

# Critical Protection and Recovery

This Is A Critical Illness Insurance Policy

Underwritten by ManhattanLife Assurance Company of America and The Manhattan Life Insurance Company

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Toll Free Telephone: 800-669-9030

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## Alabama

### Policy Forms CI-A AL, CI-B AL

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Arizona

### Policy Forms CI-A AZ, CI-B AZ

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the

military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Arkansas

### Policy Forms CI-A AR, CI-B AR

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## California

### Policy Forms CI-A CA

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered. In addition, any Specified Health Event that occurs due to a Pre-Existing Condition will not be covered if: (1) the Pre-Existing Condition was revealed in the application; or (2) we have specifically excluded the Pre-Existing Condition by name or specific description. However, subject to the provisions of this Policy, a claim for a Specified Health Event that occurs after 12 months from the Effective Date due to a Pre-Existing Condition will be a covered Loss.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 2. participating in any sport or sporting activity for wage, compensation or profit; 3. intentionally self-inflicting bodily injury or attempted suicide; 4. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 5. travel in or descent from an aircraft, except while a fare-paying passenger; 6. committing or attempting to commit a felony; 7. engaging in an illegal occupation; or 8. an Experimental Major Human Organ Transplant.

## Colorado

### Policy Forms CI-A CO, CI-B CO

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## District of Columbia

### Policy Forms ML-CI-A DC, ML-CI-B DC

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

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**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the



date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Delaware

### Policy Forms ML-CI-A, ML-CI-B

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

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**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Illinois

### Policy Forms CI-A IL, CI-B IL

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 2. participating in any sport or sporting activity for wage, compensation or profit; 3. intentionally self-inflicting bodily injury or attempted suicide; 4. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 5. travel in or descent from an aircraft, except while a fare-paying passenger; 6. committing or attempting to commit a felony; 7. engaging in an illegal occupation; or 8. an Experimental Major Human Organ Transplant.

## Idaho

### Policy Forms CI-A ID, CI-B ID

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

Pre-Existing Conditions will not apply to the following Insured Children: (a) a child born to you after the Policy Date; and (b) an adopted child placed with you for adoption after the Policy Date. Pre-Existing Conditions will not apply to congenital anomalies of any Insured Child.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you. We will refund the prorata portion of any unused premium we collected; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. alcoholism or drug addiction; 3. intentionally self-inflicting bodily injury or attempted suicide; 4. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; or 5. travel in or descent from an aircraft, except while a fare-paying passenger.

## Indiana

### Policy Forms CI-A IN, CI-B IN

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**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your

death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Iowa

### Policy Forms CI-A IA, CI-B IA

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. intentionally self-inflicting bodily injury or attempted suicide; 4. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 5. travel in or descent from an aircraft, except while a fare-paying passenger; 6. committing or attempting to commit a felony; 7. engaging in an illegal occupation; or 8. an Experimental Major Human Organ Transplant.

## Kansas

### Policy Forms CI-A KS, CI-B KS

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on

you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Kentucky

### Policy Forms CI-A KY, CI-B KY

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Louisiana

### Policy Forms CI-A LA, CI-B LA

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date



after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university, vocational, vocational-technical, trade school or institute or secondary school); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

Except for non-payment of premium, we will give you 60 days notice if we terminate your coverage.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Maryland

### Policy Forms CI-A MD, CI-B MD

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the insurance producer who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered. In addition, any Specified Health Event that occurs due to a Pre-Existing Condition will not be covered if We have specifically excluded the Pre-Existing Condition by name or specific description. However, subject to the provisions of this Policy, a claim for a Specified Health Event that occurs after 12 months from the Effective Date due to a Pre-Existing Condition will be covered. A Pre-Existing Condition does not include a condition that is revealed in the application unless we specifically exclude such condition by name or specific description.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision.

Termination under this provision shall not affect a claim existing on the date of such termination. However, any extension of benefits beyond the period this Policy was in force will end on the earlier of: 1. the date the Covered Person is discharged from the Hospital; or 2. 12 months after the date coverage terminates.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. participating in any sport or sporting activity for wage, compensation or profit; 2. intentionally self-inflicting bodily injury or attempted suicide; 3. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 4. loss sustained or contracted in consequence of the Covered Person's being intoxicated or under the influence of any narcotic, unless administered on the advice of a Physician; or 5. travel in or descent from an aircraft, except while a fare-paying passenger; 6. committing or attempting to commit a felony; or 7. an Experimental Major Human Organ Transplant.

We will not pay any claim, bill, or other demand or request for payment for health care services that the appropriate regulatory board determines were provided as a result of a Prohibited Referral.

## Minnesota

### Policy Forms CI-A MN, CI-B MN

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return the Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive the Policy. Immediately upon such delivery or mailing, this Policy will

be deemed void from the beginning. Any premium you have paid will be refunded within 10 days after we receive notice of cancellation and the returned policy. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. bodily injuries received while the Covered Person was operating a motor vehicle under the influence of alcohol as evidence by a blood alcohol level in excess of the state legal intoxication limit; or 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Mississippi

### Policy Forms CI-A MS, CI-B MS

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled fulltime in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Missouri

### Policy Forms CI-A MO, CI-B MO

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide, while sane; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Montana

### Policy Forms CI-A MT

**Insured's Right to Examine Policy** - If you are not satisfied with the Policy, you may return it for a full refund of premium. You may return the Policy by delivering it or mailing it to (1) the agent who took your application; or, (2) our Home Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive the Policy. Immediately upon such delivery or mailing, the Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning the Policy under this provision, you should state: "The Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered. In addition, any Specified Health Event that occurs due to a Pre-Existing Condition will not be covered if: (1) the Pre-Existing Condition was revealed in the application; or (2) we have specifically excluded the Pre-Existing Condition by name or specific description. However, subject to the provisions of this Policy, a claim for a Specified Health Event that occurs after 12 months from the Effective Date due to a Pre-Existing Condition will be covered.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. participation in any activity or event, including the operation of a vehicle, while voluntarily under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while voluntarily intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 2. participating in any sport or sporting activity for wage, compensation or profit; 3. intentionally self-inflicting bodily injury or attempted

suicide; 4. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 5. travel in or descent from an aircraft, except while a fare-paying passenger; 6. committing or attempting to commit a felony; 7. engaging in an illegal occupation; or 8. an Experimental Major Human Organ Transplant.

## Nebraska

### Policy Forms CI-A NE, CI-B NE

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Nevada

### Policy Forms CI-A, CI-B

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.



**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## New Hampshire

### Policy Forms CI-A NH, CI-B NH

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Home Office at 10700 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a PreExisting Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 ( or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for remuneration as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## New Mexico

### Policy Forms CI-A NM, CI-B NM

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 6 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre- Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 6 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 6 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the

date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, or while serving in the military or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## New York

### Policy Forms ML-CI-A NY, ML-CI-B NY

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, TX 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 6 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered. In addition, any Specified Health Event that occurs due to a Pre-Existing Condition will not be covered if: (1) the Pre-Existing Condition was revealed in the application; or (2) we have specifically excluded the Pre-Existing Condition by name or specific description. However, subject to the provisions of this Policy, a claim for a Specified Health Event that occurs after 6 months from the Effective Date due to a Pre-Existing Condition will be covered.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or annulment from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a child who is incapable of self-sustaining employment by reason of mental illness, developmental disability or mental retardation as defined in the mental hygiene law or physical handicap and is dependent upon you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. intentionally self-inflicting bodily injury or attempted suicide; 2. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 3. aviation, other than as a fare-paying passenger on a schedule or charter flight operated by a scheduled airline; or 4. participation in a felony.

## North Carolina

### Policy Forms CI-A NC, CI-B NC

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy. This limitation will be reduced by the amount of time the Covered Person was previously covered by Creditable Coverage if there was no more than a 63 day break in coverage.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received within 31 days of such date upon which the Insured Child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent

child attains the limiting age. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## North Dakota

### Policy Forms CI-A ND, CI-B ND

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Home Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 22 (or age 26 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 22. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 26. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Ohio

### Policy Forms CI-A OH, CI-B OH

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However,

coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Oklahoma

Policy Forms CI-A OK, CI-B OK

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. If we fail to refund any premiums paid within 30 days from the date of receipt of cancellation, we will pay interest on the proceeds. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. alcoholism or drug addiction; 3. intentionally self-inflicting bodily injury or attempted suicide; 4. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 5. travel in an aircraft, except while a fare-paying passenger; 6. committing or attempting to commit a felony; 7. engaging in an illegal occupation; or 8. an Experimental Major Human Organ Transplant.

## Oregon

Policy Forms CI-A OR, CI-B OR

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after



the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Pennsylvania

### Policy Forms CI-A PA, CI-B PA

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered. In addition, any Specified Health Event that occurs due to a Pre-Existing Condition will not be covered if: (1) the Pre-Existing Condition was revealed in the application; or (2) we have specifically excluded the Pre-Existing Condition by name or specific description. However, subject to the provisions of this Policy, a claim for a Specified Health Event that occurs after 12 months from the Effective Date due to a Pre-Existing Condition will be covered.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled fulltime in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 2. participating in any sport or sporting activity for wage, compensation or profit; 3. intentionally self-inflicting bodily injury or attempted suicide; 4. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 5. travel in or descent from an aircraft, except while a fare-paying passenger; 6. committing or attempting to commit a felony; 7. engaging in an illegal occupation; or 8. an Experimental Major Human Organ Transplant.

## Rhode Island

### Policy Forms ML-CI-A, ML-CI-B

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at Five Waterside Crossing, Third Floor, Windsor, CT 06095. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## South Carolina

### Policy Forms CI-A SC, CI-B SC

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law; 3. intentionally self-inflicting bodily injury or attempted suicide; 4. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 5. travel in or descent from an aircraft, except while a fare-paying passenger; 6. committing or attempting to commit a felony; or 7. engaging in an illegal occupation.

## South Dakota

### Policy Forms CI-A SD, CI-B SD

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy for any reason, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered. In addition, any Specified Health Event that occurs due to a Pre-Existing Condition will not be covered if: (1) the Pre-Existing Condition was revealed in the application; or (2) we have specifically excluded the Pre-Existing Condition by

name or specific description. However, subject to the provisions of this Policy, a claim for a Specified Health Event that occurs after 12 months from the Effective Date due to a Pre-Existing Condition will be covered.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. participating in any sport or sporting activity for wage, compensation or profit; 2. intentionally self-inflicting bodily injury or attempted suicide; 3. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 4. travel in or descent from an aircraft, except while a fare-paying passenger; 5. committing or attempting to commit a felony; 6. engaging in an illegal occupation; or 7. an Experimental Major Human Organ Transplant.

## Tennessee

### Policy Forms CI-A TN, CI-B TN

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Texas

### Policy Forms CI-A TX, CI-B TX

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified

Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** – A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 25; or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 25. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the “Refund of Unearned Premium” provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** – We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician’s instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Utah

### Policy Forms CI-A UT, CI-B UT

**Insured’s Right to Examine Policy** – If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: “This Policy is returned for cancellation and refund of premium”.

**Pre-Existing Condition Limitation** – During the first 6 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 6 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 6 months following the Effective Date of this Policy.

**Termination of Insurance** – A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 26; or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 26. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 26. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the “Refund of Unearned Premium” provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** – We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician’s instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Virginia

### Policy Forms CI-A VA

**Insured’s Right to Examine Policy** – If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: “This Policy is returned for cancellation and refund of premium”.



**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 2. intentionally self-inflicting bodily injury or attempted suicide; 3. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 4. travel in or descent from an aircraft, except while a fare-paying passenger; 5. committing or attempting to commit a felony; 6. engaging in an illegal occupation; or 7. an Experimental Major Human Organ Transplant.

## Vermont

### Policy Forms ML-CI-A VT, ML-CI-B VT

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event Occurring prior to the Effective Date; 2. participation in any sport or sporting activity for wage, compensation or profit; 3. intentionally self-inflicting bodily injury or attempted suicide; 4. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 5. travel in or descent from an aircraft, except while a fare-paying passenger; 6. committing or attempting to commit a felony; or 7. an Experimental Major Human Organ Transplant.

## Washington

### Policy Forms CI-A WA, CI-B WA

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. If we do not refund the premium within 30 days from the time we receive your Policy an additional 10% penalty will be added to any premium refund due. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participating in any sport or sporting activity for wage, compensation or profit; 3. intentionally self-inflicting bodily injury or attempted suicide; 4. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 5. travel in or descent from an aircraft, except while a fare-paying passenger; 6. committing or attempting to commit a felony; 7. engaging in an illegal occupation; or 8. an Experimental Major Human Organ Transplant.

## West Virginia

### Policy Forms CI-A WV, CI-B WV

**Insured's Right to Examine Policy** - If you are not satisfied with this Policy, you may return it for a full refund of premium. You may return this Policy by delivering it or mailing it to: (1) the agent who took your application; or, (2) our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 10 days after you receive this Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

**Pre-Existing Condition Limitation** - During the first 12 months following the Effective Date of this Policy, any Specified Health Event that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Specified Health Event. However, after the first 12 months following the Effective Date of this Policy, benefits will be provided in connection with all Covered Specified Health Events other than a Specified Health Event that occurred due to a Pre-Existing Condition during the first 12 months following the Effective Date of this Policy.

**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

## Wisconsin

### Policy Forms CI-A WI, CI-B WI

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deemed void from the beginning. Any premium you have paid will be refunded. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium".

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**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after a two year period immediately following the date the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. under the voluntary influence of a controlled substance; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; or 8. an Experimental Major Human Organ Transplant.

## Wyoming

### Policy Forms CI-A, CI-B

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**Termination of Insurance** - A. Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; or (b) the end of the Grace Period if the required premium has not been paid. B. Coverage of your Insured Spouse ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured. C. Coverage of an Insured Child ends on the premium due date following: the attainment of age 21 (or age 25 if enrolled full-time in an accredited college or university); or marriage, whichever occurs first. However, coverage may be continued for a physically or mentally handicapped child who is incapable of self-sustaining employment and is dependent on you for support. Proof of this must be received at least 31 days before such child attains age 21. We reserve the right to require additional proof of such incapacity and dependency; however, we will not require such proof more than once a year after the dependent child attains age 25. D. If you die while this Policy is in force, your Insured Spouse will be deemed the Named Insured. If your spouse is not an insured on the date of your death, coverage will terminate at the end of the term for which premium has been paid. Premium accepted for coverage extending beyond the date, age or event specified for termination as to a Covered Person will be refunded according to the "Refund of Unearned Premium" provision. Termination under this provision shall not affect a claim existing on the date of such termination.

**Exclusions** - We will not pay benefits for loss resulting from or in connection with the following: 1. a Specified Health Event occurring prior to the Effective Date; 2. participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the Loss occurs; 3. participating in any sport or sporting activity for wage, compensation or profit; 4. intentionally self-inflicting bodily injury or attempted suicide; 5. war or any act of war, whether declared or undeclared, while serving in the military service or any auxiliary attached thereto; 6. travel in or descent from an aircraft, except while a fare-paying passenger; 7. committing or attempting to commit a felony; 8. engaging in an illegal occupation; or 9. an Experimental Major Human Organ Transplant.

