A black and white photograph of a hand holding a coin. The coin has the number '88%' written on it in a large, white, serif font. The background is a textured, dark surface.

88%

88 percent of heart attack victims under the age of 65 are able to return to their usual work.<sup>1</sup>

<sup>1</sup>2009 Heart and Stroke Statistical Update, American Heart Association.

GVCIP1

**GROUP CRITICAL ILLNESS INSURANCE**

Best in Benefits Series<sup>SM</sup>

AWD16510X-2



## group voluntary critical illness

Allstate Workplace Division's (AWD) Group Voluntary Critical Illness coverage can help you and your family be financially prepared should you be diagnosed with a critical illness. AWD's coverage provides benefits to help supplement your existing medical insurance, and helps pay for non-medical expenses not usually covered. It is never too early to start thinking about the future.

### **i** meeting your needs

Our coverage can help meet the needs of you, your spouse, and your child(ren). Our group critical illness coverage helps offer financial peace of mind, should a covered illness be diagnosed.

- Choose from \$10,000 or \$20,000 in basic benefit coverage
- Benefits payable from Categories 1, 2, 3, plus the Wellness Screening Benefit
- Premiums are affordable
- Benefits paid directly to you unless otherwise assigned
- Coverage that supplements your existing medical benefits
- Dependents receive 50% of basic benefit amount and 100% Wellness Screening Benefit
- Portable Coverage

Your employer has made it easy to help protect you and your family in the event of a critical illness.

**EASY**  
on you & your savings

### Illness discovery form

**Family History** - Has anyone in your immediate family suffered a critical illness, such as a heart attack or stroke?

Mother or Father  Yes  No

You or Your Spouse  Yes  No

Children  Yes  No

Total Household Members Diagnosed # \_\_\_\_\_

**Medical Expenses** - What expenses might be incurred during a critical illness?

Doctor Visits (in-patient, out-patient) \$ \_\_\_\_\_

Prescriptions (doctor prescribed medications) \$ \_\_\_\_\_

Medical Supplies (medical devices and supplies) \$ \_\_\_\_\_

Transportation (to or from hospital, treatment facility) \$ \_\_\_\_\_

Care (nanny, nurse) \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

**Payment Options** - Will you have enough to cover expenses?

Insurance (major medical, FSA, supplemental) \$ \_\_\_\_\_

Savings (high interest, checking, signature loan) \$ \_\_\_\_\_

Retirement (Pension, 401k, IRA, CD) \$ \_\_\_\_\_

Mortgage (refinance, equity loan/credit) \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

**Group Critical Illness Package** - Coverage you would like.

You only \$ \_\_\_\_\_

You and Your Spouse \$ \_\_\_\_\_

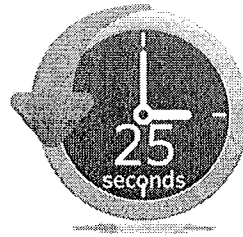
You and Your Child(ren) \$ \_\_\_\_\_

Family \$ \_\_\_\_\_



## your benefit coverage

Benefits are for critical illness coverage plus an additional benefit option, and will be provided to you, your spouse, and children, where applicable. Terms and conditions for each benefit will vary. Please review your coverage carefully.



About every 25 seconds, an American will suffer a coronary event, and about every minute someone will die from one.\*

### HOW TO GET STARTED

1. Choose from either a \$10,000 or \$20,000 basic benefit amount. Depending on the basic benefit amount you choose, up to 100% of the basic benefit amount will be payable in each of the two benefit categories. (Coronary Artery By-Pass Surgery, Alzheimer's Disease and Carcinoma In Situ pay 25% of the basic benefit amount). See Example of Benefits Paid on page 5.
2. Select coverage for you, you and your spouse, you and your child(ren), or your entire family. Spouse and children basic benefit amount is 50% of benefit shown and 100% of the Wellness Benefit.

### CATEGORY 1 BENEFITS

**Heart Attack (100%) - A \$10,000 or \$20,000 benefit will be paid** for the death of a portion of heart muscle as a result of inadequate blood supply to the relevant area. Diagnosis must be based on both new electrocardiographic changes; and elevation of cardiac enzymes or biochemical markers showing a pattern and to a level consistent with a diagnosis of heart attack.

**Heart Transplant (100%) - A \$10,000 or \$20,000 benefit will be paid** for surgical transplantation of the heart from a patient who died and whose heart was intact and capable of functioning in the recipient. The transplanted organ must come from a human donor.

**Stroke (100%) - A \$10,000 or \$20,000 benefit will be paid** for the death of a portion of the brain producing neurological sequelae including infarction of brain tissue, hemorrhage and embolization from an extra-cranial source. There must be evidence of permanent neurological deficit. Transient ischemic attacks (TIA's), head injury, chronic cerebrovascular insufficiency and reversible ischemic neurological deficits are excluded.

**Coronary Artery By-Pass Surgery (25%) - A \$2,500 or \$5,000 benefit will be paid** for undergoing a surgical operation to correct narrowing or blockage of one or more coronary arteries with bypass grafts on the advice of a cardiologist licensed in the United States. Angiographic evidence to support the necessity for bypass surgery will be required. Procedures not covered: balloon angioplasty; laser embolectomy; atherectomy; stent placement; or other non-surgical procedures.

### CATEGORY 2 BENEFITS

**Major Organ Transplant (100%) - A \$10,000 or \$20,000 benefit will be paid** for the surgical transplantation of a lung, liver, pancreas, or kidney. The transplanted organ must come from a human donor. Heart transplant is excluded from coverage.

**End Stage Renal Failure (100%) - A \$10,000 or \$20,000 benefit will be paid** for the failure of both kidneys to perform their essential functions, with the covered person undergoing peritoneal dialysis or hemodialysis or a renal transplant.

**Paralysis (100%) - A \$10,000 or \$20,000 benefit will be paid** for complete and permanent loss of function of two or more limbs. Not covered if a result of a stroke.

**Alzheimer's Disease (25%) - A \$2,500 or \$5,000 benefit will be paid** for a clinically established diagnosis of the disease by a psychiatrist or neurologist, resulting in the inability to perform, independently, 2 or more of the following activities of daily living: bathing; or dressing; or toileting; or eating; or taking medication.

\*Heart Disease and Stroke Statistics — 2009 Update, American Heart Association



## additional benefit coverage

We have enhanced coverage by providing a Wellness Screening Benefit. This benefit helps if you have a cancer or heart screening test.

### CATEGORY 3 BENEFITS

**Invasive Cancer (100%) - A \$10,000 or \$20,000 benefit will be paid** if diagnosed with a new form or type of invasive cancer, which means a malignant tumor characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue. This includes Leukemia and Lymphoma. Subject to the following: clear and definitive diagnosis by either a pathological or clinical method; and the date of diagnosis is after the effective date of coverage; and the date of diagnosis is while this benefit is in force; or the illness is not excluded by name or specific description in the certificate; or it is determined, as the result of an autopsy, that the insured died as the result of one of these illnesses.

**Carcinoma In Situ (25%) - A \$2,500 or \$5,000 benefit will be paid** if diagnosed with a new form or type of cancer wherein the tumor cells still lie within the tissue of origin without having invaded neighboring tissue. Carcinoma in Situ includes: early prostate cancer diagnosed as stage A or equivalent staging; and melanoma not invading the dermis. Carcinoma in Situ does not include: other skin malignancies; or pre-malignant lesions (such as intraepithelial neoplasia); or benign tumors or polyps. This is subject to all of the following: clear and definitive diagnosis by either a pathological or clinical method; and the date of diagnosis is after the effective date of coverage; and the date of diagnosis is while this benefit is in force; or the illness is not excluded by name or specific description in the certificate; or it is determined, as the result of an autopsy, that the insured died as the result of one of these illnesses.

### ADDITIONAL BENEFIT

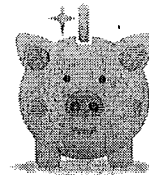
**Wellness Screening Benefit - A \$100 benefit will be paid** for one of the following cancer screening tests or heart screening tests performed while not hospital confined: Bone Marrow Testing; CA15-3 (blood test for breast cancer); CA125 (blood test for ovarian cancer); CEA (blood test for colon cancer); Chest X-ray; Colonoscopy; Flexible sigmoidoscopy; Hemocult stool analysis; Mammography, including breast ultrasound; Pap Smear, including ThinPrep Pap Test; PSA (blood test for prostate cancer); Serum Protein Electrophoresis (test for myeloma); Biopsy for skin cancer; Stress test on bike or treadmill; Electrocardiogram (EKG); Carotid Doppler; Echocardiogram; Lipid panel (total cholesterol count); Blood test for triglycerides. There is no limit to the number of years screening tests can be received, and the benefit is paid regardless of the result of the test(s). Limited to one test each calendar year for each covered person.

## example of benefits paid

Below are two examples of how benefits under the Group Critical Illness certificate will be paid. The benefits received may vary based upon each insured's personal medical experience. Spouse and children basic benefit amount is 50% of benefit shown.

\$10,000 BENEFIT		
If you have	Amount Payable	
<b>Category 1</b>		
Coronary Artery By-Pass Surgery then -	at 25%	= \$2,500
a Heart Attack then - (Since By-Pass Surgery paid)	at 75%	= \$7,500
<b>Category 2</b>		
Alzheimer's Disease then -	at 25%	= \$2,500
<b>Category 3</b>		
Invasive Cancer then -	at 100%	= \$10,000
<b>Additional Benefit</b>		
a Cancer Screening Test -	at 4 units	= \$100
<b>Total</b>		<b>= \$22,600</b>
Still eligible for*	75%	= \$7,500
*(Under Category 2 benefits)		

\$20,000 BENEFIT		
If you have	Amount Payable	
<b>Category 1</b>		
Coronary Artery By-Pass Surgery then -	at 25%	= \$5,000
a Heart Attack then - (Since By-Pass Surgery paid)	at 75%	= \$15,000
<b>Category 2</b>		
Alzheimer's Disease then -	at 25%	= \$5,000
<b>Category 3</b>		
Invasive Cancer then -	at 100%	= \$20,000
<b>Additional Benefit</b>		
a Cancer Screening Test -	at 4 units	= \$100
<b>Total</b>		<b>= \$45,100</b>
Still eligible for*	75%	= \$15,000
*(Under Category 2 benefits)		

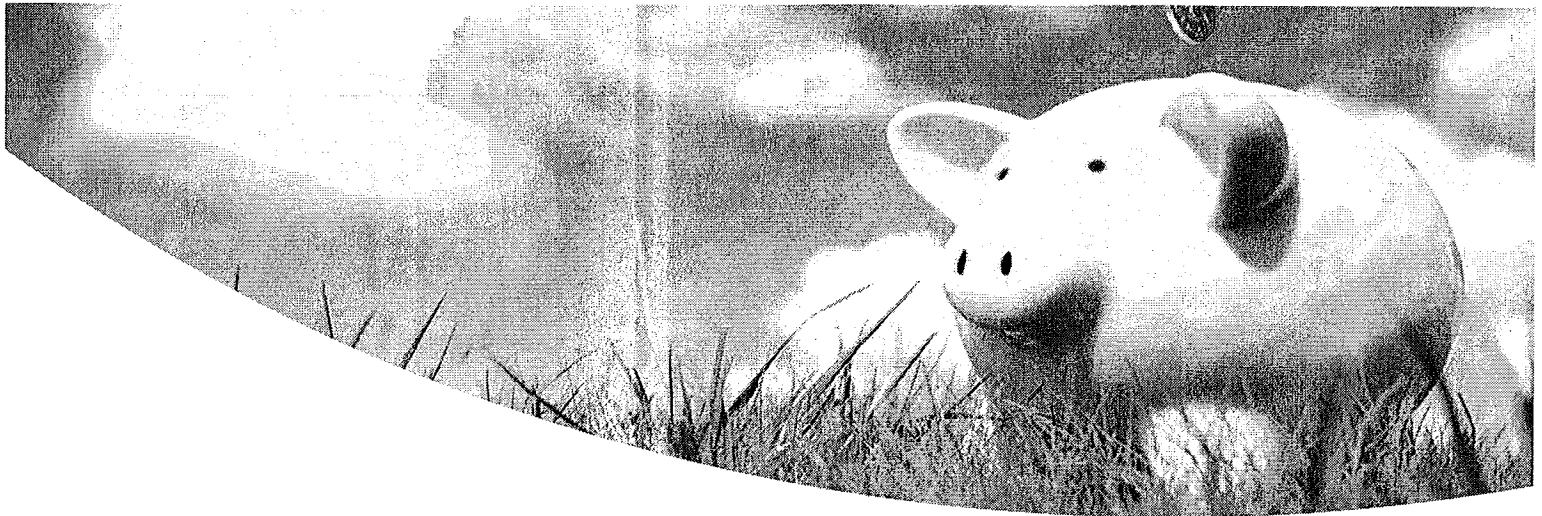


## Remember!

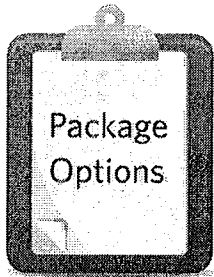
Benefits are paid directly to you unless assigned.

In the \$10,000 and \$20,000 benefit examples, after 100% of the basic benefit amount of the certificate has been paid within a category (Category 1, Category 2, or Category 3), no more basic benefits for any illness associated with that category are available.

Once the covered person has exhausted all basic benefit maximums in Categories 1, 2, and 3, and Additional Wellness Benefit, coverage is terminated.



 bi-weekly premiums detailed



The \$10,000 and \$20,000 Option packages and premiums consist of: Category 1 and Category 2 Group Voluntary Critical Illness benefits; Additional Category 3 Critical Illness Cancer Coverage; and Additional Wellness Benefit (4 units). Spouse and children basic benefit amount is 50% of benefit shown and 100% of the Wellness Benefit.

Issue Ages: 18 and over if actively at work

Issue		NT	T	NT	T
Age	Insured	\$10k	\$10k	\$20k	\$20k
18-35	EE	\$4.16	\$6.06	\$6.46	\$10.26
	EE + Sp	\$6.44	\$9.24	\$9.84	\$15.48
	EE + C	\$4.40	\$6.28	\$6.94	\$10.72
	F	\$6.66	\$9.48	\$10.30	\$15.94
36-49	EE	\$8.22	\$14.40	\$14.60	\$26.96
	EE + Sp	\$12.44	\$21.58	\$21.84	\$40.12
	EE + C	\$8.46	\$14.64	\$15.06	\$27.42
	F	\$12.66	\$21.80	\$22.30	\$40.58
50-59	EE	\$16.20	\$29.82	\$30.56	\$57.80
	EE + Sp	\$24.24	\$44.42	\$45.48	\$85.82
	EE + C	\$16.44	\$30.06	\$31.02	\$58.26
	F	\$24.48	\$44.64	\$45.94	\$86.28
60-64	EE	\$24.60	\$40.40	\$47.36	\$78.94
	EE + Sp	\$36.66	\$60.06	\$70.30	\$117.10
	EE + C	\$24.84	\$40.62	\$47.82	\$79.40
	F	\$36.90	\$60.30	\$70.78	\$117.58
65-69	EE	\$30.28	\$45.06	\$58.72	\$88.26
	EE + Sp	\$45.10	\$66.94	\$87.20	\$130.86
	EE + C	\$30.52	\$45.28	\$59.18	\$88.72
	F	\$45.34	\$67.18	\$87.66	\$131.32
70+	EE	\$35.26	\$48.70	\$68.68	\$95.54
	EE + Sp	\$52.44	\$72.34	\$101.88	\$141.66
	EE + C	\$35.50	\$48.94	\$69.14	\$96.00
	F	\$52.68	\$72.58	\$102.34	\$142.12

**k = Thousand NT = Non-Tobacco T = Tobacco**  
 EE = Employee Sp = Spouse C = Children F = Family



## certificate specifications

**Eligibility** - Your employer determines the criteria for eligibility (such as length of service and hours worked each week). Issue ages are 18 and over if actively at work for the number of hours determined by your employer.

**Dependent Coverage** - Family members who are eligible for coverage are: your legal spouse; your dependent children including newborn children, adopted children, children during pendency of adoption procedures, foster children, stepchildren, or legal ward who are under 26 years of age. Children must live in your household or be a full-time or part-time student and must be dependent on you for support. Children born to you or your spouse while individual and children coverage or family coverage is in force will be eligible for coverage. Coverage begins at the moment of birth.

**Portability Privilege** - AWD will provide Group Voluntary Critical Illness insurance portability coverage, subject to the following provisions. Coverage will not be available to you unless: coverage under the policy terminates as stated in the "Termination of Coverage" provision; and we receive a written request and payment of the first premiums for the portability coverage no later than 63 days after such termination; and the request is made on a form we furnish or approve for that purpose. Specific criteria for coverage, premiums, grace period and termination of insurance provisions are included with this privilege; refer to the policy or certificate for complete details. This option is not available if you fail to make the required monthly premium payments.

**Termination of Coverage** - Coverage under the policy ends on the earliest of: the date the policy is canceled; or the last day of the period for which any required premium payments were made; or 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; or the date you are no longer in an eligible class; or the date your class is no longer eligible; or the date you have received the maximum total percentage of the basic benefit amount for each critical illness category, including the Recurrence Benefit.

**Pre-Existing Condition Limitation** - AWD does not pay for any benefit due to, or caused by, a pre-existing condition, as defined, during the 12 month period beginning on the date that person became an insured. A pre-existing condition is a disease or physical condition for which symptoms existed within the 12 month period prior to the effective date of coverage; or medical advice or treatment was recommended or received from a member of the medical profession within the 12 month period prior to the effective date of coverage. The exception to the above would be for follow-up care for breast cancer. Routine follow-up care for a person who has been previously determined to be free of breast cancer does not constitute medical advice, diagnosis, care or treatment unless evidence of breast cancer is found during, or as the result of, the follow-up care. \* A pre-existing condition can exist even though a diagnosis has not yet been made.

**Exclusions & Limitations** - AWD does not pay benefits for an illness due to, or resulting from, (directly or indirectly): any act of war, whether or not declared, participation in a riot, insurrection or rebellion; or intentionally self-inflicted injuries; or injury incurred while engaging in an illegal occupation or committing or attempting to commit a felony; or attempted suicide, while sane or insane; or any injury sustained while under the influence of alcohol, narcotics or any other controlled substance or drug unless administered upon the advice of a physician; or participation in any form of aeronautics except as a fare paying passenger in a licensed aircraft provided by a common carrier and operating between definitely established airports; or alcohol abuse or alcoholism, drug addiction or dependence upon any controlled substance.

**Coverage Subject to the Policy** - The coverage described in the certificates of insurance are subject in every way to the terms of the policy that is issued to the policyholder (your employer). They alone make up the agreement by which the insurance is provided. The group policy may at any time be amended or discontinued by agreement between AWD and the policyholder. Your consent is not required for this. AWD is not required to give you prior notice.

The coverage is provided by limited benefit supplemental insurance policy. This material is valid as long as information remains current, but in no event later than August 1, 2013. Group Voluntary Critical Illness benefits provided by policy form GVCIP1, or state variations thereof, which provides stated benefits for specified illnesses. The policy does not provide benefits for any other sickness or condition. The policy is not a Medicare Supplement Policy. This brochure highlights some features of the policy but is not the insurance contract. For complete details, contact your Insurance Agent, or call 1-800-521-3535. This is a brief overview of the benefits available under the Group Voluntary Policy underwritten by American Heritage Life Insurance Company. Details of the insurance, including exclusions, restrictions and other provisions are included in the certificates issued.

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This brochure is for use in the City of Bradenton enrollment which is situated in Florida.



Allstate Workplace Division is the marketing name used by American Heritage Life Insurance Company (Home Office, Jacksonville, FL), a subsidiary of The Allstate Corporation.  
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