

Critical Illness insurance¹

Benefit Highlights

For all eligible employees of Ball Food Stores, Policy #900214

Effective date: January 1, 2018

If you are diagnosed with a covered condition—like a heart attack or stroke—critical illness insurance pays a lump sum benefit that can be used however you want. It helps reduce daily stress about money, so you can focus on getting better.

The following benefits are available to you. Depending upon your plan, the cost for Sun Life’s Critical Illness insurance could depend on the benefit amount, your age, and whether or not you use tobacco products.

This coverage is contributory, meaning that you are responsible for paying all or a portion of the cost

Choose the benefit that best meets your needs and your budget.

Benefit amount		
For you	For your spouse ²	For your child(ren)
You can elect from \$5,000 to \$25,000 of coverage—in increments of \$5,000—with no medical questions asked up to the Guaranteed Issue amount of \$25,000. ³	If you elect coverage for yourself, you can elect from \$5,000 to \$12,500 of coverage—in increments of \$2,500—with no medical questions asked up to the Guaranteed Issue amount of \$12,500. ³	If you elect coverage for yourself, you may elect (for each eligible child) \$5,000. An eligible child is defined as your child from birth to age 26.

Covered Critical Illness Conditions are listed on the next page.

Additional plan features

- This plan pays a \$100 wellness screening benefit each year once you provide proof of an eligible health screening. We’ll pay \$100 for a spouse screening too. The application for reimbursement is easy and includes common screenings, like certain blood tests for breast, prostate or colon cancer; Pap smear; skin cancer screening; Lipid panel (cholesterol, triglycerides, HDL, LDL); Diabetes test; Electrocardiogram (ECG). (List may vary by state.)

How Sun Life’s Critical Illness insurance can help

When John suffered a stroke in his mid-50s, he was unable to work and suddenly had additional medical expenses. Once his claim was approved, he used his cash benefit to help him:

- replace income while he was unable to work,
- pay for travel expenses for medical and physical therapy appointments, and
- cover out-of-pocket medical costs (e.g., co-pays or deductibles).

Having critical illness insurance allowed John to focus on his recovery and not his additional expenses.]



Covered Critical Illness Conditions

You will receive a payment after your coverage date if you are diagnosed with one of the below covered conditions and your claim is approved.

Payments are reflected below as a percentage of the benefit amount.

Covered conditions	The plan pays	Benefit waiting period
Core Conditions		
Heart Attack	100%	None
Stroke	100%	None
End-Stage Heart Failure	100%	None
Coronary Artery Disease*	25%	None
Cancer Conditions		
Cancer	100%	None
Non-Life Threatening Cancer*	25%	None
Other Conditions		
Benign Brain Tumor	100%	None
Coma	100%	None
Major Organ Failure	100%	None
Severe Burns	100%	None
Paralysis	100%	None
Childhood Conditions** Applies to dependent children only		
Cerebral Palsy	100%	None
Complex Congenital Heart Disease	100%	None
Cystic Fibrosis	100%	None
Type 1 Diabetes Mellitus	100%	None
Muscular Dystrophy	100%	None

A benefit is payable once for each covered condition, up to 100% payable for all covered conditions in the same category, not to exceed 200% of the total benefit payable for all covered conditions in all categories.

*Partial benefits (payable at 25%) may allow other covered conditions to be paid within the same category, up to the maximum for the category. In California, "Non-Life Threatening Cancer" is referred to as "Reduced Benefit Cancer."

**Dependent children are covered for each category/condition listed. Childhood conditions apply only if Dependent Child coverage is elected.]

Please read the Limitations and Exclusions sections of this document.

Critical Illness Q&A

Why should I consider Critical Illness insurance?

While health plans cover many of the direct costs associated with a critical illness, related expenses such as lost income, child care, travel to and from treatment, and high deductibles and co-pays may quickly diminish savings. Critical illness insurance pays a benefit if you are diagnosed with a covered condition after your coverage effective date. You may use the benefit however you see fit.

What happens if I get one of the conditions?

If you are diagnosed with a covered condition and your claim is approved, you will receive a lump sum payment. A benefit is payable once for each covered condition, up to 100% payable for all covered conditions in the same category, not to exceed 200% of the total benefit payable for all covered conditions in all categories.

- The diagnosis is a new event, not a re-diagnosis
- The 12-month waiting period between diagnoses requirement or the 12-month "cancer free" period requirement is satisfied



What if I have a pre-existing condition or I had one in the past?

For a period of time following the effective date of your insurance, we may not pay a benefit for a pre-existing condition for which you previously sought medical treatment, consultation, advice, care or services, regardless of whether the condition was diagnosed or suspected at that time; or took prescribed drugs or medicine. Read the exclusions and limitations for more information.

Do I have to answer health questions to enroll for coverage?

Not if you enroll when you are first eligible. If you request coverage after the enrollment date, you may need to fill out an "Evidence of Insurability" application that includes health questions. The application must be approved by Sun Life prior to coverage taking effect.

Can I take my insurance with me if I leave my employer?

Generally, yes. Depending upon your state, you may be offered to continue the group insurance coverage.^{4]}

How do I file a claim?

To file your claim, we need to receive information from you and your doctor about the specific medical condition. These forms may be downloaded from our website. Make sure to complete and sign all forms, as missing information or signatures can delay your claim.

Whom can I contact with questions about my coverage?

After the effective date of your coverage, contact our Customer Service representatives at 800-247-6875, 8:00 a.m. to 8:00 p.m. ET, Monday through Friday.

Important plan provisions

Limitation and exclusions*

In addition to the exclusions stated in the covered conditions section of the certificate, we will not pay any benefit that is caused by, contributed to in any way, or resulting from any critical illness condition diagnosed outside the United States or Canada without confirmation of the diagnosis by the type of specialist physician specified for each of the covered conditions in the certificate who practices in the United States or Canada.

We will not pay a benefit for any Critical Illness that is due to or results from: intentionally self-inflicted injuries; elective plastic or cosmetic surgery; active military duty; participation in war, declared or undeclared, or any act of war; active participation in a riot, rebellion, or insurrection; committing or attempting to commit an assault, felony, or other criminal act; engagement in dangerous conduct or hazardous activity where there is a likelihood of death or serious injury; being legally intoxicated or under the influence of any narcotic unless taken on the advice of a physician and taken as prescribed; or improper or illegal use of inhalants, or huffing.

Covered conditions have specific diagnostic criteria that must be met (along with supporting documentation) for a benefit to be paid. For additional information regarding covered conditions, please request an outline of coverage.

In addition to the limitations stated in the Covered Conditions section of the Certificate, we will not pay any benefit for any Critical Illness that is Diagnosed in the first 12 months following the effective date of any Insured's insurance and results from a Pre-Existing Condition.



Pre-Existing Condition means during the 6 months prior to any Insured's effective date of insurance or the effective date of an increase in any Insured's amount of insurance, any condition for which any Insured:

- sought medical Treatment, consultation, advice, care or services, including diagnostic measures for the condition, regardless of whether the condition was Diagnosed or suspected at that time;
- took prescribed drugs or medicines for the condition.

When newborn children, newly placed foster children or newly adopted children are added to your Dependent Children Insurance within 31 days of the birth, placement or adoption, the Pre-Existing Condition limitation does not apply.

*Subject to state law variations.

Focus on your health—not your wallet—if you’re diagnosed with a serious illness.



1. In some states, “Critical Illness” is referred to as “Specified Disease.”
2. If permitted by the Employer’s employee benefit plan and not prohibited by state law, the term “spouse” in this benefit includes any individual who is either recognized as a spouse, a registered domestic partner, or a partner in a civil union, or otherwise accorded the same rights as a spouse.
3. If you decline coverage during your initial eligibility period and want to elect coverage or increase coverage at a later date, you may be required to complete and submit an Evidence of Insurability application, which must be approved by Sun Life prior to coverage taking effect.
4. Subject to policy terms and state variations. Refer to your certificate for specific conditions.

“Critical Illness insurance” is a limited benefit policy. It does NOT provide basic hospital, basic medical, or major medical insurance and does not satisfy the requirement for Minimum Essential Coverage under the Affordable Care Act. The certificate has exclusions, limitations, and benefit waiting periods for certain conditions that may affect any benefits payable. Benefits payable are subject to all terms and conditions of the certificate. This overview is preliminary to the issuance of the policy and certificate. The policy, certificate, and rider, if applicable, may not be available in all states and may vary based on state laws and regulations.

Note to employees covered or considering coverage under Health Savings Accounts (HSAs) established in connection with a High Deductible Health Plan (HDHP): Based on the limited available regulatory guidance, Sun Life believes its “Critical Illness insurance” is appropriate for use with an HSA and may be purchased when the employee and/or his or her family members are covered under an HDHP. However, Sun Life cannot provide legal or tax advice. If there are legal or tax questions, we suggest that you consult your own legal or tax advisor before purchasing this insurance.

If your critical illness coverage is paid with pre-tax dollars, the benefit payments will be fully or partially taxable based on the percentage of the premiums paid with pre-tax dollars. Taxable benefit payments would be considered income and could disqualify you for Medicaid. If you currently participate or plan to participate in Medicaid you should seek advice before enrolling in critical illness coverage. Please consult your legal or tax advisor for more information. Sun Life does not provide tax or Medicaid advice.

This Overview is preliminary to the issuance of the Policy. Refer to your Certificate for details. Receipt of this Overview does not constitute approval of coverage under the Policy. In the event of a discrepancy between this Overview, the Certificate and the Policy, the terms of the Policy will govern.

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Rate Sheet

Employee - Coverage and **monthly** cost for Employee Critical Illness and Cancer.

Smoker Rates are effective as of January 01, 2018.

The chart below shows possible coverage amounts and corresponding costs per month.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

Coverage Amounts	Age and Cost												
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
\$5,000	3.20	3.20	7.80	7.80	17.70	17.70	35.60	35.60	63.10	63.10	100.50	119.00	128.20
\$10,000	6.40	6.40	15.60	15.60	35.40	35.40	71.20	71.20	126.20	126.20	201.00	238.00	256.40
\$15,000	9.60	9.60	23.40	23.40	53.10	53.10	106.80	106.80	189.30	189.30	301.50	357.00	384.60
\$20,000	12.80	12.80	31.20	31.20	70.80	70.80	142.40	142.40	252.40	252.40	402.00	476.00	512.80
\$25,000	16.00	16.00	39.00	39.00	88.50	88.50	178.00	178.00	315.50	315.50	502.50	595.00	641.00

Rate Sheet

Employee - Coverage and **monthly** cost for Employee Critical Illness and Cancer.

Non-Smoker Rates are effective as of January 01, 2018.

The chart below shows possible coverage amounts and corresponding costs per month.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

Coverage Amounts	Age and Cost												
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
\$5,000	3.10	3.10	5.40	5.40	10.15	10.15	17.90	17.90	30.35	30.35	48.55	63.65	72.15
\$10,000	6.20	6.20	10.80	10.80	20.30	20.30	35.80	35.80	60.70	60.70	97.10	127.30	144.30
\$15,000	9.30	9.30	16.20	16.20	30.45	30.45	53.70	53.70	91.05	91.05	145.65	190.95	216.45
\$20,000	12.40	12.40	21.60	21.60	40.60	40.60	71.60	71.60	121.40	121.40	194.20	254.60	288.60
\$25,000	15.50	15.50	27.00	27.00	50.75	50.75	89.50	89.50	151.75	151.75	242.75	318.25	360.75

Rate Sheet

Spouse - Coverage and **monthly** cost for Spouse Critical Illness and Cancer.

Smoker Rates are effective as of January 01, 2018.

The chart below shows possible coverage amounts and corresponding costs per month.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

Coverage Amounts	Age and Cost												
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
\$5,000	2.65	2.65	7.80	7.80	17.70	17.70	35.60	35.60	62.55	62.55	100.00	118.45	127.65
\$7,500	3.98	3.98	11.70	11.70	26.55	26.55	53.40	53.40	93.83	93.83	150.00	177.68	191.48
\$10,000	5.30	5.30	15.60	15.60	35.40	35.40	71.20	71.20	125.10	125.10	200.00	236.90	255.30
\$12,500	6.63	6.63	19.50	19.50	44.25	44.25	89.00	89.00	156.38	156.38	250.00	296.13	319.13

Rate Sheet

Spouse - Coverage and **monthly** cost for Spouse Critical Illness and Cancer.

Non-Smoker Rates are effective as of January 01, 2018.

The chart below shows possible coverage amounts and corresponding costs per month.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

Coverage Amounts	Age and Cost												
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
\$5,000	2.55	2.55	5.40	5.40	10.15	10.15	17.90	17.90	29.85	29.85	48.05	63.15	71.60
\$7,500	3.83	3.83	8.10	8.10	15.23	15.23	26.85	26.85	44.78	44.78	72.08	94.73	107.40
\$10,000	5.10	5.10	10.80	10.80	20.30	20.30	35.80	35.80	59.70	59.70	96.10	126.30	143.20
\$12,500	6.38	6.38	13.50	13.50	25.38	25.38	44.75	44.75	74.63	74.63	120.13	157.88	179.00

Rate Sheet

Child - Coverage and **monthly** cost for Child Critical Illness and Cancer.

Rates are effective as of January 01, 2018.

The chart below shows possible coverage amounts and corresponding costs per month.

Coverage Amounts	Cost per Month
\$5,000	4.40