



Cancer Endurance Plan™

You don't have to endure the financial strain of cancer alone.



Lifetime Chance of Developing Cancer

1 in 3 People in the U.S.*

Cancer shows no favoritism. Everyone is at risk.

Cancer isn't just a devastating disease. Cancer can also be devastating to your family's finances. But if you are diagnosed with cancer, you don't have to endure the financial strain of cancer alone.

The Cancer Endurance Plan's benefits do not reduce as you age. And, most benefits do not have lifetime maximums, meaning our policy can be with you or your family member for the entirety of treatment, providing help when it is needed most.

Features

- Pays in addition to any other insurance you have
- Benefits will be paid to you unless you direct otherwise in writing. Under some governmental plans (such as Medicaid) benefits have already been assigned by the insured
- Choice of individual, family, or single parent coverage
- Policy can be converted to different type (individual, family, single parent) if your family status changes (adoption, birth, death, divorce)
- Guaranteed renewable for life
- Cannot be canceled as long as premiums are paid on time
- Rates cannot be increased on an individual basis, but may increase on a class basis by state

*Source: American Cancer Society, *Cancer Facts & Figures, 2020*.

Underwritten by Liberty National Life Insurance Company, a Globe Life company

Benefit	Pays
First Occurrence	\$10,000 upon the first written diagnosis of cancer. Payable only once. For this benefit only, skin cancer (except for melanoma) is not covered.
Hospital Confinement	Days 1-90: \$750 per day of continuous confinement. And \$1,200 per day thereafter for continuous confinement. No maximum number of days. No lifetime limit.
Surgical	Maximum payment for any one operation is 250% of the amount shown in the surgical schedule of the policy, up to \$5,000 per surgical procedure. No lifetime limit.
Anesthetist	Up to 25% of the amount payable for surgery. No lifetime limit.
Outpatient Surgery	Up to \$250 for each day of a surgical procedure for cancer treatment as outpatient in hospital or ambulatory surgical center. No lifetime limit.
Attending Physician	Up to \$35 per day for one attending physician charges for cancer treatment, in or out of hospital. Charges by physician for surgery, radiation, chemotherapy, or office visit for chemotherapy and/or radiation not covered under this benefit. No lifetime limit.
Private Duty Nursing	Up to \$75 per day for graduate RN or LPN care recommended by physician, in or out of hospital. No lifetime limit.
Hospice	Up to \$75 per day for visit from Hospice representative or visiting a Hospice facility for treatment or services related to cancer as determined by physician. Does not pay if person is confined to hospital or U.S. government hospital. No lifetime limit.
Radiation and Chemotherapy*	Up to \$500 per day , for radiation or chemotherapy administered in person by a physician or nurse. No lifetime limit.
Prescription Chemotherapy Drug*	Up to \$10,000 per year for prescription cancer-fighting chemotherapy drugs prescribed to be self-administered. No lifetime limit.
Blood Transfusion	Up to \$500 per day for blood or blood components and administration of blood or plasma for blood transfusion for cancer treatment. Does not pay for cross matching, lab tests, supplies, or blood replaced by donors. No lifetime limit.
New or Experimental Treatment	Covered person's charges for new or experimental cancer treatment under policy's regular schedule of benefits. Treatment must be approved by AMA and FDA and administered in United States by licensed physician. State specific provisions may apply.
Transportation	All charges covered person and one attendant incurs for commercial transportation by aircraft, railroad, bus, or ambulance to and from ANY hospital or clinic in U.S. to receive specialized treatment for cancer. Or, 25¢ per mile if personal car is used and destination is more than 100 miles away, one way. This benefit is payable only when traveling to another city because similar physician advised services are not available within 100 miles of the city where you live. Maximum limit of 6 trips in a consecutive 12-month period.
Income Replacement	\$100 per week , if disabled due to cancer, up to a lifetime maximum of 26 weeks. All insured persons gainfully employed when the disability begins are covered. A 14-day elimination period applies.
Prosthesis	Up to \$750 for prosthesis used as a result of cancer. Lifetime limit of 2 prostheses.
Government Hospital Confinement	\$3,500 First Occurrence Benefit upon the first diagnosis of cancer (if not already paid). \$250 per day for the first 90 days of hospital confinement and \$600 per day thereafter for continuous confinement in lieu of all other hospital benefits.
Dread Disease	Pays Hospital Confinement Benefit in lieu of all other benefits for treatment of cystic fibrosis, diphtheria, encephalitis, Lou Gehrig's disease, meningitis, multiple sclerosis, muscular dystrophy, osteomyelitis, poliomyelitis, rabies, scarlet fever, sickle cell anemia, smallpox, tetanus, tuberculosis, tularemia, typhoid fever.

*In no event will charges for chemotherapy drugs be covered under both the "Radiation and Chemotherapy" benefit and the "Prescription Chemotherapy Drug" benefit. See policy and Benefit Enhancement Endorsement R3724 for full details and coverage amounts.

Limitations and Exclusions This policy contains a 30-day waiting period that begins with the policy's effective date. If a covered person has cancer manifested during the waiting period, coverage for that cancer will apply only to expenses incurred after two years from the policy's effective date, and no First Occurrence Benefit will be paid. No benefits are payable to anyone who has cancer manifested before the effective date of this policy. If a covered person has one of the specified dread diseases manifested before the policy's effective date or waiting period, coverage for the specified disease will apply only to expenses incurred after two years from the policy effective date. The policy does not cover treatment for any disease or sickness or incapacity other than cancer or one of the specified dread diseases; treatment or services where no charge is normally made in the absence of insurance, except U.S. government hospitals; treatment or services outside the continental United States; treatments that are not accepted or approved by the American Medical Association as an effective cancer treatment; or drugs or substances not approved by the Federal Drug Administration for use in the treatment of cancer. These Limitations and Exclusions may vary by state.

This is a cancer policy. This is **NOT** major medical insurance or a Medicare Supplement policy. This is a solicitation for insurance. The benefits described in this brochure are contained in policy forms 5KM, 5KN, 5KO. Forms and benefits may vary by state. This brochure is not an insurance contract. The policy explains the rights and obligations of both Liberty National and the insured. It is important to read your policy carefully. Please see your Globe Life Liberty National Division agent for cost and complete details.

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