



Accelerated Death Benefit Endorsements

Financial Protection To Help with Critical, Chronic and Terminal Illness

Marketing Guide



North American Company automatically includes the accelerated death benefit feature at policy issue for no additional premium on all applicable policies. This feature pays benefits only if/when the policyowner elects to accelerate the death benefit described both in this brochure, and in the endorsement forms. The Accelerated Death Benefit Endorsements may cover critical, chronic and terminal illness as outlined below. Please note that benefits may vary by product and state.

Critical Illness

Specific medical conditions that may qualify for the critical illness benefit include heart attack, different types of cancer, stroke, major organ transplant, and kidney failure. Please keep in mind that the policyowner must file the claim within 12 months of a qualifying event. The maximum amount of the death benefit that may be accelerated is the lesser of 25% of the death benefit at the time of each election, or \$50,000. All approved claims will receive a payment guaranteed to be 40% of the death benefit amount accelerated, less any amounts needed for debt repayments (for example, 40% of \$50,000 = \$20,000), regardless of the type of critical illness event, policy age, gender or underwriting class.

ELIGIBILITY

All of the following criteria must be met for the proposed insured to qualify:

- Maximum issue age of 75 or less (see product feature cards for details); and
- Insured is rated at Table 2 or better; and
- No medical flat extras (non-medical flat extras are acceptable).

QUALIFICATIONS

A physician must provide written certification that the insured has experienced one of these events or conditions in the past 12 months:

1. **Heart Attack** – defined as death of heart muscle due to inadequate blood supply that has resulted in evidence of myocardial infarction based on typical rise and gradual fall of Troponin or more rapid rise and fall of isoenzyme of creatine kinase with muscle and brain subunits (CK-MB) and other biochemical markers of myocardial necrosis with at least one of the following:
 - a. Typical clinical symptoms (chest pain may or may not be present);
 - b. Characteristic electrocardiogram (ECG or EKG) changes indicating ischemia; or
 - c. Coronary artery intervention.
2. **Cancer** – defined as any malignant tumor positively diagnosed with histological confirmation and characterized by the uncontrolled growth of malignant cells and invasion of tissue. The term malignant tumor includes leukemia, lymphoma and sarcoma.

The following are not covered:

- a. All cancers which are histologically classified as any of the following:
 - i. Premalignant (for example essential thrombocythemia and polycythemia rubra vera);
 - ii. Non-invasive;
 - iii. Cancer in situ;
 - iv. Having borderline malignancy; or
 - v. Having low malignancy potential.
 - b. All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0.
 - c. Any skin cancer, (other than malignant melanoma), that has been histologically classified as having caused invasion beyond the epidermis (outer skin layer).
 - d. Thyroid Cancer classified as T1NOMO.
3. **Stroke** – defined as death of brain tissue due to inadequate blood supply or hemorrhage within the skull resulting in permanent neurological deficit with persisting clinical symptoms or traumatic brain injury or persistent, disabling clinical symptoms still present more than 30 days after the initial event. Transient Ischemic Attack (TIA) is not covered.
 4. **Major Organ Transplant** - means the undergoing as a recipient of a transplant of bone marrow or a complete heart, kidney, liver, lung, or pancreas, or inclusion on the United Network of Organ Sharing (UNOS) waiting list. Transplant of any other organs, parts of organs, tissues or cells is not covered.
 5. **Kidney Failure** – defined as chronic and end stage renal failure (failure of both kidneys to function effectively) diagnosed and managed by a nephrologist, as a result of which regular dialysis is necessary.

The complete policy form LR477 may be viewed in the *Riders and Endorsements* section at www.NorthAmericanCompany.com.

BENEFIT AMOUNT

The minimum accelerated amount is \$2,500 of the death benefit. The maximum per election is 25% of the death benefit at the time of election or \$50,000, whichever is less. The payment will be made in a lump sum. The policyowner can file a claim for each qualifying critical illness event that the insured incurs, and receive up to a maximum of \$20,000 for each approved claim.

- **Critical Illness Payment:** Any payment a policyowner receives will be less than the amount of the death benefit that is accelerated – because the benefit is paid prior to the insured's death. All approved claims will receive a payment guaranteed to be 40% of the death benefit amount accelerated, less any amounts needed for debt repayments (for example, 40% of \$50,000 = \$20,000) – regardless of the type of critical illness event, policy age, gender or underwriting class.

Chronic Illness

Coverage for a chronic illness allows the policyowner to accelerate a portion of the death benefit when the insured is diagnosed with a chronic illness as defined below.

ELIGIBILITY

All of the following criteria must be met for the proposed insured to qualify:

- Maximum issue age of 80 or less(see product marketing guides for details); and
- Insured is rated at Table 4 or better; and
- No medical flat extras (non-medical flat extras are acceptable).

QUALIFICATIONS

A physician must provide written certification that within the last 12 months the insured is chronically ill. This medical certification is valid for 12 months. The insured is considered to be chronically ill if he or she:

- Is permanently unable to perform at least two Activities of Daily Living (ADLs) without substantial assistance from another person for at least 90 consecutive days; OR
- Requires substantial supervision by another person to protect oneself from threats to health and safety due to Severe Cognitive Impairment.

The Activities of Daily Living are bathing, continence, dressing, eating, toileting, and transferring. Severe cognitive impairment is defined as deterioration or loss of intellectual capacity that is measured by clinical evidence and standardized tests, which reliably measure impairment in:

- Short-term or long-term memory; OR
- Orientation to people, places or time; OR
- Deductive or abstract reasoning; OR
- Judgment as it relates to safety awareness.

BENEFIT AMOUNT

The minimum accelerated amount per election, except the final election, is 5% of the death benefit or \$50,000, whichever is less. The maximum per election is 24% of the death benefit or \$240,000, whichever is less. One election is available every 12 months.

The payment will be paid in a lump sum. A new Application for Election of Accelerated Benefits must be completed for each election.

A final election occurs if all of the available death benefit in the policy is accelerated, excluding the residual death benefit. The residual death benefit is equal to 5% of the death benefit on the initial election date, or \$10,000 if greater.

Terminal Illness

In the event that the insured is found ineligible for critical or chronic illness coverage at the time of policy issue, terminal illness coverage may still apply.

ELIGIBILITY

Terminal illness coverage has the same criteria as the life insurance policy issued.

QUALIFICATION

For terminal illness, the physician must provide written certification that the insured has a life expectancy of 24 months or less. This timeframe may vary by jurisdiction.

BENEFIT AMOUNT

The minimum accelerated amount is 10% of the death benefit or \$100,000, whichever is less on the election date. The maximum the policyowner may accelerate is 75% of the death benefit or \$750,000, whichever is less. We allow only one election per policy for terminal illness. The payment will be paid in a lump sum.

Physician Certification

In order to qualify for benefits, a physician must provide written certification that the insured is critically, chronically or terminally ill. The diagnosing physician must be a licensed medical doctor or licensed doctor of osteopathy operating within the scope of the license. A physician cannot be the insured, the policyowner, or a member of their immediate family (spouse, children, siblings, parents, grandparents, or any of their spouses).

North American may require a second opinion by a company designated physician. If there is disagreement between the first physician and the second physician, a third medical opinion will be provided by a physician that is chosen through a mutual agreement between the policyowner and North American. North American will pay for any additional medical opinions.

Electing Benefits

To elect benefits under these endorsements, the policyowner must complete an Application for Election of Accelerated Benefits form, which includes a section for the physician's certification mentioned above. The Application for Election also allows the policyowner to choose the amount of the death benefit to accelerate, subject to the minimum and maximum election amounts listed for each benefit above. The maximum death benefit that can be accelerated per policy is \$1,000,000.

Coordination of Accelerated Death Benefits

North American will not simultaneously accelerate any portion of the policy's death benefit for critical, chronic and terminal illness under these endorsements. The policyowner must discontinue any existing accelerated death benefit payments in order to elect the other accelerated death benefit under this endorsement.

PAYMENT

A payment the policyowner may receive will be less than the amount of the death benefit accelerated. A payment is reduced by a discounting method, an administrative fee (if applicable), and any applicable policy debt repayment.

DISCOUNTING METHOD

The death benefit will be reduced by the amount the client chooses to accelerate for a chronic or terminal illness. However, the actual amount paid to the client will be less than the amount of death benefit accelerated. This is because a discount is applied to accelerated death benefits. The discount depends on the specifics of the policy (including the insured's age and premium class, among other factors), as well as interest rates at the time the acceleration is requested.

For critical illness, any payment a policyowner receives will be less than the amount of the death benefit that is accelerated – because the benefit is paid prior to the insured's death. All approved claims will receive a payment guaranteed to be 40% of the death benefit amount accelerated, less any amounts needed for debt repayments (for example, 40% of \$50,000 = \$20,000) – regardless of the type of critical illness event, policy age, gender or underwriting class.

ADMINISTRATIVE FEE

We charge an administrative fee for each terminal and chronic election after applying the discount to the accelerated death benefit amount. The maximum administrative fee is \$200 and varies by jurisdiction. There is no administrative fee when the critical illness benefit is elected.

DEBT REPAYMENT AMOUNT

Policy debt must be reduced in the same proportion to the amount of death benefit accelerated. A portion of the accelerated death benefit proceeds (after discounting) will be used to pay down policy debt. (See example under "Impacts to Policy.")

MONTHLY DEDUCTION

While a chronic illness election is in effect (12 months following the election date, we waive monthly deductions for the first \$1,000,000 of the policy's death benefit amount in effect immediately prior to the initial election date. We resume monthly deductions when an election is no longer in effect. However, we will suspend lapse checking if at least 50% of the death benefit on the initial election date has been accelerated (which means the policy is in Protected Status). For a terminal illness election, we waive all monthly deductions after paying the benefit. For the critical illness election, monthly deductions are not waived, however we will suspend lapse checking for the six months following each election.

Withdrawals and Policy Loans¹

CRITICAL ILLNESS

For six months following the election of a critical illness the policyowner cannot take withdrawals. The election of a critical illness does not impact the ability to take policy loans. Availability of withdrawals resumes after the six-month period has ended. Please refer to policy form LR477 for detailed information.

CHRONIC ILLNESS

While a chronic illness election is in effect or if the policy is in protected status, the policyowner cannot take withdrawals. Policy loans may be taken during an election period – except after a final election. Availability of withdrawals resumes after the 12-month election period is over and the policy is not in protected status, except following a final election.

TERMINAL ILLNESS

Withdrawals and policy loans remain available after electing to accelerate the death benefit for terminal illness.

Impacts to Policy

IMPACT TO DEATH BENEFIT, SPECIFIED AMOUNT AND ACCOUNT VALUE

The death benefit, specified amount and account value will all be reduced in proportion to the death benefit that is accelerated. For example, if the death benefit before election is \$100,000 and the accelerated death benefit is \$20,000, the death benefit, specified amount and account value will all be reduced by 20% ($\$20,000/\$100,000$).

While a chronic illness election is in effect or the policy is in protected status, the policyowner may not increase or decrease the specified face amount of death benefit or change the death benefit option.

IMPACT TO DEATH BENEFIT GUARANTEES²

If the policy or any rider includes an additional account used to determine whether the policy will lapse (such as the Premium Guarantee Account on the Premium Guarantee Rider (PGR) on Guarantee Builder IUL), the additional account will be reduced in proportion to the death benefit accelerated. The specified amount used in the calculation of the additional account will also be reduced by the same percentage.

Other Riders and Endorsements

Upon election of accelerated benefits, all existing riders and endorsements will continue to be effective, subject to the terms and conditions of each rider or endorsement. The only exception is under a final election for chronic illness; in this case, all other riders and endorsements (except for this endorsement) attached to the policy will terminate. However, any accidental death benefit rider on the policy, if any, will not be affected by the accelerated benefits under these endorsements. No new riders can be added to the policy after an initial election.

PROVISIONS, RIDERS OR ENDORSEMENTS THAT RESTRICT CHANGES TO THE DEATH BENEFIT

If the policyowner has elected a policy provision, endorsement, or rider that restricts making any changes to the death benefit, the policyowner may not elect accelerated benefits under these endorsements. This includes any restrictions specified by a policy provision, endorsement, or rider providing overloan protection.³ If overloan protection benefit is in effect, the policyowner cannot accelerate the death benefit.

Cancellation in Case of Death

If the insured dies after the policyowner elects to receive an accelerated death benefit, but before the payment is made, the election will be cancelled and the death benefit will be paid as described in the policy. If the insured dies before all periodic payments are paid, we will pay the death benefit in lieu of the remaining accelerated death benefit payments.

Reinstatements

The endorsement may be reinstated following a policy lapse unless the maximum accelerated death benefit has been paid under these endorsements.

Term Conversions

When a term policy is converted within the first five policy years, we will add accelerated death benefit coverage without any additional requirements as long as the policy meets the qualifications listed in the Eligibility section of each benefit. For converted policies beyond the 5th policy year, the insured can submit evidence of insurability to receive both the chronic and critical benefit.

When a term policy is converted on or after policy year six, we will add accelerated death benefit coverage if the insured fully completes the Application for Policy Conversion, Change, or Reinstatement, and the new policy meets the qualifications listed in the Eligibility section of each benefit.

The agent must provide an Accelerated Death Benefit Disclosure form to the policyowner at time of application for conversion. The agent must return a signed and dated copy to North American along with the conversion application form in the states of MA and VA.

1 In some situations loans and withdrawals may be subject to federal taxes. North American Company does not give tax or legal advice. Clients should be instructed to consult with and rely on their own tax advisor or attorney for advice on their specific situation.

2 Subject to premium payments.

3 The policy will remain in effect when extensive loans are taken provided the policy is not terminated due to surrender and the policy owner does not take policy loans or withdrawals during the Over loan Protection period. This benefit may reduce the Specified Amount.

Index Universal Life products are not an investment in the "market" or in the applicable index and are subject to all policy fees and charges normally associated with most universal life insurance.

Chronic illness coverage is not available in CA. Critical illness coverage is not available in CA, CT, and FL.

Accelerated Death Benefit Endorsement for Critical, Chronic and Terminal Illness is issued on form series LR477; Accelerated Death Benefit Endorsement for Chronic and Terminal Illness is issued on form series LR465, or form series LR487 for Custom Guarantee; and Accelerated Death Benefit Endorsement for Terminal Illness is issued on form series LR466, forms series LR488 for Custom Guarantee and form series LR464 for Survivorship GIUL; Guarantee Builder IUL is issued on policy form series LS175, or state version by North American Company for Life and Health Insurance, Administrative Office, Sioux Falls, SD. Products, features, riders, endorsements or issue ages may not be available in all jurisdictions. Limitations or restrictions may apply.



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