

EMPLOYEE GUIDE

Critical Illness Insurance

Policy features and benefits specially prepared for Total Management Resources



Be prepared for the unexpected

You may know someone who has been affected by a critical illness such as cancer, stroke or heart attack, and witnessed the resulting challenges. Are you prepared if a critical illness were to happen to you? Kemper Health Critical Illness insurance can help you when you need it most.

How it Works

- 1. Select one of the benefit amounts offered.
- 2. When the diagnosis of a covered critical illness occurs, the policy pays you a lump-sum benefit amount based on the plan level you choose and the illness.
- 3. Should there be a reoccurrence of the same illness or an additional diagnosis of a different covered illness, the plan provides ongoing benefits. See the certificate for details.

Features & Extras

- Coverage is fully portable.
- Spouse/children covered at 50% of employee.
- Additional \$50 wellness benefit.

Cash benefits are paid directly to the insured with no restrictions on how the funds can be used.

Our Critical Illness insurance policy provides a lump-sum benefit payment upon diagnosis of a covered illness, paid directly to you. It provides ongoing benefits should there be a reoccurrence of the same illness or an additional diagnosis of a different covered illness.

The cash benefit is paid directly to you and can be used any way you choose.

- Finding the best healthcare available—anywhere
- Hiring a nurse or caregiver to help at home
- Or whatever else you need

PRODUCT FEATURES AND	BENEFITS					
Benefit Amount	\$10,000 or \$20,000					
Guaranteed Issue	\$20,000					
100% Benefits	Heart Attack, Stroke, Invasive Cancer, Sudden Cardiac Arrest, End Stage Renal (Kidney) Failure, Major Organ Failure, Benign Brain Tumor, Coma, Severe Burns, Complete Loss of Hearing, Complete Loss of Sight, Complete Loss of Speech, Type 1 Diabetes, Multiple Sclerosis (MS), Muscular Dystrophy, Myasthenia Gravis, Paralysis, Amyotrophic Lateral Sclerosis (ALS)					
50% Benefits	dvanced Alzheimer's Disease, Advanced Parkinson's Disease, Coronary Artery Disease Bypass Surgery), Ruptured Aneurysm					
25% Benefits	Non-invasive Cancer, Diphtheria, Encephalitis, Heart Valve Surgery, Huntington's Disease, Rabies, Rocky Mountain Spotted Fever, Tay-Sachs Disease, Tetanus, Tuberculosis					
10% Benefits	Coronary Artery Disease (Angioplasty or Atherectomy), Heart Catheterization, Transient Ischemic Attack (TIA)					
Dependent Coverage	Spouse/Children covered at 50% of employee's benefit amount					
Additional Occurrence Benefit	100% after 6 months					
Reoccurrence Benefit	100% after 12 months (a "reoccurrence" must be diagnosed as a reoccurrence, rather than a continuation of the initial covered occurrence)					
Childhood Conditions	100% Cerebral Palsy, Cleft Lip or Cleft Palate, Down Syndrome, Spina Bifida 25%, Cystic Fibrosis					
Wellness	\$50					
Skin Cancer	\$100					
Second Opinion	\$250					
Non-Local Transportation and Lodging Benefits	Transportation: \$500 airfare; \$.50/mile up to 1,000 miles; not to exceed \$5,000 per a 12 month period Outpatient Lodging: \$100 per day, not to exceed \$1,000 per a 12 month period					
Cancer Benefit Waiting Period	None					
Pre-Existing Conditions	12/12					
Plan Termination	None					
Portability	Yes					

Exclusions and Limitations

Exclusions

Benefits under the Policy and any attached rider(s) will not be payable for any loss caused in whole or in part by or resulting in whole or part from the following:

- 1. A Critical Illness, as listed in the Schedule of Benefits, occurring prior to the Policy Effective Date of coverage for an Insured Person;
- 2. Suicide or attempt at suicide, or intentional self-inflicted injury or sickness;
- 3. Participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a Physician or taken according to the Physician's instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the loss occurs;
- 4. Participating in any sport or sporting activity for wage, compensation or profit;
- 5. Commission of or attempt to commit an assault or felony;
- 6. Engaging in an illegal activity or occupation;
- 7. Diagnosis, services or treatment provided by an Immediate Family Member;
- 8. Active service, training, or duty in the Armed Forces, National Guard or Reserves of any state or country and for which any governmental body or its agencies are liable;
- 9. Diagnosis or treatment incurred outside the United States or its territories;
- 10. Declared war or any act of declared war;
- 11. Travel in or descent from an aircraft, except while a fare-paying passenger; or
- 12. An Experimental major human organ transplant.

Limitations

During the first 12 month(s) following the Policy Effective Date of coverage for an Insured Person, losses incurred for a Pre-Existing Condition will not be covered. After this initial 1-12 month(s) period, benefits for such conditions will be payable unless specifically excluded from coverage. This Pre-Existing Condition Limitation will not apply to newborn or newly adopted children as they are automatically eligible for insurance upon birth or placement. This Pre-Existing Condition Limitation does not apply to the Wellness Benefit Rider.

Pre-Existing Condition means any sickness, injury or condition for which medical advice, diagnosis or treatment was recommended by a physician or received from a physician within one-year before the effective date of the coverage of the insured person.

Some provisions, exclusions or limitations may vary by state. See the certificate for details.

Attained Age Enhanced Plan

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	ľ	Non-Tobacco					Tobacco		
\$10,000 Face Amount						\$10,	,000 Face Amo	unt	
	E	Employee and	Employee and				Employee and	Employee and	
Age Band	Employee Only	Spouse	Child	Family	Age Band	Employee Only	Spouse	Child	Family
18-25	\$0.87	\$1.41	\$1.62	\$2.34	18-25	\$0.91	\$1.48	\$1.66	\$2.41
26-30	\$1.15	\$1.84	\$1.90	\$2.77	26-30	\$1.27	\$2.02	\$2.02	\$2.96
31-35	\$1.50	\$2.37	\$2.25	\$3.30	31-35	\$1.77	\$2.79	\$2.52	\$3.72
36-40	\$2.12	\$3.29	\$2.87	\$4.23	36-40	\$2.73	\$4.26	\$3.48	\$5.20
41-45	\$3.08	\$4.76	\$3.83	\$5.69	41-45	\$4.41	\$6.84	\$5.15	\$7.77
46-50	\$4.44	\$6.84	\$5.19	\$7.78	46-50	\$7.05	\$10.94	\$7.80	\$11.87
51-55	\$6.03	\$9.31	\$6.78	\$10.25	51-55	\$10.48	\$16.25	\$11.23	\$17.19
56-60	\$7.85	\$12.17	\$8.60	\$13.10	56-60	\$14.73	\$22.85	\$15.47	\$23.79
61-65	\$10.92	\$16.94	\$11.67	\$17.88	61-65	\$21.96	\$34.08	\$22.71	\$35.01
66-70	\$15.13	\$23.46	\$15.88	\$24.40	66-70	\$31.63	\$49.10	\$32.38	\$50.03
71+	\$22.64	\$34.90	\$23.39	\$35.83	71+	\$42.95	\$66.53	\$43.70	\$67.46

	\$20	,000 Face Amo	unt			\$20	,000 Face Amo	unt	
		Employee and	Employee and				Employee and	Employee and	
Age Band	Employee Only	Spouse	Child	Family	Age Band	Employee Only	Spouse	Child	Family
18-25	\$1.43	\$2.26	\$2.66	\$3.80	18-25	\$1.52	\$2.40	\$2.75	\$3.93
26-30	\$1.93	\$3.01	\$3.17	\$4.54	26-30	\$2.16	\$3.36	\$3.40	\$4.90
31-35	\$2.59	\$4.00	\$3.83	\$5.53	31-35	\$3.11	\$4.80	\$4.34	\$6.33
36-40	\$3.76	\$5.75	\$4.99	\$7.28	36-40	\$4.96	\$7.64	\$6.19	\$9.18
41-45	\$5.60	\$8.54	\$6.84	\$10.07	41-45	\$8.18	\$12.60	\$9.41	\$14.13
46-50	\$8.23	\$12.56	\$9.46	\$14.09	46-50	\$13.30	\$20.51	\$14.53	\$22.04
51-55	\$11.31	\$17.34	\$12.54	\$18.87	51-55	\$19.93	\$30.77	\$21.16	\$32.31
56-60	\$14.85	\$22.88	\$16.09	\$24.41	56-60	\$28.14	\$43.53	\$29.37	\$45.07
61-65	\$20.85	\$32.18	\$22.08	\$33.71	61-65	\$42.18	\$65.33	\$43.42	\$66.86
66-70	\$29.11	\$44.97	\$30.35	\$46.50	66-70	\$61.11	\$94.69	\$62.34	\$96.23
71+	\$44.01	\$67.64	\$45.24	\$69.17	71+	\$83.72	\$129.48	\$84.95	\$131.02

Attained Age Enhanced Plan

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_		Non-Tobacco					Tobacco		
	\$10,	,000 Face Amo	ount			\$10,000 Face Amount			
		Employee and	Employee and				Employee and	Employee and	
Age Band	Employee Only	Spouse	Child	Family	Age Band	Employee Only	Spouse	Child	Family
18-25	\$3.75	\$6.11	\$7.00	\$10.14	18-25	\$3.92	\$6.41	\$7.17	\$10.44
26-30	\$4.96	\$7.97	\$8.21	\$12.00	26-30	\$5.48	\$8.75	\$8.73	\$12.81
31-35	\$6.50	\$10.27	\$9.75	\$14.30	31-35	\$7.67	\$12.07	\$10.90	\$16.10
36-40	\$9.17	\$14.26	\$12.42	\$18.31	36-40	\$11.83	\$18.46	\$15.08	\$22.51
41-45	\$13.35	\$20.61	\$16.58	\$24.64	41-45	\$19.09	\$29.64	\$22.32	\$33.67
46-50	\$19.24	\$29.64	\$22.49	\$33.69	46-50	\$30.55	\$47.39	\$33.80	\$51.44
51-55	\$26.11	\$40.34	\$29.36	\$44.40	51-55	\$45.41	\$70.42	\$48.66	\$74.47
56-60	\$34.00	\$52.72	\$37.25	\$56.75	56-60	\$63.81	\$99.02	\$67.04	\$103.07
61-65	\$47.32	\$73.41	\$50.57	\$77.46	61-65	\$95.14	\$147.68	\$98.39	\$151.71
66-70	\$65.56	\$101.66	\$68.81	\$105.71	66-70	\$137.04	\$212.75	\$140.29	\$216.78
71+	\$98.09	\$151.21	\$101.34	\$155.24	71+	\$186.12	\$288.30	\$189.37	\$292.33
	\$20,	,000 Face Amo	ount			\$20,	,000 Face Amo	unt	
	Employee and Employee and						Employee and	Employee and	
Age Band	Employee Only	Spouse	Child	Family	Age Band	Employee Only	Spouse	Child	Family
18-25	\$6.20	\$9.79	\$11.53	\$16.45	18-25	\$6.57	\$10.38	\$11.90	\$17.03
26-30	\$8.36	\$13.02	\$13.72	\$19.67	26-30	\$9.36	\$14.56	\$14.71	\$21.21
31-35	\$11.22	\$17.31	\$16.58	\$23.94	31-35	\$13.46	\$20.78	\$18.79	\$27.43
36-40	\$16.27	\$24.90	\$21.62	\$31.55	36-40	\$21.47	\$33.11	\$26.82	\$39.76
41-45	\$24.27	\$36.99	\$29.62	\$43.62	41-45	\$35.43	\$54.58	\$40.78	\$61.23
46-50	\$35.64	\$54.41	\$40.99	\$61.06	46-50	\$57.63	\$88.86	\$62.96	\$95.51
51-55	\$48.99	\$75.14	\$54.34	\$81.77	51-55	\$86.34	\$133.34	\$91.69	\$139.99
56-60	\$64.35	\$99.13	\$69.70	\$105.76	56-60	\$121.92	\$188.63	\$127.27	\$195.28
61-65	\$90.35	\$139.45	\$95.68	\$146.08	61-65	\$182.78	\$283.08	\$188.13	\$289.73
66-70	\$126.14	\$194.85	\$131.50	\$201.50	66-70	\$264.79	\$410.32	\$270.12	\$416.98
71+	\$190.69	\$293.09	\$196.04	\$299.74	71+	\$362.77	\$561.08	\$368.12	\$567.73

Affordable protection in an ever-changing world.

At Kemper Health we understand the changes that affect our customers' lives and their need for affordable insurance. Our voluntary benefits play a critical role in employees' financial well-being by helping fill the gaps in major medical plans, preparing for retirement and providing financial protection from the unexpected.

kemperbenefits.com

Policies issued by:

Reserve National Insurance Company A Kemper Life and Health Company

Oklahoma City, Oklahoma

Policy Form Series KB-MCI and KB-ECI. Form numbers may vary by state.

Kemper Health, kemperbenefits.com, is part of Kemper Corporation (NYSE: KMPR) is one of the nation's leading, with subsidiaries that provide an array of products to the individual and business markets. Kemper's underwriting companies are rated "A-" (Excellent) for financial strength and ability to meet policyowner obligations by A.M. Best Company, a leading insurance rating authority.

Kemper Corporation's underwriting company for the Kemper Health voluntary worksite life, accident and health insurance products is Reserve National Insurance Company, which is responsible for the underwriting risks, financial and contractual obligations and support functions associated with the products it issues. Kemper Corporation is not responsible for the products of any of its underwriting companies.

This is only a summary of products and services offered. Actual offerings may vary by group size and other underwriting considerations, and are subject to the requirements of state insurance laws and regulations, and the benefits/provisions as described may vary due to such requirements. All products are subject to the terms, conditions, limitations and exclusions of the specific policy. Please see the specific policy and certificate for details. Policies are not available in all states.

The Kemper Health insurance plans, either alone or in combination with each other, are not "minimum essential coverage" under the federal Affordable Care Act.

IMPORTANT: If an individual is insured under one or more Kemper Health insurance plans, and is also covered by Medicaid or a state variation of Medicaid, most non-disability benefits are automatically assigned according to state regulations. This means that instead of paying the benefits to the insured individual, we must pay the benefits to Medicaid or the medical provider to reduce the charges billed to Medicaid. Proposed insureds should consider their circumstances before enrolling in Kemper Health coverage.

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