

Specified Disease Insurance

Financial relief when it's needed most



Specified Disease Insurance

A cancer diagnosis, heart attack or other life-altering condition usually leads to unknown and unexpected costs. Specified disease insurance can help lessen the impact by paying a lump-sum benefit to employees that can be used for anything, so they can concentrate more on their recovery and less on their finances.

First Symetra Specified Disease Insurance pays a lump-sum benefit directly to an insured upon the first diagnosis of a covered condition after the policy is in effect. Insureds can spend their benefit dollars in any way they choose, and benefits are paid regardless of any other insurance they may have.

What's covered

Coverage includes the seven conditions listed below.

Covered specified disease conditions

- Invasive cancer
- ✓ Heart attack
- ✓ Stroke
- ✓ End
- ✓ Major organ failure
- ✓ Minor cancer
- End-stage renal disease
- Obstructive coronary artery disease

Family coverage

Primary insureds, spouses and domestic partners age 18 and older, plus dependent children up to age 26, are eligible for coverage.

Benefit amounts

Primary insured	\$5,000 to \$50,000*
Spouse or domestic partner (as defined by state or federal law)	50% of primary insured's benefit
Children up to age 26	25% of primary insured's benefit; not to exceed \$10,000

*Higher amounts may be available. Talk to your First Symetra representative to learn more.

How it works

In this example, Emil and Analía have specified disease insurance with a \$20,000 benefit amount. Emil suffers a heart attack, and Analía is diagnosed with cancer. They each receive a lump-sum benefit, which they can use however they choose.

	Percent of eligible benefit amount	Specified disease insurance pays
Emil (primary insured)	100%	\$20,000
Analía (spouse)	50%	\$10,000

Key features

Eligibility

You can offer coverage to eligible full-time and part-time employees who work an average of 15 or more hours per week.²

Minimum participation requirements

The greater of 25 enrolled employees or 10% of all eligible employees.

Premium rates

Employee rates can be calculated on an age-banded basis.

Continuation of coverage

Allows the primary insured, their spouse/domestic partner and dependent children to continue coverage if employment or membership terminates.

Benefit waiting period

Coverage begins 30 days from the date of enrollment. If the coverage amount is later increased, another 30-day waiting period will apply.

Preexisting conditions

Benefits will not be paid for any condition diagnosed or treated during the six months before the effective date of coverage. New claims for preexisting conditions are covered once the policy has been in effect for six months.

Optional benefits

Health screening benefit

Pays \$50-\$150 per covered primary insured or spouse* per calendar year for the following imaging and laboratory tests:

- Biopsy
- Blood test for triglycerides
- ✓ Bone marrow testing
- ✓ Breast ultrasound
- ✓ CA 125 (blood test for ovarian cancer)
- ✓ CA 15-3 (blood test for breast cancer)
- CEA (blood test for colon cancer)

*Not available for dependent children.

- ✓ Chest X-ray
- Colonoscopy
- ✓ Fasting blood glucose test
- Flexible sigmoidoscopy
- Hemoccult stool specimen
- 🗸 Mammogram
- 🖌 Pap test

Guaranteed issue

Coverage is guaranteed issue (GI) when minimum participation requirements are met. Other important factors will be evaluated, including company financial strength, industry, workforce demographics, plan design and the voluntary benefits enrollment strategy. Higher guaranteed issue amounts could be available based on these factors or with employer contributions.

Group size	Minimum benefit	GI up to
100–299 lives	\$5,000	\$50,000
300-999 lives	\$5,000	\$50,000
1,000+ lives	\$5,000	\$50,000

- ✓ PSA (prostate-specific antigen) test
- Serum cholesterol test to determine HDL/LDL level
- Serum protein electrophoresis (blood test for myeloma)
- ✓ Stress test on a bicycle or treadmill
- ✓ Thermography

Product highlights

 Benefit amounts from \$5,000 to \$50,000.

- Guaranteed issue with no medical underwriting.³
- Benefits can be spent however insureds want.
- Spouse and dependent coverage is available.

Peace of mind after a serious illness

Medical advancements have greatly improved our ability to manage serious health events. But individuals may face steep out-of-pocket costs for their treatment, plus other costs not covered by a health plan.

Specified disease insurance can help provide the financial support your employees may need during recovery.

Note: Any specified disease benefits totaling more than the costs incurred for medical care are generally taxable if the employee or employer paid the premium on a pre-tax basis. It's also important to note that specified disease benefits may affect eligibility for public assistance like federal, state or local welfare programs. For specific information, please consult a tax professional.

To learn more about First Symetra Specified Disease Insurance, contact your First Symetra representative.



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- ¹ Subject to underwriting guidelines.
- ² Some industries may require a minimum eligibility of 30 hours per week and/or coverage will not be available for workers who are not classified as employees.
- ³ Guaranteed issue amounts are determined by a group's industry, case characteristics and demographics. They're available for selection without evidence of insurability (EOI) during open or annual enrollment. EOI is required for late entrants.