

THE TIMBER RIDGE SERIES®

Critical Illness Insurance Plans

ABOUT DEARBORN NATIONAL™

Three words embody what Dearborn National stands for: **Strength, Independence and Solutions.**

Dearborn National focuses on its customers and concentrates on building relationships for the long term. Because one size does not fit all, we work hard to find the right solution to fit every need.

Colorado Bankers Life Insurance Company®, a Dearborn National brand company, has underwritten life, health and annuity products since 1974. Today, it continues to create products that meet the demands of an ever-changing marketplace. Colorado Bankers Life is a subsidiary of Health Care Service Corporation, a mutual legal reserve company, a health insurance carrier based in Illinois.

Dearborn National...delivering large-company solutions with a small-company touch.



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This document contains a general summary of benefits, exclusions and limitations. Please refer to the policy for the actual terms and conditions that apply. In the event there are discrepancies with the information given in this document, the terms and conditions of the policy will govern. Contract form series RCT122007; riders CCFR-604 and CCR-122007.

Products and services marketed under the Dearborn National™ brand and the star logo are underwritten and/or provided by Colorado Bankers Life Insurance Company® (Greenwood Village, CO), licensed in 48 states (excluding New York and Vermont where it is not licensed and does not solicit business), the District of Columbia and Guam. Product features and availability vary by state and are solely the responsibility of Colorado Bankers Life Insurance Company.



Underwritten by Colorado Bankers Life
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Strength. Independence. Solutions.

What is Critical Illness Coverage and how does this plan work?

The Timber Ridge Series® is term life insurance that is designed to pay death benefits upon your death while the policy remains in force and to pay living benefits upon the first ever diagnosis of one of the covered conditions listed below, made on or after the 30th day after the policy effective date, regardless of additional treatment, actual expenses or other coverage. The amount of the death benefit available under the coverage after a living benefit has been paid, is reduced by the living benefit payment made. If 100% of the face amount is paid out as a living benefit, the policy and all coverage will end. Only one living benefit pay-out may be made under the policy for each benefit and for each insured person.



THE TIMBER RIDGE SERIES¹

is designed to pay, as a lump sum, the percentage of your term life insurance death benefit listed below if you are first ever diagnosed with one of the following covered conditions² on or after the 30th day coverage becomes effective:

Invasive Cancer	100%
Heart Attack	100%
Stroke	100%
End-Stage Renal Failure	100%
Major Organ Transplant	100%
Terminal Illness	100%
Advanced Alzheimer's Disease	100%
Loss of Independent Living	100%
Loss of Limbs	100%
Major Burns	100%
Paralysis	100%
Coronary Bypass Surgery	25%
Heart Valve Replacement/Repair Surgery	25%
Aortic Surgery	25%
Angioplasty	10%

DEATH FROM ANY CAUSE IS A 100% BENEFIT

(Except suicide during the first two years.)

WHY CRITICAL ILLNESS COVERAGE?

Almost everyone knows someone who has experienced a critical illness of some kind...and survived physically. Critical Illness insurance is designed to help people through the financial challenges associated with survival of a critical illness.

WHY CRITICAL ILLNESS COVERAGE?

Approximately

1.2 MILLION

people suffer heart attacks each year³

Approximately

780,000

people suffer strokes each year⁴

TAX TREATMENT OF ACCELERATED LIVING BENEFIT

Unlike a death benefit, living benefits may be taxable. You should consult with a tax advisor as to the taxability of any living benefit you receive.

SURVIVAL RATES ARE UP!

Advanced medical technology is allowing many more people to survive critical illnesses that would have been fatal in the past:

- ▲ Between 1994 and 2004, the death rate declined approximately 31% for heart attacks and almost 24% for strokes. *(Source: American Heart Association, Heart and Stroke Statistical Update, 2008.)*
- ▲ The possibility of surviving a critical illness before age 65 is almost twice as great as dying. *(Source: National Center for Health Statistics.)*

WOULDN'T A CHECK BE BETTER THAN A GET WELL CARD?

Living benefits are paid directly to you. You choose how to spend the benefit at a time when you and your family may need extra cash the most. For example:

- ▲ Home Health Care
- ▲ Cost of Caregivers
- ▲ Lost Income of Self or Spouse
- ▲ Daily Living Expenses
- ▲ Co-Pays and Deductibles
- ▲ Non-Covered "Experimental" Treatments
- ▲ Housekeeping or Child Care Expenses
- ▲ Maintenance of Your Family's Quality of Life

COVERAGE REDUCTION AND TERMINATION

Termination of the life insurance policy will terminate living benefits. This plan ends when you reach age 70. See the policy for options available to convert the life insurance coverage prior to age 65.

CRITICAL ILLNESS FAMILY RIDER (OPTIONAL)

Spouse Only option – Under this option, with the payment of the required premium and approval by the home office, this rider provides \$10,000 of 10-year level term life insurance and critical illness coverage upon first diagnosis of life threatening cancer, heart attack, stroke, renal failure, major organ transplant and terminal illness.² The rider is guaranteed renewable every 10 years and terminates at your age 70 or your spouse's age 70, whichever occurs first. It is convertible to a \$10,000 renewable and convertible term life policy with the critical condition accelerated benefit rider without proof of insurability based on the premium rates at his/her then attained age.

Spouse and/or Child option – Under this option, Child coverage is also available. All eligible children can be covered for \$5,000 of 10-year level term life insurance and critical illness coverage for the same covered conditions as the spouse. Refer to the policy for spouse and child eligibility definitions.

Under either option, the total amount paid out for death benefits or covered conditions will not exceed \$10,000 on the insured spouse and \$5,000 per insured child. Benefits may vary by state.

COVERED CONDITIONS AND DEFINITION SUMMARY²

Invasive Cancer – A malignant neoplasm, which is characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue, and which is not specifically hereafter excluded. Leukemias and lymphomas are included.

Heart Attack – An acute myocardial infarction resulting in the death of a portion of the heart muscle (myocardium) due to a blockage of one or more coronary arteries and resulting in the loss of the normal function of the heart.

Stroke – Any acute cerebrovascular accident producing neurological impairment and resulting in paralysis or other measurable objective neurological deficit persisting for at least 96 hours and expected to be permanent. Transient ischemic attack (mini-stroke), head injury, chronic cerebrovascular insufficiency and reversible ischemic neurological deficits are excluded.

End-Stage Renal Failure – The chronic and irreversible failure of both of your kidneys, which requires you to undergo periodic and ongoing dialysis.

Major Organ Transplant – The clinical evidence of major organ(s) failure, which require the malfunctioning organ(s) or tissue of the insured to be replaced with an organ(s) or tissue from a suitable human donor (excluding the insured) under generally accepted medical procedures. The organs and tissues covered by this definition are limited to: liver, kidney, lung, entire heart, small intestine, pancreas, pancreas-kidney or bone marrow. In order for the Major Organ Transplant to be covered under this Policy, the Insured must be registered by the United Network of Organ Sharing (UNOS).

Terminal Illness – Advanced or rapidly progressing incurable disabling terminal illness where, based on our investigation, the life expectancy is no greater than 12 months.

Advanced Alzheimer's Disease – The diagnosis, by a legally qualified physician board-certified as a neurologist, of advanced Alzheimer's disease. The insured must exhibit loss of intellectual capacity involving impairment of memory and judgement as measured by clinical evidence and standardized testing. It must result in significant reduction in mental and social functioning such that the insured requires substantial assistance in performing at least three of the six activities of daily living.

Loss of Independent Living – The diagnosis, by a legally qualified physician board-certified in a specialty medically appropriate for the related condition, that you have been unable for at least 180 consecutive days to perform by yourself, without substantial assistance from another person, at least three of the six activities of daily living.

Loss of Limbs – The diagnosis, by a legally qualified physician board-certified as medically appropriate for this condition, of a total and irreversible severance of two or more limbs from above the wrist or ankle joint as the result of an accident or medically required amputation.

Major Burns – The diagnosis, by a legally qualified physician board-certified as a plastic surgeon, that you have sustained third degree burns covering at least 20% of the surface area of your body.

Paralysis – The complete and permanent loss of use of two or more limbs through neurological injury for a continuous period of at least 180 days.

Coronary Bypass Surgery – The actual undergoing of coronary artery bypass surgery using either a saphenous vein or internal mammary artery graft for the treatment of coronary heart disease deemed medically necessary to correct a narrowing or blockage of one or more coronary arteries.

Heart Valve Replacement/Repair Surgery – The actual undergoing of open heart surgery to replace or repair one or more valves.

Aortic Surgery – The actual undergoing of surgery for disease of the aorta needing excision and surgical replacement of a portion of the diseased aorta with a graft.

Angioplasty – The actual undergoing of a percutaneous transluminal angioplasty deemed medically necessary to correct a narrowing or blockage of one or more coronary arteries.

¹Some exclusions and exceptions apply. Benefits may differ or not be available in some states. Your agent will explain the benefits available in your state. ²Covered conditions are defined in the policy. The summary contained in this piece is only an overview of the actual definitions. The actual policy definitions should be consulted and will control. ³Source: American Heart Association, Know the Facts, Get the Stats 2007. ⁴Source: American Heart Association, Heart and Stroke Statistical Update, 2008. ⁵Source: American Cancer Society, Cancer Facts & Figures, 2007.