



## American Heritage Life Insurance Company

24-hour protection for medical treatment and services due to an accidental injury

## Accident Insurance from Allstate Benefits\*

You don't know when an accident will happen, and you don't know how much it may cost. Hospital stays, medical treatment, follow-up visits and other expenses can all add up quickly. Your major medical insurance may not cover everything, but Allstate Benefits Accident Insurance can help.

Accident Insurance from Allstate Benefits pays in addition to any other coverage that you have. Benefits are paid directly to you and you decide how to spend them, whether it's to help cover costs left over from your major medical coverage or to help pay other daily living expenses. There are no restrictions on how your benefit is spent.

### Your Benefits

Like most Accident Insurance, Allstate Benefits Accident coverage includes benefits for hospital admission and stays, medical treatment, services for accidental injuries, and more. But our protection goes well beyond the basics.

### Affordable Premiums

You may wonder how our Accident Insurance premium rates are so affordable. The answer is simple: much like major medical insurance issued, our coverage is offered to most, if not all, within your workplace, or "group." This keeps your premiums affordable and offers the convenience of payroll-deducted premiums.

### The Allstate Benefits Advantage

- Guaranteed Issue coverage, meaning no medical questions to answer\*\*
- Benefits paid directly to you for medical services/treatment due to accidental injuries
- Coverage for you and your entire family is also available
- Affordable premiums available through your employer can be payroll deducted
- Portable coverage means you can take it with you if you leave your employer

With Allstate Benefits, you can receive the treatment you need to protect your finances. **Practical benefits for everyday living.®**

## DID YOU KNOW ?



**1,054 injuries in 10 minutes**

Every 10 minutes, 1,054 people suffer an injury severe enough to require a doctor or medical professional†



**85% off-the-job**

More than 85% of medically-consulted injuries suffered by workers occurred off the job‡

\*Allstate Benefits is the marketing name used by American Heritage Life Insurance Company, a subsidiary of The Allstate Corporation. \*\*Please refer to the Exclusions and Limitations section of this brochure. †National Safety Council, Injury Facts®, 2022 Edition.



# Meet Joe

Joe, his wife, and their two young children lead an active lifestyle, with participation in lots of children's sports teams and friendly pickup games at the neighborhood park and community center.

Joe's employer offers Accident Insurance from Allstate Benefits during their annual open enrollment period, and Joe selects family coverage. The decision helps give him peace of mind because he knows that in the event of an accidental injury, he will have help covering some of the medical costs.



Joe's story of injury and treatment for a broken leg turned into a happy ending, because he had Accident Insurance to help with his expenses.



## COVERAGE

Joe chose Accident benefits offered through his employer during his annual enrollment to help protect his family if they suffer an accidental injury.



## TREATMENT

One afternoon, Joe is playing soccer when he breaks his leg after colliding with another player. He is taken to the urgent care center and receives treatment for his injury.

Here's Joe's treatment path:

- Taken by ambulance to an urgent care center
- Examined by a doctor and X-rays were taken
- Diagnosed with a fracture of the tibia and fibula and admitted for surgery to repair it
- Visited by his doctor and released after a one-day stay in the hospital
- Had to immobilize his leg for several weeks
- Seen by his doctor during a follow-up visit and sent to physical therapy to strengthen his leg and improve his mobility

Joe went online to file claims and cash benefits were direct deposited into his bank account.

Joe is back playing soccer with his buddies.



## BENEFITS

Joe's Accident claim paid cash benefits for the following:

Ground Ambulance
Urgent Care Center
X-rays
Initial Hospital Admission
Daily Hospital Confinement
Dislocation or Fracture (Open Reduction)
General Anesthesia
Medical Equipment
Medical Supplies
Medication
Therapy (6 days)
Accident Physician Treatment
Accident Follow-Up Treatment

For a listing of benefits and benefit amounts, see pages 3, 4, 5 and 6.

The examples above detail fictional thought processes and needs; your individual needs and reasons for coverage may vary.

## ACCIDENT INSURANCE from Allstate Benefits

Benefits are paid once per covered person per covered accident, unless otherwise noted

ACCIDENT FACILITY CARE BENEFITS				PLAN
Initial Hospital Admission				\$1,500
Daily Hospital Confinement (pays daily)				\$280
Intensive Care Unit Confinement (pays daily)				\$560
Rehabilitation Unit Confinement (pays daily)				\$100
ACCIDENT INJURIES BENEFITS				PLAN
Brain Injury Diagnosis				\$300
Broken Tooth				\$600
Burns (% of body surface)	2nd Degree	Less than 10%	\$312.50	
		10% to 24%	\$625	
		25% or more	\$3,125	
	3rd Degree	Less than 10%	\$1,250	
		10% to 24%	\$6,250	
		25% or more	\$25,000	
Skin Graft (% of Burns Benefit)				50%
Coma				\$10,000
Lacerations	With Repair (total length)	Less than 2"	\$200	
		2" to 6"	\$500	
		More than 6"	\$1,000	
	Without Repair		\$200	
Paralysis	1 or 2 Limbs		\$5,250	
	3 or 4 Limbs		\$10,500	
ACCIDENT TREATMENT AND URGENT CARE BENEFITS				PLAN
Accident Follow-Up Treatment (pays daily)				\$200
Accident Physician Treatment				\$250
Ambulance	Air		\$3,000	
	Ground		\$700	
Urgent Care				\$100
X-ray				\$100
Emergency Room Services				\$200
Blood, Plasma or Platelets				\$1,200
Eye Injury				\$400
General Anesthesia				\$400
Ligament, Rotator Cuff, Tendon or Knee Cartilage Surgery	With Repair		\$2,000	
	Without Repair		\$600	
Miscellaneous Outpatient Surgery				\$400
Open Abdominal or Thoracic Surgery				\$4,000
Ruptured or Herniated Disc Surgery				\$2,000
Major Diagnostic Exam			up to	\$100
Pain Management (Epidural or Nerve Ablation)				\$50
TREATMENT, SUPPORT AND RECOVERY BENEFITS				PLAN
Companion Non-Local Lodging (pays daily)				\$420
Medical Equipment				\$525
Medical Supplies				\$21
Medication				\$21
Non-Local Transportation (per trip; 3 times per accident)				\$1,050
Post-Accident Common Carrier Transportation				\$840
Prosthetic Device	1 device		\$2,100	
	2 or more devices		\$4,200	
Residence/Automobile Modification				\$2,100
Therapy (pays daily; up to 6 days per accident)				\$126
ACCIDENTAL DEATH AND DISMEMBERMENT BENEFITS				PLAN
Accidental Death				\$40,000
Common Carrier Accidental Death (fare-paying passenger)				\$100,000
Accidental Dismemberment†				\$40,000
Functional Loss†				\$40,000

## PLAN

### SEMI-MONTHLY PREMIUMS

EE	EE + SP	EE + CH	F
\$9.20	\$15.77	\$23.42	\$29.99

### 20THLY PREMIUMS

EE	EE + SP	EE + CH	F
\$11.04	\$18.92	\$28.10	\$35.98

EE = Employee

EE + SP = Employee + Spouse

EE + CH = Employee + Child(ren)

F = Family

Issue ages: 18 and Over if Actively at Work

Injury Benefit Schedule is on page 4

†Up to amount shown; see the "Dismemberment and Functional Loss" section of the Injury Benefit Schedule on page 4. Multiple losses from same injury pay up to amount shown.

ADDITIONAL RIDER BENEFITS	PLAN
Dislocation and Fracture Rider <sup>^</sup>	
Closed Reduction Maximum	\$9,600
Open Reduction Maximum	\$28,800
Avulsion Fracture or Chip Fracture (25% of Closed Reduction) up to	\$2,400
Partial Dislocation (25% of Closed Reduction) up to	\$2,400
Stress Fracture (10% of Closed Reduction) up to	\$960
Organized Sports Activity Rider*	25%
Fixed Health Screening Services Rider (once per person/year)	\$100

<sup>^</sup>Up to amount shown; see Injury Benefit Schedule below. Multiple losses from the same injury pay up to the maximums shown here for each type of repair (Open or Closed Reduction).

#### •Organized Sports Activity

Pays an additional percentage of the benefit amounts paid for: Accident Facility Care; Accident Injuries; Accident Treatment and Urgent Care; Treatment, Support and Recovery; Dislocation and Fracture

## INJURY BENEFIT SCHEDULE

Benefit amounts for coverage and one occurrence are shown below.

WITH CLOSED or OPEN REDUCTION	PLAN	
DISLOCATION*	OPEN	CLOSED
Hip Joint	\$28,800	\$9,600
Ankle Joint; Knee Joint (except Patella); Bone or Bones of the Foot (except Toes)	\$11,520	\$3,840
Wrist Joint	\$10,080	\$3,360
Elbow Joint	\$8,640	\$2,880
Shoulder Joint	\$5,760	\$1,920
Bone or Bones of the Hand (except Fingers); Collarbone	\$4,320	\$1,440
Lower Jaw	\$2,880	\$960
Two or more Fingers or Two or more Toes	\$2,016	\$672
Kneecap (Patella)	\$1,440	\$480
One Finger or One Toe or Any other dislocation not listed above	\$864	\$288
FRACTURE*	OPEN	CLOSED
Hip; Thigh (Femur); Pelvis (except Coccyx); Skull Fracture— Depressed (except Bones of the Face or Nose)	\$28,800	\$9,600
Skull Fracture—Non-Depressed (except Bones of the Face or Nose)	\$27,360	\$9,120
Vertebral Body or Vertebral Processes	\$21,600	\$7,200
Arm, between Shoulder and Elbow (Humerus); Shoulder Blade (Scapula); Leg (Tibia or Fibula)	\$15,840	\$5,280
Ankle; Kneecap (Patella); Collarbone (Clavicle); Forearm (Radius or Ulna)	\$11,520	\$3,840
Foot (except Toes); Hand or Wrist (except Fingers)	\$10,080	\$3,360
Lower Jaw (Mandible) (except Alveolar Process)	\$5,760	\$1,920
Two or more Ribs, Fingers or Toes; Bones of Face (except Nose); Nose; Upper Jaw (except Alveolar Process); Sternum	\$4,320	\$1,440
One Rib, Finger or Toe; Coccyx; Any other fracture not listed above	\$2,016	\$672

\*Employee, Spouse and Children receive 100% of the benefit amounts listed.

DISMEMBERMENT AND FUNCTIONAL LOSS	PLAN
Arm, Leg, Hand, Foot	\$20,000 each
Speech	\$40,000
Hearing or Sight (per Ear or Eye)	\$20,000
One or more entire Toes or Fingers	\$4,000



## 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 [mybenefits.allstate.com](http://mybenefits.allstate.com)

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 and your children.

\*Two or more surgeries done at the same time through one incision or entry point are considered one operation. The procedure or benefit that pays the highest amount is paid.

## Benefits (subject to maximums as listed on page 3)

Services must be received within 180 days of the covered accident, unless otherwise specified.

### ACCIDENT FACILITY CARE BENEFITS

**Initial Hospital Admission** - first admission to a hospital

**Daily Hospital Confinement** - maximum of 365 days over a two-year period following the covered accident

**Intensive Care Unit Confinement** - maximum of 180 days

**Rehabilitation Unit Confinement** - must be hospital-confined prior to being transferred to the rehabilitation unit. Maximum of 30 days per continuous period of rehabilitation unit confinement, up to the maximum of 60 days per calendar year

### ACCIDENT INJURIES BENEFITS

**Brain Injury Diagnosis** - diagnosis of concussion, cerebral laceration, cerebral contusion or intracranial hemorrhage

**Broken Tooth** - dental repair to sound natural teeth by crown, filling or extraction. One crown, filling or extraction per covered person, per accident. Not payable for injury caused by biting or chewing

**Burns** - treatment received within 48 hours of an accident for a 2nd or 3rd degree burn resulting from exposure to heat, electricity, radiation, friction or chemicals. Sunburns are not covered. If both 2nd and 3rd degree burns are suffered in a single accident, the benefit amount for each degree of burn is paid

**Skin Graft** - skin transplant to repair or treat burns on the body. A benefit must be paid under the Burns benefit

**Coma** - unconsciousness lasting seven or more days, during which time the Glasgow Coma Score is 4 or lower. Medically-induced comas, coma resulting directly from drug or alcohol use, and diagnosis of brain death are excluded

**Lacerations** - treatment received within three days of an accident for a cut or tear of skin/flesh. If more than one laceration in a single accident is repaired, the total length of all repaired lacerations will determine the benefit amount paid

**Paralysis** - complete/permanent loss of use of one or more limbs for 90 consecutive days

### ACCIDENT TREATMENT AND URGENT CARE BENEFITS

**Accident Follow-Up Treatment** - treatment received by telemedicine consultation (doesn't include electronic mail message, fax or online questionnaire), at a doctor's office or as an outpatient in a hospital. Maximum of six days. Not paid if the Therapy benefit is paid for the same day of treatment. If treatment is eligible for payment under the Accident Follow-Up Treatment and Therapy benefits, the treatment paying the highest benefit amount is paid

**Accident Physician Treatment** - treatment by a doctor

**Ambulance** - transportation by a licensed ground or air ambulance service. Payable once per accident per year

**Urgent Care** - services received at an urgent care facility

**X-ray** - must be ordered by a doctor

**Emergency Room Services** - treatment in an emergency room

**Blood, Plasma or Platelets** - transfusion of blood products to treat an injury

**Eye Injury** - surgery or removal of a foreign object by a doctor. Eye exam with or without anesthesia is not surgery

**General Anesthesia** - administered for surgery, provided one of the certificate surgery benefits is paid

**Ligament, Rotator Cuff, Tendon, or Knee Cartilage Surgery\*** - surgery or an exploratory arthroscopic surgical procedure to repair a torn, ruptured or severed ligament, rotator cuff, tendon, or knee cartilage

**Miscellaneous Outpatient Surgery\*** - outpatient surgical procedures. Not paid if Eye Injury or any other surgery is paid

**Open Abdominal or Thoracic Surgery\*** - performed by a doctor for diagnosis or repair

**Ruptured or Herniated Disc Surgery\*** - surgical repair for a ruptured disc of the spine

**Major Diagnostic Exam** - CAT or CT scan, EEG, MRI, PET, or ultrasound. X-rays are not covered. If more than one exam is ordered, the exam paying the highest benefit amount is paid

**Pain Management** - epidural injection, corticosteroid injection, or nerve ablation procedure to manage pain in the body. General, regional or local anesthesia is not covered

## Benefits, Continued (subject to maximums as listed on pages 3 and 4)

### TREATMENT, SUPPORT AND RECOVERY BENEFITS

**Companion Non-Local Lodging** - each day a companion stays at a non-local lodging to be with a covered person while confined in a non-local facility more than 50 miles from their home. Maximum of 30 days

**Medical Equipment** - doctor-prescribed cane, crutches, supportive braces, walker, walking boot, wheelchair or scooter that aids in mobility

**Medical Supplies** - purchase of medical supplies

**Medication** - purchase of prescription or over-the-counter medication

**Non-Local Transportation** - when a covered person travels more than 50 miles from their home to obtain treatment not available locally. Not paid when receiving services other than non-local treatment, when someone accompanies or visits a covered person receiving non-local treatment, or when transported by air or ground ambulance

**Post-Accident Common Carrier Transportation** - following a three-day hospital stay more than 250 miles from the covered person's home; requires a common-carrier flight, train or bus to return home within 48 hours of discharge. Payable only if the Daily Hospital Confinement benefit is paid. Does not pay for someone to accompany the covered person

**Prosthetic Device** - a new or replacement of an existing prosthetic arm, eye, foot, hand, or leg. Does not include hearing aids, dental aids, false teeth, eyeglasses, artificial joints or cosmetic prostheses (including hair wigs)

**Residence or Automobile Modification** - permanent structural modifications made to a primary residence (by a licensed contractor) or an automobile within 365 days after a covered accident to maintain an independent lifestyle

**Therapy** - daily treatment for one or more of the following therapies: chiropractic; cognitive behavioral; occupational; physical; respiratory; speech; or vocational. Not paid if the Accident Follow-Up Treatment benefit is paid; if the treatment received meets the requirements for Accident Follow-Up Treatment and Therapy, the benefit paying the highest amount is paid

### ACCIDENTAL DEATH AND DISMEMBERMENT BENEFITS

**Accidental Death** - death caused by a covered accident

**Common Carrier Accidental Death** - death while traveling as a fare-paying passenger on a common carrier

**Accidental Dismemberment** - dismemberment(s) caused by a covered accident. If this benefit was previously paid for the loss of a finger, hand, foot or toe and a second dismemberment occurs under the same covered accident in the same area of the body within 180 days, the benefit will be reduced by the previously paid amount

**Functional Loss** - total and irreversible loss of hearing, sight or speech lasting at least 90 days and caused by a covered accident

### ADDITIONAL RIDER BENEFITS

**Dislocation and Fracture** - dislocations or fractures resulting from a covered accident and listed in the schedule of benefits are covered. Multiple dislocations or fractures from the same accident are limited to the amount shown in the Benefit Amounts on page 4

**Closed Reduction** - non-surgical repair of a dislocation or fracture, including immobilization

**Open Reduction** - surgical repair of a dislocation or fracture

**Avulsion Fracture** - tendon or ligament pulls off a piece of bone

**Chip Fracture** - small fragment of bone is broken off

**Partial Dislocation** - joint is not completely separated

**Stress Fracture** - tiny cracks in bone often caused by repetitive force

**Organized Sports Activity** - pays for treatment of covered injuries received while participating in a regularly scheduled athletic event or team practice. An athletic event: includes formal registration; has a set of written rules; is officiated by a certified official; has a governing body overseeing it; is an amateur event; and is not for wage or profit. Treatment must be received within 180 days of a covered accident. Pays an additional percentage of the benefit amounts paid for the certificate and rider benefits for Accident Facility Care; Accident Injuries; Accident Treatment and Urgent Care; Treatment, Support and Recovery; Dislocation and Fracture

**Fixed Health Screening Services** - coverage for one eligible service performed each year for each covered person. Covered services include: Biopsy for cancer and skin cancer; Blood Chemistry Panel; Blood Tests for Triglycerides, CA15-3 (breast cancer), CA125 (ovarian cancer), CEA (colon cancer), or PSA (prostate cancer); Chest X-ray; Clinical Testicular Exam; CBC (blood count); Colonoscopy; Doppler Screening (cancer, carotids or peripheral vascular disease); Echocardiogram; EKG (Electrocardiogram); EEG (Electroencephalogram); Endoscopy; Fasting Blood or Plasma Glucose test; Flexible Sigmoidoscopy; Hemoglobin A1C; Hemoccult Stool Analysis; HPV (Human Papillomavirus) vaccination; Lipid Panel (total cholesterol count); Mammography (including breast ultrasound); Oral Cancer Screening; Pap Smear, including ThinPrep Pap Test; Sampling of blood or tissue for genetic testing for cancer risk; Serum Protein Electrophoresis (test for myeloma); Skin Cancer Screening; Skin Exam; Stress Test (bike or treadmill); Testing for Donation of Bone Marrow (includes HLA - Human Leukocyte Antigen); Thermography; Two-Hour Post-Load Plasma Glucose Test; Ultrasound Screening of abdominal aorta for aortic aneurysms; Ultrasound for cancer detection

## Non-Fatal Injury Facts



42% of poisoning exposures involve children age 5 or younger, and 93% of non-fatal poisonings are adults older than 19.<sup>†</sup>

Non-fatal poisonings account for more than 1.7 million ER visits each year.<sup>†</sup>



3.2 million people were treated in emergency departments for injuries involving sports and recreational equipment.<sup>†</sup>

The activities most frequently identified with injuries include exercise, cycling, and playing basketball.<sup>†</sup>



One home fire-related injury occurs every 46 minutes.<sup>†</sup>

One- and two-family home fires account for 56.6% of non-fatal injuries.<sup>†</sup>

Apartment structure fires account for 19.1% of non-fatal injuries.<sup>†</sup>

<sup>†</sup>National Safety Council, Injury Facts®, 2022 Edition.

<https://injuryfacts.nsc.org/home-and-community/safety-topics/poisoning/data-details/>



Practical benefits for everyday living.®



When you choose  
**ALLSTATE BENEFITS,**  
we can help give you and your family financial peace of mind.  
**Are you in good hands?®**



We're the name you know and trust, protecting America's families for over 50 years. Our valuable coverage options help empower people to make the best decisions for their finances and their futures.

Once you've elected coverage, register with our convenient customer service portal, MyBenefits, for anytime access to your coverage details and important documents. MyBenefits also allows you to file claims quickly and easily – and get benefits deposited directly into your bank account (authorization required).





Allstate Benefits is the marketing name used by American Heritage Life Insurance Company, a subsidiary of The Allstate Corporation. ©2025 Allstate Insurance Company.  
[www.allstate.com](http://www.allstate.com) or [allstatebenefits.com](http://allstatebenefits.com)

## 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 and your children. Spouse and child coverage ends when your coverage ends, when you request to terminate dependent coverage, or upon your death. Spouse coverage also ends upon divorce. Child coverage also ends when the child reaches age 26, unless the child is disabled and dependent on you for support.

### When Coverage Ends

Coverage under the policy and riders ends on the earliest of the following: the date the group policy is terminated; the group policy grace period ends after non-payment of required premiums; you are no longer actively working for the group policyholder; you or your class are no longer eligible; you submit a written request to terminate the certificate; your death; the date 45 days after we have provided notice of termination due to our discovery of a false claim being filed.

### Portability/Continuing Coverage

You may be eligible to continue coverage under the Portability Provision or the Continuation of Coverage for Layoff or Leave of Absence Provision when you are no longer in an eligible class, your class is no longer eligible, or you are no longer actively working. Refer to your Certificate of Insurance for details.

## EXCLUSIONS AND LIMITATIONS

### Exclusions and Limitations for the Policy and the following riders: Dislocation/Fracture Rider; Organized Sports Activity Rider; Fixed Health Screening Services Rider

Benefits are not paid for: act of war or participation in a riot, insurrection, rebellion or terrorist act; suicide or attempt at suicide, while sane or insane; intentionally self-inflicted injury or action; any bacterial infections (except 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 course, racetrack or speedway; hernia, including complications; operating a vehicle with a blood alcohol level that equals or exceeds the legal limit in the jurisdiction where the accident occurred; voluntary ingestion, injection, inhalation, or absorption of any poison, gas or fumes; voluntarily taking drugs or sedatives, unless taken as prescribed by a physician; an error, mishap, or malpractice during a medical, diagnostic or surgical treatment or procedure; elective, cosmetic, or plastic surgery, or using drugs or supplies to alter, improve or enhance the shape or appearance of the body (including for psychological or emotional reasons); serving as an active member of the Military, Naval, or Air Forces of any country or combination of countries.

Benefits will not be paid for loss that occurs prior to the effective date of coverage or outside the United States, its territories, or Canada.

This brochure is for use in enrollments situated in FL.

This material is valid as long as information remains current, but in no event later than August 1, 2028.

Group Accident benefits are provided under policy form GA17, or state variations thereof. Accident Rider benefits are provided under the following rider forms, or state variations thereof: Dislocation and Fracture Rider GAIC7DF; Organized Sports Activity Rider GAIC7OS; Fixed Health Screening Services Rider GAIC7FHSR.

**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.**