

# Accident Insurance

from Allstate Benefits



Benefits are paid to you

Protection for accidental injuries off-the-job

## 1 CHOOSE

You choose the benefits to help protect yourself and any family members from accidental injury expenses

## 2 USE

You experience an accidental injury and seek medical attention from a medical professional

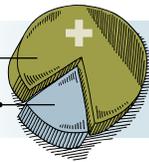
## 3 CLAIM

You go online and file a claim. The cash benefits are paid to you, to use however you wish

Even when you live well, accidents happen. Treatment can be vital to recovery, but it can also be expensive. And if an accident keeps you away from work during recovery, the financial worries can grow quickly.

# 3/4

Outside Work  
1/4 At Work



Nearly three-fourths of medically consulted injuries take place outside of work.<sup>1</sup>

Most major medical insurance plans only pay a portion of the bills. Our coverage can help pick up where other insurance leaves off and provide cash to help cover the expenses.

With accident insurance from Allstate Benefits, you can gain the advantage of financial protection, thanks to the cash benefits paid directly to you. You also gain the financial empowerment to seek the treatment needed to get well.

### Here's How It Works

Our coverage pays you cash benefits that correspond with a variety of covered occurrences, such as: dismemberment; dislocation or fracture; hospital confinement; ambulance services; physical therapy and more. The cash benefits can be used to help pay for deductibles, treatment, rent and more.

With Allstate Benefits, you can protect your finances against life's slips and falls.

**Are you in Good Hands? You can be.**

THIS IS NOT A POLICY OF WORKERS' COMPENSATION INSURANCE. THE EMPLOYER DOES NOT BECOME A SUBSCRIBER TO THE WORKERS' COMPENSATION SYSTEM BY PURCHASING THIS POLICY, AND IF THE EMPLOYER IS A NON-SUBSCRIBER, THE EMPLOYER LOSES THOSE BENEFITS WHICH WOULD OTHERWISE ACCRUE UNDER THE WORKERS' COMPENSATION LAWS. THE EMPLOYER MUST COMPLY WITH THE WORKERS' COMPENSATION LAW AS IT PERTAINS TO NON-SUBSCRIBERS AND THE REQUIRED NOTIFICATIONS THAT MUST BE FILED AND POSTED.

### Key Features

- Guaranteed Issue coverage, meaning no medical questions to answer
- Coverage available for spouse and child(ren)
- Premiums are affordable and are conveniently payroll deducted
- Coverage can be continued, as long as premiums are paid to Allstate Benefits

[See reverse for plan details](#)



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<sup>1</sup>National Safety Council, Injury Facts®, 2014 Edition

## YOU DECIDE how to use the cash benefits

Our cash benefits provide you with greater coverage options because you get to determine how to use them.



### Finances

Can help protect your HSAs, savings, retirement plans and 401ks from being depleted



### Travel

You can use your cash benefits to help pay for expenses while receiving treatment in another city



### Home

You can use your cash benefits to help pay the mortgage, continue rental payments, or perform needed home repairs for your after care



### Expenses

The lump-sum cash benefit can be used to help pay your family's living expenses such as bills, electricity and gas

## Benefits

### Base Policy

Accidental Death	Common Carrier Accidental Death
Dismemberment	Dislocation or Fracture
Hospital Confinement	Daily Hospital Confinement
Intensive Care	Ambulance
Accident Physician Treatment	X-ray
Emergency Room Services	

### Benefit Enhancements

Lacerations	Burns
Skin Graft	Brain Injury Diagnosis
Paralysis	Coma with Respiratory Assistance
Blood and Plasma	General Anesthesia
Appliance	Medicine
Physical Therapy	Non-Local Transportation
Ruptured Spinal Disc Surgery	Eye Surgery
Open Abdominal or Thoracic Surgery	Medical Supplies
Prosthesis	Rehabilitation Unit
Family Member Lodging	Post-Accident Transportation
Accident Follow-up Treatment	

Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery

Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI)

### Additional Rider

Outpatient Physician's Benefit

## Access Your Benefits and Claim Filings

Accessing your benefit information using **MyBenefits** has never been easier.

**MyBenefits** is an easy-to-use website that offers you 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.

For use in enrollments situated in: TX

This material is valid as long as information remains current, but in no event later than April 1, 2019.

Group Accident benefits are provided by policy form GVAP2, or state variations thereof. Outpatient Physician's Benefit Rider provided by rider form GOPBR, or state variations thereof.

**Coverage is provided by Limited Benefit Supplemental Accident Insurance.** The policy is not a Medicare Supplement Policy. If eligible for Medicare, review Medicare Supplement Buyer's Guide available from Allstate Benefits. This information highlights some features of the policy but is not the insurance contract. For complete details, contact your Allstate Benefits Agent. This is a brief overview of the benefits available under the Group Voluntary Policy underwritten by American Heritage Life Insurance Company (Home Office, Jacksonville, FL). Details of the insurance, including exclusions, restrictions and other provisions are included in the certificates issued.

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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# Group Voluntary Accident (GVAP2)

## Off-the-Job Accident Insurance

from Allstate Benefits

See attached **Important Information About Coverage**.

### BENEFIT AMOUNTS

Benefits are paid once per accident unless otherwise noted here or in the Important Information About Coverage.

BASE ACCIDENT BENEFITS		PLAN
Accidental Death	Employee	\$40,000
	Spouse	\$20,000
	Children	\$10,000
Common Carrier Accidental Death (Fare-paying passenger)	Employee	\$200,000
	Spouse	\$100,000
	Children	\$50,000
Dismemberment <sup>1</sup>	Employee	\$40,000
	Spouse	\$20,000
	Children	\$10,000
Dislocation or Fracture <sup>1</sup>	Employee	\$4,000
	Spouse	\$2,000
	Children	\$1,000
Hospital Confinement (Pays once/year)		\$1,000
Daily Hospital Confinement (Pays daily)		\$200
Intensive Care (Pays daily)		\$400
Ambulance	Ground	\$200
	Air	\$600
Accident Physician's Treatment		\$100
X-ray		\$200
Emergency Room Services		\$200

<sup>1</sup>Up to amount shown; see Injury Benefit Schedule on reverse. Multiple losses from same injury pay only up to amount shown above.

BENEFIT ENHANCEMENTS		PLAN
Lacerations <sup>2</sup> (Pays once/year)		\$100
Burns <sup>2</sup> (Other than sunburns)	< 15% of body surface	\$200
	> 15% or more	\$1,000
Skin Graft (% of Burns Benefit)		50%
Brain Injury Diagnosis <sup>2</sup> (Pays once)		\$300
Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI)		\$100
Paralysis <sup>2</sup> (Pays once)	Paraplegia	\$15,000
	Quadriplegia	\$30,000
Coma with Respiratory Assistance (Pays once)		\$20,000
Open Abdominal or Thoracic Surgery <sup>2</sup>		\$2,000
Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery	Surgery	\$1,000
	Exploratory	\$300
Ruptured Spinal Disc Surgery		\$1,000
Eye Surgery		\$200
General Anesthesia		\$200
Blood and Plasma <sup>2</sup>		\$600
Appliance		\$250
Medical Supplies		\$10
Medicine		\$10
Prosthesis	1 device	\$1,000
	2 or more devices	\$2,000
Physical Therapy (Pays daily; max. 6 days/accident)		\$60
Rehabilitation Unit (Pays daily)		\$200
Non-Local Transportation		\$800
Family Member Lodging		\$200
Post-Accident Transportation (Pays once/year)		\$400
Accident Follow-Up Treatment		\$100
ADDITIONAL RIDER BENEFIT		PLAN
Outpatient Physician's Benefit		\$50

<sup>2</sup>Within 3 days after accident.

## INJURY BENEFIT SCHEDULE

Benefit amounts for coverage and one occurrence are shown below.  
Covered spouse gets 50% of the amounts shown and children 25%.

LOSS OF LIFE OR LIMB	PLAN
Life, or both eyes, hands, arms, feet, or legs, or one hand or arm and one foot or leg	\$40,000
One eye, hand, arm, foot, or leg	\$20,000
One or more entire toes or fingers	\$4,000
COMPLETE DISLOCATION	PLAN
Hip joint	\$4,000
Knee or ankle joint <sup>^</sup> , bone or bones of the foot <sup>^</sup>	\$1,600
Wrist joint	\$1,400
Elbow joint	\$1,200
Shoulder joint	\$800
Bone or bones of the hand <sup>^</sup> , collarbone	\$600
Two or more fingers or toes	\$280
One finger or toe	\$120
COMPLETE, SIMPLE OR CLOSED FRACTURE	PLAN
Hip, thigh (femur), pelvis <sup>++</sup>	\$4,000
Skull <sup>++</sup>	\$3,800
Arm, between shoulder and elbow (shaft), shoulder blade (scapula), leg (tibia or fibula)	\$2,200
Ankle, knee cap (patella), forearm (radius or ulna), collarbone (clavicle)	\$1,600
Foot <sup>++</sup> , hand or wrist <sup>++</sup>	\$1,400
Lower jaw <sup>++</sup>	\$800
Two or more ribs, fingers or toes, bones of face or nose	\$600
One rib, finger or toe, coccyx	\$280

<sup>^</sup>Knee joint (except patella). Bone or bones of the foot (except toes). Bone or bones of the hand (except fingers). <sup>++</sup>Pelvis (except coccyx). Skull (except bones of face or nose). Foot (except toes). Hand or wrist (except fingers). Lower jaw (except alveolar process).

## PLAN PREMIUMS

MODE	EE	EE + SP	EE + CH	F
Monthly	\$12.52	\$18.36	\$25.26	\$31.58

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



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For use in enrollments situated in: TX. This rate insert is part of forms ABJ32291X and ABJ29987 and is not to be used on its own.

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# Group Voluntary Accident (GVAP2) Off-the-Job Accident Insurance

## Important Information About Coverage

Provides details of base policy and rider coverage in all states. State-specific information is noted when it varies from the standard. Below is a list of base policy and rider benefits available with Group Accident coverage. Please refer to your employer chosen plan for the specific items that apply to your coverage. You will receive a certificate that details the certificate specifications for the coverage you purchased.

**Group Accident Issue ages are 18 and over if Actively at Work.**

### Benefits Specifications (see Benefit Amounts)

**Accidental Death and Dismemberment** - Multiple dismemberments from the same accident are limited to the amount shown in the Base Accident Benefits on front page of insert.

**Dislocation or Fracture** - Multiple dislocations or fractures from the same accident are limited to the amount shown in the Base Accident Benefits on front page of insert.

**Hospital Confinement** - Pays once/covered person/accident/year.

**Daily Hospital Confinement** - Per day, max. 90 days/injury.

**Intensive Care** - Per day, max. 90 days/injury.

### Benefit Enhancement Specifications (see Benefit Amounts)

**Lacerations** - Within 3 days after accident.

**Brain Injury Diagnosis** - Must be diagnosed within 30 days after accident. Pays once/covered person.

**Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI)** - Within 180 days of accident, if treatment received within 30 days of accident. Pays once/year.

**Coma with Respiratory Assistance** - pays once/covered person.

**GA only** - The Coma with Respiratory Assistance benefit is deleted.

**Ruptured Spinal Disc Surgery** - 2 or more procedures through same entry point are considered 1 operation. Within 180 days after accident.

**Skin Graft** - Within 90 days after accident.

**Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery** - Within 180 days after accident.

**Eye Surgery** - Within 90 days after accident.

**Rehabilitation Unit** - Per day, max. 30 days confinement, max. 60 days/year. Not paid if Daily Hospital Confinement benefit paid.

**General Anesthesia** - Within 180 days after accident.

**Appliance** - Within 90 days after accident.

**Medical Supplies** - Within 90 days after accident; provided a benefit is paid under Accident Physician's Treatment or X-ray benefit.

**Medicine** - Within 90 days after accident; provided a benefit is paid under Accident Physician's Treatment or X-ray benefit.

**Prosthesis** - Within 180 days after accident.

**Physical Therapy** - Not payable for chiropractic services or if Accident Follow-Up Treatment benefit paid. Provided a benefit is paid under Accident Physician's Treatment or X-ray benefit.

**LA, OH** - Chiropractic services included.

**Non-Local Transportation** - Per trip, max. 3 times/accident. More than 100 miles from your home.

**Post-Accident Transportation** - More than 250 miles from your home, by common carrier.

**Accident Follow-Up Treatment** - Per day, max. 2 treatments/accident. Not paid if Physical Therapy benefit paid. Provided a benefit is paid under Accident Physician's Treatment or X-ray benefit.

**CO, NE, PA, UT** - For all Benefit Enhancement Specifications, the limitations to the number of days between the accident and the hospitalization and/or treatment are deleted.

### Outpatient Physician's Benefit Rider Specifications (see Benefit Amounts)

The benefit is limited to 2 days per covered person per calendar year, not to exceed 4 days per calendar year if coverage includes eligible dependents.

## Conditions, Limitations and Exclusions Affecting Your Benefits

### Conditions and Limits

**Most States** - When an injury results in a covered loss within 90 days (180 days for dismemberment or death), unless otherwise stated, from the date of an accident, and is diagnosed by a physician, Allstate Benefits will pay benefits as stated. Treatment must be received in the United States or its territories.

**CO, NE** - When an injury results in a covered loss within 90 days (180 days for dismemberment or death) from the date of an accident, unless otherwise stated, and is diagnosed by a physician, Allstate Benefits will pay benefits as stated. Treatment must be received in the United States or its territories.

**PA** - When an injury results in a covered loss within 90 days (90-day time limit not applicable to Accidental Death and Common Carrier Accidental Death), unless otherwise stated, from the date of an accident, Allstate Benefits will pay benefits as stated. Treatment must be received in the United States or its territories.

**TX** - The last sentence is replaced with the following: For the Hospital Confinement, Accident Physician Treatment, X-Ray, and Emergency Room Services benefits, treatment must be received in the United States or its territories, unless the treatment is the result of an emergency. Treatments included in all other benefits must be received in the U.S. or its territories.

**UT** - When an injury results in a covered loss within 180 days from the date of an accident, or unless otherwise stated, and is diagnosed by a physician, Allstate Benefits will pay benefits as stated. Treatment must be received in the United States or its territories.

### Your Eligibility

**All States** - Your employer decides who is eligible for your group (such as length of service and hours worked each week).

### Dependent Eligibility/Termination

**(a) Coverage may include you, your spouse or domestic partner and children.**

**DC** - Coverage may include you, your spouse, domestic/civil union partner, and children.

**HI** - Coverage may include you, your spouse or domestic partner, your children, and your certified reciprocal beneficiary.

**ID** - Coverage may include you, your spouse and children.

**RI, NJ** - Coverage may include you, your spouse or civil union partner, and children.

**(b) Coverage for children ends when the child reaches age 26, unless he or she continues to meet the requirements of an eligible dependent.**

**IL** - Coverage for children ends when the child reaches age 26 (30 if a military veteran who is an Illinois resident), unless he or she continues to meet the requirements of an eligible dependent.

**MA** - Coverage for children ends the earlier of when the child reaches age 26 or 2 years following loss of dependent status under the Internal Revenue Code, unless he or she continues to meet the requirements of an eligible dependent.

**PA** - The following is added: Coverage will not terminate due to age on a child who was a full-time student and whose studies were interrupted by active duty service in the military.

## Dependent Eligibility/Termination (continued)

### (c) Spouse coverage ends upon valid decree of divorce or your death.

NJ, RI - Spouse or civil union coverage ends upon valid decree of divorce or your death.

### (d) Domestic partner coverage ends upon termination of domestic partnership or your death.

DC - Domestic/civil union partner coverage ends upon termination of partnership or your death.

ID - (d) is deleted.

## When Coverage Ends

Coverage under the policy ends on the earliest of:

- (a) the date the policy is canceled;
- (b) the last day of the period for which you made any required contributions;
- (c) the last day you are in active employment, except as provided under the Temporary Layoff, Leave of Absence or Family and Medical Leave of Absence provision;
- (d) the date you are no longer in an eligible class;
- (e) the date your class is no longer eligible;
- (f) upon discovery of fraud or material misrepresentation when filing a claim

GA - the following is added as item (g): the date you request to discontinue coverage in writing.

CT - (f) is replaced with: upon discovery of a material misrepresentation when filing a claim.

ME - The following is added: Termination of coverage due to non-payment of premiums does not apply if it can be shown that the insured suffered from organic brain disease.

MD - (b) is replaced with: the last day of the period for which you made any required contributions, subject to the Grace Period provision.  
(f) is replaced with: upon discovery of fraud or material misrepresentation when filing a claim, subject to the Contestability of Coverage provision.

NE - (f) is replaced with: upon discovery of fraud or intentional misrepresentation when filing a claim.

NC, ND - (f) is deleted.

## Continuation of Coverage

You may be eligible to continue coverage when coverage under the policy ends. You have 60 days after coverage under the policy ends to let us know if you wish to continue coverage.

## Accident and Benefit Enhancement Exclusions and Limitations

### Benefits are not paid for:

#### (a) injury incurred before the effective date;

ID, MD - (a) is deleted.

#### (b) injury as a result of an on-the-job accident;

KY, SD - injury as a result of an on-the-job accident, unless not payable under any workers' compensation law.

#### (c) any act of war or participation in a riot, insurrection or rebellion;

CT - any act of war or participation in an insurrection or rebellion.

ID - any act of war or participation in a riot or rebellion.

MD - any act of war.

OK - participation in a riot, insurrection or rebellion.

UT - any act of war or voluntary participation in a riot, insurrection or rebellion.

## Accident and Benefit Enhancement Exclusions and Limitations (continued)

#### (d) self-inflicted injury;

CA - self-inflicted injury, whether sane or insane.

DC - (d) is deleted.

#### (e) suicide or attempt at suicide;

CO, MO - suicide, or attempt at suicide, while sane.

#### (f) being under the influence of alcohol or narcotics unless taken on the advice of a physician;

AR, CA - injury from being intoxicated or under the influence of any controlled substance unless taken on the advice of a physician.

CT, ID, MD, OK, SD - (f) is deleted.

IN, TX - injury from being intoxicated or under the influence of any narcotic, unless taken upon the advice of a physician.

LA - injury from being intoxicated or under the influence of any narcotic not prescribed or recommended by a physician.

MI - being under the influence of alcohol (as defined by the laws of the state of Michigan), narcotics (drugs that depress the nervous system), or any other controlled substance or drug unless taken upon the advice of a physician.

NJ - injury from intoxication or being under the influence of any narcotic, unless taken or consumed upon the advice of a physician.

OR - being legally intoxicated as defined by the laws of this state or while under the influence of any narcotic, unless administered on the advice of a physician.

PA - injury from being intoxicated or under the influence of any narcotic unless taken on the advice of a physician.

UT - being under the influence of alcohol or narcotics unless taken on the advice of a physician, if the use of alcohol or any narcotic substantially contributes to or causes the accident or is over the legal limit.

#### (g) bacterial infection (except pyogenic infections from an accidental cut or wound);

AR, ID - (g) is deleted.

IL - bacterial infection (except infections resulting from an accidental injury or infection which results from an accidental or involuntary or an unintentional ingestion of a contaminated substance).

MO - any bacterial infection (except pyogenic infections from an accidental cut or wound from ingestion of a contaminated substance or material).

TX - bacterial infection (except food poisoning and pyogenic infections from an accidental cut or wound).

WV - bacterial infection (except pyogenic infections which occur with and through an accident).

#### (h) participation in aeronautics unless a fare-paying passenger on a licensed common-carrier aircraft;

NJ - aviation, unless a fare-paying passenger on a licensed common-carrier aircraft.

#### (i) engaging in an illegal occupation, assault or felony;

CA, NE, TX - engaging in an illegal occupation or felony.

CT - committing or attempting to commit an assault or felony.

ID - engaging in an illegal occupation or participation in a felony.

MD - (i) is deleted.

#### Accident and Benefit Enhancement Exclusions and Limitations (continued)

**NJ** - any loss to which a contributing cause was the commission of or attempt to commit a felony or to which a contributing cause was the engagement in an illegal occupation.

**WI** - engaging in illegal activities or in an illegal occupation that results in the conviction of a felony.

**(j) driving in any race or speed test or testing any vehicle on any racetrack or speedway;**

**ID, OK** - (j) is deleted.

**(k) serving as an active member of the Military, Naval, or Air Forces of any country or combination of countries;**

**(l) hernia, including complications;**

**IL** - all types of hernia including complications (except for hernia caused by an accident).

**AR, ID, MI, WV** - (l) is deleted.

**PA** - hernia, including complications will be excluded during the first 6 months of coverage but will be covered thereafter.

**CT** - the following is added as item (m): the voluntary use of any controlled substance as defined in Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as now or hereafter amended, unless prescribed by a doctor for the insured.

**MD** - the following is added as item (n): health care services that the appropriate regulatory board determines were provided as a result of a prohibited referral.

#### Outpatient Physician's Benefit Rider, if included

**CT, DC, KS, NJ, ND** - Outpatient Physician's Benefit Rider is not available.

**Benefits are not paid for:**

**(a) losses incurred before the effective date;**

**ID, MD** - (a) is deleted.

**(b) a loss as a result of an on-the-job accident;**

**KY, SD** - loss as a result of an on-the-job accident, unless not payable under any workers' compensation law.

**(c) any act of war or participation in a riot, insurrection or rebellion;**

**ID** - any act of war or participation in a riot or rebellion.

**MD** - any act of war.

**OK** - participation in a riot, insurrection or rebellion.

**UT** - any act of war or voluntary participation in a riot, insurrection or rebellion

**(d) suicide or attempted suicide;**

**CO, MO** - suicide, or attempted suicide, while sane.

**(e) self-inflicted action;**

**CA** - self-inflicted action, whether sane or insane.

**(f) being under the influence of alcohol or narcotics unless taken on the advice of a physician;**

**AR, CA** - loss from being intoxicated or under the influence of controlled substance, unless taken on the advice of a physician.

#### Outpatient Physician's Benefit Rider, if included (continued)

**ID, MD, OK, SD** - (f) is deleted.

**IN, TX** - loss from being intoxicated or under the influence of any narcotic, unless taken upon the advice of a physician.

**LA** - loss from being intoxicated or under the influence of any narcotic not prescribed or recommended by a physician.

**MI** - being under the influence of alcohol (as defined by the laws of the state of Michigan), narcotics (drugs that depress the nervous system), or any other controlled substance or drug unless taken upon the advice of a physician.

**OR** - being legally intoxicated as defined by the laws of this state or while under the influence of any narcotic, unless taken on the advice of a physician.

**PA** - injury from being intoxicated, or under the influence of any narcotic unless taken on the advice of a physician.

**UT** - being under the influence of alcohol or narcotics unless taken on the advice of a physician, if the use of alcohol or any narcotic substantially contributes to or causes the accident or is over the legal limit.

**(g) participation in aeronautics unless a fare-paying passenger on a licensed common-carrier aircraft;**

**(h) engaging in an illegal occupation, assault or felony;**

**CA, TX** - engaging in an illegal occupation or felony.

**ID** - engaging in an illegal occupation or participation in a felony.

**MD** - (h) is deleted.

**WI** - engaging in illegal activities or in an illegal occupation that results in the conviction of a felony.

**(i) driving in any race or speed test or testing any vehicle on any racetrack or speedway;**

**ID, OK** - (i) is deleted.

**(j) serving as an active member of the Military, Naval, or Air Forces of any country;**

**MD** - the following is added as item (k): for health care services that the appropriate regulatory board determines were provided as a result of a prohibited referral.



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**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.**