

GROUP CRITICAL ILLNESS INSURANCE

SPECIFIED DISEASE RIDER SUMMARY PAGE

TIER I SPECIFIED DISEASE BENEFIT	Percentage of Face Amount
Adrenal Hypofunction (Addison's Disease), Cerebrospinal Meningitis, Diphtheria, Encephalitis, Huntington's Chorea, Legionnaire's Disease, Lyme Disease, Malaria, Muscular Dystrophy, Myasthenia Gravis, Necrotizing Fasciitis, Osteomyelitis, Poliomyelitis (Polio), Rabies, Sickle Cell Anemia, Systemic Lupus, Systemic Sclerosis (Scleroderma), Tetanus, Tuberculosis	25%

We will pay the benefit shown if an insured is diagnosed with one of the Tier I Specified Diseases listed, and if the date of diagnosis is while the rider is in force.

For any subsequent Tier I Specified Disease to be covered, the date of diagnosis of the subsequent Tier I Specified Disease must satisfy the Additional Diagnosis separation period outlined in the brochure.

TIER II SPECIFIED DISEASE BENEFIT

Human Coronavirus	<p>10% if confined to a hospital for 4-9 days</p> <p>25% if confined to a hospital for 10 or more days</p> <p>40% if confined to an intensive care unit</p>
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We will pay the benefit shown if an insured is diagnosed with human coronavirus, and such diagnosis results in either a period of hospital confinement or hospital intensive care unit confinement as a direct result of human coronavirus. Furthermore, the date of diagnosis must be while the rider is in force.

In addition, the insured must be receiving treatment for human coronavirus for the minimum number of days shown. Only the highest eligible benefit amount will be payable under these benefits. In the event a lower benefit amount was previously paid under these benefits for any period of hospital confinement and that confinement is extended or the insured is moved to an intensive care unit triggering a higher payment, the difference between the previous paid benefit amount and the new benefit amount will be provided.

For any subsequent human coronavirus diagnosis to be covered, the date of diagnosis must satisfy the Additional Diagnosis separation period outlined in the brochure.

In Alaska, all references to Human Coronavirus are revised to Severe Human Coronavirus.



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For a complete list of limitations and exclusions please refer to the brochure. This insert is a brief description of coverage and is not a contract. Read your certificate carefully for exact terms and conditions. This piece is intended to be used in conjunction with the C22000 Critical Illness product brochure and is subject to the terms, conditions, and limitations of Policy Series C22000.

Continental American Insurance Company • Columbia, South Carolina

WHAT IS NOT COVERED, LIMITATIONS AND EXCLUSIONS, AND TERMS YOU NEED TO KNOW

These benefits will be paid based on the face amount in effect on the specified disease date of diagnosis. All limitations and exclusions that apply to the critical illness plan also apply to the rider unless amended by the rider.

No benefits will be paid for loss which occurred prior to the effective date of the plan.

Date of diagnosis is defined for each specified disease as follows:

- Adrenal Hypofunction (Addison's Disease): The date a doctor diagnoses an insured as having Adrenal Hypofunction and where such diagnosis is supported by medical records.
- Cerebrospinal Meningitis: The date a doctor diagnoses an insured as having Cerebrospinal Meningitis and where such diagnosis is supported by medical records.
- Diphtheria: The date a doctor diagnoses an insured as having Diphtheria based on clinical and/or laboratory findings as supported by medical records.
- Encephalitis: The date a doctor diagnoses an insured as having Encephalitis and where such diagnosis is supported by medical records.
- Human Coronavirus: The date a doctor diagnoses an insured as having Human Coronavirus based on laboratory findings as supported by viral testing or a blood test.
- Huntington's Chorea: The date a doctor diagnoses an insured as having Huntington's Chorea based on clinical findings as supported by medical records.
- Legionnaire's Disease: The date a doctor diagnoses an insured as having Legionnaire's Disease by finding Legionella bacteria in a clinical specimen taken from the insured.
- Lyme Disease: The date a doctor diagnoses an insured as having Lyme Disease and where such diagnosis is supported by medical records.
- Malaria: The date a doctor diagnoses an insured as having Malaria and where such diagnosis is supported by medical records.
- Muscular Dystrophy: The date a doctor diagnoses an insured as having Muscular Dystrophy and where such diagnosis is supported by medical records.
- Myasthenia Gravis: The date a doctor diagnoses an insured as having Myasthenia Gravis and where such diagnosis is supported by medical records.
- Necrotizing Fasciitis: The date a doctor diagnoses an insured as having Necrotizing Fasciitis and where such diagnosis is supported by medical records.
- Osteomyelitis: The date a doctor diagnoses an insured as having Osteomyelitis and where such diagnosis is supported by medical records.
- Poliomyelitis: The date a doctor diagnoses an insured as having Poliomyelitis and where such diagnosis is supported by medical records.
- Rabies: The date a doctor diagnoses an insured as having

Rabies and where such diagnosis is supported by medical records.

- Sickle Cell Anemia: The date a doctor diagnoses an insured as having Sickle Cell Anemia and where such diagnosis is supported by medical records.
- Systemic Lupus: The date a doctor diagnoses an insured as having Systemic Lupus and where such diagnosis is supported by medical records.
- Systemic Sclerosis (Scleroderma): The date a doctor diagnoses an insured as having Systemic Sclerosis and where such diagnosis is supported by medical records.
- Tetanus: The date a doctor diagnoses an insured as having Tetanus by finding Clostridium tetani bacteria in a clinical specimen taken from the insured.
- Tuberculosis: The date a doctor diagnoses an insured as having Tuberculosis by finding Mycobacterium tuberculosis bacteria in a clinical specimen taken from the insured.

The term Hospital Intensive Care Unit specifically excludes any type of facility not meeting the definition of Hospital Intensive Care Unit as defined in the plan, including but not limited to (In Florida and North Carolina, not limited to reference is not applicable) private monitored rooms, surgical recovery rooms, observation units, and the following step-down units:

- A progressive care unit,
- A sub-acute intensive care unit, or
- An intermediate care unit.

The term Hospital specifically excludes any facility not meeting the definition of Hospital as defined in the plan, including but not limited to (In Florida and North Carolina, not limited to reference is not applicable):

- A nursing home,
- An extended-care facility,
- A skilled nursing facility,
- A rest home or home for the aged,
- A rehabilitation facility (In Missouri, this is not applicable),
- A facility for the treatment of alcoholism or drug addiction, or
- An assisted living facility.

Human Coronavirus does not include the following Human Coronaviruses: 229E, NL63, OC43, and HKU1.

Adrenal Hypofunction does not include secondary and tertiary adrenal insufficiency.