



## Allstate<sup>®</sup> BENEFITS

Protection when faced with  
a critical illness diagnosis  
and you need treatment

## Critical Illness Insurance

No one is ever really prepared for a life-altering critical illness diagnosis. The whirlwind of appointments, tests, treatments and medications can add to your stress levels.

The treatment to recovery is vital, but it can also be expensive. Your medical coverage may only cover some of the costs associated with treatment. You're still responsible for deductibles and coinsurance. If treatment keeps you out of work, the financial worries can grow quickly and stress levels may rise.

Critical Illness coverage helps provide financial support if you are diagnosed with a covered critical illness. With the expense of treatment often high, seeking the treatment you need could seem like a financial burden. When a diagnosis occurs, you need to be focused on getting better and taking control of your health, not stressing over financial worries.

### Here's How It Works

You choose benefits to protect yourself and any family members if diagnosed with a critical illness. Then, if diagnosed with a covered critical illness, you will receive a cash benefit based on the percentage payable for the condition.

### Meeting Your Needs

- Guaranteed Issue coverage, subject to exclusions and limitations\*
- Coverage available for individual and child(ren) or family
- Covered dependents receive 50% of your Basic-Benefit Amount
- Benefits paid regardless of any other medical or disability plan coverage
- Premiums are affordable and conveniently payroll deducted
- Coverage may be continued; refer to your certificate for details

With Allstate Benefits, you can make treatment decisions without putting your finances at risk. **Practical benefits for everyday living.**<sup>®</sup>

## DID YOU KNOW ?



Every **40** seconds,  
an American will suffer  
a heart attack<sup>†</sup>



Every **40** seconds,  
someone in the U.S.  
has a stroke<sup>\*\*</sup>

\*Please refer to the Exclusions and Limitations section of this brochure.

<sup>†</sup>[https://www.cdc.gov/heartdisease/heart\\_attack.htm](https://www.cdc.gov/heartdisease/heart_attack.htm) <sup>\*\*</sup><https://www.cdc.gov/stroke/facts.htm>

## Using your cash benefits

Cash benefits provide you with options, because you decide how to use them.



### Finances

Can help protect HSAs, savings, retirement plans and 401(k)s from being depleted.



### Travel

Can help pay for expenses while receiving treatment in another city.



### Home

Can help pay the mortgage, continue rental payments, or perform needed home repairs for after care.



### Expenses

Can help pay your family's living expenses such as bills, electricity, and gas.



## MyBenefits: 24/7 Access [mybenefits.allstate.com](http://mybenefits.allstate.com)

An easy-to-use website that offers 24/7 access to important information about your benefits. Plus, you can submit and check your claims (including claim history), request your cash benefit to be direct deposited, make changes to personal information, and more.

**Fixed Wellness Rider** - Biopsy for skin cancer; Blood tests for triglycerides, CA15-3 (breast cancer), CA125 (ovarian cancer), CEA (colon cancer), PSA (prostate cancer); Bone Marrow Testing; Sampling of blood or tissue for genetic testing for cancer risk; Chest X-ray; Colonoscopy; Doppler screening for carotids or peripheral vascular disease; Echocardiogram; EKG; Flexible sigmoidoscopy; Hemocult stool analysis; HPV (Human Papillomavirus) Vaccination; Lipid panel (total cholesterol count); Mammography, including Breast Ultrasound; Pap Smear, including ThinPrep Pap Test; Serum Protein Electrophoresis (test for myeloma); Stress test on bike or treadmill; Thermography; Ultrasound screening for abdominal aortic aneurysms.

## Benefits (subject to maximums as listed on page 3)

Benefit paid upon diagnosis of one of the following conditions

### INITIAL CRITICAL ILLNESS BENEFITS\*

**Heart Attack** - the death of a portion of the heart muscle due to inadequate blood supply. Established (old) myocardial infarction and cardiac arrest are not covered

**Stroke** - the death of a portion of the brain producing neurological sequelae including infarction of brain tissue, hemorrhage and embolization from an extra-cranial source. Transient ischemic attacks (TIAs), head injury, chronic cerebrovascular insufficiency and reversible ischemic neurological deficits are not covered

**End Stage Renal Failure** - irreversible failure of both kidneys, resulting in peritoneal dialysis or hemodialysis. Renal failure caused by traumatic events, including surgical trauma, are not covered

**Major Organ Transplant** - pays either Candidate Benefit if placed on National Transplant List, or Surgery Benefit for transplant of heart, lungs, liver, pancreas or kidneys. Lungs and kidneys are each considered one major organ, regardless of whether one or both lungs or kidneys are transplanted. Surgery Benefit not paid if Candidate Benefit paid; also not paid for mechanical or non-human organs

**Coronary Artery Bypass Surgery** - to correct narrowing or blockage of one or more coronary arteries with bypass graft. Abdominal aortic bypass, balloon angioplasty, laser embolectomy, atherectomy, stent placement and non-surgical procedures are not covered

**Waiver of Premium (employee only)** - premiums waived if disabled for 90 consecutive days due to a critical illness or specified disease

### CANCER CRITICAL ILLNESS BENEFITS\*

**Invasive Cancer** - malignant tumor with uncontrolled growth, including Leukemia and Lymphoma. Carcinoma in situ, non-invasive or metastasized skin cancer and early prostate cancer are not covered

**Carcinoma In Situ** - non-invasive cancer, including early prostate cancer (stages A, I, II) and melanoma that has not invaded the dermis. Other skin malignancies, pre-malignant lesions (such as intraepithelial neoplasia), benign tumors and polyps are not covered

### REOCCURRENCE OF CRITICAL ILLNESS BENEFITS\*

**Initial Critical Illness** - second diagnosis more than 6 months after the first date of diagnosis for which an Initial Critical Illness benefit was paid

**Cancer Critical Illness** - second diagnosis more than 6 months after the last date treatment was received for which a Cancer Critical Illness benefit was paid

### RIDER BENEFITS

**Skin Cancer Rider** - includes diagnosis of basal cell carcinoma and squamous cell carcinoma. Must not have been paid within 365 days. Malignant melanoma and pre-cancerous conditions such as leukoplakia; actinic keratosis; carcinoid; hyperplasia; polycythemia; non-malignant melanoma; moles; and similar diseases or lesions are not covered

**Fixed Wellness Rider** - 24 exams. Once per person per calendar year; see left for list of wellness services and tests

\*Benefits paid once per covered person. When all benefits have been used, the coverage terminates.

## BENEFIT AMOUNTS

Percentages below are based on the Basic Benefit Amount of \$10,000 (Plan 1), \$20,000 (Plan 2), \$30,000 (Plan 3) or \$40,000 (Plan 4) chosen by your employer.

†Covered dependents receive 50% of your benefit amount.

INITIAL CRITICAL ILLNESS BENEFITS†	PLAN 1	PLAN 2	PLAN 3	PLAN 4
Heart Attack (100%)	\$10,000	\$20,000	\$30,000	\$40,000
Stroke (100%)	\$10,000	\$20,000	\$30,000	\$40,000
End Stage Renal Failure (100%)	\$10,000	\$20,000	\$30,000	\$40,000
Major Organ Transplant (100%)	\$10,000	\$20,000	\$30,000	\$40,000
Coronary Artery Bypass Surgery (25%)	\$2,500	\$5,000	\$7,500	\$10,000
Waiver of Premium (employee only)	Yes	Yes	Yes	Yes
CANCER CRITICAL ILLNESS BENEFITS†	PLAN 1	PLAN 2	PLAN 3	PLAN 4
Invasive Cancer (100%)	\$10,000	\$20,000	\$30,000	\$40,000
Carcinoma In Situ (25%)	\$2,500	\$5,000	\$7,500	\$10,000
REOCCURRENCE OF CRITICAL ILLNESS BENEFITS†	PLAN 1	PLAN 2	PLAN 3	PLAN 4
Initial Critical Illness (same amount as Initial Critical Illness Benefit)	Yes	Yes	Yes	Yes
Cancer Critical Illness (same amount as Cancer Critical Illness Benefit)	Yes	Yes	Yes	Yes
RIDER BENEFITS	PLAN 1	PLAN 2	PLAN 3	PLAN 4
Skin Cancer Rider	\$250	\$250	\$250	\$250
Fixed Wellness Rider (per year)	\$50	\$50	\$50	\$50

### PLAN 1 - BI-WEEKLY ISSUE AGE PREMIUMS

AGE	EE, EE+CH	EE+SP, F
Uni-Tobacco		
18-29	\$2.82	\$4.58
30-39	\$4.44	\$7.00
40-49	\$8.26	\$12.74
50-59	\$15.76	\$23.98
60+	\$29.46	\$44.54

### PLAN 2 - BI-WEEKLY ISSUE AGE PREMIUMS

AGE	EE, EE+CH	EE+SP, F
Uni-Tobacco		
18-29	\$4.94	\$7.74
30-39	\$8.20	\$12.62
40-49	\$15.82	\$24.08
50-59	\$30.82	\$46.56
60+	\$58.24	\$87.70

### PLAN 3 - BI-WEEKLY ISSUE AGE PREMIUMS

AGE	EE, EE+CH	EE+SP, F
Uni-Tobacco		
18-29	\$7.06	\$10.94
30-39	\$11.94	\$18.26
40-49	\$23.38	\$35.42
50-59	\$45.86	\$69.14
60+	\$87.00	\$130.86

### PLAN 4 - BI-WEEKLY ISSUE AGE PREMIUMS

AGE	EE, EE+CH	EE+SP, F
Uni-Tobacco		
18-29	\$9.18	\$14.12
30-39	\$15.72	\$23.90
40-49	\$30.94	\$46.76
50-59	\$60.92	\$91.72
60+	\$115.78	\$174.02

EE = Employee; EE+SP = Employee + Spouse; EE+CH = Employee + Child(ren); F = Family

## CERTIFICATE SPECIFICATIONS

### Eligibility

Your employer decides who is eligible for your group (such as length of service and hours worked each week). Issue ages are 18 and over.

### Dependent Eligibility/Termination

Family members eligible for coverage are your spouse or domestic partner and children. Coverage for children ends when the child reaches age 26, unless he or she continues to meet the requirements of an eligible dependent. Spouse coverage ends upon valid decree of divorce or your death. Domestic partner coverage ends when the domestic partnership ends or your death.

### When Coverage Ends

Coverage under the policy ends on the earliest of: the date the certificate is canceled; the date the policy is canceled; you stop paying your premium; the last day of active employment; you or your class are no longer eligible; a false claim is filed; when all benefits have been paid under the policy and riders; or the date you request to discontinue coverage.

### Continuing Your Coverage

You may be eligible to continue coverage when coverage under the policy ends. Refer to your Certificate of Insurance for details.

## EXCLUSIONS AND LIMITATIONS

### Conditions and Limits

A diagnosis occurring before your coverage begins is not payable; however, a diagnosis of any covered critical illness or specified disease after your effective date will be payable. Benefits are subject to all limitations and exclusions. All critical illnesses must meet the definitions and dates of diagnoses stated in the policy and be diagnosed by a physician while coverage is in effect. The basic-benefit amounts paid for all critical illnesses combined will never exceed \$250,000 for each covered person.

If the first diagnosis of cancer occurs before the effective date of coverage, benefits are paid for a subsequent diagnosis of cancer after the effective date, subject to the terms and conditions in the certificate.

### Exclusions

Benefits are not paid for: intentionally self-inflicted injury or action; illegal activities or occupations; suicide while sane, or self-destruction while insane, or any attempt at either; substance abuse, including alcohol, alcoholism, abuse of legally obtained prescription medication, or illegal use of non-prescribed drugs or narcotics; being under the influence of alcohol, drugs or narcotics, unless administered and taken as prescribed by a physician; or hospital confinement due to mental illness.

This brochure is for use in enrollments situated in GA.

Rev. 5/24. This material is valid as long as information remains current, but in no event later than May 1, 2027.

Group Critical Illness benefits are provided under policy form GVCIP4, or state variations thereof. Critical Illness Rider benefits are provided under the following rider forms, or state variations thereof: Skin Cancer Rider GCIP4SCR and Fixed Wellness Rider GCIP4FWR.

The coverage provided is limited benefit supplemental critical illness insurance. The policy is not a Medicare Supplement Policy. If eligible for Medicare, review Medicare Supplement Buyer's Guide available from Allstate Benefits.

This is a brief overview of the benefits available under the group policy underwritten by American Heritage Life Insurance Company (Home Office, Jacksonville, FL). Details of the coverage, including exclusions and other limitations are included in the certificates issued. For additional information, you may contact your Allstate Benefits Representative.

The coverage does not constitute comprehensive health insurance coverage (often referred to as "major medical coverage") and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.



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[allstatebenefits.com](http://allstatebenefits.com)