United Teacher Associates Insurance Company (UTA)



# First Diagnosis Cancer Benefit Policy



This brochure is designed as a marketing aid and is not to be construed as a contract for a Cancer policy. It provides a brief description of the important features of policy form series CF-960201-UTA.V2-TX Please refer to the policy and accompanying outline of coverage for the full terms and conditions of coverage.



UTA-7-0002-BRO-TX.V2 8/20/12

## **CANCER: Basic Facts**

## Who can get cancer?

According to the American Cancer Society, anyone can develop cancer. Since the risk of being diagnosed with cancer increases as individuals age, most cases occur in adults who are middleaged or older. About 78% of all cancers are diagnosed in persons 55 and older.

#### **CANCER:**

- In the US, men have a slightly less than a 1 in 2 lifetime risk of developing cancer and women have a little more than a 1 in 3 risk.
- The National Cancer Institute estimates that approximately 11.4 million Americans with a history of cancer were alive in January 2006.

Prostate 217,730 (28%) Lung & Bronchus 116.750 (15%) Colon & Rectum 72.090 (9%) Urinary Bladder 52,760 (7%) Melanoma of the Skin 38,870 (5%) Kidney & Renal Pelvis 35,370 (5%) Non-Hodgkin Lymphoma 35,380 (4%) Leukemia 24.690 (3%) Oral Cavity & Pharynx 25,240 (3%) Pancreas 21,370 (3%) All Sites

789.620 (100%)

Male

## **Leading Sites of New Cancer Cases\*** 2010 Estimates

\*Excludes basal and squamous cell skin cancers and in situ carcinoma except urinary bladder.

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Lung & Bronchus 105,770 (14%) Colon & Rectum 70.480 (10%) Uterine Corpus 43.470 (6%) Thyroid 33.930 (5%) Non-Hodgkin Lymphoma 30,160 (4%) Melanoma of the Skin 29,260 (4%) Kidney & Renal Pelvis 22,870 (3%) Ovary

**Female** 

Breast

207,090 (28%)

Pancreas 21.770 (3%) All Sites

739,940 (100%)

21,880 (3%)

- About 1,529,560 new cancer cases were expected to be diagnosed in 2010.
- This year, about 569,490 Americans are expected to die of cancer, more than 1,500 people a day.

#### How many people are surviving cancer?

The 5-year relative survival rate for all cancers diagnosed between 1999 and 2005 is 68%, up from 50% in 1975-1977. The improvement in survival reflects progress in diagnosing certain cancers at an earlier stage and improvements in treatment.

#### FACT...

The National Institutes of Health estimate overall costs of cancer in 2010 at \$263.8 billion, of which \$102.8 billion for direct medical costs (total of all health expenditures).

# **Here's the GOOD NEWS**

There are advanced treatments available to increase your chance of cancer survival. However, sometimes these advanced treatments are not available locally, and the cost of travel and care can be overwhelming. Couldn't you use all the money you can get if you're diagnosed with cancer?

## How would you pay for out-of-pocket cancer expenses?

Major Medical, HMO, Medicare, Medicaid, use your own assets or rely on your family?

## Transfer some of the Risk to UTA

Sources: American Cancer Society, Cancer Facts & Figures 2010, pages: 1-3. The above facts are based on U.S. population and are for information purposes only and do not imply coverage provided under this policy or endorsement of the American Cancer Society. The American Cancer Society does not endorse any product or service.

# First Diagnosis Cancer Benefit Policy

#### **BENEFITS**

The United Teacher Associates First Diagnosis Cancer Benefit Policy pays a maximum benefit amount due in cash¹ of between \$10,000 - \$50,000 on First Diagnosis of Internal Cancer or Malignant Melanoma.

#### You can select the lump sum payment benefit that best fits your needs:

\$50,000, \$40,000, \$30,000, \$25,000, \$20,000 or \$10,000

- The money comes directly to you unless assigned to your health care provider, all at one time in one lump sum payment.
- You know exactly how much coverage could be available for a covered claim — there are no surprises.
- · Guaranteed renewable for life.
- Coverage available for individual, single parent, or family.

- You may receive your total cash benefit whether or not you are hospitalized or receive treatment.
- Like all individual policies, continuous coverage even if you change jobs or retire.
- This policy pays regardless of any other existing coverage you may have.

#### **RIDERS**

# First Diagnosis Heart Attack & First Major Heart Surgery Rider<sup>2</sup>

(Rider Form Number RD-10501-FDH, max. issue age 64)

\$10,000-\$50,000 on first diagnosis of heart attack and first major heart surgery. If first major heart surgery is performed prior to the payment of the First Diagnosis Heart Attack Benefit, we will pay a First Major Heart Surgery Benefit equal to 20% of the First Diagnosis Heart Attack Benefit you select. The remaining 80% of the First Diagnosis Heart Attack Benefit will be payable upon a later first diagnosis of a heart attack under the terms of the rider.

#### Intensive Care Unit Benefit Rider<sup>2</sup>

(Rider Form Number RD-10203-ICU, Refer to Rate Booklet UTA-7-0005 for max. issue ages)

The optional Intensive Care Unit Benefit Rider pays for Intensive Care or Cardiac Intensive Care. When any covered person is confined to an intensive care unit as a result of any injury or sickness, we will pay the ICU charges not to exceed the maximum daily benefit amount you select:

\$600 per day or \$300 per day for confinement in Hospital Intensive Care Unit or Cardiac Intensive Care Unit. Coverage is from the first day for any accident and for any sickness not to exceed 30 days for each period of confinement. Benefits are reduced to one-half of the listed ICU Benefit Amount shown on the policy schedule for covered persons prior to attainment of age 1 and after attainment of age 65.

#### Cash Value Rider<sup>2</sup>

(Rider Form Number RD-40201-CV-TX)

You buy your protection today. After your policy has been in force for 20 years or at age 65, which ever occurs first, you receive a check for 100% of your original premiums paid, less any claims paid to you, unless surrendered prior to maturity.\*

After your money is returned, you can continue your policy and your premiums will be reduced by 50%.

Beginning with the sixth year, your cash value will begin to build up in the policy. The longer the policy is in force the more money you'll accumulate. Upon surrender of the policy or your death, you will receive a percentage of premiums paid, minus claims paid.

This rider is available through age 49 and is based on the policy owner's age at issue. This rider is not available with policies purchased as part of your Section 125 plan.

\* The Cash Value Benefit does not include premium for rate increases or policy upgrades.

### First Diagnosis Stroke Benefit Rider<sup>2</sup>

(Rider Form Number RD-STK10101-TX\_08.11.2011)

The First Diagnosis Stroke Benefit Rider pays the benefit amount selected upon First Diagnosis of Stroke. Select a lump sum of \$5,000, \$10,000, \$15,000, \$20,000 or \$25,000.

- 1 As listed in the policy schedule.
- 2 Optional riders available for additional premium

#### THIS IS A CANCER ONLY POLICY

RENEWABILITY CONDITIONS: The policy is guaranteed renewable. Premium rates may be changed on a class or state basis.

If this is a Single Parent plan or an Individual plan, upon the death of the Insured or the payment of the First Diagnosis Cancer Benefit Amount for the insured, the coverage ceases; we will refund the pro-rata portion of any premium paid. If this is a Family Plan, upon the death of the Insured or the payment of the First Diagnosis Cancer Benefit Amount for the Insured, the coverage will be changed to a Single Parent Plan. The Insured's spouse will become the Insured.

POLICY LIMITATIONS AND EXCLUSIONS: This policy provides benefits only for first diagnosis of internal cancer or malignant melanoma. This policy does not cover any other disease or sickness or incapacity. No benefit is payable for the diagnosis of skin cancer other than malignant melanoma. The First Diagnosis Cancer Benefit Policy contains a 30-day "waiting period." Cancer will not be a covered condition when any advice or treatment received within the Waiting Period, or prior to the Effective Date, leads to the First Diagnosis of Cancer. If Cancer is diagnosed during the Waiting Period, the Insured has the option to cancel the policy and receive a refund of any premiums paid.

Benefit amounts will not be paid for any diagnosis resulting from a pre-existing condition. A PRE-EXISTING CONDITION means a Cancer means a Cancer or covered disease for which diagnosis, advice or treatment is within the five (5) years prior to the Effective Date of the policy. No benefits will be payable during the first twelve (12) months that coverage is in force for a Pre-Existing Condition if the Effective Date is prior Your sixty-fifth (65th) birthday; unless specifically excluded from coverage by name or specific description. If You are age sixty-five (65) or over on the Effective Date of the policy, benefits for a Pre-Existing Condition will be excluded for six (6) months from the Effective Date of the policy, unless specifically excluded from coverage by name or specific description.

#### First Diagnosis Heart Attack & First Major Heart Surgery Rider

PRE-EXISTING CONDITION LIMITATIONS: No language in this policy shall be construed to cause a First Diagnosis Heart Attack Benefit or First Major Heart Surgery Benefit to be paid if there was a Pre-Existing Condition regardless of when a diagnosis is made. A First Diagnosis Heart Attack Benefit or First Major Heart Surgery Benefit will not be paid if there was a Pre-Existing Condition regardless of when a diagnosis or procedure is made.

#### First Diagnosis Stroke Benefit Rider

PRE-EXISTING CONDITION means a Cancer or covered disease for which diagnosis, advice or treatment is within the five (5) years prior to the Effective Date of the policy. No benefits will be payable during the first twelve (12) months that coverage is in force for a Pre-Existing Condition if the Effective Date is prior Your sixty-fifth (65th) birthday; unless specifically excluded from coverage by name or specific description. If You are age sixty-five (65) or over on the Effective Date of the policy, benefits for a Pre-Existing Condition will be excluded for six (6) months from the Effective Date of the policy, unless specifically excluded from coverage by name or specific description. This 12-month period is measured from the Effective Date of coverage for each Insured Person.

#### **EXCLUSIONS AND LIMITATIONS**

PRE-EXISTING CONDITION(S): The benefits of this Policy will not be payable during the first twelve (12) months that coverage is in force for a Pre-Existing Condition if the Effective Date is prior Your sixty-fifth (65th) birthday; unless specifically excluded from coverage by name or specific description. If You are age sixty-five (65) or over on the Effective Date of the policy, benefits for a Pre-Existing Condition will be excluded for six (6) months from the Effective Date of the policy, unless specifically excluded from coverage by name or specific description.

10-DAY right TO EXAMINE POLICY: you have 10 days to review the policy after you receive it. If for any reason you are not satisfied, you may return it to us for a full refund of the premium your paid.

