



Cancer Assist for AK

Applicable to policy form CanAssist

- with Specified Disease Benefit, Progressive Payment Benefit, \$100 Health Screening Benefit
\$10,000 Initial Diagnosis Benefit

COVERAGE LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE AND SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Level 3	17-75	\$50.70	\$88.20	\$52.15	\$89.65
Level 4	17-75	\$59.65	\$103.20	\$61.25	\$104.80

outline of coverage, sample policy/certificate, proposal description or see your Colonial Life benefits counselor. Coverage type, benefits and rates vary by state. Coverage may not be available in all states. Rates provided are illustrative and your actual premium may be different depending on your particular situation and plan choices.

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