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 select the benefit coverage amount based on your individual needs, the needs of your family and your budget. 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, meaning no medical questions to answer at initial enrollment
- Coverage available for individual and child(ren) or family. Child(ren) are covered at no additional cost
- 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
- 100% of your Basic-Benefit Amount is paid for Advanced Alzheimer’s Disease and Advanced Parkinson’s Disease

With Allstate Benefits, you can make treatment decisions without putting your finances at risk. *Are you in Good Hands? You can be.*

`http://tinyurl.com/z7uyfc`

**DID YOU KNOW?**

- Every 34 seconds, an American will suffer a heart attack*
- Every 40 seconds, someone in the U.S. has a stroke*

*ABJ32915X-SUN*
Meet Ashley

Ashley is like any single parent who has been diagnosed with a critical illness. She’s worried about her future, her children and how they will cope with her treatments. Most importantly, she worries about how she will pay for it all.

Here is what weighs heavily on her mind:

- Major medical only pays a portion of the expenses associated with my treatment
- I have copays I am responsible for until I meet my deductible
- If I am not working due to my treatments, I must cover my bills, rent/mortgage, groceries and my children’s education
- If the right treatment is not available locally, I will have to travel to get the treatment I need

Ashley’s story of diagnosis and treatment turned into a happy ending; she had supplemental Critical Illness Insurance to help with expenses.

<table>
<thead>
<tr>
<th>CHOOSE</th>
<th>USE</th>
<th>CLAIM</th>
</tr>
</thead>
</table>
| Ashley chooses Critical Illness benefits and rider benefits to help protect her and her children, if they are diagnosed with a critical illness. | During Ashley’s annual mammogram a suspicious area was discovered. She went through rounds of tests, a biopsy, outpatient surgery and doctor visits. Here’s Ashley’s treatment path:  
- Ashley has her annual mammogram screening  
- A suspicious area is found, a biopsy performed and she is diagnosed with invasive breast cancer  
- After visits with doctors, surgeons, radiologists, and anesthesiologists, Ashley undergoes surgery  
- Surgery is performed to remove a Stage II tumor. She is visited by her doctor and released  
- She undergoes three week intervals of chemotherapy and medications for three months  
Two years later, Ashley’s cancer returns.  
- She has surgery and is treated with radiation  
- Followed-up with doctor visits  
Ashley is a fighter and is determined to beat cancer. | After each Critical Illness event and treatment, Ashley would go online to file claims. 
Ashley’s Critical Illness claim paid her cash benefits for the following: 
Invasive Cancer $20,000  
Reoccurrence (cancer diagnosis) $20,000  
Total Benefits: $40,000  
The cash benefits were direct deposited into her bank account. |
Benefits (subject to maximums as listed on the attached rate insert)

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 or cardiac arrest not covered
- **Stroke** - Transient ischemic attacks (TIAs), head injury, chronic cerebrovascular insufficiency or reversible ischemic neurological deficits 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 not covered
- **Major Organ Transplant** - pays either Candidate Benefit or Surgery Benefit for transplantation of heart, lung, liver, pancreas or kidneys
- **Coronary Artery Bypass Surgery** - to correct narrowing or blockage of one or more coronary arteries with by-pass graft. Abdominal aortic bypass, balloon angioplasty, laser embolectomy, atherecotomy, stent placement, or non-surgical procedures 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***
- **Carcinoma In Situ** - non-invasive cancer, including early prostate cancer (stages A, I, II) and melanoma that has not invaded the dermis
- **Invasive Cancer** - malignant tumor with uncontrolled growth, including Leukemia and Lymphoma

**REOCURRENCE OF CRITICAL ILLNESS BENEFITS***
- **Initial Critical Illness** - second diagnosis more than 12 months after the first date of diagnosis for which a Critical Illness Benefit was paid
- **Cancer Critical Illness** - second diagnosis more than 12 months after the last date treatment was received, for which a Cancer Critical Illness Benefit was paid

**RIDER BENEFITS**
- **Supplemental Critical Illness Benefits***
  - **Advanced Alzheimer’s Disease** - must exhibit impaired memory and judgment and be certified unable to perform at least two daily activities without adult assistance
  - **Advanced Parkinson's Disease** - must exhibit two or more of the following: muscle rigidity, tremor, or bradykinesia (slowness in physical and mental responses); and be certified unable to perform at least two daily activities without adult assistance
  - **Benign Brain Tumor** - a non-malignant tumor limited to brain, meninges, cranial nerves, or pituitary gland. Tumors of the skull, pituitary adenomas less than 10mm, or germinomas are not covered
  - **Coma** - unconscious and not responsive to external stimulation or responsive to internal needs. Medically-induced Coma; Coma resulting from alcohol or drug use; or diagnosis of brain death are not covered
  - **Complete Loss of Hearing** - permanent loss of hearing in both ears
  - **Complete Loss of Sight** - permanent loss of vision in both eyes
  - **Complete Loss of Speech** - permanent loss of speech or verbal communication
  - **Paralysis** - permanent loss of muscle function in two or more limbs, due to disease or injury. Does not include loss of muscle function limited to fingers or toes

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

**CONDITIONS**

**Conditions and Limits**
A diagnosis occurring before your coverage begins is not payable; however, a diagnosis of any covered condition after our effective date and waiting period will be payable. Benefits are subject to the Benefit Waiting Period Limitation, as well as all other 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 date of diagnosis for each illness must be separated by 30 days. The Basic-Benefit Amounts paid for all critical illnesses combined will never exceed $250,000 for each covered person.

**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.
CONDITIONS, CONT'D.

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 critical illness benefits and any attached riders have been paid; or the date you request to discontinue coverage.

Continuing Your Coverage
You may be able to continue coverage when coverage under the policy ends. Refer to your Certificate of Insurance for details.

EXCLUSIONS AND LIMITATIONS

Benefit Waiting Period Limitation
Benefits are not paid for a critical illness that occurs during the first 30 days following the date the covered person became insured. If a diagnosis occurs during the Benefit Waiting Period the following options are available: Return the coverage for a full refund, or continue coverage and receive benefits for one of the other specified critical illnesses listed in the policy.

Reoccurrence of Cancer
Applies to Cancer Critical Illness, regardless of whether your plan includes a Benefit Waiting Period Limitation.

Critical Illness Certificate Exclusions and Limitations
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; or being under the influence of alcohol, drugs or narcotics, unless administered and taken as prescribed by a physician.

Major Organ Transplant Limitation
Lungs and kidneys each considered one major organ, regardless of whether one or both lungs, or one or both kidneys, are transplanted. Surgery Benefit not paid if Candidate Benefit paid, or for mechanical or non-human organs.

Cancer Critical Illness Limitation
Carcinoma in Situ does not include other skin malignancies, pre-malignant lesions (such as intraepithelial neoplasia), or benign tumors or polyps. Invasive Cancer does not include carcinoma in situ, non-invasive or metastasized skin cancer, or early prostate cancer.
Critical Illness Insurance (GVCIP4)
from Allstate Benefits

**BENEFIT AMOUNTS**
Percentages below are based on the Basic Benefit Amount of $20,000 chosen by your employer.

†Covered dependents receive 50% of your benefit amount.

### INITIAL CRITICAL ILLNESS BENEFITS†

<table>
<thead>
<tr>
<th>Condition</th>
<th>Benefit Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Attack (100%)</td>
<td>$20,000</td>
</tr>
<tr>
<td>Stroke (100%)</td>
<td>$20,000</td>
</tr>
<tr>
<td>End Stage Renal Failure (100%)</td>
<td>$20,000</td>
</tr>
<tr>
<td>Major Organ Transplant (100%)</td>
<td>$20,000</td>
</tr>
<tr>
<td>Coronary Artery Bypass Surgery (25%)</td>
<td>$5,000</td>
</tr>
<tr>
<td>Waiver of Premium (Employee only)</td>
<td>Yes</td>
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</table>

### CANCER CRITICAL ILLNESS BENEFITS†

<table>
<thead>
<tr>
<th>Condition</th>
<th>Benefit Amount</th>
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<tbody>
<tr>
<td>Carcinoma In Situ (25%)</td>
<td>$5,000</td>
</tr>
<tr>
<td>Invasive Cancer (100%)</td>
<td>$20,000</td>
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### REOCCURRENCE OF CRITICAL ILLNESS BENEFITS†

<table>
<thead>
<tr>
<th>Condition</th>
<th>Benefit Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Critical Illness (same amount as Initial Critical Illness Benefit)</td>
<td>Yes</td>
</tr>
<tr>
<td>Cancer Critical Illness (same amount as Cancer Critical Illness Benefit)</td>
<td>Yes</td>
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### RIDER BENEFITS†

<table>
<thead>
<tr>
<th>Condition</th>
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</thead>
<tbody>
<tr>
<td>Supplemental Critical Illness Benefits</td>
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</tr>
<tr>
<td>Advanced Alzheimer’s Disease (100%)</td>
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<tr>
<td>Advanced Parkinson’s Disease (100%)</td>
<td>$20,000</td>
</tr>
<tr>
<td>Benign Brain Tumor (100%)</td>
<td>$20,000</td>
</tr>
<tr>
<td>Coma (100%)</td>
<td>$20,000</td>
</tr>
<tr>
<td>Complete Loss of Hearing (100%)</td>
<td>$20,000</td>
</tr>
<tr>
<td>Complete Loss of Sight (100%)</td>
<td>$20,000</td>
</tr>
<tr>
<td>Complete Loss of Speech (100%)</td>
<td>$20,000</td>
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<tr>
<td>Paralysis (100%)</td>
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**PLAN - MONTHLY ATTAINED AGE PREMIUMS**

<table>
<thead>
<tr>
<th>Age</th>
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<th>EE+SP, F</th>
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<tbody>
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<td>Tobacco</td>
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<tr>
<td>80+</td>
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<td>$315.58</td>
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For use in: GA
This rate insert is part of form ABJ32915X-SUN and is not to be used on its own.

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