



Cancer Care CompassSM

Your guide to cancer care benefits and services for better health outcomes



Not a bank or credit union deposit, obligation or guarantee	May lose value
Not FDIC or NCUA/NCUSIF insured	Not insured by any federal government agency

A healthy direction for the journey ahead

You can't predict what you'll encounter on life's journey, but you can help prepare for it. Symetra's Cancer Care Compass provides access to resources and guidance to help live a healthier lifestyle today and a lump sum payout if the insured faces a covered cancer diagnosis in the future.

These optional cancer benefits and services are available at application for an additional cost with our indexed universal life insurance products.

Cancer Care Compass is a rider package comprised of the Cancer Insurance and Value Added Services riders.



Multi-cancer early detection test



When cancer is detected in its earliest stages, treatment can be more effective and survival rates improve significantly. Yet, approximately 50% of cancers are detected at an advanced stage.¹ With Symetra's Cancer Care Compass, the insured has access to the Galleri[®] multi-cancer early detection test, provided by GRAIL.

Galleri[®] test

Completed through a simple blood draw, the Galleri test can detect a cancer signal across more than 50 types of cancer—including many that are not commonly screened for today. The test is available one time to the insured, beginning at age 50 and up to age 89, after the benefit waiting period.

The Galleri test looks for a signal present in the blood that may be associated with cancer and can point to where in the body the cancer signal is coming from. The test should be used in addition to routine cancer screenings to help detect more cancers early when there may be more treatment options. Galleri test results are not a cancer diagnosis. A positive test result should be followed by an appointment with the insured's primary care physician.²

How it works

- 1 Check eligibility**
Start by reviewing the testing eligibility requirements.³
- 2 Request the test**
The insured will provide some information about their health history. An independent telemedicine health care provider will review the request and determine clinical eligibility—typically within one week.
- 3 Complete the blood draw**
If the insured is eligible, the provider will ship them a Galleri test collection kit and send an email confirmation with instructions for scheduling a blood draw with one of GRAIL's preferred partners—either at home or in a lab.
- 4 Receive the results**
The insured will get an email when their result is ready—about two weeks after the blood draw. A telemedicine provider will be available to talk through the result with the insured and help guide their next steps.

Health advocacy and support services



Navigating the emotional and physical challenges of a cancer diagnosis, plus the cost of unexpected medical bills for treatment can be overwhelming. Your rider includes access to a wide range of services provided by Health AdvocateSM—a team of passionate health care professionals working together to support you in achieving your best overall health.

You and your eligible family members can register for these services after the benefit waiting period.⁴

How it works

EAP+ Work/LifeTM

This confidential program offers unlimited, toll-free access to licensed professional counselors and work/life specialists for short-term assistance with a wide range of family- and work-related issues. Educational materials, webinars and other resources are available through a dedicated website. Specialists can help you address:

- ✓ Stress, depression and anxiety.
- ✓ Substance abuse.
- ✓ Financial and legal problems.
- ✓ Divorce, grief and loss.
- ✓ Child and elder care concerns.

Health Advocacy

You have unlimited access to a personal health advocate, typically a registered nurse supported by medical directors and other specialists, who can help:

- ✓ Find qualified doctors, hospitals and other providers.
- ✓ Explain conditions and treatments.
- ✓ Resolve billing and claims issues.
- ✓ Arrange for second opinions and the transfer of medical records.
- ✓ Clarify health insurance benefits and answer coverage questions.

NurseLineTM

You can reach a registered nurse anytime—day or night—for trusted advice when you need it most. Experienced nurses are available to:

- ✓ Answer questions about symptoms or medications.
- ✓ Offer self-care information for non-urgent health issues.
- ✓ Explain health conditions and treatments.
- ✓ Direct you to the appropriate care for immediate attention, if needed.

Medical Bill SaverTM

Expert negotiators will work with providers to help reduce the cost of medical and dental bills that are not covered by your insurance—saving you time and money. Skilled negotiators can:

- ✓ Help reduce your out-of-pocket costs on non-covered bills.
- ✓ Handle negotiations and obtain provider signoffs.
- ✓ Give you itemized summaries of outcomes and payment terms.

Wellness Coaching

The Wellness Coaching program provides a personalized, action-oriented approach to help you and your eligible family members reach and maintain your best possible health. Features include:

- ✓ Unlimited, confidential support from a personal wellness coach by telephone, email or secure web messaging.
- ✓ A comprehensive website featuring a personalized health profile to identify health risks, wellness tools and trackers, and self-guided programs on weight loss, nutrition and exercise.

Nutrition intervention, guidance and support



Proper nutrition can have a positive impact on your health. That's why our nutrition provider, Savor Health[®], provides 24/7, on-demand access to personalized, evidence-based nutrition interventions, guidance and support—all through the convenience of text messaging.

Dietitian on demand

This service provides unlimited access to Ina[®], a virtual dietitian that provides personalized guidance to help maintain a healthy weight, strengthen the immune system and help manage and mitigate symptoms that often accompany chronic medical conditions, especially cancer. You and your eligible family members can register for this service after the benefit waiting period.⁴

How it works

- ✓ Ask Ina[®] questions about your personal nutritional needs and promptly get answers, 24/7.
- ✓ Tell Ina[®] about your medical condition(s) and preferences and Ina[®] and Savor Health's team of credentialed nutrition experts will evaluate your unique needs and identify appropriate nutritional guidance.
- ✓ Get the same personalized nutrition advice of a registered dietitian, including:
 - Recipes and menu plans
 - Symptom management guidance and support
 - Clinically appropriate dietary recommendations
 - Regular outreach from Ina[®] to check-in on your nutrition and proactively provide personalized nutrition tips

Cash benefit



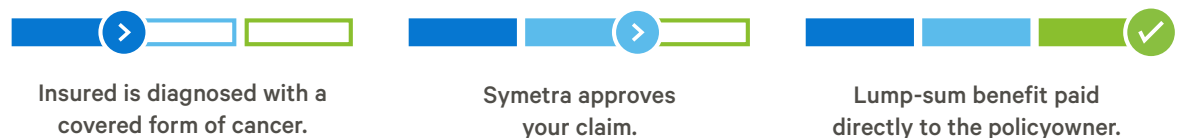
A cancer diagnosis can make you feel like your world has turned upside down—but it doesn't mean you need to go into debt. Symetra's Cancer Care Compass includes a cash benefit that can be used to assist with cancer-related expenses such as insurance co-payments and deductibles, replacing lost income, travel, lodging and more. However, there are no restrictions on how the money is used.

At application, you'll choose one of three maximum cash benefit amounts:

- \$50,000
- \$100,000
- \$200,000

The amount chosen cannot exceed 20% of the base policy death benefit. For policies with a death benefit less than \$250,000, the \$50,000 benefit amount is available.

How the payout works



To receive the cash benefit, the cancer claim must be submitted to Symetra with a board-certified physician's statement and proof of the insured's covered cancer diagnosis.

The payout will be determined by the insured's cancer diagnosis. Cancer benefit amounts are broken into two categories.

Cancer categories and payments:

- ① **Category One cancers**
100% payment of the maximum benefit elected
- ② **Category Two cancers**
50% payment of the maximum benefit elected

Cancer can reoccur during a person’s lifetime. So in certain instances, Symetra’s Cancer Care Compass can help more than once.

For example

If the insured is first diagnosed with a Category Two cancer, 50% of the maximum benefit amount will be paid, and the remaining 50% will be available for a subsequent Category One cancer claim.

If the insured is diagnosed with a Category One cancer first, the maximum benefit amount will be paid, the rider will terminate, and rider charges will stop.

Only one claim may be approved for each of the above categories.

Access to the value-added services will continue to be available at no additional cost for two years after the payment of the maximum benefit amount.

The table below shows two hypothetical scenarios based on the order in which a claim occurs and the maximum benefit amount elected.*

			Scenario 1		Scenario 2	
			Category Two cancer, then Category One cancer		Category One cancer first	
Base policy death benefit	Maximum cancer rider benefit amount(s) available	Maximum cancer rider benefit amount elected	Category Two cancer claim payment	Category One cancer claim payment	Category One cancer claim payment	Balance remaining
\$100,000	\$50,000	\$50,000	\$25,000	\$25,000	\$50,000	\$0
\$400,000	\$50,000	\$50,000	\$25,000	\$25,000	\$50,000	\$0
\$750,000	\$50,000 or \$100,000	\$100,000	\$50,000	\$50,000	\$100,000	\$0
\$1,000,000	\$50,000, \$100,000 or \$200,000	\$200,000	\$100,000	\$100,000	\$200,000	\$0

* In no case will the Cancer Insurance Rider pay more than the maximum benefit amount elected.

The payout of the rider’s cash benefit amount will have no effect on the policy’s death benefit, accelerated death benefit rider benefits, policy value or loan value.

Covered cancer conditions

Covered cancers ⁵	% of maximum benefit amount paid
<p>Category One cancers</p> <p>Limited to malignant tumors characterized by the uncontrolled growth and spread of malignant cells and invasion of neighboring tissue that is supported by histological evidence of malignancy. Includes but is not limited to:</p> <ul style="list-style-type: none"> • Leukemia • Lymphoma • Hodgkin's disease • Sarcoma • Malignant melanoma greater than 1.0 mm in thickness • Stage 1B (T1b) malignant melanoma (less than or equal to 1.0mm in thickness or with ulceration and Clark level IV or V invasion) • Intraductal non-invasive cancer of the breast • Multiple myeloma 	<p>100%</p>
<p>Category Two cancers</p> <p>Limited to cancers where the tumor cells have not spread to neighboring tissue. Includes but is not limited to:</p> <ul style="list-style-type: none"> • Chronic lymphocytic leukemia that has not progressed beyond ARI Stage 0 • Stage 1A (T1a) malignant melanoma (less than or equal to 1.0mm in thickness), not ulcerated and without Clark level IV or V invasion • Early prostate cancer classified as T1a or T1b (or equivalent without lymph node or distant metastasis) 	<p>50%</p>
<p>Exclusions and limitations⁵</p> <p>This rider does not pay any cancer benefit amount for a diagnosis of the following conditions:</p> <ul style="list-style-type: none"> • Pre-malignant tumors or polyps. • Pre-malignant lesions, such as intraepithelial neoplasia. • Benign tumors or polyps. • Non-melanoma skin cancer. Defined as a malignant growth that arises on the surface of the skin, including basal cell carcinoma, squamous cell carcinoma and Merkel cell carcinoma. (Non-melanoma skin cancer does not include melanoma skin cancer or metastatic skin cancer.) • All forms of cancer and tumors that are histologically described as benign, non-malignant, pre-malignant, borderline, low malignant potential, dysplasia (all grades) or intraepithelial neoplasia. • Any pre-existing cancer condition as defined in the Cancer Insurance Rider attached to the policy. 	

Important note: If you're a resident of Arizona, please [click here](#) for exclusions and limitations for the Cancer Insurance Rider.

Accessing your benefits and services

After reviewing your Symetra policy, be sure to enroll in our customer self-service portal, where you can view policy and rider details and register for the health and well-being services included under Cancer Care Compass.

Create a self-service portal account

- 1 Visit www.symetra.com.
- 2 Click on the “My Account” button at the top-right side of the screen.
- 3 Under the “Account Access” title, click on “Create a new user account.”
- 4 From the “Tell us who you are” menu, select “I’m a customer.”
- 5 Enter your policy number and continue through the prompts to set up the online account. You will establish a username and password to log in.

Questions?

Symetra customer service representatives can be reached Monday through Friday, from 6 a.m. to 4:30 p.m. PT at 1-800-796-3872.

Log in to your account and register for your value-added services after the benefit waiting period:

- 1 Click on “Coverage” in the navigation bar at the top of the screen.
- 2 Click on “Cancer Care Compass.”
- 3 Review the available services.
- 4 Click on “What to expect” and “What you will need” for information before you register.

The screenshot displays the Cancer Care Compass self-service portal interface. At the top, there is a navigation bar with a back arrow and the text "Coverage > Cancer Care Compass". Below this, there are four service cards, each with a title, a brief description, a registration button, and two dropdown menus labeled "What to expect" and "What you will need".

- Health advocacy services:** Health AdvocateSM provides you and your eligible family members access to a wide range of personalized health and well-being support services. Button: Register for Health Advocate.
- Multi-cancer early detection testing:** GRAIL offers the GalleriSM test that screens for a cancer signal across more than 50 types of cancer. The test is available one-time for the insured. Button: Request the Galleri Test.
- Nutrition intervention, guidance and support:** Savor HealthSM provides you and your eligible family members 24/7 on-demand access to personalized nutrition guidance via text message. Button: Register for Savor Health.
- Cash benefit:** We'll provide the available cancer benefit amount as a lump-sum payment if the insured is diagnosed with a qualifying form of cancer. Cancer benefit amount: \$50,000.00. To submit a claim for the cancer benefit amount, call us at 1-800-796-3872.

Contact your insurance professional for more information about Symetra's Cancer Care Compass and how it can work with your other included policy riders.

Important information

Life insurance is issued by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004-5135. Policies and riders may not be available in all U.S. states or any U.S. territory and terms and conditions may vary by the state in which they are available.

Symetra's Cancer Care CompassSM is a rider package comprised of the Cancer Insurance Rider and the Value Added Services Rider and is available with Symetra's indexed universal life insurance policies.

A rider is a provision of the policy that may have additional costs, limitations, potential benefits and features that should never be confused with the base policy itself. Before evaluating the benefits of a rider, carefully examine the policy to which it is attached.

Certain benefits or riders may have tax implications. You should consult with your legal or tax professional prior to purchasing.

Life insurance policies contain exclusions, limitations, reductions of benefits and terms for keeping them in-force. Please contact your insurance professional for complete details.

The Cancer Insurance Rider is offered at application for an additional cost and is usually issued under rider form number L-10351. The rider is only available for insureds issue ages 20-80, and if elected, additional underwriting will be required. It's possible that the insured is approved for the base policy but declined for the rider based on the rider underwriting results. The rider is not available on policies with ratings worse than Table 4, with annual flat extras exceeding \$5 per \$1,000, or with both flat extras and table rates. The maximum cash benefit amount is selected at application and cannot be increased once the rider is issued. If the Cancer Insurance Rider is declined, the Value Added Services Rider is not available.

If the insured is certified as having been diagnosed with a Category One or Two cancer after the benefit waiting period, the policyowner will be eligible to receive a lump sum cash benefit. The claim must be submitted to Symetra with a board-certified physician's statement and proof of the insured's qualifying cancer diagnosis as soon as reasonably possible. The initial benefit amount may be lower than the maximum benefit amount elected (Category One) if the diagnosis is first certified as a Category Two cancer. If the insured is subsequently diagnosed and certified with a Category One cancer, any remaining benefit will be paid out in a lump sum. When the total maximum benefit amount is paid, the rider will terminate and the monthly rider charges will stop. In no case will the total benefit amount be higher than the maximum benefit amount. The payout of the rider's benefit amount will have no effect on the policy's death benefit, accelerated death benefit rider benefits, policy value or loan value. For policies with a lapse protection benefit, the lapse protection value will be reduced by rider charges.

Monthly rider charges, when deducted from the policy value, are treated as withdrawals and are subject to the same income tax rules that apply to any other withdrawals. The purchase of this rider and/or receipt of a Cancer Benefit Amount payment may have other income tax consequences. Consult with your personal tax or legal professional before applying for this benefit.

Cancer Care Compass includes the Value Added Services Rider for an additional cost and is usually issued under form number L-10358. The value-added services are provided by third-party providers that are independent of Symetra Life Insurance Company. Registering to use or using these services is optional.

The Galleri[®] multi-cancer early detection screening test is administered by GRAIL, LLC, and is available one time to insured's ages 50-89 under the rider after the benefit waiting period. The test is available through an independent telemedicine healthcare provider. The test results are provided to the insured. Access to the rider's nutrition or health advocacy services are available after the benefit waiting period and will remain available to the policyowner and their eligible family members through the insured's age 90 or at no additional cost for two years following the payment of the rider maximum benefit amount.

Products and services offered under the Value Added Services Rider are not insurance and are subject to change. For more information, please contact Symetra at www.symetra.com or by telephone at 1-800-796-3872. There are additional requirements associated with participation in the value-added services. Terms and conditions may vary and may not be available in all U.S. states or any U.S. territory. If any service is discontinued or if we elect to cease to offer a service, we may substitute a reasonably comparable service. If no reasonably comparable service is available, we may discontinue the specific service and cease charging for that service.

¹ D. Crosby et al., *Science* 375, eaay9040(2022). DOI: 10.1126/science.aay9040. Research and review article, 'Early detection of cancer,' posted online to American Association for the Advancement of Science, March 18, 2022. <https://www.science.org/doi/epdf/10.1126/science.aay9040> Accessed Dec. 15, 2023.

² The Galleri screening test does not detect a signal for all cancers, and all cancers cannot be detected in the blood. False positive and false negative signal results do occur. The Galleri test should be used in addition to health care provider recommended screening tests. Detection of a cancer signal is not a diagnosis of cancer. If a "Cancer Signal is Detected," the insured will be responsible for the cost of follow-up diagnostic procedures.

³ Symetra offers access to the Galleri test to the insured beginning at age 50. The insured may qualify at an earlier age if they have certain risk factors. GRAIL does not recommend testing in individuals who are pregnant or undergoing active cancer treatment. You can check specific eligibility criteria on the Galleri patient portal for Symetra insureds before requesting the test.

⁴ For information about family member eligibility for Health Advocate and Savor Health's Ina[®], contact Symetra Customer Service at 1-800-796-3872.

⁵ Refer to the Cancer Insurance Rider for additional information, restrictions and limitations. Exclusions may vary by state.



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