

Cancer First Occurrence

This Is A Cancer Insurance Policy

Underwritten by ManhattanLife Assurance Company of America

Administrative Office: 10777 Northwest Freeway, Houston, TX 77092

Toll Free Telephone: 800-669-9030

ALABAMA

Policy Form FOB02-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 the Policy by delivering it or mailing it to the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid. The company reserves the right to change the rates on all policies of this class in the entire state. Dependent unmarried children are covered to age 21. Full-time students may be covered longer.

Limitations and Exclusions

(1) The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. The policy does not provide benefits for any other disease or sickness or incapacity. (2) The First Occurrence Benefit contains a 30 day "waiting period." This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 30 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period," the Covered Person may void the policy from the beginning and receive a full refund of premium. (3) The policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. (4) The policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

ARKANSAS

Policy Form ARFOB-98

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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. Clinical diagnosis of cancer shall be accepted as evidence that cancer exists in an insured when a pathological diagnosis cannot be made, provided such medical evidence substantially documents the diagnosis of cancer and the insured receives treatment for cancer. This policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 30 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 30 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the policy from the beginning and receive a full refund of premium, continue coverage for payment of benefits for cancer diagnosed after the 30 day waiting period, or elect the \$250 benefit described under PART II – BENEFITS. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

ARIZONA

Policy Form FOB02-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 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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity.
2. The First Occurrence Benefit contains a 45 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the Policy from the beginning and receive a full refund of premium.
3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household.
4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses", this Rider will not pay for intensive care confinement where the cause for such confinement is: (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of this Rider.

CALIFORNIA

Policy Form FOB02-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 the Policy by delivering it or mailing it to the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity.
2. The

First Occurrence Benefit contains a 45 day “waiting period”. This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the “waiting period”, the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS

Intensive Care Unit Rider

Pre-Existing Conditions. This Rider does not provide benefits for loss or losses due to Pre-Existing Conditions that are incurred during the 12 months immediately prior to the Rider Date. In addition, a loss caused by 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, a claim for a Pre-Existing Condition incurred after 12 months from the date of this Rider becomes effective will be covered, unless that condition is excluded by name or specific description effective on the date of loss.

Mammography Rider

We will pay the actual charge for one routine low dose mammography screening each year for the presence of occult breast cancer for a Covered female thirty-five (35) years of age or older.

COLORADO

Policy Form FOB98-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 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 30 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. When returning this Policy under this provision, you should state: “This Policy is returned for cancellation and refund of premium.”

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day “waiting period”. This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 45 days from the “Effective Date” as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the “waiting period”, the Covered Person may void the policy from the beginning and receive a full refund of premium. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled “Time Limit on Certain Defenses,” the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

GEORGIA

Policy Form FOB98-GA

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 30 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. When returning this Policy under this provision, you should state: “This Policy is returned for cancellation and refund of premium.”

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 26.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 30 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 30 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the policy from the beginning and receive a full refund of premium, continue coverage for payment of benefits for cancer diagnosed after the 30 day waiting period, or elect the \$250 benefit described under PART II - BENEFITS. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

IDAHO

Policy Form FOB02-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 the Policy by delivering it or mailing it to the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. Clinical diagnosis of Cancer shall be accepted as evidence that Cancer exists when a pathological diagnosis cannot be made or is medically inappropriate, provided such medical evidence substantially documents the diagnosis of Cancer, and the Covered person receives medically necessary care as the result of Cancer. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 3. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

Pre-Existing Condition Limitation

During the first 12 months following the Effective Date of this Policy, any First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer) that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Cancer. However, benefits will be provided for a First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer) that occurs after the first 12 months of the Effective Date of this Policy.

ILLINOIS

Policy Form FOB13-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 the Policy by delivering it or mailing it to the agent who took your application or to 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies on this form in the entire state. Dependent unmarried children can be covered under the age of 25.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period." This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period," the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

Termination of Insurance

Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; (b) the last premium due date if the premium is not paid before the end of the grace period; (c) upon the payment of the benefits; however, any remaining covered dependents shall remain covered until their benefit is paid; (d) coverage of your Insured Spouse/Civil Union Partner ends on the next premium due date after the date of divorce or legal separation from you, the Named Insured; (e) coverage of an Insured Child ends on the premium due date next following: the attainment of age 26 (or age 30 if an honorably discharged military veteran who resides in the state of Illinois); 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 incapacities and dependency, however, we will not require such proof more than once a year after the dependent child attains age 26; or, (f) if you die while this Policy is in force, your Insured Spouse/Civil Union Partner will be deemed to be the Named Insured. If your spouse/civil union partner 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 after the coverage for a Covered Person has terminated will be considered premium for the persons still covered under this Policy.

OPTIONAL RIDER BENEFITS -Cancer Screening Benefit Rider

Termination

This Rider terminates at the end of the grace period for the payment of the premium for the Policy or this Rider, if the Policy terminates, or on the next renewal date after a request for termination.

INDIANA

Policy Form FOB98IN

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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 45 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the policy from the beginning and receive a full refund of premium. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

IOWA

Policy Form FOB13

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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies on this form in the entire state. Dependent unmarried children can be covered under the age of 25.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period." This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period," the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS -Cancer Screening Benefit Rider

Termination

This Rider terminates at the end of the grace period for the payment of the premium for the Policy or this Rider, if the Policy terminates, or on the next renewal date after a request for termination.

KANSAS

Policy Form FOB02-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 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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

KENTUCKY

Policy Form FOB98KY

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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. For dependent unmarried children, coverage ends at the attainment of age 19

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 45 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the policy from the beginning and receive a full refund of premium. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

LOUISIANA

Policy Form FOB98LA

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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 45 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the policy from the beginning and receive a full refund of premium. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on

the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

MASSACHUSETTS

Policy Form FOB02-MA

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 the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums following the approval of the Commissioner of Insurance on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. Clinical diagnosis of Cancer shall be accepted as evidence that Cancer exists when a pathological diagnosis is medically inappropriate or is life threatening, provided such medical evidence substantially documents the diagnosis of Cancer, and the Covered Person receives medically necessary care as the result of Cancer. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 3. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

Pre-Existing Condition Limitation

During the first six months following the Effective Date of this Policy, any First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer) that occurs due to a Pre-Existing Condition is not covered, even when such Pre-Existing Condition is revealed in the application, and no benefits will be payable under this Policy in connection with such Cancer. However, benefits will be payable for a First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer) that occurs after the first six months of the Effective Date of the Policy.

If we deny liability and refuse to make payment on the basis of a Pre-Existing Condition, we will provide you together with the notice of denial of liability documented evidence of specific instances of actual treatment or observation of such Pre-Existing Condition, illness or injury in all cases except those of a confidential nature.

MARYLAND

Policy Form FOB02-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 the Policy by delivering it or mailing it to the insurance producer who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. Clinical diagnosis of Cancer shall be accepted as evidence that Cancer exists when a pathological diagnosis cannot be made or is medically inappropriate, provided such medical evidence substantially documents the diagnosis of Cancer, and the Covered person receives medically necessary care as the result of Cancer. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 30 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 30 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the Policy from the

beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

MINNESOTA

Policy Form FOB13-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 the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 days after you receive the Policy. Immediately upon such delivery or mailing, this Policy will be deemed void from the beginning. **When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium." Any premium you have paid will be refunded to you within 10 days after receipt of your notice of cancelation and the returned policy.**

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies on this form in the entire state. Dependent unmarried children can be covered under the age of 25.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period." This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period," the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

Termination of Insurance

Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; (b) the last premium due date if the premium is not paid before the end of the grace period; (c) upon the payment of the benefits; however, any remaining covered dependents shall remain covered until their benefit is paid; (d) 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; (e) coverage of an Insured Child ends on the premium due date next 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 incapacities and dependency, however, we will not require such proof more than once a year after the dependent child attains age 25; or, (f) if you die while this Policy is in force, your Insured Spouse will be deemed to be 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 after the coverage for a Covered Person has terminated will be considered premium for the persons still covered under this Policy.

OPTIONAL RIDER BENEFITS -Cancer Screening Benefit Rider

Termination

This Rider terminates at the end of the grace period for the payment of the premium for the Policy or this Rider, if the Policy terminates, or on the next renewal date after a request for termination.

MISSOURI

Policy Form FOB13-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 the Policy by delivering it or mailing it to the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies on this form in the entire state. Dependent unmarried children can be covered under the age of 26.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period." This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period," the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

Termination of Insurance

Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; (b) the last premium due date if the premium is not paid before the end of the grace period; (c) upon the payment of the benefits; however, any remaining covered dependents shall remain covered until their benefit is paid; (d) 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; (e) coverage of an Insured Child ends on the premium due date next 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 incapacities and dependency, however, we will not require such proof more than once a year after the dependent child attains age 26; or, (f) if you die while this Policy is in force, your Insured Spouse will be deemed to be 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 after the coverage for a Covered Person has terminated will be considered premium for the persons still covered under this Policy.

OPTIONAL RIDER BENEFITS -Cancer Screening Benefit Rider

Termination

This Rider terminates at the end of the grace period for the payment of the premium for the Policy or this Rider, if the Policy terminates, or on the next renewal date after a request for termination.

MISSISSIPPI

Policy Form FOB98MS

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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 45 days from the "Effective Date " as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the policy from the beginning and receive a full refund of premium. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

MONTANA

Policy Form FOB02-MT

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 the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. Dependent unmarried children are covered to age 21 or 25 if a full-time student. The company reserves the right to change the premiums on all policies of this form in the entire state.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. The policy does not provide benefits for any other disease or sickness or incapacity. 2. The policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 3. The policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

Pre-Existing Condition Limitation

We will not exclude coverage for a pre-existing condition unless medical advice, diagnosis, care or treatment was recommended to or received by you within the three year period preceding the Effective Date of the Policy. Benefits will be provided for the first diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer) that occurs after the first 12 months from the Effective Date of the Policy. We will waive any part of the 12 month waiting period for the period of time you were previously covered by qualifying coverage that provided benefits for first diagnosis of Cancer or malignant melanoma (excluding all other skin cancer), if the qualifying previous coverage was continuous to a date not more than 30 days prior to the date of application for the Policy.

NEBRASKA

Policy Form FOB13-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 the Policy by delivering it or mailing it to the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies on this form in the entire state. Dependent unmarried children can be covered under the age of 25.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the first diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period." This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period," the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

Termination of Insurance

Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; (b) the last premium due date if the premium is not paid before the end of the grace period; (c) upon the payment of the benefits; however, any remaining covered dependents shall remain covered until their benefit is paid; (d) 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; (e) coverage of an Insured Child ends on the premium due date next 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 incapacities and dependency, however, we will not require such proof more than once a year after the dependent child attains age 25; or, (f) if you die while this Policy is in force, your Insured Spouse will be deemed to be 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 after the coverage for a Covered Person has terminated will be considered premium for the persons still covered under this Policy.

OPTIONAL RIDER BENEFITS -Cancer Screening Benefit Rider

Termination

This Rider terminates at the end of the grace period for the payment of the premium for the Policy or this Rider, if the Policy terminates, or on the next renewal date after a request for termination.

NEW HAMPSHIRE

Policy Form FOB02-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 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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the first diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. The policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period". That means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 45 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the policy from the beginning and receive a full refund of premium, continue coverage for payment of benefits for Cancer diagnosed after the 45 day waiting period, or elect the \$250 benefit. 3. The policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. The policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

NEW MEXICO

Policy Form FOB02-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 the Policy by delivering it or mailing it to the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

NEVADA

Policy Form FOB02-NV

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 the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

NORTH CAROLINA

Policy Form FOB98NC

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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 30 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 30 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the policy from the beginning and receive a full refund of premium, continue coverage for payment of benefits for cancer diagnosed after the 30 day waiting period, or elect the \$250 benefit described under PART II - BENEFITS. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

NORTH DAKOTA

Policy Form FOB02-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 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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 22 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. Clinical diagnosis of Cancer shall be accepted as evidence that Cancer exists when a pathological diagnosis cannot be made or is medically inappropriate, provided such medical evidence substantially documents the diagnosis of Cancer, and the Covered person receives medically necessary care as the result of Cancer. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 30 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 30 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

OHIO

Policy Form FOB980H

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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 45 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the policy from the beginning and receive a full refund of premium. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

OKLAHOMA

Policy Form FOB980K

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. If we do not return any premiums or moneys paid within thirty (30) days from the date of cancellation, we shall pay interest on the proceeds which shall be the same rate of interest as the average of the United States Treasury Bill rate of the preceding calendar year, plus two percentage points, which shall accrue from the date of cancellation until the premiums or moneys are returned. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 30 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 30 days from the "Effective Date" as shown in the Policy Schedule; however, we will pay a benefit of 10% of the total amount of first occurrence benefits purchased if cancer is diagnosed before the policy has been in force 30 days from the "Effective Date" as shown in the policy schedule, or the Covered Person may void the policy from the beginning and receive a full refund of premium. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

OREGON

Policy Form FOB02-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 the Policy by delivering it or mailing it to the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

PENNSYLVANIA

Policy Form FOB02-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 the Policy by delivering it or mailing it to the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. Dependent unmarried children are covered to age 21 or 25 if a full-time student. The company reserves the right to change the premiums on all policies of this form in the entire state.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 30 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 30 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your Immediate Family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for intensive care confinement where the cause for such confinement is: (1) in any type of Hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Rider Date.

SOUTH CAROLINA

Policy Form FOB98SC

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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student .

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. Clinical diagnosis of Cancer shall be accepted as evidence that Cancer exists in an insured when a pathological diagnosis cannot be made or is medically inappropriate, provided such medical evidence substantially documents the diagnosis of Cancer, and the insured receives medically necessary care as the result of Cancer. 2. The First Occurrence Benefit contains a 30 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has cancer diagnosed before the Policy has been in force 30 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has cancer first diagnosed during the "waiting period", the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

SOUTH DAKOTA

Policy Form FOB13-SD

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 the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies on this form in the entire state. Dependent unmarried children can be covered under the age of 25.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity.
2. The First Occurrence Benefit contains a 45 day "waiting period." This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period," the Covered Person may void the Policy from the beginning and receive a full refund of premium.
3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household, unless you or a member of your immediate family is a physician who is operating within the scope of his/her license and is the only physician in the area.
4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

Termination of Insurance

Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; (b) the last premium due date if the premium is not paid before the end of the grace period; (c) upon the payment of the benefits; however, any remaining covered dependents shall remain covered until their benefit is paid; (d) 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; (e) coverage of an Insured Child ends on the premium due date next 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 incapacities and dependency, however, we will not require such proof more than once a year after the dependent child attains age 25; or, (f) if you die while this Policy is in force, your Insured Spouse will be deemed to be 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 after the coverage for a Covered Person has terminated will be considered premium for the persons still covered under this Policy.

OPTIONAL RIDER BENEFITS -Cancer Screening Benefit Rider

Termination

This Rider terminates at the end of the grace period for the payment of the premium for the Policy or this Rider, if the Policy terminates, or on the next renewal date after a request for termination.

TENNESSEE

Policy Form FOB98TN

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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 24.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This policy does not provide benefits for any other disease or sickness or incapacity.
- 2.

The First Occurrence Benefit contains a 30 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 30 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the policy from the beginning and receive a full refund of premium. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

TEXAS

Policy Form FOB98TX

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 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the policy has been in force 45 days from the "Effective Date" as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the policy from the beginning and receive a full refund of premium. 3. This policy will not pay benefits if the diagnosis of cancer is made by you or a member of your immediate family or household. 4. This policy will not pay benefits if the diagnosis of cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

UTAH

Policy Form FOB02-UT (0203)

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 the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The

company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children under the age of 26 are covered.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. Clinical diagnosis of Cancer shall be accepted as evidence that Cancer exists in a Covered Person when a pathological diagnosis cannot be made or is medically inappropriate, provided such medical evidence substantially documents the diagnosis of Cancer, and the Covered Person receives medically necessary care as the result of Cancer. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 30 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 30 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

VIRGINIA

Policy Form FOB02-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 the Policy by delivering it or mailing it to the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Suite 600, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the Internal Cancer Benefit; however, any remaining covered dependents shall remain covered until the Internal Cancer Benefit is paid subject to the Termination of Insurance section of the policy. Dependent unmarried children are covered to age 21 or 25 if a full-time student. The company reserves the right to change the premiums on all policies of this form in the entire state.

Limitations and Exclusions

1. This Policy pays a benefit only for the Positive Diagnosis of Cancer. Pathologic proof thereof must be submitted. Clinical diagnosis of Cancer shall be accepted as evidence that Cancer exists in a Covered Person when a pathological diagnosis cannot be made or is medically inappropriate, provided such medical evidence substantially documents the diagnosis of Cancer, and the Covered Person receives medically necessary care as the result of Cancer. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 3. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

Pre-Existing Condition Limitation

During the first 12 months following the Effective Date of this Policy, any Positive Diagnosis of Cancer that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Cancer. However, benefits will be provided for a Positive Diagnosis of Cancer that occurs after the first 12 months of the Effective Date of this Policy.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

During the first 12 months following the Effective Date of this Policy, any Positive Diagnosis of Cancer that occurs due to a Pre-Existing Condition is not covered and no benefits will be payable under this Policy in connection with such Cancer. However, benefits will be provided for a Positive Diagnosis of Cancer that occurs after the first 12 months of the Effective Date of this Policy.

WASHINGTON

Policy Form FOB13-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 the Policy by delivering it or mailing it to the insurance producer who took your application or to 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, 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."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company

reserves the right to change the premiums on all policies on this form in the entire state. Dependent unmarried children can be covered under the age of 26.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period." This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period," the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

Termination of Insurance

Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; (b) the last premium due date if the premium is not paid before the end of the grace period; (c) upon the payment of the benefits; however, any remaining covered dependents shall remain covered until their benefit is paid; (d) 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; (e) coverage of an Insured Child ends on the premium due date next 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 incapacities and dependency, however, we will not require such proof more than once a year after the dependent child attains age 26; or, (f) if you die while this Policy is in force, your Insured Spouse will be deemed to be 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 after the coverage for a Covered Person has terminated will be considered premium for the persons still covered under this Policy.

OPTIONAL RIDER BENEFITS -Cancer Screening Benefit Rider

Termination

This Rider terminates at the end of the grace period for the payment of the premium for the Policy or this Rider, if the Policy terminates, or on the next renewal date after a request for termination.

WICONSIN

Policy Form FOB13

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 the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies on this form in the entire state. Dependent unmarried children can be covered under the age of 25.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 45 day "waiting period." This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 45 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period," the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

Termination of Insurance

Coverage under this Policy will end on the earlier of: (a) the date requested in writing by you; (b) the last premium due date if the premium is not paid before the end of the grace period; (c) upon the payment of the benefits; however, any remaining covered dependents shall remain covered until their benefit is paid; (d) 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; (e) coverage of an Insured Child ends on the premium due date next 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 incapacities

and dependency, however, we will not require such proof more than once a year after the dependent child attains age 25; or, (f) if you die while this Policy is in force, your Insured Spouse will be deemed to be 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 after the coverage for a Covered Person has terminated will be considered premium for the persons still covered under this Policy.

OPTIONAL RIDER BENEFITS -Cancer Screening Benefit Rider

Termination

This Rider terminates at the end of the grace period for the payment of the premium for the Policy or this Rider, if the Policy terminates, or on the next renewal date after a request for termination.

WEST VIRGINIA

Policy Form FOB02-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 the Policy by delivering it or mailing it to the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. Clinical diagnosis of Cancer shall be accepted as evidence that Cancer exists when a pathological diagnosis cannot be made or is medically inappropriate, provided such medical evidence substantially documents the diagnosis of Cancer, and the Covered person receives medically necessary care as the result of Cancer. This Policy does not provide benefits for any other disease or sickness or incapacity. 2. The First Occurrence Benefit contains a 30 day "waiting period". This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 30 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the "waiting period", the Covered Person may void the Policy from the beginning and receive a full refund of premium. 3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household. 4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled "Time Limit on Certain Defenses," the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.

WYOMING

Policy Form FOB02-WY

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 the agent who took your application or to our Administrative Office at 10777 Northwest Freeway, Houston, Texas 77092. You must do this within 30 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. When returning this Policy under this provision, you should state: "This Policy is returned for cancellation and refund of premium."

Guaranteed Renewable for Life

The only way the policy can be canceled is for failure to pay premiums or upon the payment of the benefit amount; however, any remaining covered dependents shall remain covered until the benefit amount is paid subject to the Termination of Insurance section of the policy. The company reserves the right to change the premiums on all policies of this form in the entire state. Dependent unmarried children are covered to age 21 or 25 if a full-time student.

Limitations and Exclusions

1. The First Occurrence Benefit pays a benefit only for the First Diagnosis of internal Cancer or malignant melanoma (this excludes all other skin cancer). Pathologic proof thereof must be submitted. This Policy does not provide benefits for any other disease or sickness or incapacity.

2. The First Occurrence Benefit contains a 30 day “waiting period”. This means that the First Occurrence Benefit is not payable to anyone who has Cancer diagnosed before the Policy has been in force 30 days from the Effective Date as shown in the Policy Schedule. If a Covered Person has Cancer first diagnosed during the “waiting period”, the Covered Person may void the Policy from the beginning and receive a full refund of premium.

3. This Policy will not pay benefits if the diagnosis of Cancer is made by you or a member of your immediate family or household.

4. This Policy will not pay benefits if the diagnosis of Cancer is made outside the United States or its Territories.

OPTIONAL RIDER BENEFITS - Intensive Care Unit Rider

Limitations and Exclusions - Benefits reduced 50% at age 70

Subject to the provision entitled “Time Limit on Certain Defenses,” the Rider will not pay for Intensive Care confinements where the cause for such confinement is (1) in any type of hospital room, ward or unit other than an ICU; (2) due to any attempt at suicide or intentionally self-inflicted injury; (3) due to injuries sustained in consequence of a Covered Person committing a felony or under the influence of drugs not administered on the advice of a physician; (4) a result of alcoholism or drug addiction; or (5) a heart condition or aggravated by a heart condition and the Covered Person had received medical advice, treatment or diagnosis of a heart attack, heart condition, heart trouble, or any abnormal condition of his heart prior to the Effective Date of the Rider.