

# Critical illness insurance

## Get ahead of life's twists and turns

Critical illness insurance provides a cash payment after diagnosis of a covered condition such as a heart attack or cancer.



### Why critical illness insurance makes sense

Critical illnesses are expensive. It's easy to understand how unpaid medical bills can threaten a family's financial future. While you can't prevent a diagnosis in your family, you can help protect your finances with additional, cost-effective coverage.

### Key benefits

- \$50 health and wellness benefit available to everyone insured for completing an eligible health screening, including an annual exam
- Examples of critical illnesses include heart attack, stroke, cancer, infertility, type 1 diabetes, autism and others
- No exclusions for pre-existing health conditions, but covered diagnoses must occur after the coverage effective date
- May be paid again when the same critical illness occurs after a stated separation period
- No health exam or questions required to purchase critical illness insurance
- Cash payments paid directly to you to use for medical and non-medical expenses
- Additional payments may be available if also enrolled in accident and/or hospital indemnity insurance



### Here's an example of how it works\*



**Jill elects** a \$20,000 amount of coverage for herself from the plan offered by Purdue.



**A year later** she suffers a heart attack (as defined in the policy). She recovers fully.



**Jill submits a claim and gets a \$20,000 payment** from Securian.



**Jill uses the money** to pay for child care while she recovers.

\*Actual experience and benefit payouts may vary from this example.

## What does your critical illness plan cover and how much will you receive?

It provides a cash payment directly to you to help manage expenses associated with a covered critical illness.

| Employee coverage  | Spouse coverage                     | Child coverage                      | Dependent parent coverage           |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| <b>\$10,000, \$20,000 or \$30,000</b>  | 50% of your elected coverage amount | 50% of your elected coverage amount | 25% of your payable coverage amount |
| In order to elect coverage for your spouse and/or child(ren), you must elect coverage on yourself. |                                     |                                     |                                     |

### Are dependent parents eligible?

Yes, coverage for your dependent parent(s) is automatically included when you are enrolled in employee coverage. Your parent(s) and those of your spouse are eligible at 25% of your payable covered benefit provided you cover more than half of their out-of-pocket costs, including housing, food, clothing and medical services, or a dependent parent is claimed as a dependent on IRS income tax forms. The dependent parent(s) only needs to meet one of these two requirements. Please note that your dependent parent(s) must reside in the United States. Dependent parents are not eligible for all covered conditions offered to an employee, their spouse and child(ren). The benefit is payable to the covered employee.

## Covered critical illnesses

The following conditions are covered at the percentages listed below (if approved). Covered critical illness claims will be reviewed and must meet the definitions as defined in the policy.

| Covered condition                         | Initial occurrence benefit | Recurrence benefit | Covered under dependent parent benefit? |
|---|----------------------------|--------------------|---|
| Addison's disease                         | 10%                        |                    | Y                                       |
| Alzheimer's disease                       | 100%                       |                    | Y                                       |
| Amyotrophic lateral sclerosis (ALS)       | 25%                        |                    | Y                                       |
| Aneurysm                                  | 10%                        | 10%                | Y                                       |
| Autism spectrum disorder                  | 50%                        |                    | N                                       |
| Benign brain tumor                        | 25%                        | 25%                | Y                                       |
| Blindness                                 | 25%                        |                    | Y                                       |
| Cerebral palsy                            | 50%                        |                    | N                                       |
| Cleft lip or cleft palate needing surgery | 50%                        |                    | N                                       |
| Coma                                      | 25%                        | 25%                | Y                                       |
| Coronary artery disease needing surgery   | 25%                        | 25%                | Y                                       |
| Down syndrome                             | 50%                        |                    | N                                       |
| Gaucher disease                           | 50%                        |                    | N                                       |
| Glycogen storage disease                  | 50%                        |                    | N                                       |
| Heart attack                              | 100%                       | 100%               | Y                                       |
| Heart valve disease                       | 25%                        | 25%                | Y                                       |
| Huntington's disease                      | 25%                        |                    | Y                                       |
| Infectious disease (5-day hospital stay)  | 25%                        | 25%                | Y                                       |
| Invasive cancer                           | 100%                       | 100%               | Y                                       |
| Kidney failure                            | 100%                       | 100%               | Y                                       |
| Loss of hearing                           | 25%                        |                    | Y                                       |
| Loss of speech                            | 25%                        |                    | Y                                       |

## Covered critical illnesses continued

| Covered condition                    | Initial occurrence benefit | Recurrence benefit | Covered under dependent parent benefit? |
|--------------------------------------|----------------------------|--------------------|---|
| Major organ failure                  | 100%                       | 100%               | Y                                       |
| Metastatic cancer                    | 25%                        |                    | Y                                       |
| Multiple sclerosis                   | 100%                       |                    | Y                                       |
| Muscular dystrophy                   | 50%                        |                    | Y                                       |
| Myasthenia gravis                    | 25%                        |                    | Y                                       |
| Niemann-Pick disease                 | 50%                        |                    | N                                       |
| Non-invasive cancer                  | 25%                        | 25%                | Y                                       |
| Paralysis                            | 25%                        | 25%                | Y                                       |
| Parkinson's disease                  | 100%                       |                    | Y                                       |
| Phenylalanine hydroxylase deficiency | 50%                        |                    | N                                       |
| Pompe disease                        | 50%                        |                    | N                                       |
| Severe burns                         | 100%                       | 100%               | Y                                       |
| Sickle cell anemia                   | 50%                        |                    | N                                       |
| Skin cancer                          | 10%                        | 10%                | Y                                       |
| Spina bifida                         | 50%                        |                    | N                                       |
| Stroke                               | 100%                       | 100%               | Y                                       |
| Sudden cardiac arrest                | 100%                       | 100%               | Y                                       |
| Systemic lupus erythematosus         | 25%                        |                    | Y                                       |
| Systemic sclerosis                   | 10%                        |                    | Y                                       |
| Tay-Sachs disease                    | 50%                        |                    | N                                       |
| Transient ischemic attacks           | 10%                        | 10%                | Y                                       |
| Type 1 diabetes                      | 50%                        |                    | N                                       |
| Zellweger syndrome                   | 50%                        |                    | N                                       |

## Related covered benefits

|                       |         |
|-----------------------|---------|
| Infertility treatment |         |
| Tier 1                | \$250   |
| Tier 2                | \$2,500 |
| Tier 3                | \$7,500 |



## Get paid \$50 for annual wellness screenings including an annual exam

**It pays to visit the doctor.** You, your spouse and children are eligible for a \$50 health and wellness payment each year when you are enrolled in critical illness insurance. There is a maximum of one health and wellness benefit payment per insured, per year.

To file a health and wellness claim, go to [LifeBenefits.com](https://LifeBenefits.com).

# Monthly cost of coverage

## Employee-paid coverage

| <b>\$10,000</b>                      |         |         |         |          | <b>Monthly premium - Tobacco</b> |         |         |          |
|--------------------------------------|---------|---------|---------|----------|----------------------------------|---------|---------|----------|
| <b>Monthly premium - Non-tobacco</b> |         |         |         |          |                                  |         |         |          |
| Age                                  | EE Only | EE + SP | EE + CH | EE + FAM | EE Only                          | EE + SP | EE + CH | EE + FAM |
| Under 25                             | \$2.40  | \$3.60  | \$3.00  | \$4.20   | \$3.80                           | \$5.70  | \$4.40  | \$6.30   |
| 25-29                                | \$2.50  | \$3.75  | \$3.10  | \$4.35   | \$3.80                           | \$5.70  | \$4.40  | \$6.30   |
| 30-34                                | \$3.20  | \$4.80  | \$3.80  | \$5.40   | \$5.50                           | \$8.25  | \$6.10  | \$8.85   |
| 35-39                                | \$4.80  | \$7.20  | \$5.40  | \$7.80   | \$7.80                           | \$11.70 | \$8.40  | \$12.30  |
| 40-44                                | \$7.10  | \$10.65 | \$7.70  | \$11.25  | \$12.40                          | \$18.60 | \$13.00 | \$19.20  |
| 45-49                                | \$9.80  | \$14.70 | \$10.40 | \$15.30  | \$15.70                          | \$23.55 | \$16.30 | \$24.15  |
| 50-54                                | \$14.50 | \$21.75 | \$15.10 | \$22.35  | \$24.10                          | \$36.15 | \$24.70 | \$36.75  |
| 55-59                                | \$18.30 | \$27.45 | \$18.90 | \$28.05  | \$30.50                          | \$45.75 | \$31.10 | \$46.35  |
| 60-64                                | \$22.70 | \$34.05 | \$23.30 | \$34.65  | \$38.30                          | \$57.45 | \$38.90 | \$58.05  |
| 65-69                                | \$25.80 | \$38.70 | \$26.40 | \$39.30  | \$43.80                          | \$65.70 | \$44.40 | \$66.30  |
| 70+                                  | \$30.80 | \$46.20 | \$31.40 | \$46.80  | \$52.90                          | \$79.35 | \$53.50 | \$79.95  |

| <b>\$20,000</b>                      |         |         |         |          | <b>Monthly premium - Tobacco</b> |          |          |          |
|--------------------------------------|---------|---------|---------|----------|----------------------------------|----------|----------|----------|
| <b>Monthly premium - Non-tobacco</b> |         |         |         |          |                                  |          |          |          |
| Age                                  | EE Only | EE + SP | EE + CH | EE + FAM | EE Only                          | EE + SP  | EE + CH  | EE + FAM |
| Under 25                             | \$4.80  | \$7.20  | \$6.00  | \$8.40   | \$7.60                           | \$11.40  | \$8.80   | \$12.60  |
| 25-29                                | \$5.00  | \$7.50  | \$6.20  | \$8.70   | \$7.60                           | \$11.40  | \$8.80   | \$12.60  |
| 30-34                                | \$6.40  | \$9.60  | \$7.60  | \$10.80  | \$11.00                          | \$16.50  | \$12.20  | \$17.70  |
| 35-39                                | \$9.60  | \$14.40 | \$10.80 | \$15.60  | \$15.60                          | \$23.40  | \$16.80  | \$24.60  |
| 40-44                                | \$14.20 | \$21.30 | \$15.40 | \$22.50  | \$24.80                          | \$37.20  | \$26.00  | \$38.40  |
| 45-49                                | \$19.60 | \$29.40 | \$20.80 | \$30.60  | \$31.40                          | \$47.10  | \$32.60  | \$48.30  |
| 50-54                                | \$29.00 | \$43.50 | \$30.20 | \$44.70  | \$48.20                          | \$72.30  | \$49.40  | \$73.50  |
| 55-59                                | \$36.60 | \$54.90 | \$37.80 | \$56.10  | \$61.00                          | \$91.50  | \$62.20  | \$92.70  |
| 60-64                                | \$45.40 | \$68.10 | \$46.60 | \$69.30  | \$76.60                          | \$114.90 | \$77.80  | \$116.10 |
| 65-69                                | \$51.60 | \$77.40 | \$52.80 | \$78.60  | \$87.60                          | \$131.40 | \$88.80  | \$132.60 |
| 70+                                  | \$61.60 | \$92.40 | \$62.80 | \$93.60  | \$105.80                         | \$158.70 | \$107.00 | \$159.90 |

| <b>\$30,000</b>                      |         |          |         |          | <b>Monthly premium - Tobacco</b> |          |          |          |
|--------------------------------------|---------|----------|---------|----------|----------------------------------|----------|----------|----------|
| <b>Monthly premium - Non-tobacco</b> |         |          |         |          |                                  |          |          |          |
| Age                                  | EE Only | EE + SP  | EE + CH | EE + FAM | EE Only                          | EE + SP  | EE + CH  | EE + FAM |
| Under 25                             | \$7.20  | \$10.80  | \$9.00  | \$12.60  | \$11.40                          | \$17.10  | \$13.20  | \$18.90  |
| 25-29                                | \$7.50  | \$11.25  | \$9.30  | \$13.05  | \$11.40                          | \$17.10  | \$13.20  | \$18.90  |
| 30-34                                | \$9.60  | \$14.40  | \$11.40 | \$16.20  | \$16.50                          | \$24.75  | \$18.30  | \$26.55  |
| 35-39                                | \$14.40 | \$21.60  | \$16.20 | \$23.40  | \$23.40                          | \$35.10  | \$25.20  | \$36.90  |
| 40-44                                | \$21.30 | \$31.95  | \$23.10 | \$33.75  | \$37.20                          | \$55.80  | \$39.00  | \$57.60  |
| 45-49                                | \$29.40 | \$44.10  | \$31.20 | \$45.90  | \$47.10                          | \$70.65  | \$48.90  | \$72.45  |
| 50-54                                | \$43.50 | \$65.25  | \$45.30 | \$67.05  | \$72.30                          | \$108.45 | \$74.10  | \$110.25 |
| 55-59                                | \$54.90 | \$82.35  | \$56.70 | \$84.15  | \$91.50                          | \$137.25 | \$93.30  | \$139.05 |
| 60-64                                | \$68.10 | \$102.15 | \$69.90 | \$103.95 | \$114.90                         | \$172.35 | \$116.70 | \$174.15 |
| 65-69                                | \$77.40 | \$116.10 | \$79.20 | \$117.90 | \$131.40                         | \$197.10 | \$133.20 | \$198.90 |
| 70+                                  | \$92.40 | \$138.60 | \$94.20 | \$140.40 | \$158.70                         | \$238.05 | \$160.50 | \$239.85 |

Rates are subject to change.

EE = Employee, EE + SP = Employee and spouse, EE + CH = Employee and child(ren), EE + FAM = Employee and family

# When to enroll and how to file a claim

## When can you enroll?

### You can enroll:

- Within 31 days of initial eligibility period
- During your open enrollment window
- Within 31 days of a qualified family status change

It's quick and easy to enroll without answering health questions or a doctor's exam.

## How to enroll

To enroll, go to BenefitFocus through the OneCampusPortal at [one.purdue.edu](https://one.purdue.edu).

## How to file a critical illness benefit claim

It's easy to file a critical illness claim and receive the benefits you're entitled to.

You can use payments any way you choose to cover costs such as copays, deductibles, child care and more.

### Information needed to initiate the claim

#### Employee

- Personal information will be pre-filled in the submission
- Date of event

#### Spouse or child

- Insured's full name
- Address
- Date of birth
- Date of event

### How to submit the claim

Go to the Securian Financial website [LifeBenefits.com](https://LifeBenefits.com) and log in.

- **User ID:** PURDUE followed by your employee ID number
- **Initial password:** Your eight-digit date of birth (MMDDYYYY) followed by the last four digits of your Social Security number
- If you've previously logged in to LifeBenefits™, use the password you created.
- Select "Start a new claim"
- Answer all questions to the best of your ability with your claim

If you do not have the necessary documents available at the time of submission, you can upload them and any additional information by returning to [LifeBenefits.com](https://LifeBenefits.com) and clicking on "My claims."

If you have questions, need assistance or want to file your claim over the phone, call Securian Financial at **1-888-658-0193**.

# Additional information

## Can I take my coverage with me if I leave Purdue?

If you leave Purdue for any reason, including retirement, you can elect to port your coverage and pay premiums directly to Securian Financial. Initially, rates are the same as what you pay as an active employee, but rates are subject to change.

## Who is eligible for coverage?

- You – all full-time or part-time employees actively working in the United States at the employer's normal place of business at least 20 hours per week
- Spouse if employee coverage is elected
- Your child(ren) from live birth to age 26 if employee coverage is elected
- Dependent parent(s) – your parent(s) and those of your spouse at 25% of your employee payable benefit, provided they live in the United States

Please note that your spouse cannot receive coverage as both an employee and dependent, and a child cannot be covered by more than one parent, if you are both employees of Purdue.

Residents of some states may be required to have medical insurance in order to be eligible for coverage.

## What is the recurrence benefit?

It provides an additional benefit payment after a benefit separation period of 6 months, if an insured is once again diagnosed with a condition that was previously approved. Eligible conditions pay a recurrence benefit percentage based on the condition. Not all conditions have a recurrence benefit. See covered conditions list for eligible conditions. Initial and subsequent diagnosis must happen while covered under the plan.

## We're here to help

### Critical illness insurance questions?

Call **1-855-750-1906** to chat with a Securian Financial customer service representative.

## Learn more

Visit our educational microsite for more information about your coverage options and costs. Visit [securian.com/purdue-insurance](https://securian.com/purdue-insurance).

## Critical illness exclusions and limitations

### Are there any other exclusions that apply?

In no event will we pay benefits where the insured's covered condition is caused directly or indirectly by, results in whole or in part from, or for which there is contribution from any of the following:

1. intentionally self-inflicted injury or self-destruction, whether sane or insane;
2. the insured's commission of a felony;
3. the insured's voluntary use of prescription drugs, non-prescription drugs, illegal drugs, medications, poisons, gases, fumes, or other substances taken, absorbed, inhaled, ingested, or injected unless taken or used as prescribed by a physician, or an over-the-counter drug as directed by the manufacturer;
4. motor vehicle collision or accident where the insured is the operator of the motor vehicle and the insured's blood alcohol level meets or exceeds the level at which intoxication is defined in the state where the collision or accident occurred, regardless of any legal proceedings thereto; or
5. war or any act of war (not including acts of terrorism), whether declared or undeclared.

### Are there any additional limitations that apply?

**The policy provides limited benefits.** Other benefit limitations may exist and vary by covered benefit. Please refer to your plan documents for more information.

### Group critical illness insurance

**Limitations and exclusions apply.** This is a summary of plan provisions related to the insurance policy issued by Securian Life Insurance Company to Purdue University. This policy has exclusions, limitations, reduction of benefits, terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact Securian Financial Group. In the event of a conflict between this summary and the policy and/or certificate, the policy and/or certificate shall dictate the insurance provisions, exclusions, all limitations and terms of coverage. All elections or increases are subject to the actively-at-work requirement of the policy. Products are offered under policy form series 23-32606.13 or a state variation thereof. Product availability and features may vary by state. Benefits for covered conditions will be payable upon a diagnosis of a covered condition that satisfies the requirements of the policy and when all other policy requirements are met.

Other benefit limitations may exist and vary by covered benefit. Please refer to your plan documents for more information. This presentation provides general information to the recipient. Securian Life cannot provide legal or tax advice with respect to ERISA; Health Savings Account (HSA) laws, rules or regulations, any applicable tax laws, rules or regulations; or any other applicable federal or state laws, rules or regulations. Any questions regarding these topics should be directed to your legal and tax advisors.

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