

Group Critical Illness Insurance

Benefits Proposal

This proposal has been
prepared for:

City of South Fulton

Presented by:

Aflac Group

Proposal State:

Georgia

Presentation Date:

08/27/2025

Expires on 10/01/2025



Continental American Insurance Company (CAIC)
A proud member of the Aflac family of insurers.
Policy Form Series C22000

Group Critical Illness Insurance

Plan Description

The Aflac Group Critical Illness Plan provides cash benefits when an insured person is diagnosed with a covered critical illness-and these benefits are paid directly to your employees (unless otherwise assigned). The plan provides a lump-sum benefit to help with out-of-pocket medical expenses and the living expenses that can accompany a covered critical illness. It is also H.S.A.-compatible.

Features and Plan Provisions (specific benefit provisions may vary by situs state)		
Benefit Amounts	See Premium Rates and Plan Benefits for available options	
Spouse Coverage	Up to 50% of the face amount elected by the employee	
Child Coverage	Up to 50% of the face amount elected by the employee	
Guaranteed Issue Amounts	Employee:	Up to \$30,000
	Spouse:	Up to \$15,000
	Participation Requirement:	0%
Requirement for Group Billing	To establish group billing, 25 distinct individuals must be paying premiums	
Payment Method	Payroll Deducted	
Pre-existing Condition Exclusion	None	
Waiting Period	There is no waiting period	
Benefit Reductions	No reduction at any age	
Rate Guarantee	5 Year(s)	
Portability/Continuation	Evergreen	
Rate Type	Attained Age	
Eligibility	Work Week Hours:	Employee must work at least 16 hours per week
	Length of Employment:	No minimum requirement; set by employer
Waiver of Premium	After 90 days of total disability for an employee due to a covered critical illness, we will fully waive all premiums for the duration specified in the certificate	
Successor Insured Waiver of Premium	Not Included	
Separation Period - Additional Diagnosis/Reoccurrence	Additional Diagnosis:	6 consecutive months
	Reoccurrence:	6 consecutive months
Successor Insured	Included	
Issue Ages	Employee:	18+
	Spouse:	18+
	Children:	Under age 26
Termination Age	None	
Certificate Effective Date	Coverage is effective on the billing effective date	

Group Critical Illness Insurance

Plan Benefits

(Benefit provisions may vary by situs state)

Base Benefits	
Heart Attack (Myocardial Infarction)	100%
Sudden Cardiac Arrest	100%
Coronary Artery Bypass Surgery	100%
Major Organ Transplant*	100%
Bone Marrow Transplant (Stem Cell Transplant)	100%
Kidney Failure (End-Stage Renal Failure)	100%
Stroke (Ischemic or Hemorrhagic)	100%
Coma	25%
Loss of Hearing	100%
Loss of Sight	100%
Loss of Speech	100%
Paralysis	100%

*25% of this benefit is payable for Insureds placed on a transplant list for a major organ transplant

Cancer Benefits	
Cancer (Internal or Invasive)	100%
Non-Invasive Cancer	25%
Skin Cancer	\$250 per calendar year

Health Screening Benefit	
Health Screening (payable for employee and spouse only)	\$50
Health Screening (payable for dependent children)	100% of the Health Screening Amount
Payable per calendar year	1

Additional Benefits	
Benign Brain Tumor	100%

Childhood Conditions Rider	
Cystic Fibrosis, Cerebral Palsy, Cleft Lip or Cleft Palate, Down Syndrome, Phenylalanine Hydroxylase Deficiency Disease (PKU), Spina Bifida	50% of employee benefit
Autism Spectrum Disorder	\$3000

Progressive Diseases Rider	
Advanced Alzheimer's Disease	25%
Advanced Parkinson's Disease	25%
Amyotrophic Lateral Sclerosis (ALS)	25%
Sustained Multiple Sclerosis (MS)	25%
Chronic Obstructive Pulmonary Disease (COPD)	25%
Crohn's Disease	25%

Specified Diseases Rider	
Tier 1 – Adrenal Hypofunction (Addison's Disease), Cerebrospinal Meningitis, Diphtheria, Encephalitis, Huntington's Chorea, Legionnaire's Disease, Lyme Disease, Malaria, Muscular Dystrophy, Myasthenia Gravis, Necrotizing Fasciitis, Osteomyelitis, Poliomyelitis (Polio), Rabies, Sickle Cell Anemia, Systemic Lupus, Systemic Sclerosis (Scleroderma), Tetanus, Tuberculosis	25%
Tier 2 – Human Corona Virus Only	
Hospitalization: 4+days	10%
Hospitalization: 10+days	25%
Hospitalization: Intensive Care Unit (ICU)	40%

Please request a sample policy for full benefit provisions and descriptions.

Group Critical Illness Insurance

Premium Rates

Employee - Uni-Tobacco Monthly Premiums			
Age	\$10,000	\$20,000	\$30,000
18-24	\$3.46	\$6.92	\$10.38
25-29	\$4.28	\$8.56	\$12.84
30-34	\$4.86	\$9.72	\$14.58
35-39	\$6.18	\$12.36	\$18.54
40-44	\$8.32	\$16.64	\$24.96
45-49	\$12.27	\$24.54	\$36.81
50-54	\$16.93	\$33.86	\$50.79
55-59	\$23.39	\$46.78	\$70.17
60-64	\$32.90	\$65.80	\$98.70
65-69	\$44.32	\$88.64	\$132.96
70+	\$59.86	\$119.72	\$179.58

Spouse - Uni-Tobacco Monthly Premiums			
Age	\$5,000	\$10,000	\$15,000
18-24	\$1.73	\$3.46	\$5.19
25-29	\$2.14	\$4.28	\$6.42
30-34	\$2.43	\$4.86	\$7.29
35-39	\$3.09	\$6.18	\$9.27
40-44	\$4.16	\$8.32	\$12.48
45-49	\$6.14	\$12.27	\$18.41
50-54	\$8.47	\$16.93	\$25.40
55-59	\$11.70	\$23.39	\$35.09
60-64	\$16.45	\$32.90	\$49.35
65-69	\$22.16	\$44.32	\$66.48
70+	\$29.93	\$59.86	\$89.79

This proposal has been generated based on the enrollment technology intended to be used. If there is a change to the enrollment technology the proposal may need to be modified based on the capabilities of the new platform.

The rates shown are for proposal purposes only and should not be used to fulfill enrollment. Upon won notification, Aflac will provide Build Requirements with the final rates to the Policy Administrator and their enrollment technology vendor. Rates enrolled other than the final provided will not be honored.

The premium and product availability indicated in this proposal are subject to change as a result of final underwriting.

Group Critical Illness Insurance

Benefits Summary

(Benefit provisions vary by situs state)

Where applicable, covered conditions must be caused by underlying diseases as defined in the plan. Benefits will be based on the face amount in effect on the critical illness date of diagnosis.

Initial Diagnosis

An insured may receive up to 100% of his face amount upon the diagnosis of a covered critical illness.

Additional Diagnosis

Once benefits have been paid for a covered critical illness, we will pay benefits for each different critical illness when the date of diagnosis is separated by at least 6 consecutive months.

Reoccurrence

Once benefits have been paid for a covered critical illness, benefits are payable for that same critical illness when the date of diagnosis is separated by at least 6 consecutive months.

Health Screening Benefit

The Health Screening Benefit is payable once per calendar year for health screening tests performed as the result of preventive care, including tests and diagnostic procedures ordered in connection with routine examinations. See Master Policy for the full list of covered health screening tests.

Additional Benefits

Benefits are payable if an insured is diagnosed with one of the diseases listed.

Childhood Conditions Rider

Benefits are payable if a dependent child is diagnosed with one of the conditions listed. Autism benefit is not payable if the DSM severity level specifier is less than Level 1. For any subsequent childhood condition to be covered, the two dates of diagnosis must satisfy the separation period for Reoccurrence.

Progressive Diseases Rider

One benefit per disease is payable if an insured is diagnosed with one of the diseases listed. For any subsequent progressive disease to be payable, the two dates of diagnosis must satisfy the separation period for Reoccurrence.

Specified Diseases Rider

Tier 1 - Benefits are payable if an insured is diagnosed with one of the diseases listed. For any subsequent Tier 1 specified diseases to be payable, the two dates of diagnosis for Tier 1 diseases must satisfy the separation period for Reoccurrence.
Tier 2 - Benefits are payable if an insured is diagnosed with one of the diseases listed and such diagnosis results in either a period of Hospital confinement or a period of Hospital Intensive Care Unit confinement as a direct result of the disease. For any subsequent Tier 2 specified disease to be payable, the two dates of diagnosis for Tier 2 diseases must satisfy the separation period for Reoccurrence.

**Plan designs vary and appearance of benefit provisions here does not guarantee coverage.*

Group Critical Illness Insurance

Limitations & Exclusions

Exclusions

We will not pay for loss due to:

- **Self-Inflicted Injuries** - injuring or attempting to injure oneself intentionally or taking action that causes oneself to become injured
- **Suicide** - committing or attempting to commit suicide, while sane or insane
- **Illegal Acts** - participating or attempting to participate in an illegal activity, or working at an illegal job
- **Participation in Aggressive Conflict of any kind, including:**
 - War (declared or undeclared) or military conflicts
 - Insurrection or riot
 - Civil commotion or civil state of belligerence
- **Illegal substance abuse, which includes the following:**
 - Abuse of legally-obtained prescription medication
 - Illegal use of non-prescription drugs

Diagnosis must be made and treatment must be received in the United States or its territories.

All benefits under the plan, including benefits for diagnoses, treatment, confinement and covered tests, are payable only while coverage is in force.

All limitations and exclusions that apply to the critical illness plan also apply to the riders unless amended by the riders.

Group Critical Illness Insurance

Notices

This proposal is a brief description of coverage, not a contract. Read your policy and riders (as applicable) carefully for exact plan language, terms, and conditions.

If this coverage will replace any existing individual policy, please be aware that it may be in your employees' best interest to maintain their individual guaranteed-renewable policy.

Notice to Consumer: The coverages provided by Continental American Insurance Company (CAIC) represent supplemental benefits only. They do not constitute comprehensive health insurance coverage and do not satisfy the requirement of minimum essential coverage under the Affordable Care Act. CAIC coverage is not intended to replace or be issued in lieu of major medical coverage. It is designed to supplement a major medical program.