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Allstate at Work®

# accident insurance

## Group Voluntary Accident Policy

Accidents happen — a fatal injury occurs every 14 minutes and a disabling injury every 4 seconds.<sup>1</sup>

About 1 out of 16 people experience an unintentional injury each year.<sup>1</sup> If it happens to employees, how will they pay for it?

Nine out of 10 deaths and about two thirds of the disabling injuries suffered by workers in occurred off the job.<sup>1</sup>

While you can count on health insurance to cover medical expenses, it doesn't usually cover indirect costs that can arise with a serious, or even a not-so-serious, injury. You may end up paying out of your own pocket for things like transportation, over-the-counter medicine, day care or sitters and extra help around the house.

With accident insurance, the benefits you receive can help take care of these extra expenses and anything else that comes up.

Group Voluntary Accident Insurance provides extra money to help:

- Make ends meet and manage medical costs
- Keep savings intact

1. *Injury Facts* 2007 Edition, National Safety Council.



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# how it works

## Payment of Benefits

If, while the policy is in force, a covered person sustains an injury which results within 90 days (180 days for Accidental Death or Dismemberment) from the date of an accident, in any of the losses stated in the benefits provision, subject to the Limitations/Exclusions provisions and all other provisions contained in the certificate of insurance, and is diagnosed by a physician, AWD will pay the benefits for such loss. Any loss not stated in the benefits provisions is not covered under the policy. Treatment must be received in the United States or its territories.

**Benefits are shown at 2 units of coverage, unless otherwise noted.**

GROUP ACCIDENT POLICY BENEFITS	INSURED EMPLOYEE	INSURED SPOUSE	INSURED CHILD
<p><i>Accidental Death</i> AWD pays the amount shown if a covered person dies as a result of an accidental injury.</p>	\$40,000	\$20,000	\$10,000
<p><i>Common Carrier Accidental Death</i> AWD pays the amount shown if a covered person dies as a result of an injury sustained while riding as a fare paying passenger on a scheduled common carrier.</p>	\$200,000	\$100,000	\$50,000
<p><i>Dismemberment</i> AWD pays the amount shown for dismemberment (see Injury Benefits schedule below). If a covered person sustains more than one dismemberment in any one injury, the total amount AWD will pay cannot exceed the amount shown.</p>	\$4,000- \$40,000* * depending on type of loss	\$2,000- \$20,000*	\$1,500- \$10,000*
<p><i>Dislocation or Fracture</i> AWD pays the amount shown for dislocation or fracture (see Injury Benefits schedule below). If a covered person sustains more than one dislocation or fracture in any one injury, the total amount AWD will pay cannot exceed the amount shown.</p>	\$120- \$4,000* * depending on type of loss	\$60- \$2,000*	\$30- \$1,000*
<p><i>Initial Hospitalization Confinement</i> AWD pays the amount shown for the first time a covered person is hospital confined as a result of an injury after their effective date of coverage. AWD pays this benefit only once for each covered person over the lifetime of the policy.</p>	\$1,000	\$1,000	\$1,000
<p><i>Hospital Confinement</i> AWD pays the amount shown for each day a covered person is confined in a hospital, as a result of injury, up to a maximum of 90 days for any one injury.</p>	\$200/day	\$200/day	\$200/day
<p><i>Intensive Care</i> AWD pays the amount shown for each day a covered person is confined in a hospital intensive care unit, as a result of injury, up to a maximum of 90 days for any continuous period of hospital intensive care confinement.</p>	\$400/day	\$400/day	\$400/day
<p><i>Ambulance Services</i> AWD pays the amount shown if a covered person requires Ground Ambulance ambulance service to or from a hospital, as a result of injury. Air Ambulance</p>	\$200 \$600	\$200 \$600	\$200 \$600
<p><i>Medical Expenses</i> AWD pays up to the amount shown for expenses incurred for each medical or surgical treatment a covered person may require, as a result of an injury. Covers doctor fees, x-rays, emergency services and repair to natural sound teeth, if diagnosed by a licensed dentist to be a result of the injury.</p>	up to \$500	up to \$500	up to \$500
<p><i>Outpatient Physician's Treatment (Wellness Plus)</i> AWD pays the amount shown if a covered person is treated by a physician for any cause outside of a hospital. This benefit is limited to 2 visits for each covered person, each calendar year; and a maximum of 4 visits each calendar year for family coverage.</p>	\$50/visit	\$50/visit	\$50/visit

Your group accident plan consists of accident benefits at 2 units.

### Weekly Premiums

INDIVIDUAL	FAMILY
\$3.59	\$9.07

Issue ages are **18-99 for the base policy.**

Certificates under this plan are issued on a guaranteed basis only at the time of the initial enrollment. A completed Evidence of Insurability form AWD4502TN is required for late entrants into the group plan.

### Injury Benefits

The list below shows covered injury benefits for 2 units of coverage and one occurrence. An insured spouse gets 50% of the amounts shown; insured children get 25% of the amounts shown.

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

\*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).

**Eligibility** - Family members eligible for coverage include: you; your legal spouse; unmarried children (including adopted children, children pending adoption and stepchildren) who are under 24 years old and dependent on the employee for maintenance and support.

**Termination of Coverage** - As long as you are insured, your coverage under the policy ends on the earliest of: the date the policy is canceled; or the last day of the period for which you made any required contributions; or the last day you were in active employment, except as provided under the "Temporarily Not Working" provision; or the date you were no longer in an eligible class; or the date your class is no longer eligible.

Spouse coverage ends upon valid decree of divorce or your death. A child's coverage ends on the certificate anniversary next following the date the child is no longer eligible. This is the earlier of: (a) when the child marries; or (b) reaches age 24 (and has been dependent on the employee for maintenance and support). Coverage for unmarried children does not terminate if they are: 1. incapable of self-sustaining employment by reason of mental or physical incapacity; and 2. incapacitated prior to the attainment of the limiting age of eligibility under the policy; and 3. chiefly dependent upon you for support and maintenance. Coverage for the child continues as long as the policy remains in force and the child remains in such condition. Proof of the incapacity and dependency of the child must be furnished within 60 days of the child's attainment of the limiting age of eligibility. Thereafter, such proof must be furnished as frequently as may be required, but no more frequently than annually after the child's attainment of the limiting age for eligibility. If AWD accepts a premium for coverage extending beyond the date, age or event specified for termination as to a covered person, then coverage continues during the period for which such premium was accepted. This does not apply where such acceptance was based on a misstatement of age.

**Temporarily Not Working** - AWD will continue your coverage in accordance with the personnel practices of the policyholder's Human Resource department for a temporary layoff or leave of absence, if premium payments continue and the policyholder approved the leave in writing. Coverage will be continued for three months following the date you ceased active employment. If your coverage ends while on a family and medical leave of absence, your coverage will be reinstated when you return to active employment. AWD will not: 1. apply a new pre-existing condition exclusion; or 2. require evidence of insurability.

**Portability Privilege** - If your coverage terminates for any reason other than failure to pay required premiums, or if your employer terminates the group policy and does not replace it with another group accident plan, you will be eligible for portability coverage. This means you continue the same benefits you had under the group policy, but pay your premiums directly to AWD. You will no longer be covered under the group policy, but will continue to receive the benefits described in your certificate of insurance.

**Continuation of Coverage (COBRA)** - Since the plan is employer-sponsored, it is subject to the same federal COBRA continuation requirements that apply to medical plans. However, COBRA continuation only provides coverage for the following benefits: Dislocation or Fracture, Initial Hospitalization Confinement, Hospital Confinement, Intensive Care, Ambulance Services, Medical Expenses and Outpatient Physician's Treatment. It does not provide benefits for Accidental Death, Common Carrier Accidental Death, Dismemberment or a disability rider. In general, this allows you to continue your insurance under the group policy for 18 months after your employment terminates. If your dependent would lose coverage due to your death, divorce, or attainment of the limiting age for eligibility of dependents, the coverage may be continued for up to 36 months. If the group policy is terminated by the employer before the end of the COBRA continuation period, you will be entitled to be covered under a replacement group plan.

**Coverage Subject to the Policy** - The coverage described in the certificate of insurance is subject in every way to the terms of the policy that is issued to the policyholder (your employer). It alone makes 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.

**Exclusions and Limitations** - The policy does not cover any loss incurred by a covered person as a result of: injury incurred prior to the covered person's effective date of coverage subject to the Contestability provision; or any act of war whether or not declared, participation in a riot, insurrection or rebellion; or suicide, or any attempt at suicide, whether sane or insane; or any injury sustained while the covered person is under the influence of alcohol or any narcotic, unless administered on the advice of a physician; or any bacterial infection (except pyogenic infections which shall occur with and through an accidental cut or wound); 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 committing or attempting to commit an assault or felony; or driving in any organized or scheduled race or speed test or while testing an automobile or any vehicle on any racetrack or speedway; or hernia, including complications due to hernia.

Any injury incurred while a covered person is an active member of the Military; Naval; or Air Forces of any country or combination of countries is not covered. Upon notice and proof of service in such forces, AWD will return the pro-rata portion of the premium paid for any period of such service.

**Pre-existing Condition Limitation** - AWD does not pay for any loss due to a pre-existing condition if the loss occurs during the 12 month period beginning on the date that person became a covered person. A pre-existing condition is a disease or physical condition for which: 1. symptoms existed within the 12 month period prior to the effective date of coverage; or 2. medical advice or treatment was recommended by or received from a member of the medical profession within the 12 month period prior to the effective date of coverage.

**The policy is a Limited Benefit Policy.**



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**This brochure is for use in enrollments which are situated in Tennessee.**

Accident insurance benefits provided by policy GVAP1, or state variations thereof. Underwritten by American Heritage Life Insurance Company. Benefits, limitations and exclusions vary by state. This brochure highlights some features of the policy but is not the insurance contract. Only the actual policy provisions control. The policy sets forth, in detail, the rights and obligations of both the insured and the insurance company.

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