How do I know what critical illnesses are covered?
Members can review the Certificate of Coverage that their employer provides to them after they enrolled in coverage.

Does the Standard pay a benefit for a diagnosis of a covered critical illness that occurred prior to the effective date of coverage?
No. The diagnosis of the covered critical illness must occur AFTER the effective date of coverage. This is regardless if it is the first time the condition was diagnosed or if it is a return of a condition after a period of remission.

What does carcinoma in situ mean?
Carcinoma in situ is also known as non-invasive cancer. This means that the abnormal cells have not spread to nearby tissue. They remain in the place where they first formed. The “in situ” cells are not malignant or cancerous. Carcinoma in situ is also called stage 0 disease.

Is Basal cell or squamous cell carcinomas covered as carcinoma in situ?
No, these types of skin cancer are not covered under carcinoma in situ. Melanoma that has not invaded the dermis that can be classified as: Clark’s level I or II, Breslow’s depth of less than .75mm, or as Stage 0 by the American Joint Committee on Cancer would be covered under the carcinoma in situ benefit.

What is the benefit payout for carcinoma in situ?
We pay 25% of the coverage amount if an insured is diagnosed with carcinoma in situ. The only exception is for diagnosis of ductal carcinoma in situ, or DCIS. Due to the extensive treatment that a member must undergo when diagnosed with DCIS, we changed the benefit payout to 100% of the coverage amount for a DCIS diagnosis that was made 5/1/2021 or later.

What is the difference between cancer and carcinoma in situ?
Cancer occurs when abnormal cells spread to nearby tissue or to the lymph nodes. Cancerous cells are malignant and are characterized by uncontrolled growth, unlike in situ cells that remain in the place where they first formed.

Cancer examples: Leukemia, lymphoma, sarcoma, or malignant melanoma.
Carcinoma in situ examples: Early prostate cancer and ductal carcinoma in situ.

Does The Standard’s coverage pay for skin cancer?
The critical illness product does not include a separate benefit for skin cancer. If a diagnosis of skin cancer meets the definition of carcinoma in situ or cancer, it would be a covered critical illness.

Examples: Melanoma that has not invaded the dermis that can be classified as: Clark’s level I or II, Breslow’s depth of less than .75mm, or as Stage 0 by the American Joint Committee on Cancer would be covered as carcinoma in situ. Malignant melanoma would be covered as cancer. Basal cell or squamous cell carcinomas would not be covered.

Groups situated in New York include a skin cancer benefit that pays $250 per lifetime for the diagnosis of basal or squamous cell carcinoma of the skin.

Continued on next page
Is a heart attack covered under The Standard’s critical illness policy?
Yes, myocardial infarction, also known as a heart attack, is a covered critical illness. Myocardial infarction does not include a heart attack that occurred during a medical procedure or due to alcohol or drug abuse.

Does someone have to survive the event for the policy to pay?
No, the benefits will be paid in equal shares to the first surviving class of the following classes: Spouse, Child(ren), Parents, Siblings, Estate.

Does The Standard’s critical illness coverage pay for sudden cardiac arrest?
No, sudden cardiac arrest is not a covered condition.

Is a stroke covered under The Standard’s critical illness policy?
Yes, a stroke is a covered condition. A benefit will be paid for a stroke if there is clinical evidence of death to the brain tissue, which is expected to be permanent. The severity of the stroke is measured by a physician assigning a Modified Rankin Score of 4 (moderately severe disability; unable to walk or attend to bodily functions without assistance of others) or greater. Transient ischemic attack, or TIA, and traumatic injury to the brain tissue or blood vessels are not considered a stroke.

What is a Modified Rankin Scale and why is it used?
The Modified Rankin Scale is a tool used by physicians while in the emergency room or in a stroke unit to determine the severity level of a stroke.

Modified Rankin Scale Scoring:
0 - No symptoms at all
1 - No significant disability despite symptoms; able to carry out all usual duties and activities
2 - Slight disability; unable to carry out all previous activities, but able to look after own affairs without assistance
3 - Moderate disability; requiring some help, but able to walk without assistance
4 - Moderately severe disability; unable to walk without assistance and unable to attend to own bodily needs without assistance
5 - Severe disability; bedridden, incontinent and requiring constant nursing care and attention
6 - Deceased

What if the physician does not use the Modified Rankin Score to determine the severity of a stroke?
The claims team will review the medical records to determine if the condition would meet the same requirements as those defined by a Modified Rankin Score of 4 or greater.

Does the Standard’s critical illness coverage pay for a transient ischemic attack (TIA)?
No, TIAs are not a covered condition.

Does The Standard’s critical illness coverage pay for an aneurysm?
No, an aneurysm is not a covered condition.

What childhood conditions are covered under The Standard’s critical illness policy?

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<thead>
<tr>
<th>Condition</th>
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<tbody>
<tr>
<td>Anal Atresia</td>
<td>Coarctation of the Aorta</td>
<td>Muscular Dystrophy</td>
</tr>
<tr>
<td>Anencephaly</td>
<td>Cystic Fibrosis</td>
<td>Omphaloele</td>
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<tr>
<td>Biliary Atresia</td>
<td>Diaphragmatic Hernia</td>
<td>Patent Ductus Arteriosis</td>
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<tr>
<td>Cerebral Palsy</td>
<td>Down’s Syndrome</td>
<td>Spina Bifida</td>
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<td>Cleft Lip</td>
<td>Gastrochisis</td>
<td>Cystica with Myelomeningocele</td>
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<tr>
<td>Cleft Palate</td>
<td>Hirschsprung’s Disease</td>
<td>Tetralogy of Fallot</td>
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<tr>
<td>Club Foot</td>
<td>Hypoplastic Left Heart Syndrome</td>
<td>Transposition of the Great Arteries</td>
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<td>Infantile Hypertrophic Pyloric Stenosis</td>
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State variations exist. Consult your certificate of coverage for complete details of coverage

1 Critical Illness insurance is called Specified Disease insurance in the state of New York and Vermont.
2 These conditions are not covered if the policy situs state is New York.