

## Cancer Benefit Summary by Plan

<b>Plan ID - L6040-AD</b>	<b>Plan A</b>	<b>Plan B</b>	<b>Plan C</b>
Annual Screening Benefit	\$ 50.00	\$ 100.00	\$ 125.00
First Occurrence	\$ 2,000.00	\$ 4,000.00	\$ 8,000.00
First Occurrence Building Benefit (annual increase)	\$ 500.00	\$ 500.00	\$ 500.00
Surgical Schedule	\$ 5,000.00	\$ 6,000.00	\$ 6,000.00
Daily Hospital Confinement Benefit	\$ 200.00	\$ 300.00	\$ 300.00
Daily Radiation, Chemo, Immunotherapy, Experimental Treatment	\$ 400.00	\$ 600.00	\$ 600.00
Employee Only	\$ 23.12	\$ 32.06	\$ 37.62
Single Parent Family	\$ 27.04	\$ 37.34	\$ 43.48
Employee Family	\$ 38.44	\$ 52.91	\$ 61.54