Aflac D Plus Rider

OPTIONAL LUMP SUM CRITICAL ILLNESS BENEFIT RIDER

We've been dedicated to helping provide peace of mind and financial security for more than 60 years.





RC(12/21)

AFLAC PLUS RIDER

OPTIONAL LUMP SUM CRITICAL ILLNESS BENEFIT RIDER

Rider Series CIRIDER



Boost your protection with the Aflac Plus Rider

Like many people, you probably have insurance to cover auto accidents, fires, burglaries, and standard hospital bills. But what would happen to your family's finances if you experienced a catastrophic event, such as a heart attack, stroke, Alzheimer's disease, or Parkinson's disease–an event that knocked you off your feet or even changed your life forever?

With deductibles, copayments, and out-of-pocket maximums on your major medical insurance increasing, how are you going to pay your bills if you experience a life-changing event? The Aflac Plus Rider can help. This rider can be attached to select policies, further boosting your benefits. The Aflac Plus Rider pays a specific benefit amount when you are diagnosed with a covered event. You can use the cash to help pay out-of-pocket expenses, such as utility bills, car payments, and mortgage or rent payments. **For a list of policies the Aflac Plus Rider can be added to, please contact your Aflac insurance agent/producer.**

How it works



The above example is based on a scenario for Aflac Lump Sum Critical Illness Benefit Rider that includes the following benefit conditions: Heart Attack (Tier One Critical Illness Event Benefit) of \$5,000. The Tier One Critical Illness Event Benefit pays \$5,000 for a covered tier one critical illness event.

Benefits and/or premiums may vary based on state. The rider has limitations, exclusions and pre-existing conditions limitations that may affect benefits payable. For costs and complete details of the coverage, contact your Aflac insurance agent/producer. This brochure is for illustrative purposes only. Refer to the policy and rider for complete benefit details, definitions, limitations and exclusions.

Aflac herein means American Family Life Assurance Company of Columbus.

Aflac Plus Rider Benefit Overview

BENEFIT:	DESCRIPTION:
TIER ONE CRITICAL ILLNESS EVENT BENEFIT	 \$5,000 upon a covered person's onset date of one of the following: Heart Attack Stroke Coma Paralysis Type 1 Diabetes Traumatic Brain Injury Alzheimer's Disease Parkinson's Disease Parkinson's Disease Amyotrophic Lateral Sclerosis (ALS or Lou Gehrig's disease) Multiple Sclerosis Permanent Loss of Sight Permanent Loss of Speech Sudden Cardiac Arrest This benefit is payable once per covered person, per lifetime.
SUBSEQUENT TIER ONE CRITICAL ILLNESS EVENT BENEFIT	 \$3,000 upon a covered person's onset date of: a recurrence of that same Tier One Critical Illness Event, or an occurrence of a different Tier One Critical Illness Event. This benefit is not payable on the same day as the Tier One Critical Illness Event Benefit.
TIER TWO CRITICAL ILLNESS EVENT BENEFIT	 \$2,000 upon a covered person's onset date of one of the following: 1. Encephalitis 6. Necrotizing Fasciitis 2. Bacterial Meningitis 7. Osteomyelitis 3. Lyme Disease 8. Systemic Lupus 4. Sickle Cell Anemia 9. Cystic Fibrosis 5. Cerebral Palsy This benefit is not payable on the same day as the Tier One Critical Illness Event Benefit.
COMPLICATIONS OF CORONARY ARTERY BYPASS GRAFT SURGERY BENEFIT	\$3,000 when a covered person undergoes Coronary Artery Bypass Graft Surgery, and the covered person then later experiences complications. This benefit is payable once per covered person, per lifetime.

LIMITED BENEFIT, LUMP SUM CRITICAL ILLNESS RIDER

American Family Life Assurance Company of Columbus (herein referred to as Aflac) Worldwide Headquarters • 1932 Wynnton Road • Columbus, Georgia 31999 Toll-Free 1.800.99.AFLAC (1.800.992.3522)

The rider described in this Outline of Coverage provides supplemental coverage and will be issued only to supplement insurance already in force.

LIMITED BENEFIT, LUMP SUM CRITICAL ILLNESS RIDER Outline of Coverage for Rider Form CIRIDERMA

THIS IS NOT MEDICARE SUPPLEMENT COVERAGE. If you are eligible for Medicare, review the "Guide to Health Insurance for People With Medicare" furnished by Aflac.

(1) The rider is an individual rider of insurance.

Caution: The issuance of the lump sum critical illness rider is based on your answers to the questions on your application. If your answers are not correct or are not true as of the date that you signed the application, we have the right to deny benefits or rescind the rider. This is subject to the Time Limit on Certain Defenses provision that is in your policy.

(2) SUMMARY OF RIDER FEATURES:

The rider:

- 1. is not Medicare Supplement coverage.
- 2. is guaranteed-renewable for your lifetime.
- 3. is not subject to automatic premium increases as you get older.
- 4. may be subject to across the board premium increases for all policyholders in your class.
- 5. does not offer an option to purchase inflation protection.
- 6. does not offer an option to purchase nonforfeiture protection.
- 7. does contain special age limitations for purchase.
- 8. does not cover services due to Pre-existing Conditions (existing health problems) for a period of twelve months from rider issue.
- 9. does not have a waiting period before benefits are payable by rider.
- 10. does not offer a waiver of premium.
- (3) THE PURPOSE OF AN OUTLINE OF COVERAGE: An Outline of Coverage provides a very brief description of some of the important features of the rider. This is not the insurance contract and only the actual contract provisions will control. The contract itself sets forth, in detail, the rights and obligations of both you and Aflac. It is, therefore, important that you READ YOUR CONTRACT CAREFULLY.
- (4) CRITICAL ILLNESS INSURANCE COVERAGE is designed to supplement your existing accident and sickness coverage only when certain losses occur as a result of Critical Illness Events or other conditions as specified. Tier One Critical Illness Events are: (1) Heart Attack,
 (2) Stroke, (3) Coma, (4) Paralysis, (5) Type 1 Diabetes,

(6) Traumatic Brain Injury, (7) Alzheimer's Disease,
(8) Parkinson's Disease, (9) Amyotrophic Lateral Sclerosis,
(10) Multiple Sclerosis, (11) Permanent Loss of Sight, Hearing, or Speech; or (12) Sudden Cardiac Arrest.
Tier Two Critical Illness Events are: (1) Encephalitis,
(2) Bacterial Meningitis, (3) Lyme Disease,
(4) Sickle Cell Anemia, (5) Cerebral Palsy, (6) Necrotizing Fasciitis, (7) Osteomyelitis, (8) Systemic Lupus, or
(9) Cystic Fibrosis. Coverage is provided for the benefits outlined in (6) Benefits. The benefits described in
(6) Benefits may be limited by (7) Exceptions, Reductions, and Limitations of the Rider.

- (5) RENEWABILITY: THE RIDER IS GUARANTEED-RENEWABLE FOR YOUR LIFETIME. This means you have the right to continue the coverage by the timely payment of premiums at the rate in effect at the beginning of each term. We may discontinue or terminate the rider if you have committed fraud. We may also terminate the rider if you have purposely misrepresented material fact that relates to the rider. This includes claims for rider benefits. Premium rates may change only if changed on all riders of the same form number and class in force in your state.
- (6) **BENEFITS:** We will pay the benefits the way they are listed below, as applicable, while your coverage is in force. All of these benefits are subject to the Pre-existing Conditions Limitation. These benefits are also subject to the Limitations and Exclusions, as well as all other policy provisions, unless they are modified herein.

We will not pay benefits for Alzheimer's Disease (as defined in the rider) when Alzheimer's disease was diagnosed prior to the Effective Date of coverage. We will not pay benefits for Parkinson's Disease (as defined in the rider) when Parkinson's disease was diagnosed prior to the Effective Date of coverage. We will not pay benefits for Multiple Sclerosis (as defined in the rider) when multiple sclerosis was diagnosed prior to the Effective Date of coverage. We will not accept an assignment of these benefits. All benefits will be payable to you. Any accrued benefits unpaid at the time of your death will be paid to your estate. A. TIER ONE CRITICAL ILLNESS EVENT BENEFIT: We will pay \$5,000 upon a Covered Person's Onset Date of one of

the following Tier One Critical Illness Events:

- 1. Heart Attack
- 2. Stroke
- 3. Coma
- 4. Paralysis
- 5. Type 1 Diabetes
- 6. Traumatic Brain Injury
- 7. Alzheimer's Disease
- 8. Parkinson's Disease
- 9. Amyotrophic Lateral Sclerosis
- 10. Multiple Sclerosis
- 11. Permanent Loss of Sight
- 12. Permanent Loss of Hearing
- 13. Permanent Loss of Speech
- 14. Sudden Cardiac Arrest

This benefit is payable once per Covered Person, per lifetime.

- **B. SUBSEQUENT TIER ONE CRITICAL ILLNESS EVENT BENEFIT:** After a Covered Person has previously qualified for benefits for a Tier One Critical Illness Event under Benefit A above, we will pay \$3,000 upon that Covered Person's Onset Date of:
 - 1. a **recurrence** of that **same** Tier One Critical Illness Event, or
 - 2. an occurrence of a **different** Tier One Critical Illness Event.

The Onset Date of the subsequent Tier One Critical Illness Event must be 180 days or more from the Onset Date of any previously paid Tier One Critical Illness Event for such Covered Person in order for this benefit to be paid. This benefit is not payable on the same day as the Tier One Critical Illness Event Benefit.

- C. TIER TWO CRITICAL ILLNESS EVENT BENEFIT: We will pay \$2,000 upon a Covered Person's Onset Date of one of the following Tier Two Critical Illness Events:
 - 1. Encephalitis
 - 2. Bacterial Meningitis
 - 3. Lyme Disease
 - 4. Sickle Cell Anemia
 - 5. Cerebral Palsy
 - 6. Necrotizing Fasciitis
 - 7. Osteomyelitis
 - 8. Systemic Lupus
 - 9. Cystic Fibrosis

This benefit is not payable on the same day as the Tier One Critical Illness Event Benefit.

D. COMPLICATIONS OF CORONARY ARTERY BYPASS GRAFT SURGERY BENEFIT: We will pay \$3,000 when a Covered Person undergoes Coronary Artery Bypass Graft Surgery, and the Covered Person then later experiences complications.

This benefit is payable once per Covered Person, per lifetime.

(7) EXCEPTIONS, REDUCTIONS, AND LIMITATIONS OF THE RIDER: (This is not a daily hospital expense plan.):

- A. We will not pay benefits for any loss that is caused by a Pre-existing Condition, unless the Onset Date takes place more than 12 months after the Effective Date of coverage. Benefits are payable for only one covered loss at a time per Covered Person. We will not pay benefits for any condition when diagnosis occurred prior to the Effective Date of coverage.
- **B.** We will not pay benefits for any loss that is diagnosed or treated outside the territorial limits of the United States or its possessions.
- **C.** We will not pay benefits whenever coverage that is provided by the rider violates any U.S. economic or trade sanctions. If the coverage does violate such sanctions, the coverage will be null and void.
- **D.** For any benefit to be payable, the Onset Date of the loss has to take place on or after the Effective Date of coverage and while coverage is in force.
- E. We will not pay benefits if fraud is committed in making a claim under this coverage. This includes any prior claim under any other Aflac coverage if benefits were received that were not lawfully due and that falsely caused payment to be made.

F. The rider does not cover loss that is caused by or that results from:

- Participating in any activity or event, to include the operation of a vehicle, while under the influence of a controlled substance* or while intoxicated ("intoxicated" means that condition as defined by the law of the jurisdiction in which the accident took place);
- Using any drug, narcotic, hallucinogen, or chemical substance* or willingly taking any kind of poison or inhaling any kind of gas or fumes;
- 3. Participating in, or attempting to particpate in, an illegal activity that is defined as a felony, whether you are charged or not ("felony" is as defined by the law of the jurisdiction in which the activity takes place), or being incarcerated in a detention facility or a penal institution;
- 4. Self-inflicting a bodily injury on purpose or trying to commit suicide, while sane or insane;
- 5. Being exposed to war or any act of war, declared or undeclared; or

 Actively serving in any of the armed forces or units auxiliary thereto, to include the National Guard or Reserve.

*Unless administered by a Physician and taken according to the Physician's instructions.

PRE-EXISTING CONDITIONS LIMITATION

A "Pre-existing Condition" is an illness, a disease, an infection, a disorder, or an injury for which, within the 12-month period before the Effective Date of coverage:

- 1. prescription medication was taken; or
- 2. medical testing, medical advice, consultation, or treatment was recommended or received; or
- 3. for which symptoms existed that would ordinarily cause a prudent person to seek diagnosis, care, or treatment.

Benefits for a loss that is caused by a Pre-existing Condition will not be covered unless the Onset Date is more than 12 months after the Effective Date of coverage.

(8) THE RELATIONSHIP OF COST OF CARE AND

BENEFITS. Because the costs of care services are likely to go up over time, you should think about if and how the benefits of this plan may be adjusted.

- a) The benefit level will not increase over time.
- b) There are no automatic benefit adjustment provisions.
- c) You are not guaranteed the option to buy additional benefits.
- d) There are no additional benefits available for purchase.
- e) There will be no additional premium charge imposed as there are no additional benefits available for purchase.

(9) THE PREMIUM:

a) Rider Annual Premium: \$___

(10) COMPLAINTS: If you have a complaint, you may call us at 1-800-992-3522 or your associate (duly licensed agent). If you are not satisfied, you may call the Massachusetts Division of Insurance at (617) 521-7777 or write to them at 1000 Washington Street, Suite 810, Boston, Massachusetts 02118-6200.

RETAIN THIS FORM FOR YOUR RECORDS. THIS OUTLINE OF COVERAGE IS JUST A BRIEF SUMMARY OF THE COVERAGE THAT IS PROVIDED. THE CONTRACT ITSELF SHOULD BE CONSULTED TO DETERMINE THE GOVERNING PROVISIONS OF THE CONTRACT.

TERMS YOU NEED TO KNOW

ALZHEIMER'S DISEASE: Alzheimer's disease that causes a person to be incapacitated. Alzheimer's disease is a progressive degenerative brain disease that is diagnosed by a psychiatrist or neurologist as Alzheimer's disease. To be incapacitated due to Alzheimer's disease, a covered person must:

- 1. Exhibit the loss of intellectual capacity involving impairment of memory and judgment, resulting in a significant reduction in mental and social functioning, **and**
- 2. Meet the five criteria listed in Stage 6 of the FAST scale, as certified by a physician.

AMYOTROPHIC LATERAL SCLEROSIS (ALS or Lou Gehrig's disease):

a chronic, progressive neurological disease resulting in permanent clinical impairment of motor function and is definitively diagnosed by a neurologist as amyotrophic lateral sclerosis.

BACTERIAL MENINGITIS: inflammation of the thin, membranous covering (meninges) of the brain and the spinal cord caused by a bacterial infection and characterized by fever, vomiting, intense headache, and stiff neck.

CEREBRAL PALSY: a disability resulting from damage to the brain before, during, or shortly after birth and outwardly manifested by muscular incoordination and speech disturbances.

COMA: a continuous state of profound unconsciousness diagnosed or treated on or after the effective date of coverage, lasting for a period of seven or more consecutive days and characterized by the absence of: (1) spontaneous eye movements, (2) response to painful stimuli, and (3) vocalization. The condition must require intubation for respiratory assistance. The term coma does not include any medically induced coma.

CORONARY ARTERY BYPASS GRAFT SURGERY: open-heart surgery to correct narrowing or blockage of one or more coronary arteries with bypass grafts, but excluding procedures such as but not limited to coronary angioplasty, valve replacement surgery, stent placement, laser relief, or other surgical or nonsurgical procedures.

COVERED PERSON: any person insured under the policy to which the rider is attached.

CYSTIC FIBROSIS: a hereditary disorder affecting the exocrine glands which causes the production of abnormally thick mucus, leading to the blockage of the pancreatic ducts, intestines, and bronchi and often resulting in respiratory infection.

EFFECTIVE DATE: the effective date of the rider is as stated in the Policy Schedule.

ENCEPHALITIS: an inflammation of the brain, usually caused by a direct viral infection or a hyper-sensitivity reaction to a virus or foreign protein.

FUNCTIONAL ASSESSMENT STAGING (FAST) SCALE: a seven-stage

system used to describe the progression of Alzheimer's disease.

The seven stages are summarized below:

Stage 1: No difficulties, either subjectively or objectively.

- Stage 2: Complains of forgetting location of objects; subjective word finding difficulties.
- Stage 3: Decreased job function evident to co-workers; difficulty in traveling to new locations; decreased organizational capacity.
- Stage 4: Decreased ability to perform complex tasks, paying bills and managing finances, etc.
- Stage 5: Requires assistance in choosing proper clothing to wear for day, season, or occasion.
- Stage 6: Memory difficulties continue to worsen, significant personality changes may emerge and affected individuals need extensive help with customary daily activities including dressing, bathing, and toileting.
- Stage 7: Individuals affected lose the ability to respond to their environment, the ability to speak, and the ability to control movement without assistance.

HEART ATTACK: a myocardial infarction. The attack must be positively diagnosed by a physician and must be evidenced by electrocardiographic findings or clinical findings together with blood enzyme findings. The definition of heart attack shall not be construed to mean congestive heart failure, atherosclerotic heart disease, angina, coronary artery disease, cardiac arrest, or any other dysfunction of the cardiovascular system.

HOEHN AND YAHR SCALE: a widely used clinical rating scale, which defines broad categories of motor function in Parkinson's disease in five stages.

The five stages are summarized below:

- Stage 1: Symptoms are mild and on one side of the body only, usually with minimal or no functional disability;
- Stage 2: Symptoms on both sides of the body without impairment of balance;
- Stage 3: Mild to moderate disability with balance impairment; physically independent;
- Stage 4: Severe symptoms; no longer able to live alone, but still able to walk or stand unassisted;
- Stage 5: Confinement to bed or wheelchair unless aided.

LYME DISEASE: an inflammatory disease caused by bacteria that are transmitted by ticks that is characterized initially by a rash, headache, fever, and chills, and later by possible arthritis and neurological and cardiac disorders.

MULTIPLE SCLEROSIS: a chronic degenerative disease of the central nervous system in which gradual destruction of myelin occurs in the brain or spinal cord or both, interfering with the nerve pathways, with muscular weakness, loss of coordination, or speech and visual disturbances present for a continuous period of at least 90 days.

NECROTIZING FASCIITIS: a severe bacterial infection of the fascia, the soft tissues that line and separate muscles, that causes extensive tissue death.

ONSET DATE: is as follows for each covered condition:

- Heart Attack: the date of occurrence of a heart attack as defined in the rider.
- Stroke: the date of occurrence of a stroke as defined in the rider.
- Coma: the date a physician confirms a coma as defined in the rider.
- Paralysis: the date a physician establishes the diagnosis of paralysis (as defined in the rider) on clinical or laboratory findings as supported by medical records.
- Type 1 Diabetes: the date a physician initially establishes the diagnosis of type 1 diabetes on clinical or laboratory findings as supported by medical records.
- Traumatic Brain Injury: the date of occurrence of a traumatic brain injury as defined in the rider.
- Alzheimer's Disease: the date a physician initially certifies that a covered person is incapacitated due to Alzheimer's disease as defined in the rider.
- Parkinson's Disease: the date a physician initially certifies that a covered person is incapacitated due to Parkinson's disease as defined in the rider.
- Amyotrophic Lateral Sclerosis (ALS or Lou Gehrig's disease): the date of diagnosis of amyotrophic lateral sclerosis as defined in the rider.
- Multiple Sclerosis: the date of diagnosis of sustained multiple sclerosis (as defined in the rider) by a physician.
- Permanent Loss of Sight, Hearing, or Speech: the date that permanent loss of sight, hearing, or speech (as defined in the rider) is initially diagnosed by a physician.
- Sudden Cardiac Arrest: the date of occurrence of sudden cardiac arrest as defined in the rider.
- Encephalitis, Bacterial Meningitis, Lyme Disease, Necrotizing Fasciitis, and Osteomyelitis: the date of diagnosis by a physician.
- Sickle Cell Anemia and Cerebral Palsy: the date of initial diagnosis by a physician.
- Coronary Artery Bypass Graft Surgery: the date of surgery.
- Systemic Lupus: the date of initial diagnosis by a physician.
- Cystic Fibrosis: the date of initial diagnosis by a physician.

OSTEOMYELITIS: inflammation of the bone due to infection.

PARALYSIS: complete and total loss of use of two or more limbs (paraplegia, quadriplegia, or hemiplegia) for a continuous period of at

least 30 days as the result of a spinal cord injury that occurred on or after the effective date of coverage. The paralysis must be confirmed by the attending physician.

PARKINSON'S DISEASE: Parkinson's disease that causes a person to be incapacitated. Parkinson's disease is a chronic progressive neurological disease that is diagnosed by a psychiatrist or neurologist as Parkinson's disease. To be incapacitated due to Parkinson's disease, a covered person must:

- 1. Exhibit two or more of the following clinical manifestations:
 - Muscle rigidity
 - Tremor
 - Bradykinesis (abnormal slowness of movement, sluggishness of physical and mental responses), and
- 2. Be assessed at Stage 4, as certified by a physician, on the HOEHN and YAHR Scale.

PERMANENT LOSS OF SIGHT, HEARING, or SPEECH:

- Loss of Sight: the restriction of visual field to 20 degrees or less in both eyes, or the reduction of sight in the better eye to a corrected visual acuity of less than 6/60 (Metric Acuity) or 20/200 (Snellen or E-chart Acuity), and diagnosed by a physician.
- Loss of Hearing: the total, irreversible, and uncorrectable loss of all hearing in both ears and diagnosed by a physician.
- Loss of Speech: the permanent, total, and irreversible loss of the ability to speak, including loss of speech due to surgery or medical treatment for an illness, and diagnosed by a physician.

SICKLE CELL ANEMIA: a chronic hereditary blood disease marked by sickle-shaped red blood cells and characterized by episodic pain in the joints, fever, leg ulcers, and jaundice.

STROKE: apoplexy due to rupture or acute occlusion of a cerebral artery. The apoplexy must cause complete or partial loss of function involving the motion or sensation of a part of the body and must last more than 24 hours. The stroke must be positively diagnosed by a physician based upon documented neurological deficits and confirmatory neuroimaging studies. Stroke does not mean head injury, transient ischemic attack (TIA), cerebrovascular insufficiency, or lacunar infarction (LACI).

SUDDEN CARDIAC ARREST: sudden, unexpected loss of heart function in which the heart abruptly and without warning stops working as a result of an internal electrical system malfunction of the heart. Any death where the sole cause of death shown on the death certificate is cardiovascular collapse, sudden cardiac arrest, cardiac arrest, or sudden cardiac death shall be deemed to be sudden cardiac arrest for purposes of the rider.

SYSTEMIC LUPUS: a chronic inflammatory multisystem disease that occurs when the body's immune system attacks its own tissues and organs.

TERMINATION: the rider will terminate upon the earlier of the termination of the policy to which it is attached or the failure to pay the premiums for the rider.

TIER ONE CRITICAL ILLNESS EVENT: Heart Attack; Stroke; Coma; Paralysis; Type 1 Diabetes; Traumatic Brain Injury; Alzheimer's Disease; Parkinson's Disease; Amyotrophic Lateral Sclerosis; Multiple Sclerosis; Permanent Loss of Sight, Hearing, or Speech; or Sudden Cardiac Arrest.

TIER TWO CRITICAL ILLNESS EVENT: Encephalitis, Bacterial Meningitis, Lyme Disease, Sickle Cell Anemia, Cerebral Palsy, Necrotizing Fasciitis, Osteomyelitis, Systemic Lupus, or Cystic Fibrosis.

TRAUMATIC BRAIN INJURY: a nondegenerative, noncongenital injury to the brain from an external nonbiological force, requiring hospital confinement for 48 hours or more and resulting in a permanent neurological deficit with significant loss of muscle function and persistent clinical symptoms. Traumatic brain injury must be positively diagnosed by a physician based upon documented neurological deficits and confirmatory neuroimaging studies.

TYPE 1 DIABETES: a form of diabetes mellitus causing total insulin deficiency of a covered person along with continuous dependence on exogenous insulin in order to maintain life. A diagnosis of type 1 diabetes must be made by a physician who specializes in diabetes.





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