What can living with a critical illness mean to you?

Daily out-of-pocket expenses for fighting the disease while still paying your bills!

Benefit coverage for Spectrum

On average, every 40 seconds, someone in the United States has a stroke.¹

¹ Heart Disease and Stroke Statistics—2012 Update, American Heart Association.
group voluntary critical illness

Allstate Benefits (AB) group voluntary critical illness coverage provides a lump-sum cash benefit to help you cover the out-of-pocket expenses associated with a critical illness.

No one knows what lies ahead on the road through life. Will you be diagnosed with Alzheimer’s or Parkinson’s? Will you suffer a stroke, heart attack or the complete loss of hearing? The signs pointing to a critical illness are not always clear and may not be preventable, but our coverage can help offer financial protection in the event you are diagnosed.

Critical illness coverage can help offer peace of mind when a critical illness diagnosis occurs. Below is an example of how benefits might be paid. *

Our critical illness insurance policy would provide the following:
- Wellness Benefit: $100
- Heart Attack Benefit: $10,000
- Second Event Benefit: $10,000
- By-Pass Surgery Benefit: $2,500
- Total cash benefits: $22,600

John chooses coverage from the plan benefits his employer is offering.

John’s prognosis is good and he is expected to make a full recovery.

John's annual wellness exam he has a heart attack.

Three months later - John suffers another heart attack.

Four months later he has Coronary Artery By-Pass Surgery.

INITIAL CRITICAL ILLNESS BENEFITS

Heart Attack (100%) - Pays when you have a heart attack.

Stroke (100%) - Pays when you have a stroke.

Coronary Artery By-Pass Surgery (25%) - Pays when you have coronary artery by-pass surgery.

Major Organ Transplant (100%) - Pays when you have a heart, lung, liver, pancreas or kidney transplant (must be a human donor).

End Stage Renal Failure (100%) - Pays when you have peritoneal dialysis or hemodialysis.

Waiver of Premium (Employee only) - Pays your premium if you are disabled for 90 days in a row, due to a critical illness, as long as the disability lasts, up to 2 years.

Benefit amounts are shown on pages 2a and/or 2b. See page 4 for conditions and requirements.

Meeting your needs

Our coverage can help meet the needs of you and your family by offering financial support when it is needed most:

- Benefits and coverage amounts have been selected by your employer to make it easy to choose a plan that meets your needs **
- Covered dependents receive 50% of your basic-benefit amount
- Benefits paid directly to you
- Coverage supplements any existing medical benefits
- Premiums are affordable
- Portable

Your benefit coverage

A percentage of the basic benefit amount is payable for each covered person in the Initial Critical Illness benefits, Cancer Critical Illness benefits, Second Event Initial Critical Illness Benefit, Supplemental Critical Illness benefits, and an Additional benefit. Benefit amounts are shown on pages 2a and/or 2b. See page 4 for conditions and requirements.

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* The example shown may vary from the plan your employer is offering. Your individual experience may also vary.

** Amounts over the guaranteed issue amount or enrolling after your initial enrollment period requires evidence of insurability.
Stroke is the leading cause of serious, long-term disability in the United States.²

² Heart Disease and Stroke Statistics - 2012 update, American Heart Association.

**CANCER CRITICAL ILLNESS BENEFITS**

**Invasive Cancer (100%)** - Pays when you are diagnosed with invasive cancer (includes Leukemia and Lymphoma).

**Carcinoma in Situ (25%)** - Pays when you are diagnosed with cancer in situ.

**CRITICAL ILLNESS ADDITIONAL BENEFIT**

**Second Event Initial Critical Illness Benefit** - Pays when you are diagnosed for the second time with a previously paid Initial Critical Illness Benefit.

**SUPPLEMENTAL CRITICAL ILLNESS BENEFITS I**

**Advanced Alzheimer’s Disease (25%)** - Pays when you are diagnosed with Advanced Alzheimer’s.

**Advanced Parkinson’s Disease (25%)** - Pays when you are diagnosed with Advanced Parkinson’s.

**Benign Brain Tumor (100%)** - Pays when you are diagnosed with a brain tumor.

**Coma (100%)** - Pays when you are unconscious more than 14 consecutive days, due to sickness or brain injury (a medically induced coma is not covered).

**Complete Blindness (100%)** - Pays when you are diagnosed with irreversible loss of sight in both eyes.

**Complete Loss of Hearing (100%)** - Pays when you are diagnosed with total and irreversible loss of hearing in both ears.

**Paralysis (100%)** - Pays when you suffer a complete and permanent loss of use of two or more limbs.

**Occupational HIV (100%)** - Pays when you are accidentally exposed and infected with HIV, during the normal course of duties of the occupation in which you are regularly engaged and for which remuneration is earned.

**ADDITIONAL BENEFIT**

**Wellness Benefit** - Pays annually when you receive one of the following:

- Biopsy for skin cancer
- Blood test for triglycerides
- Bone Marrow Testing
- CA15-3, CA125 and CEA (blood tests for breast, ovarian and colon cancer)
- Chest X-ray
- Colonoscopy
- Doppler screenings for carotids and peripheral vascular disease
- Echocardiogram
- EKG (Electrocardiogram)
- Flexible sigmoidoscopy
- Hemocult stool analysis
- HPV Vaccination (Human Papillomavirus)
- Lipid panel (total cholesterol count)
- Mammography, including Breast Ultrasound
- Pap Smear, including ThinPrep Pap Test
- PSA (prostate specific antigen – blood test for prostate cancer)
- Serum Protein Electrophoresis (test for myeloma)
- Stress test on bike or treadmill
- Thermography
- Ultrasound screening for abdominal aortic aneurysms
CERTIFICATE SPECIFICATIONS

Your Eligibility - Your employer decides who is eligible for your group (such as length of service and hours worked each week). Issue ages are 18 and over.

Dependent Eligibility/Termination - (a) Family members eligible for coverage are your spouse (or domestic 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. (c) Spouse coverage ends upon valid decree of divorce or your death. (d) Domestic partner coverage ends when the domestic partnership ends or your death.

Portability Privilege - Coverage may be continued under the Portability Provision when coverage under the policy ends.

Termination of Coverage - Your coverage under the policy ends when: the policy is canceled; you stop paying your premium; last day of active employment; you are no longer eligible; a false claim is filed; or when all critical illness benefits have been paid.

BENEFIT CONDITIONS

Benefits are not payable for any critical illness diagnosed prior to the effective date. Benefits are also subject to the Pre-Existing Condition Limitation, as well as all other limitations and exclusions. All critical illnesses must meet the definitions and dates of diagnoses stated in the policy and be diagnosed by a physician while coverage is in effect. The date of diagnosis for each illness must be separated by 90 days. Emergency situations while you are outside the U.S. will be considered when you return to the U.S.

Pre-Existing Condition Limitation - (a) We do not pay benefits for a critical illness that is caused by or is contributed to by or results from, a pre-existing condition when the date of diagnosis is within 12 months after the effective date of coverage. (b) A pre-existing condition is a condition, whether diagnosed or not, for which symptoms existed within the 12-month period prior to the effective date; or medical advice or treatment was recommended or received from a medical professional within 12 months prior to the effective date.

Other Limitations and Exclusions - We do not pay benefits for: (a) any act of war, declared or undeclared, participation in a riot, insurrection or rebellion; (b) intentionally self-inflicted injury or action; (c) illegal activities or participation in an illegal occupation; (d) suicide while sane, or self-destruction while insane, or any attempt at either; (e) substance abuse, including alcohol, alcoholism, drug addiction, or dependence upon any controlled substance.

Stroke Exclusions - Does not include: Transient ischemic attacks (TIAs), head injury, chronic cerebrovascular insufficiency and reversible ischemic neurological deficits.

Coronary Artery By-Pass Surgery Exclusions - Does not include: abdominal aortic by-pass, balloon angioplasty; laser embolectomy; atherectomy; stent placement; or other non-surgical procedures.

Invasive Cancer Exclusions - Does not include: carcinoma in situ; tumors related to HIV; non-invasive or metastasized skin cancer; or early prostate cancer.

Carcinoma In Situ Exclusions - Does not include: other skin malignancies; or pre-malignant lesions (such as intraepithelial neoplasia); or benign tumors or polyps.

Second Event Initial Critical Illness Benefit Conditions - There must be at least 12 months between each diagnosis. A covered person can receive a Second Event Critical Illness Benefit only once for each initial critical illness.

Advanced Alzheimer’s Disease Conditions - Must have impaired memory and judgment, and be unable to perform 3 or more daily activities.*

Advanced Parkinson’s Disease Conditions - Must have 2 or more physical signs and be unable to perform 3 or more daily activities.*

*Daily activities are: bathing, dressing, toileting, continence, transferring and eating.

Benign Tumor Exclusions - Does not include: tumors of the skull, pituitary adenomas, or germanomas.

Occupational HIV - Exposure must be accidental and during the normal course of duties of the covered person. The covered person must not have previously tested HIV positive.
Don’t Wait for A Sign

There are different signs that doctors look for when diagnosing critical illnesses. Being diagnosed with a critical illness can be one of the most frightening experiences anyone has to face, especially if you are unprepared. Don’t wait for a sign to start thinking about the future or your finances. You can rely on our Critical Illness Insurance to help give you peace of mind, so you can cope with the challenges of treatment.

Budget friendly
Sometimes, undergoing expensive treatments for a critical illness is difficult if money is tight. That’s where we can help. Our supplemental benefit coverage pays in addition to your major medical insurance to help provide additional dollars that may be used to cover your out-of-pocket expenses.

According to the first National Critical Illness Risk Assessment Study published by the American Association for Critical Illness Insurance in 2010, 17 percent of non-smoking men and 36 percent of male smokers who reach the age of 55 without having a critical illness will be diagnosed with one prior to turning age 65. For women who reach age 55, some 12 percent of non-smokers and 23 percent of smokers will face a critical illness before reaching age 65.
This material is valid as long as information remains current, but in no event later than November 15, 2015. Group Critical Illness benefits provided by policy form GVCIP2, or state variations thereof.

The policy is Limited Benefit Critical Illness Insurance. The policy does not provide benefits for any other sickness or condition. The policy is not a Medicare Supplement Policy. If eligible for Medicare, review Medicare Supplement Buyer’s Guide available from Allstate Benefits.

This brochure highlights some features of the policy but is not the insurance contract. If you have questions about issued coverage, a certificate, or filing a claim, please call Allstate Benefits at 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 (Home Office, Jacksonville, FL). Details of the insurance, including exclusions, restrictions and other provisions are included in the certificates issued.

This brochure is for use in the Spectrum enrollment which is sitused in AZ.
Benefit coverage for

Spectrum

group voluntary critical illness

benefit amounts

<table>
<thead>
<tr>
<th>INITIAL CRITICAL ILLNESS BENEFITS</th>
<th>LOW</th>
<th>HIGH</th>
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<tbody>
<tr>
<td>Heart Attack (100%)</td>
<td>$10,000</td>
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<tr>
<td>Stroke (100%)</td>
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<tr>
<td>Coronary Artery By-Pass Surgery (25%)</td>
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<tr>
<td>Major Organ Transplant (100%)</td>
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<tr>
<td>End Stage Renal Failure (100%)</td>
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Waiver of Premium (Employee only)

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<th>CRITICAL ILLNESS ADDITIONAL BENEFIT</th>
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1 Pays same amount as Initial Critical Illness Benefit

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<th>SUPPLEMENTAL CRITICAL ILLNESS BENEFITS</th>
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<td>Benign Brain Tumor (100%)</td>
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<td>Corna (100%)</td>
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<td>Complete Blindness (100%)</td>
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<th>ADDITIONAL BENEFIT</th>
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<tr>
<td>Wellness Benefit (per year)</td>
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Premiums on reverse.

GROUP CRITICAL ILLNESS INSURANCE
Best in Benefits SeriesSM

ABJ24213X-Insert-Spec
## semi-monthly premiums

### LOW PLAN - $10,000 BASIC BENEFIT AMOUNT

**non-tobacco**

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<tr>
<th>AGES</th>
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**tobacco**

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### HIGH PLAN - $20,000 BASIC BENEFIT AMOUNT

**non-tobacco**

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EE = Employee; EE + SP = Employee + Spouse; EE + CH = Employee + Child(ren); F = Family. Issue Ages: 18 and over if Actively at Work.