HM WORKSITE ADVANTAGE

SOLUTIONS THAT PROVIDE OPTIONS AND FLEXIBILITY

HM LIFE INSURANCE COMPANY

Critical Illness
Product Specifications

CRITICAL ILLNESS

Plan Pays for Initial Diagnosis, Reoccurrence and Additional Occurrence

Group Critical Illness coverage from HM Life Insurance Company helps to protect employees and their families in the event of a critical illness or life-changing health event. While health insurance may cover a significant portion of the medical expenses for diagnosing and treating a critical illness, HM's Critical Illness plan pays in addition to any other insurance coverage and pays the benefit directly to the insured.

The benefit dollars may be used by the insured to help replace lost wages and cover bills, meals, child care, travel and any other living expense. Our Critical Illness plan also can complement an employee's High Deductible Health Plan (HDHP) by providing dollars that may be used to satisfy a deductible or help with other uncovered expenses.

Covered Critical Illnesses and Their Payable Benefits

HM Life Insurance Company's Critical Illness product pays a lump sum benefit for three types of diagnoses:

- **First Occurrence** provides a lump sum payment when a covered critical illness is first diagnosed.
- **Reoccurrence** pays when a covered critical illness reoccurs. The reoccurrence must be separated from the initial diagnosis by at least 180 days (365 days treatment-free for cancer) or separated from another reoccurrence by at least 180 days (365 days treatment-free for cancer).
- **Additional Occurrence** pays an additional benefit upon the diagnosis of a covered condition for which benefits previously have not been paid. The diagnosis must be separated from the other critical illness by at least 180 days.

HM Life Insurance Company's Critical Illness product provides benefits for 11 critical illnesses, payable from 10% to 100% of the policy amount.

Plan Tiers

HM Life Insurance Company offers two plan tiers for its Critical Illness product. When the employee is covered, children automatically are covered. Coverage tiers are:

- Employee
- Employee and Spouse*

Group Eligibility

Groups with as few as 10 eligible employees may qualify for coverage. Ten enrolled employees are required to issue the policy. This product is available through payroll deduction.

Employee Eligibility

Employees working a minimum of 15 hours per week or the equivalent hours per month and who have completed their employer-defined eligibility waiting period are eligible to apply for Critical Illness coverage.

Illness	% of Face Amount
Myocardial Infarction (Heart Attack)	100%††
Stroke	100%
Invasive Cancer	100%††
Major Organ Transplant	100%
End-stage Renal Disease (Kidney Failure)	100%
Loss of Sight, Speech or Hearing	100%†

Illness	% of Face Amount
Coma	100%†
Paralysis	100%†
Coronary Artery Bypass	25%†
Carcinoma in Situ	25%†
Skin Cancer	10%†

† Payable once per lifetime.
†† Benefits paid for Carcinoma in Situ, Skin Cancer and Coronary Artery Bypass Surgery reduce the benefit payable for subsequently diagnosed Invasive Cancer and Heart Attack, respectively.

* *Spouse may include domestic partner*

Dependent Coverage

The plan sponsor may choose to offer spouse coverage up to 50%, 75% or 100% of the employee's coverage amount. The spouse benefit is rounded up to the nearest benefit increment to a maximum of $100,000. The spouse must meet underwriting criteria to be approved for coverage. Dependent children receive 25% of the employee's benefit amount, up to $20,000, at no additional cost.

Guaranteed Issue

Certificates are guaranteed issue for employees when the group meets the minimum participation requirement. Higher guaranteed issue amounts are available with employer contribution. The maximum employee guaranteed issue amount by group size is shown in the table below.

Employees requesting coverage in excess of the guaranteed issue amount and coverage requested when the participation requirement is not met will be subject to health questions and underwriting approval. Groups offering plan amounts in excess of $75,000 will require additional medical information for all employees in the group. Spouses are not eligible for guaranteed issue.

Eligible Employees	Maximum Guaranteed Issue Amount	Minimum Participation for Guaranteed Issue
Employee Paid (voluntary)		
500+	$20,000	15%
100 to 499	$10,000	20%
50 to 99	$2,500	40%
10 to 49	$2,500	60% or 10 approved applications, whichever is greater
Employer Paid (non-contributory)		
500+	$30,000	100%
100 to 499	$15,000	100%
50 to 99	$10,000	100%
10 to 49	$5,000	100%

Age Guidelines

Employees and spouses ages 18 to 69 years and dependent children under age 19 years (25 if a full-time student) may enroll for coverage. Benefit amounts are reduced by 50% at age 70. The health screening benefit is not reduced.

Pre-existing Conditions

HM Life Insurance Company's Critical Illness plan has a 12/12 pre-existing condition limitation. Benefits will not be paid for any condition or illness diagnosed or treated within a 12-month period prior to the effective date of the policy. However, a claim for benefits for a loss starting after 12 months from the effective date of the coverage will not be reduced or denied on the grounds that it is caused by a pre-existing condition.

Health Screening Benefit

Each covered person is eligible to receive an annual $50 benefit for one of 19 covered health screenings. We will pay this benefit once per policy year, whether or not there is a supporting diagnosis and regardless of the results of the test. Covered tests include:

- Blood test for triglycerides
- Bone marrow testing
- Breast ultrasound
- CA 15-3 (blood test for breast cancer)
- CA 125 (blood test for ovarian cancer)
- CEA (blood test for colon cancer)
- Chest x-ray
- Colonoscopy
- Fasting blood glucose test
- Flexible sigmoidoscopy
- Hemoccult stool analysis
- Mammography
- Pap test
- PSA (blood test for prostate cancer)
- Serum cholesterol test to determine level of HDL and LDL
- Serum protein electrophoresis (blood test for myeloma)
- Skin review by a dermatologist
- Stress test on a bicycle or treadmill or the use of medication
- Thermography

Criteria for Payment of Benefits

HM Life Insurance Company will pay benefits for each covered condition if all are true:

- The date of diagnosis is after the eligibility waiting period
- The date of diagnosis occurs while the policy is in force, and the covered person has paid the premium
- The cause of the illness or condition is not excluded by name or specific description
- The diagnosis is not a pre-existing condition

Continuation of Coverage

Employees who leave their current employer have the opportunity to continue their coverage if the covered person has been continuously insured for at least 12 consecutive months under this plan or a prior plan, up to the date that employment is terminated. Coverage can be continued until: 1) the date the employer's group policy is terminated, 2) the date the covered person fails to pay the required premium, or 3) the date he or she attains age 70.

Commissions

HM's commission structure provides heaped and level options.

Benefit Amounts

Benefit amounts are available from $2,500 to $200,000 in the increments shown below. Maximum spouse coverage is $100,000.

Range	Increment
$2,500 to $10,000	$500
$10,000 to $100,000	$5,000
$100,000 to $200,000	$10,000

Weekly Premium

The premium chart below shows sample rates per individual employee/spouse; premium amounts may vary by state.
The spouse rate is based on the employee's issue age.

Weekly Rates for Uni-tobacco

Issue Age	Benefit Amount											
	$2,500	$5,000	$10,000	$15,000	$20,000	$25,000	$30,000	$50,000	$75,000	$100,000	$150,000	$200,000
18-24	$0.23	$0.35	$0.59	$0.83	$1.06	$1.30	$1.54	$2.49	$3.67	$4.77	$6.93	$9.09
25-29	0.35	0.53	0.90	1.27	1.64	2.01	2.38	3.86	5.70	7.46	10.95	14.43
30-34	0.52	0.81	1.39	1.97	2.54	3.12	3.70	6.02	8.92	11.74	17.33	22.91
35-39	0.79	1.27	2.22	3.18	4.13	5.08	6.04	9.85	14.62	19.30	28.63	37.96
40-44	1.21	1.99	3.54	5.09	6.64	8.19	9.74	15.95	23.71	31.38	46.68	61.98
45-49	1.80	3.00	5.39	7.79	10.19	12.59	14.99	24.58	36.57	48.47	72.24	96.01
50-54	2.58	4.37	7.94	11.51	15.09	18.66	22.23	36.52	54.38	72.16	107.68	143.19
55-59	3.47	5.96	10.95	15.93	20.92	25.90	30.88	50.82	75.75	100.58	150.22	199.85
60-64	4.33	7.54	13.96	20.39	26.81	33.23	39.65	65.33	97.44	129.46	193.46	257.46
65-69	4.60	8.10	15.10	22.11	29.11	36.11	43.12	71.13	106.14	141.07	210.89	280.71

Weekly Rates for Non-tobacco

Issue Age	Benefit Amount											
	$2,500	$5,000	$10,000	$15,000	$20,000	$25,000	$30,000	$50,000	$75,000	$100,000	$150,000	$200,000
18-24	$0.21	$0.32	$0.53	$0.75	$0.97	$1.18	$1.40	$2.26	$3.34	$4.33	$6.27	$8.22
25-29	0.31	0.48	0.81	1.15	1.48	1.82	2.15	3.49	5.16	6.75	9.89	13.02
30-34	0.44	0.69	1.18	1.68	2.18	2.67	3.17	5.15	7.63	10.03	14.78	19.53
35-39	0.67	1.08	1.90	2.71	3.52	4.34	5.15	8.41	12.47	16.46	24.39	32.32
40-44	0.97	1.59	2.84	4.08	5.33	6.58	7.82	12.80	19.03	25.17	37.41	49.65
45-49	1.44	2.40	4.32	6.25	8.17	10.09	12.01	19.70	29.32	38.84	57.86	76.88
50-54	2.07	3.50	6.36	9.22	12.09	14.95	17.81	29.26	43.57	57.80	86.21	114.62
55-59	2.78	4.77	8.77	12.76	16.75	20.74	24.73	40.70	60.66	80.53	120.24	159.95
60-64	3.47	6.04	11.18	16.32	21.46	26.60	31.74	52.31	78.01	103.63	154.83	206.03
65-69	3.68	6.48	12.09	17.70	23.30	28.91	34.52	56.94	84.98	112.93	168.78	224.64

Weekly Rates for Tobacco

Issue Age	Benefit Amount											
	$2,500	$5,000	$10,000	$15,000	$20,000	$25,000	$30,000	$50,000	$75,000	$100,000	$150,000	$200,000
18-24	$0.30	$0.45	$0.75	$1.06	$1.36	$1.66	$1.96	$3.17	$4.68	$6.10	$8.91	$11.72
25-29	0.45	0.68	1.16	1.63	2.11	2.58	3.05	4.95	7.32	9.60	14.13	18.66
30-34	0.74	1.16	1.99	2.82	3.65	4.48	5.31	8.64	12.80	16.87	24.97	33.07
35-39	1.14	1.83	3.20	4.58	5.95	7.32	8.70	14.19	21.06	27.84	41.37	54.89
40-44	1.93	3.17	5.64	8.11	10.58	13.05	15.51	25.39	37.74	50.00	74.49	98.97
45-49	2.87	4.78	8.60	12.43	16.25	20.08	23.90	39.20	58.32	77.35	115.38	153.41
50-54	4.13	6.98	12.68	18.38	24.09	29.79	35.49	58.31	86.82	115.26	172.08	228.90
55-59	5.55	9.53	17.49	25.45	33.41	41.38	49.34	81.19	121.00	160.73	240.15	319.57
60-64	6.93	12.06	22.32	32.58	42.84	53.10	63.36	104.41	155.71	206.93	309.33	411.73
65-69	7.35	12.95	24.14	35.33	46.52	57.72	68.91	113.68	169.64	225.52	337.23	448.94

Definitions, Exclusions and Limitations

This is only a product highlight document. It is not intended to be a complete or legal description of the coverage. Certain definitions, exclusions and limitations apply and may vary by state. Please refer to the Certificate of Coverage for complete details. A copy of the standard definitions, exclusions and limitations can be obtained by visiting our Web site at **www.hminsurancegroup.com**.

HM INSURANCE GROUP
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IT'S OUR POLICY TO PROTECT.

HM Life Insurance Company, rated "A-" (Excellent) by A.M. Best, is a member of HM Insurance Group, providing health risk solutions to employers and employees.