Marketed by

Platinum®
SUPPLEMENTAL INSURANCE

Cancer, Heart Attack or Stroke Insurance Policies With Chronic Disease

SUPPLEMENTAL INSURANCE POLICIES

Insurance coverage underwritten by

State Mutual
Insurance Company
Since 1936

PSI11-061 ND 4-11-2024

Platinum®
SUPPLEMENTAL INSURANCE

Established in 1995
Dubuque, Iowa

A

Rated A with the Better Business Bureau.

Building innovative supplemental healthcare policies
that support the real needs of rural families.

Delivering helpful person-to-person service
to 70,000+ customers in 20 states—and growing.

Policies underwritten by:

State Mutual
Insurance Company
Since 1936

Established in 1936
Rome, Georgia

Fighting cancer or chronic illness **can be costly.** It creates **two types** of expenses:

1 in 2 people will be diagnosed with cancer at some point in their lives.[1]

60% of U.S. adults have a chronic illness.[2]

Medical Expenses

Such as doctor or hospital bills. Health insurance typically covers most of these expenses.

Nonmedical Expenses

These are unavoidable expenses caused by your illness that you pay for out of your own pocket.

The facts are:

- Cancer patients are **2.5 times** more likely to file for bankruptcy.[3]
- Someone has a heart attack in the U.S. every **40 seconds**.[4]
- **Stroke** is the leading cause of serious long-term disability.[5]
- **1 in 3** seniors die with Alzheimer's disease or another form of dementia.[6]

Your out-of-pocket expenses:

Medical Expenses:
- Deductibles
- Co-payments
- Benefit limitations
- Experimental treatments

Living Expenses:
- Mortgage or rent
- Car payments
- Utilities
- Groceries

Additional Expenses:
- Transportation
- Hotels
- Special diets
- Family care

Loss of Income:
If you or your spouse need time off from work, or are caring for a family member.

How will you pay for these extra expenses?

- Spend savings
- Borrow from your retirement
- Sell assets
- Assistance from family

A better solution:

Insurance policies marketed by

Platinum Supplemental Insurance

[1]Lifetime Risk of Developing or Dying From Cancer. American Cancer Society. (2023). Accessed on May 22,2023, from https://www.cancer.org/cancer/cancer-basics/lifetime-probability-of-developing-or-dying-from-cancer.html.
[2]Chronic Diseases in America. Centers for Disease Control and Prevention. (2019, Oct. 23). Accessed on June 30, 2020, from https://www.cdc.gov/chronicdisease/resources/infographic/chronic-diseases.htm.
[3]Financial Insolvency as a Risk Factor for Early Mortality Among Patients with Cancer. (2016, Jan. 25). Accessed on Dec. 29, 2020, from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4933128/.
[4]Tsao CW, Aday AW, Almarzooq ZI, Beaton AZ, Bittencourt MS, Boehme AK, et al. Heart Disease and Stroke Statistics—2022 Update: A Report From the American Heart Association. (2022, July 15). Accessed on Sept. 6, 2022, from cdc.gov/heartdisease/facts.htm.
[5]Tsao CW, Aday AW, Almarzooq ZI, Alonso A, Beaton AZ, Bittencourt MS, et al. Heart Disease and Stroke Statistics—2022 Update: A Report From the American Heart Association. Accessed on Sept. 6, 2022, from cdc.gov/stroke/facts.htm.
[6]2022 Alzheimer's Disease Facts and Figures. Alzheimer's Association. Accessed on Sept. 6, 2022, from https://www.alz.org/alzheimers-dementia/facts-figures.

Focus on recovery, not expenses.

Cancer Lump Sum Benefits[7*]

$5,000–$100,000 CANCER LUMP SUM BENEFIT

Pays the lump sum benefit amount when a covered person is diagnosed as having cancer. Nonmalignant melanoma skin cancer will pay a onetime benefit of $500.

$12,500–$25,000 LIMITED CANCER LUMP SUM BENEFIT

Pays 25% of the lump sum benefit amount for limited cancer, including cancer in situ.

Heart Attack or Stroke Lump Sum Benefits[8*]

$5,000–$50,000 HEART ATTACK OR STROKE LUMP SUM BENEFIT

Pays the lump sum benefit amount when a covered person is diagnosed as having a heart attack or stroke.

$2,500–$25,000 CORONARY ARTERY BYPASS LUMP SUM BENEFIT

Pays 50% of the lump sum benefit amount for coronary artery bypass surgery not resulting from a heart attack.

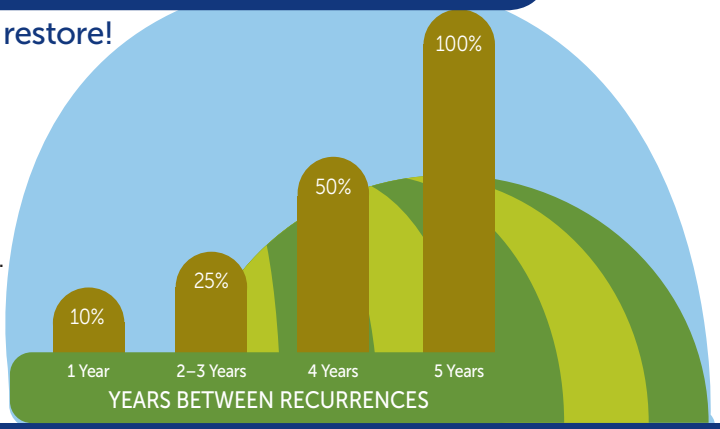
$1,250–$12,500 CORONARY ANGIOPLASTY LUMP SUM BENEFIT

Pays 25% of the lump sum benefit amount for coronary angioplasty, aortic surgery or a heart valve replacement/repair not resulting from a heart attack.

Recurrence Benefit[9]

After you recover, your lump sum benefits start to restore!

The recurrence benefit is a percentage of the lump sum benefit amount that restores and becomes available again after a period of time. The Cancer Lump Sum Recurrence Benefit is payable after a covered person has been in a period of remission for at least one full year from a previous cancer diagnosis. For the Heart Attack or Stroke Lump Sum Benefit, recurrence must be at least one full year from the lump sum benefit payment on a previous diagnosis.



[7]Cancer Lump Sum and Recurrence Indemnity Benefit Insurance Policy.
[8]Heart Attack and Stroke Lump Sum Benefit Insurance Policy. Benefit amounts listed are based on the maximum benefit level. Other benefit plans are available at $1,000 per unit.
[9]Cancer Lump Sum and Recurrence Indemnity Benefit Insurance Policy and Heart Attack and Stroke Lump Sum Benefit Insurance Policy
*Premiums will vary by plan.

Cancer, Heart Attack & Stroke Treatment Benefits[10]

Hospital Confinement
Days 1–10 // $500/day
Days 11–90 // $1,000/day
NO LIFETIME MAXIMUM
Pays per day when you are confined to the hospital for at least 18 hours as a direct result of cancer, heart attack or stroke.

Intensive Care Unit
$1,000/day **// $30,000**/month
30-DAY MAXIMUM
Pays when a covered person is confined to an intensive care unit of a hospital as a direct result of cancer, heart attack or stroke.

Catastrophic Hospital Confinement
Day 91+ // $1,500/day **// $45,000**/month*
NO LIFETIME MAXIMUM
Benefit begins on the 91st day of continuous hospital confinement. Pays in addition to all other benefits, except the hospital confinement benefit.

Drugs and Medicine // $300/day
NO LIFETIME MAXIMUM
Pays each day for FDA-approved medication received during a covered hospital confinement.

Attending Physician // $150/day
NO LIFETIME MAXIMUM
Pays each day a covered person receives services from an attending physician during a covered hospital confinement.

Private Nurse // $300/day
NO LIFETIME MAXIMUM
Pays each day a covered person receives full-time services from a private nurse while hospital confined.

Skilled Nursing Facility // $300/day
NO LIFETIME MAXIMUM
Pays each day a covered person is confined to a skilled nursing facility. The nursing confinement must begin within 14 days after the covered person is discharged from a hospital.**

Hospice Benefit // $15,000/month
BASED ON A 30-DAY MONTH
6-MONTH MAXIMUM
Pays each day a terminally ill covered person receives hospice care as a direct result of cancer, heart attack or stroke.

Lodging // $100/day
NO LIFETIME MAXIMUM
UP TO 30 DAYS PER CALENDAR YEAR
Pays lodging each day for a covered person or an adult companion when insured is receiving treatment from a medical facility located more than 100 miles from their home.

Transportation
NO LIFETIME MAXIMUM
Common Carrier (Air, Rail or Bus) // up to $2,000/trip
LIMITED TO TWO ROUND TRIPS PER PERSON, PER CALENDAR YEAR
Pays the benefit amount for a covered person and one adult companion to travel to or from the hospital.

Private Vehicle // up to $2,000/year
$0.60/MILE UP TO THE BENEFIT AMOUNT
PAYS FOR UNLIMITED TRIPS
Pays the benefit amount for a covered person to travel to or from a hospital located more than 50 miles from the home.

Ambulance
NO LIFETIME MAXIMUM
Pays per trip to or from a hospital where insured is confined as an inpatient.
Ground // $500/trip
LIMITED TO 4 TIMES PER CALENDAR YEAR
Air // $2,000/trip
LIMITED TO 1 TRIP PER CALENDAR YEAR

Cancer Treatment Benefits[11]

UP TO $15,000

EXPERIMENTAL TREATMENT
Pays for experimental drugs and chemicals, surgery, or therapy endorsed by either the NCI or ACS for experimental studies in the treatment of cancer.

UP TO $5,000

PROSTHESIS
Pays the prosthesis benefit amount when a covered person purchases or has surgically implanted a medically necessary prosthetic device as prescribed by a physician as a direct result of cancer.

UP TO $2,500 // $500 STORAGE BENEFIT

EGG OR SPERM HARVESTING
Pays the egg or sperm harvesting and storage benefit amount when a covered person has a procedure to harvest and store an egg or sperm prior to beginning cancer treatment that would damage the egg or sperm.

RECONSTRUCTIVE SURGERY
Pays the reconstructive surgery benefit amount when a covered person has a medically necessary reconstructive surgery as a direct result of cancer.

[10]Cancer Indemnity Benefit Rider and Heart Attack and Stroke Indemnity Benefit Rider
[11]Cancer Indemnity Benefit Rider
*Example uses daily benefit multiplied by assumed 30 days per month.
**This benefit is payable up to the same number of days as the Hospital Confinement Benefit.

Chemotherapy and Radiation Benefits[12]*

UP TO $3,000 per month

ORAL CHEMOTHERAPY

$1,000/treatment
LIMITED TO 36 MONTHS
Pays per medication, maximum of three medications per month.

UP TO $1,000 per day

INJECTED CHEMOTHERAPY

NO LIFETIME MAXIMUM
Pays per day for covered injected chemotherapy treatments.

UP TO $1,000 per day

RADIATION

NO LIFETIME MAXIMUM
Pays per day for covered radiation treatments.

UP TO $500 per month

ANTI-NAUSEA DRUGS

NO LIFETIME MAXIMUM
Pays per month for prescribed anti-nausea drugs while an insured person is receiving chemotherapy, radiation or experimental treatment on an outpatient basis.

UP TO $250 per month

SUPPORTIVE DRUGS

NO LIFETIME MAXIMUM
Pays per month for supportive or protective care drugs prescribed in connection or conjunction with injected chemotherapy.

[12]Cancer Chemotherapy and Radiation Indemnity Benefit Rider
Benefit amounts listed are based on the maximum benefit level.
*Premiums will vary by plan.

Cancer + Heart Transplant Benefits

The original benefit listed below increases by 5% every year for 20 years.

UP TO $200,000 COULD INCREASE TO $400,000

HUMAN HEART TRANSPLANT[13]*

Pays the heart transplant benefit amount if a covered person is the recipient of a heart transplant.

BONE MARROW TRANSPLANT[14]*

Pays the bone marrow transplant lifetime benefit amount when a covered person is the recipient of a bone marrow transplant as a direct result of cancer.

UP TO $100,000 COULD INCREASE TO $200,000

STEM CELL TRANSPLANT[14]*

Pays the stem cell transplant benefit amount if a covered person is the recipient of a human stem cell transplant as a direct result of cancer.

BONE MARROW DONOR[14]*

Pays the bone marrow donor lifetime benefit amount when a covered person is the donor or the recipient of a bone marrow transplant as a direct result of cancer.

[13]Heart Attack and Stroke Lump Sum Benefit Insurance Policy.
[14]Cancer Lump Sum and Reoccurrence Indemnity Benefit Insurance Policy.
*Benefit amounts listed are based on the maximum benefit level. Other benefit plans are available at $1,000 per unit. Premiums will vary by plan.

Chronic Disease Benefits[15]

The original benefit listed below increases by 5% every year for 20 years.

The benefits decrease by half at age 70.

$150,000 COULD INCREASE TO 300,000 IN 20 YEARS

COMA // Pays the coma lifetime benefit amount when a covered person has been in a coma for a period of 30 consecutive days.

PERMANENT PARALYSIS // Pays the applicable permanent paralysis lifetime benefit amount (either for paraplegia or quadriplegia) when a covered person is diagnosed with permanent paralysis.

$100,000 COULD INCREASE TO $200,000 IN 20 YEARS

MULTIPLE SCLEROSIS // Pays the multiple sclerosis lifetime benefit amount if an insured is diagnosed with multiple sclerosis.

PARKINSON'S // Pays the Parkinson's lifetime benefit amount if an insured is diagnosed with Parkinson's disease.

LOSS OF HEARING, SIGHT OR SPEECH // Pays the loss of hearing, sight or speech benefit amount when a covered person is diagnosed with total loss of hearing, sight or speech.

ALZHEIMER'S // Pays the Alzheimer's lifetime benefit amount if a covered person is diagnosed with advanced Alzheimer's and is unable to perform at least three Activities of Daily Living.

HUMAN ORGAN TRANSPLANT
Pays the organ transplant lifetime benefit amount if a covered person is the recipient of a human organ transplant because the organ can no longer adequately function, causing a covered person to be at greater risk of death.

$50,000 COULD INCREASE TO $100,000 IN 20 YEARS

ALS // Pays the amyotrophic lateral sclerosis benefit amount if an insured is diagnosed with ALS. This diagnosis must be supported by investigations including typical MRI findings, lumbar puncture, blood and urine studies, and electromyography (EMG), which unequivocally confirm the diagnosis.

$25,000 COULD INCREASE TO $50,000 IN 20 YEARS

END-STAGE RENAL FAILURE // Pays the end-stage renal failure lifetime benefit amount when a covered person is diagnosed with end-stage renal failure as a result of sickness or disease.

[15]Chronic Disease Indemnity Benefit Insurance Policy. Benefits decrease by half at age 70.

Policy Advantages

- You're paid regardless of any other insurance you may have, and the cash benefits are paid directly to you. You decide how to use the money.*
- Policy is guaranteed renewable as long as you pay your premiums on time.
- Your premiums do not increase because you get older.

Return of Premium

APPLICANTS AGE 49 AND UNDER[16]

We will return all premiums paid (less any claims paid) every 20 years.

	Premium Paid In	Claims Paid	Refund Amount
Example 1	$15,000	$150,000 Claims	No Refund
Example 2	$15,000	$5,000 Claims	$10,000
Example 3	$15,000	$0 Claims	$15,000

*The benefits may be paid directly to the hospital or other healthcare agency if an assignment of benefits is made.

[16]20-Year Return of Premium Indemnity Benefit Rider

Policy Type

Your Age _____

Plan Level $_____ Plan Level $_____ Plan Level $_____

_____ _____ _____

Policy Type _____ Policy Type _____ Policy Type _____

CANCER, HEART ATTACK, STROKE BENEFIT LEVELS

	65+	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F
Cancer Lump Sum and Recurrence	$5,000	$10,000	$15,000	$20,000	$30,000	$40,000	$100,000*
Nonmalignant Melanoma Skin Cancer *(Lifetime benefit)*	$500	$500	$500	$500	$500	$500	$500
Limited Cancer *(Lifetime benefit)*	$1,250	$2,500	$3,750	$5,000	$7,500	$10,000	$25,000
Bone Marrow Transplant	$10,000	$20,000	$30,000	$40,000	$60,000	$80,000	$200,000
Stem Cell Transplant	$5,000	$10,000	$15,000	$20,000	$30,000	$40,000	$100,000
Bone Marrow Donor	$5,000	$10,000	$15,000	$20,000	$30,000	$40,000	$100,000
Heart Attack or Stroke Lump Sum	$5,000	$10,000	$15,000	$20,000	$30,000	$40,000	$50,000
Coronary Artery Bypass Surgery	$2,500	$5,000	$7,500	$10,000	$15,000	$20,000	$25,000
Coronary Angioplasty *(Lifetime benefit)*	$1,250	$2,500	$3,750	$5,000	$7,500	$10,000	$12,500
Heart Transplant	$20,000	$40,000	$60,000	$80,000	$120,000	$160,000	$200,000
Chronic Illness/Transplant							
Human Organ Transplant	$100,000	$100,000	$100,000	$100,000	$100,000	$100,000	$100,000
Living Organ Donor	$50,000	$50,000	$50,000	$50,000	$50,000	$50,000	$50,000
Alzheimer's (Lifetime benefit)	$100,000	$100,000	$100,000	$100,000	$100,000	$100,000	$100,000
Permanent Paralysis	$150,000	$150,000	$150,000	$150,000	$150,000	$150,000	$150,000
Paraplegia	$50,000	$50,000	$50,000	$50,000	$50,000	$50,000	$50,000
Coma	$150,000	$150,000	$150,000	$150,000	$150,000	$150,000	$150,000
End-Stage Renal Failure	$25,000	$25,000	$25,000	$25,000	$25,000	$25,000	$25,000
Amyotrophic Lateral Sclerosis	$50,000	$50,000	$50,000	$50,000	$50,000	$50,000	$50,000
Multiple Sclerosis	$100,000	$100,000	$100,000	$100,000	$100,000	$100,000	$100,000
Parkinson's	$100,000	$100,000	$100,000	$100,000	$100,000	$100,000	$100,000
Loss of Hearing/Sight/Speech	$100,000	$100,000	$100,000	$100,000	$100,000	$100,000	$100,000
Chemotherapy Injected *(per day)*	$100	$100	$200	$300	$500	$800	$1,000
Chemotherapy Oral/Topical *(per month, up to 3 medications per month, up to 36 months)*	$100	$100	$200	$300	$500	$800	$1,000
Radiation *(per day)*	$100	$100	$200	$300	$500	$800	$1,000
Anti-Nausea Drug *(per month)*	$50	$50	$100	$150	$250	$400	$500
Supportive Drug *(per month)*	$25	$25	$50	$75	$125	$200	$250
Cancer, Heart Attack or Stroke Benefits							
Days 1–10 *(per day)*	$500	$500	$500	$500	$500	$500	$500
Days 11–90 *(per day)*	$1,000	$1,000	$1,000	$1,000	$1,000	$1,000	$1,000
Day 91+ *(per day)*	$1,500	$1,500	$1,500	$1,500	$1,500	$1,500	$1,500
Intensive Care Unit *(per day)*	$1,000	$1,000	$1,000	$1,000	$1,000	$1,000	$1,000
Hospice Care *(per day)*	$500	$500	$500	$500	$500	$500	$500
Drugs & Medicine *(per day)*	$300	$300	$300	$300	$300	$300	$300
Attending Physician *(per day)*	$150	$150	$150	$150	$150	$150	$150
Private Nurse *(per day)*	$300	$300	$300	$300	$300	$300	$300
Skilled Nursing Facility *(per day)*	$300	$300	$300	$300	$300	$300	$300
Ground Ambulance *(per trip, 4 trips/year)*	$500/trip	$500/trip	$500/trip	$500/trip	$500/trip	$500/trip	$500/trip
Air Ambulance *(per trip, 1 trip/year)*	$2,000/trip	$2,000/trip	$2,000/trip	$2,000/trip	$2,000/trip	$2,000/trip	$2,000/trip
Private Vehicle *($0.60/mile)*	$0.60/mi *up to $2,000*	$0.60/mi *up to $2,000*	$0.60/mi *up to $2,000*	$0.60/mi *up to $2,000*	$0.60/mi *up to $2,000*	$0.60/mi *up to $2,000*	$0.60/mi *up to $2,000*
Common Carrier *(up to $2,000/person, 2 trips per year)*	$2,000/trip	$2,000/trip	$2,000/trip	$2,000/trip	$2,000/trip	$2,000/trip	$2,000/trip
Lodging *(per day)*	$100	$100	$100	$100	$100	$100	$100
Prosthesis *(implant, artificial limb)***	$5,000	$5,000	$5,000	$5,000	$5,000	$5,000	$5,000
Prosthesis *(hair, external breast, larynx, eye)***	$1,250	$1,250	$1,250	$1,250	$1,250	$1,250	$1,250
Egg/Sperm Harvesting and Storage**	$2,500	$2,500	$2,500	$2,500	$2,500	$2,500	$2,500
Egg/Sperm Storage**	$500	$500	$500	$500	$500	$500	$500
Reconstructive Surgery**	$2,500	$2,500	$2,500	$2,500	$2,500	$2,500	$2,500
Experimental Treatment *($3,000/unit)***	$15,000	$15,000	$15,000	$15,000	$15,000	$15,000	$15,000

*Benefit amounts listed are based on the maximum Cancer Lump Sum and Recurrence Indemnity Benefit Insurance Policy. Other benefit plans between $50,000 and $100,000 are available for the Cancer Lump Sum and Recurrence Benefit Insurance Policy. Premiums will vary by plan.

**Prosthesis, Egg/Sperm Harvesting and Storage, Reconstructive Surgery, and Experimental Treatment are only available with the Cancer Indemnity Benefit Rider

Toll-Free 1-877-822-0582

Our customer service specialists are friendly and knowledgeable licensed agents.
If you have a question, please call us.

This brochure is intended to provide a general description of the benefits available under the Cancer Lump Sum and Reoccurrence Indemnity Benefit Insurance Policy, the Heart Attack and Stroke Benefit Insurance Policy, and the Chronic Disease Indemnity Benefit Insurance Policy, and their optional Riders. Benefit type and amount will vary based on the type of policy, optional riders, and plan level selected. Policy provisions and benefits may vary from state to state. Please see the policy and riders for exact details for costs and further details of coverage, including exclusions, any restrictions, limitations and the terms under which policy may be continued in force.
With questions, see your agent or contact the insurance company. This is a solicitation of insurance an agent may contact you.

THESE ARE LIMITED POLICIES. READ YOUR POLICIES CAREFULLY.

Pre-existing conditions are not covered during the first six months after the policy date.

Waiting Periods: A waiting period is the number of days for which no benefits are payable. The benefits under the Cancer Lump Sum and Reoccurrence Indemnity Benefit Insurance Policy, the Heart Attack and Stroke Benefit Insurance Policy, and the Chronic Disease Indemnity Benefit Insurance Policy, and their optional Riders are subject to a 30-day waiting period.

Right to Return: If you are not satisfied with your policies, send them back to customer service within thirty (30) days after you receive it, and the insurance company will return your money, less any claims paid.

The policies riders are limited health coverage that provide benefits in addition to other insurance you may have.

NOTICE TO BUYER: These policies and riders provide limited benefits. They may not cover all the costs incurred by the buyer during the period of coverage. The buyer is advised to carefully review all policy limitations, exclusions, terms and conditions. PLEASE READ YOUR ACCOMPANYING OUTLINE OF COVERAGE.

These are not Medicare Supplement policies.

This brochure is designed to be a marketing aid and is not to be construed as a contract for insurance.

This brochure provides a brief description of the important features of policy form(s):

SMCA2019, SMCAIR2019, SMCCRR2019, SMHS2019, SMHSIR2019, SMICCD2019, SM20ROPII

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Platinum® SUPPLEMENTAL INSURANCE

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Insurance coverage underwritten by

State Mutual Insurance Company
Since 1936