

Allstate BENEFITS

Protection for accidental injuries on- and off-the-job, 24 hours a day

Accident Insurance

Today, active lifestyles in or out of the home may result in bumps, bruises and sometimes breaks. Getting the right 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.

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 support, thanks to the cash benefits paid directly to you. You also gain the financial empowerment to seek the treatment needed to be on the mend.

Here's How It Works

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

Meeting Your Needs

- Guaranteed Issue coverage, subject to exclusions and limitations*
- Benefits are paid directly to you unless otherwise assigned
- Pays in addition to other insurance coverage
- Coverage also available for your dependents
- Premiums are affordable and can be conveniently payroll deducted
- Coverage may be continued; refer to your certificate for details

With Allstate Benefits, you can protect your finances against life's slips and falls.
Practical benefits for everyday living.℠

*Please refer to the Exclusions and Limitations section of this brochure.
[1]National Safety Council, Injury Facts®, 2017 Edition

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DID YOU KNOW?

The number of injuries suffered by workers in one year, both on- and off-the-job, includes:[1]

ON-THE-JOB (in millions)

Work **4.4**

OFF-THE-JOB (in millions)

Home **9.2**

Non-Auto **4.0**

Auto **2.2**

Offered to the employees of:
National Treasury Employees Union

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
allstatebenefits.com/mybenefits

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.

Dependent Eligibility

Coverage may include you, your spouse or domestic partner, and your children.

*Two treatments per covered person, per accident. **Up to three times per covered person, per accident. [1]Multiple dislocations, fractures, dismemberments or functional losses from the same accident are limited to the amount shown in the Benefit Amounts on the following page. [2]Two or more surgeries done at the same time are considered one operation. [3]Paid for each day a room charge is incurred, up to 30 days for each covered person per continuous period of rehabilitation unit confinement, for a maximum of 60 days per calendar year. Not paid for days on which the Daily Hospital Confinement benefit is paid.

Benefits (subject to maximums as listed on the following page)

BASE POLICY BENEFITS

Initial Hospital Confinement

Daily Hospital Confinement - up to 365 days for any one accident

Intensive Care - up to 180 days for each period of continuous confinement

RIDER BENEFITS ADDED TO BASE POLICY

Accident Treatment & Urgent Care Rider
Benefits for: Ground Ambulance, Air Ambulance, Accident Physician's Treatment, X-ray, Urgent Care

Dislocation/Fracture Rider[1] - amount paid depends on type of dislocation or fracture. See Injury Benefit Schedule on the following page

Emergency Room Services Rider - received as a result of injury

ADDITIONAL RIDER BENEFITS

Outpatient Physician's Treatment for Accident and Preventive Care Benefit Rider - Once per day, per covered person, not to exceed 2 days per covered person, per calendar year and a maximum of 4 days per calendar year if dependents are covered. Does not cover sickness

Accidental Death, Dismemberment and Functional Loss Rider
Benefits for: Accidental Death, Common Carrier, Dismemberment[1], Functional Loss[1]

Benefit Enhancement Rider

- Accident Follow-Up Treatment - not payable for the same visit for which the Physical, Occupational or Speech Therapy benefit is paid*
- Lacerations
- Burns - treatment for one or more burns, other than sunburns
- Skin Graft - for a burn for which a benefit is paid under the Burns benefit
- Brain Injury Diagnosis - first diagnosis of concussion, cerebral laceration, cerebral contusion or intracranial hemorrhage. Must be diagnosed by CT Scan, MRI, EEG, PET scan or X-ray
- Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI) - treatments must be received within 30 days after the accident. Payable once per covered person, per accident, per calendar year
- Paralysis - spinal cord injury resulting in complete/permanent loss of use of two or more limbs for 90 consecutive days
- Open Abdominal or Thoracic Surgery - must be performed by a physician[2]
- Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery - surgery for torn, ruptured, or severed tendon, ligament, rotator cuff or knee cartilage; pays the reduced amount shown for arthroscopic exploratory surgery[2]
- Ruptured Disc Surgery - diagnosis and surgical repair to a ruptured disc of the spine by a physician[2]
- Eye Surgery - surgery or removal of a foreign object by a physician
- General Anesthesia - payable only if one of the rider Surgery benefits is paid
- Blood and Plasma
- Appliance - physician-prescribed wheelchair, crutches or walker to help with personal locomotion or mobility
- Medical Supplies
- Medicine
- Prosthesis - physician-prescribed prosthetic arm, leg, hand, foot or eye lost as a result of an accident
- Physical, Occupational or Speech Therapy - 1 treatment per day; maximum of 6 treatments per accident. Includes chiropractic services. Not payable for same visit for which Accident Follow-Up Treatment benefit is paid
- Rehabilitation Unit - must be hospital-confined due to an injury prior to being transferred to rehab[3]
- Non-Local Transportation - obtaining treatment more than 50 miles from your home when not available locally. Ground or air ambulance is not covered**
- Family Member Lodging - 1 adult family member to be with you while you are hospital confined. Not paid if family member lives within 50 miles of the hospital. Payable up to 30 days per accident
- Post-Accident Transportation - three-day hospital stay more than 250 miles from your home, with a flight on a common carrier to return home. Payable only if the Daily Hospital Confinement benefit is paid
- Broken Tooth - dental repair by crown, filling or extraction; only one of the three is covered per accident. Injury must be to natural teeth and cannot be due to biting or chewing
- Residence/Vehicle Modification - permanent structural modification certified necessary by a physician, within 365 days after accident
- Pain Management (Epidural Injection) - injection in the spine to manage pain due to an accidental injury
- Miscellaneous Outpatient Surgery - physician-performed outpatient surgical procedure. Not paid if one of the following benefits is paid: Open Abdominal or Thoracic Surgery; Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery; Ruptured Disc Surgery; or Eye Surgery

BENEFIT AMOUNTS

Benefits are paid once per accident unless otherwise noted

BASE POLICY BENEFITS		PLAN
Initial Hospital Confinement (pays once/year)		$1,250
Daily Hospital Confinement (pays daily)		$250
Intensive Care (pays daily)		$500
RIDER BENEFITS		**PLAN**
Accident Treatment and Urgent Care Rider		
Ambulance	Ground Air	$250 $750
Accident Physician's Treatment		$125
X-ray		$250
Urgent Care		$125
Dislocation or Fracture Rider[1]		$5,000
Emergency Room Services Rider		$250
Outpatient Physician's Treatment for Accident and Preventive Care Benefit Rider (pays daily)		$50
Accidental Death*, Dismemberment[1,*] and Functional Loss[1,*] Rider		$50,000
Common Carrier Accidental Death (fare-paying passenger)		$125,000
BENEFIT ENHANCEMENT RIDER		**PLAN**
Accident Follow-Up Treatment (pays daily)		$100
Lacerations		$100
Burns	< 15% body surface 15% or more	$200 $1,000
Skin Graft (% of Burns Benefit)		50%
Brain Injury Diagnosis		$600
Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI) (pays once/year)		$100
Paralysis (pays once)	Paraplegia Quadriplegia	$15,000 $30,000
Open Abdominal or Thoracic Surgery		$2,000
Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery	Surgery Exploratory	$1,000 $300
Ruptured Spinal Disc Surgery		$1,000
Eye Surgery		$200
General Anesthesia		$200
Blood and Plasma		$600
Appliance		$250
Medical Supplies		$10
Medicine		$10
Prosthesis	1 device 2 or more devices	$1,000 $2,000
Physical, Occupational or Speech Therapy (pays daily)		$60
Rehabilitation Unit (pays daily)		$200
Non-Local Transportation		$500
Family Member Lodging (pays daily)		$200
Post-Accident Transportation (pays once/year)		$400
Broken Tooth		$200
Residence/Vehicle Modification		$1,000
Pain Management (Epidural Injection)		$100
Miscellaneous Outpatient Surgery		$200

*Each benefit pays the amount shown. [1]Up to amount shown; see Injury Benefit Schedule. Multiple losses from same injury pay only up to amount shown above.

PLAN PREMIUMS

MODE	EE	EE + SP	EE + CH	F
Bi-Weekly	$9.06	$13.58	$15.90	$20.42

Issue ages: 18 and Over if Actively at Work

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

INJURY BENEFIT SCHEDULE

Benefit amounts for coverage and one occurrence are shown below.

COMPLETE DISLOCATION	PLAN
Hip joint	$5,000
Knee or ankle joint▲, bone or bones of the foot▲	$2,000
Wrist joint	$1,750
Elbow joint	$1,500
Shoulder joint	$1,000
Bone or bones of the hand▲, collarbone	$750
Two or more fingers or toes	$350
One finger or toe	$150
COMPLETE, SIMPLE OR CLOSED FRACTURE	**PLAN**
Hip, thigh (femur), pelvis◆◆	$5,000
Skull◆◆	$4,750
Arm, between shoulder and elbow (shaft), shoulder blade (scapula), leg (tibia or fibula)	$2,750
Ankle, knee cap (patella), forearm (radius or ulna), collarbone (clavicle)	$2,000
Foot◆◆, hand or wrist◆◆	$1,750
Lower jaw◆◆	$1,000
Two or more ribs, fingers or toes, bones of face or nose	$750
One rib, finger or toe, coccyx	$350
LOSS	**PLAN**
Life, hearing, speech, or both eyes, hands, arms, feet, or legs, or one hand or arm and one foot or leg	$50,000
One eye, hand, arm, foot, or leg	$25,000
One or more entire toes or fingers	$5,000

▲Knee joint (except patella). Bone or bones of the foot (except toes). Bone or bones of the hand (except fingers). ◆◆Pelvis (except coccyx). Skull (except bones of face or nose). Foot (except toes). Hand or wrist (except fingers). Lower jaw (except alveolar process).

CERTIFICATE SPECIFICATIONS

Conditions and Limits

When an injury results in a covered loss within 180 days, 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.

Eligibility

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

Dependent Eligibility/Termination

Coverage may include you, your spouse or domestic partner, and your 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 upon termination of the domestic partnership or your death.

When Coverage Ends

Coverage under the policy and riders ends on the earliest of: the date the policy or certificate is canceled; the last day of the period for which you made any required contributions; 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; the date you are no longer in an eligible class; the date your class is no longer eligible; discovery of fraud or material misrepresentation when filing a claim; or the day you request to discontinue coverage in writing.

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

Exclusions and Limitations for Policy and the following riders: Accident Treatment and Urgent Care Rider; Dislocation/Fracture Rider; Emergency Room Services Rider; Accidental Death, Dismemberment and Functional Loss Rider; and Benefit Enhancement Rider

Benefits are not paid for: injury incurred before the effective date; act of war or participation in a riot, insurrection or rebellion; suicide or attempt at suicide; intentionally self-inflicted injury or action; any bacterial infection (except pyogenic infections from an accidental cut or wound); participation in aeronautics unless a fare-paying passenger on a licensed common-carrier aircraft; engaging in an illegal occupation or committing or attempting an assault or felony; driving in any race or speed test or testing any vehicle on any racetrack or speedway; hernia, including complications; injury while under the influence of alcohol or any drug, unless taken as prescribed by a physician; serving as an active member of the Military, Naval, or Air Forces of any country or combination of countries.

Exclusions and Limitations for Outpatient Physician's Treatment for Accident and Preventive Care Benefit Rider

Benefits are not paid for: injury incurred before the effective date; act of war or participation in a riot, insurrection or rebellion; suicide or attempt at suicide; intentionally self-inflicted injury or action; participation in aeronautics unless a fare-paying passenger on a licensed common-carrier aircraft; engaging in an illegal occupation or committing or attempting an assault or felony; driving in any race or speed test or testing an automobile or any vehicle on any racetrack or speedway; injury while under the influence of alcohol or any drug, unless taken as prescribed by a physician; serving as an active member of the Military, Naval, or Air Forces of any country or combination of countries.

Allstate BENEFITS

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www.allstate.com or
allstatebenefits.com

This brochure is for use in enrollments sitused in GA.

This material is valid as long as information remains current, but in no event later than March 1, 2023.
Group Accident benefits are provided under policy form GVAP6, or state variations thereof. Accident Rider benefits are provided under the following rider forms, or state variations thereof: Accident Treatment and Urgent Care Rider GP6AUC; Dislocation/Fracture Rider GP6DF; Emergency Room Services Rider GP6ERS; Outpatient Physician's Treatment for Accident and Preventive Care Benefit Rider GP6OPH; Accidental Death, Dismemberment and Functional Loss Rider GP6ADD; Benefit Enhancement Rider GP6BE.

The coverage provided is 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 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.