

# Cash benefits when you need them most – Cancer Insurance from Chubb

A cancer diagnosis and treatment can be an emotionally and physically difficult time. Chubb is there to help support you by providing cash benefits paid directly to you. Benefits are paid if you are diagnosed with cancer, but also help cover many other cancer-related services such as doctor’s visits, treatments, specialty care, and recovery. However, there are no restrictions on how to use these cash benefits—so you can use them as you see fit.

Choose the right level of coverage during the enrollment period to better protect your family.

## Cash benefits for every step of the way

Cancer Insurance Benefits	Low Plan	High Plan
<b>Diagnosis of cancer</b>	Employee or spouse: \$2,500 Child(ren): \$3,750 Waiting period: 0 days Benefit reduction: none	Employee or spouse: \$2,500 Child(ren): \$3,750 Waiting period: 0 days Benefit reduction: none
<b>Hospital confinement</b>	Employee and spouse: \$100 per day – days 1 through 90 Additional days: \$100 Child(ren): \$100 per day – days 1 through 90 Additional days: \$100	Employee and spouse: \$300 per day – days 1 through 90 Additional days: \$300 Child(ren): \$300 per day – days 1 through 90 Additional days: \$300
<b>Radiation therapy, chemotherapy, immunotherapy</b>	\$500 maximum per month Maximum per covered person per 12-month period	\$1,500 maximum per month Maximum per covered person per 12-month period
<b>Alternative care</b>	\$75 per visit Maximum visits per calendar year: 4	\$75 per visit Maximum visits per calendar year: 4
<b>Attending physician</b>	\$30 per visit Maximum visits per confinement: 2 Maximum visits per calendar year: 4	\$50 per visit Maximum visits per confinement: 2 Maximum visits per calendar year: 4
<b>Family care</b>	Childcare: \$100 per day per child Maximum days per calendar year: 30 Adult day care or home healthcare: \$100 per day Maximum days per calendar year: 30	Childcare: \$100 per day per child Maximum days per calendar year: 30 Adult day care or home healthcare: \$100 per day Maximum days per calendar year: 30

## Cash benefits for every step of the way (cont.)

<b>Cancer Insurance Benefits</b>	<b>Low Plan</b>	<b>High Plan</b>
<b>Prescription drug in-patient</b>	Per confinement: \$150 Maximum confinements per calendar year: 6	Per confinement: \$150 Maximum confinements per calendar year: 6
<b>Private full-time nursing services</b>	\$150 per day Maximum days per calendar year: 4	\$150 per day Maximum days per calendar year: 4
<b>U.S. government or charity hospital</b>	Days 1 through 30: \$100 Additional days: \$100 Maximum days per confinement: 15	Days 1 through 30: \$300 Additional days: \$300 Maximum days per confinement: 15
<b>Specialty Care Benefits</b>	<b>Low Plan</b>	<b>High Plan</b>
<b>Family member transportation and lodging</b>	Family transportation: \$100 per trip Maximum trips per calendar year: 12 Family lodging: \$100 per day Maximum days per calendar year: 100	Family transportation: \$100 per trip Maximum trips per calendar year: 12 Family lodging: \$100 per day Maximum days per calendar year: 100
<b>Home health care</b>	\$100 per day not to exceed the number of days confined	\$300 per day not to exceed the number of days confined
<b>Hospice care</b>	\$50 per day	\$100 per day
<b>Skilled nursing care facility</b>	\$100 per day Maximum days per calendar year limited to number of days of hospital confinement	\$300 per day Maximum days per calendar year limited to number of days of hospital confinement
<b>Cancer Treatment Benefits</b>	<b>Low Plan</b>	<b>High Plan</b>
<b>Air ambulance</b>	\$2,000 per trip Maximum trips per confinement: 2	\$2,000 per trip Maximum trips per confinement: 2
<b>Ambulance</b>	\$200 per trip Maximum trips per confinement: 2	\$200 per trip Maximum trips per confinement: 2
<b>Blood, plasma, and platelets</b>	\$150 per transfusion Maximum transfusions per calendar year: 2	\$250 per transfusion Maximum transfusions per calendar year: 2
<b>Bone marrow or stem cell donation</b>	\$100 per confinement Lifetime maximum donations: 2	\$100 per confinement Lifetime maximum donations: 2
<b>Bone marrow or stem cell transplant</b>	First bone marrow transplant: \$1,500 Lifetime maximum transplant(s): 1 First stem cell transplant: \$500 Lifetime maximum transplant(s): 1	First bone marrow transplant: \$4,500 Lifetime maximum transplant(s): 1 First stem cell transplant: \$1,500 Lifetime maximum transplant(s): 1
<b>Hormonal therapy</b>	\$50 per treatment Maximum treatments per calendar year: 12	\$50 per treatment Maximum treatments per calendar year: 12
<b>Counseling</b>	\$75 per visit Maximum visits per calendar year: 6	\$75 per visit Maximum visits per calendar year: 6

## Cash benefits for every step of the way (cont.)

<b>Hair piece</b>	\$50 per hair piece Lifetime maximum: 1	\$50 per hair piece Lifetime maximum: 1
<b>Non-surgical prosthesis</b>	\$100 Lifetime maximum number of devices: 1	\$100 Lifetime maximum number of devices: 1
<b>Recovery at home</b>	\$100 per day not to exceed the number of days confined Maximum days per calendar year: 15	\$100 per day not to exceed the number of days confined Maximum days per calendar year: 15
<b>Therapy</b>	\$25 per day of therapy Maximum days per calendar year: 15	\$25 per day of therapy Maximum days per calendar year: 15
<b>Transportation and lodging</b>	Transportation: \$100 per trip Maximum trips per calendar year: 12 Lodging: \$100 per day Maximum days per calendar year: 100	Transportation: \$100 per trip Maximum trips per calendar year: 12 Lodging: \$100 per day Maximum days per calendar year: 100
<b>Preventative and Wellness Benefits</b>	<b>Low Plan</b>	<b>High Plan</b>
<b>Cancer wellness</b>	\$50 Maximum days of service, per covered person per calendar year: 1 day(s) Waiting period: 0 days	\$50 Maximum days of service, per covered person per calendar year: 1 day(s) Waiting period: 0 days
<b>Genetic tumor testing</b>	\$100 per test Maximum tests per calendar year: 1	\$100 per test Maximum tests per calendar year: 1
<b>Heritable cancer screening</b>	\$75 Maximum tests per calendar year: 1	\$75 Maximum tests per calendar year: 1
<b>Pharmacogenomic (PGX) screening test</b>	\$100 per test Maximum tests per calendar year: 1	\$100 per test Maximum tests per calendar year: 1
<b>Heart Attack or Stroke Benefit</b>	<b>Low Plan</b>	<b>High Plan</b>
<b>Heart attack or stroke</b>	Employee and spouse: \$2,500 Child(ren): \$2,500 Recurrence benefit: \$1,250 Waiting period: 0 days Benefit reduction: none	Employee and spouse: \$2,500 Child(ren): \$2,500 Recurrence benefit: \$1,250 Waiting period: 0 days Benefit reduction: none
<b>Specified Disease Benefits</b>	<b>Low Plan</b>	<b>High Plan</b>
	Waiting period: 0 days Benefit reduction: None	Waiting period: 0 days Benefit reduction: None
<b>Hospital confinement for specified disease benefit</b>	\$100 per day – days 1 through 30 Additional days: \$100 Maximum days per confinement: 31	\$300 per day – days 1 through 30 Additional days: \$300 Maximum days per confinement: 31
<b>Surgical Treatment Benefits</b>	<b>Low Plan</b>	<b>High Plan</b>
<b>Waiting period</b>	Waiting period: 0 days	Waiting period: 0 days
<b>Surgery</b>	Up to \$2,000	Up to \$5,000

## Cash benefits for every step of the way (cont.)

<b>Anesthesia</b>	General anesthesia: 25% of surgery benefit Maximum benefits per calendar year: 2	General anesthesia: 25% of surgery benefit Maximum benefits per calendar year: 2
<b>Outpatient surgery facility service</b>	\$150 per day Maximum benefits per calendar year: 4	\$150 per day Maximum benefits per calendar year: 4
<b>Reconstructive surgery</b>	Breast TRAM flap: \$2,000 Breast reconstruction: \$500 Breast symmetry: \$500 Facial reconstruction: \$500	Breast TRAM flap: \$2,000 Breast reconstruction: \$500 Breast symmetry: \$500 Facial reconstruction: \$500
<b>Second and third opinion</b>	\$300 Maximum benefits per calendar year: 2	\$300 Maximum benefits per calendar year: 2
<b>Surgical prosthesis</b>	\$1,000 per device Lifetime maximum benefit amount: \$1,000	\$3,000 per device Lifetime maximum benefit amount: \$3,000
<b>Accident and Sickness Benefits</b>	<b>Low Plan</b>	<b>High Plan</b>
<b>Hospital intensive care for accident or sickness</b>	Hospital confinement ICU for accident or sickness benefit: \$600 Maximum number of days per confinement: 45	Hospital confinement ICU for accident or sickness benefit: \$600 Maximum number of days per confinement: 45
<b>Advocacy Package</b>	<b>Low Plan</b>	<b>High Plan</b>
<b>Kindly Human™</b> Participants can talk for up to six hours total per year for pre-clinical peer-to-peer connections and navigation across real-life issues.	Included	Included

## Additional plan benefits

<b>Renewability</b>	Conditionally Renewable Coverage is automatically renewed as long as the insured is an eligible employee, premiums are paid as due, and the policy is in force.
<b>Portability</b>	Portability Employees can keep their coverage if they change jobs or retire while the policy is in-force.
<b>Continuity of coverage</b>	Included
<b>Pre-existing conditions limitation</b>	A condition for which a covered person received medical advice or treatment within the 12 months preceding the certificate effective date.
<b>Waiver of premium</b>	Included

## Definitions and provisions

<b>Continuity of coverage</b>	<p>If the certificate replaced another cancer indemnity certificate or individual policy, your coverage under the certificate shall not limit or exclude coverage for a pre-existing condition or waiting period that would have been covered under the policy being replaced.</p> <p>Benefits payable for a pre-existing condition or during the waiting period will be the lesser of the benefits that would have been payable under the terms of the prior coverage if it had remained in force; or the benefits payable under the certificate.</p> <p>Time periods applicable to pre-existing conditions and waiting periods will be waived to the extent that similar limitations or exclusions were satisfied under the coverage being replaced.</p> <p>Continuity of coverage is only extended to the benefits provided under the certificate. The certificate may not include all the benefits provided under the prior coverage.</p>
<b>Definition of cancer</b>	<p>Cancer means carcinoma in situ, leukemia, or a malignant tumor characterized by uncontrolled cell growth and invasion or spread of malignant cells to distant tissue. Cancer is also defined as cancer which meets the diagnosis criteria of malignancy established by the American Board of Pathology after a study of the histocytologic architecture or pattern of the suspect tumor, tissue, or specimen.</p> <p>Carcinoma in situ means a malignant tumor which is typically classified as Stage 0 cancer, where the tumor cells still lie within the tissue of the site of origin without having invaded neighboring tissue.</p> <p>The following are not considered cancer: Pre-malignant conditions or conditions with malignant potential; non-invasive basal cell carcinoma of the skin; non-invasive squamous cell carcinoma of the skin; or melanoma diagnosed as Clark's Level I or II or Breslow less than .75mm.</p>
<b>Plan descriptions</b>	Refer to the Certificate of Coverage for details specific to each plan.

# Exclusions and limitations

No benefits will be paid for a date of diagnosis or treatment of cancer prior to the coverage effective date, except where continuity of coverage applies.

No benefits will be paid for services rendered by a member of the immediate family of a covered person.

We will not pay benefits for other conditions or diseases, except losses due directly from cancer or skin cancer.

We will not pay benefits for cancer or skin cancer if the diagnosis or treatment of cancer is received outside of the territorial limits of the United States and its possessions. Benefits will be payable if the covered person returns to the territorial limits of the United States and its possessions, and a physician confirms the diagnosis or receives treatment.

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## Rates

Monthly Premium	Low Plan	High Plan
Employee only	\$13.12	\$17.90
Employee + spouse	\$22.66	\$36.54
Employee + child(ren)	\$17.34	\$23.44
Family	\$31.90	\$43.40



### Questions?

Contact the FBS Benefits CareLine via the QR code or (833) 453-1680.

\*Please refer to your Certificate of Insurance for a complete listing of available benefits, limitations and exclusions. Underwritten by ACE Property & Casualty Company, a Chubb company. This information is a brief description of the important benefits and features of the insurance plan. It is not an insurance contract. This policy does not constitute comprehensive health insurance coverage (often referred to as "major medical coverage") and does not satisfy a person's individual obligation to secure the requirement of minimum essential coverage under the Affordable Care Act (ACA). For more information about the ACA, please refer to <http://www.HealthCare.gov>.