period.
- \$1,000 lifetime maximum for chemotherapy and radiation treatments (even on an outpatient basis)
- Acceptance is guaranteed, so long as you have not had cancer in the past 5 years (6 months in CA, 2 years in GA)*
- Benefits are paid directly to you or anyone you choose, regardless of any health insurance you already have
- You may also have benefits paid to the hospital or provider
- Portable coverage that stays with you no matter where you live or work, with benefits that don't reduce due to age

Who is eligible?

If you're an ASCE member between the ages of 18 and 75 (under age 65 in CA), you and your spouse (between the ages of 18 and 75 or under age 65 in CA) are eligible for this insurance coverage if you have not been medically

diagnosed with, treated for, or advised of cancer (except skin cancer) within the five years (6 months in CA, 2 years in GA) prior to the effective date of your coverage. Your dependent children are also eligible for coverage if they are under age 19 (under age 25 if a full-time student) and have not been medically treated for or advised of cancer (except skin cancer) within the five years (6 months in CA, 2 years in GA) prior to the effective date of your coverage.

How do these plans work?

Who selects the doctors and hospitals?

You will receive all the benefits for which you are eligible, regardless of what physician you see or what hospital you use. There are no restrictions as long as they meet the plan definitions.

How are benefits paid?

All benefit checks will be sent directly to you or anyone you choose—never to your doctor or hospital, unless specifically requested.

Are benefits paid regardless of any other coverage?

There is no coordination of benefits or co-payments with this plan. This is a supplemental plan that pays regardless of any other insurance you have with other companies.

When will coverage become effective?

Your coverage will become effective on the date shown on your Certificate of Insurance, provided you have paid your first premium and you (or any dependents to be insured) are not hospital-confined on that date. **This is a cancer-only policy.**

30-Day Free Look

When you become insured, you will be sent a Certificate of Insurance summarizing your insurance coverage. If you are not completely satisfied with the terms of your certificate, you may return it, without claim, within 30 days. Your coverage will be terminated and you will receive a full refund of premium—no questions asked!

*This is a supplemental health insurance plan that requires you to have major medical coverage, Medicare, or other health coverage that meets "minimum essential coverage" as defined by the Affordable Care Act.

What is my cost?

ONE RATE FOR ALL AGES MONTHLY PREMIUMS	
Individual Plan (you only)	\$12.95
Family Plan (you, your spouse, and your children)	\$19.95

Your payment options:

Please note: You also may have the option of paying your premiums once a year (annually), twice a year (semi-annually), or four times a year (quarterly). If you pay your premiums monthly, quarterly or semi-annually, the total amount of premiums and/or administration fees that you pay in a year may be higher than if you make one annual payment. If you are interested in learning more about these payment options, please refer to your fulfillment package for details

What isn't covered?

This plan pays benefits only for cancer treatment recommended and approved by or performed by a physician.

Exclusions

Benefits will not be paid under the policy and any attached rider for any expenses that result from:

1. Injury or sickness other than cancer
2. Treatment or services performed outside of the United States

Other insurance provided by this company: Only one certificate or policy providing cancer coverage may be in force as elected by the member. If any other certificate or policies previously issued by us or any other AEGON, U.S.A. affiliates are in force concurrently with the Certificate issued under this policy, the excess insurance will be void. All premiums paid for the excess will be returned to the insured.

Pre-existing Condition Limitation

A cancer for which treatment has been received before the covered person has been insured for 30 days from his or her effective date of coverage will be considered a pre-existing condition (except in AZ, MO, OK, TX, and WI). We will, however, make the payments for this cancer if the covered person incurs expenses after his or her insurance has been in effect for 12 months.

Rate change: We have the right to change the premium rates on any premium due date. The premium rates may also be changed at any time the terms of this Policy are Changes.

Certificate of Insurance: This brochure is only a brief description of the principal provisions and features of the ASCE Group \$3,500 First Diagnosis Cancer Insurance plan. The complete terms and conditions are set forth in the group policy issued by Monumental Life Insurance Company to the Trustee of the ASCE Group \$3,500 First Diagnosis Cancer Insurance plan.

When you become insured, you will be sent a Certificate of Insurance summarizing your benefits under the plan. In the event of any conflict or inconsistency between the information on this site and the information contained in the underlying plan documents, the plan documents will in all respects control and govern. If any provision is not explained or only partially explained, your rights will always be determined under the provisions of the underlying plan documents. Insurance coverage and availability may differ by state.

How do I apply?

Before you request coverage, you must be a member in good standing with ASCE. Please wait until your application for membership is accepted before applying for insurance. If you have any questions regarding membership, please contact ASCE directly. To apply for insurance, please download the application for the product you're interested in. You may fax your completed and signed application toll-free to **866.817.9009**, or send it via mail to:



ASCE Group Insurance Program Plan Administrator
1200 E. Glen Ave., Peoria Heights, IL 61616-5348

Important notice to persons on Medicare

THIS POLICY OR CERTIFICATE DUPLICATES SOME MEDICARE BENEFITS

This is not Medicare Supplement insurance.

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 Medicare Supplement insurance.

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 Insurance

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.

This Group \$3,500 First Diagnosis Cancer Insurance Plan is Underwritten by:

Transamerica Premier Life Insurance Company,
4333 Edgewood Road N.E.
Cedar Rapids, IA 52499

Marketed and Administered by:



PEARL INSURANCE®

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This brochure contains a brief description of the principal provisions and features of the Plan. The complete terms and conditions, including limitations and exclusions, are set forth in the Group Policy MZ0200581H0003A.

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A Notice About Transamerica Premier Life Insurance Company's Privacy Policy:

1. We do not sell your personal information to anyone.
2. We may collect nonpublic personal information about you from the following sources:
 - Information we receive from you on applications or other forms
 - Information about your transactions with us or our affiliates
3. We do not disclose any nonpublic personal information about you to either our affiliates or non-affiliates, except as permitted or required by law.
4. We restrict access to your nonpublic personal information to employees who need to know it in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards to protect your nonpublic personal information.

ASCE incurs certain administrative expenses in connection with this sponsored program. To provide and maintain this valuable membership benefit, it is reimbursed for such expenses.

For complete plan details, please contact the Plan Administrator, Pearl Insurance, at **800.650.2723**.