



Allstate BENEFITS

Protection for hospital stays when a sickness or injury occurs

Supplemental Health Insurance

Life is unpredictable. Without any warning, an illness or injury can lead to a hospital confinement and medical procedures and/or visits, which may mean costly out-of-pocket expenses.

Expenses associated with a hospital stay can be financially difficult if money is tight and you are not prepared. But having the right coverage in place before you experience a sickness or injury can help eliminate your financial concerns and provide support at a time when it is needed most. We offer a solution to help you protect your income and empower you to seek treatment.

Here's How It Works

Our Supplemental Health Options insurance pays a cash benefit for hospital confinements. This benefit is payable directly to you and can help keep you from withdrawing money from your personal bank account or your Health Savings Account (HSA) for hospital-related expenses. Protecting your finances if faced with an unexpected illness is extremely important, as is seeking the necessary treatment when you need it. This is especially true since statistics show the average hospital stay is approximately 5 days³ and just over \$5,000 per day², which can add up quickly. These facts make it increasingly important to not only protect your finances if faced with an unexpected illness, but also to empower yourself to seek the necessary treatment.

Meeting Your Needs

- Includes benefits for hospitalization, surgery, outpatient, nursing, transportation, plus additional benefits can be added to enhance your coverage
- Coverage available for spouse and child(ren)
- Benefits paid directly to you unless assigned elsewhere, and paid regardless of any other coverage you may have

With Allstate Benefits, you can feel assured that you have the protection you need if faced with a hospitalization. **Are you in Good Hands? You can be.**

THIS IS NOT A POLICY OF WORKERS' COMPENSATION INSURANCE. THE EMPLOYER DOES NOT BECOME A SUBSCRIBER TO THE WORKERS' COMPENSATION SYSTEM BY PURCHASING THIS POLICY, AND IF THE EMPLOYER IS A NON-SUBSCRIBER, THE EMPLOYER LOSES THOSE BENEFITS WHICH WOULD OTHERWISE ACCRUE UNDER THE WORKERS' COMPENSATION LAWS. THE EMPLOYER MUST COMPLY WITH THE WORKERS' COMPENSATION LAW AS IT PERTAINS TO NON-SUBSCRIBERS AND THE REQUIRED NOTIFICATIONS THAT MUST BE FILED AND POSTED.

¹<http://www.uofmhealth.org/news/archive/201606/heading-hospital-even-insurance-it-may-cost-you-1000-or-more>

²<https://www.healthcare.gov/why-coverage-is-important/protection-from-high-medical-costs/>

³<http://www.cdc.gov/nchs/data/abus/2016/082.pdf>

DID YOU KNOW ?



In recent years, the cost of a hospital stay has increased by more than 37%.¹

\$7,500

cost to fix a broken leg

Medical costs in the United States are among the highest in the world.

In 2016, the average cost to fix a broken leg in the United States was \$7,500.²

\$30,000

cost per 3-day stay

The average cost of a 3-day hospital stay is around \$30,000.³

Offered to the employees of:
Donna ISD

Meet Tommy

Tommy's parents are like most parents; they worry about the health and well-being of their family. They know that as Tommy grows, he will become more active and may be hospitalized due to a sickness or injury. Most importantly, they worry about how they will pay for it.

Here is what weighs heavily on their minds:

- Major medical only pays a portion of the expenses associated with hospital stays
- They have copays they are responsible for until they meet their deductible
- If they miss work due to Tommy having a hospital stay, they must cover their bills, rent/mortgage, groceries and education expenses
- If the right treatment is not available locally, they will have to travel to get the treatment he needs



Tommy's story of sickness and a hospital stay turned into a happy ending, because his parents had Supplemental Health Insurance to help with expenses.



CHOOSE

Tommy's mother chooses benefits to help protect herself and her family members, should they suffer an illness or injury that requires a hospital stay.



USE

Tommy was sick and vomiting, had a loss of appetite and a fever, and complained about a pain in his side. He was also unable to get out of bed.

Here's Tommy's treatment path:

- Taken by ambulance to the emergency room
- Examined by a physician
- Multiple tests were performed
- Admitted for a two-day hospital stay
- Underwent emergency appendectomy surgery
- Visited by his doctor and released
- Recovered from surgery in 5 weeks
- Seen by the doctor during a follow-up visit

Tommy's mother went online after Tommy's hospital stay to file a claim. The cash benefits were direct deposited into her bank account.

Tommy is fully recovered and back to normal.



CLAIM

Tommy's hospital stay claim paid cash benefits for the following:

Ambulance
Initial Hospitalization
Daily Hospital Confinement
Surgery
Anesthesia
Inpatient Physician's Treatment
Outpatient Physician's Treatment

For a listing of benefits and benefit amounts, see the rate insert.

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 and children.

Benefits

HOSPITALIZATION BENEFITS

Initial Hospitalization Confinement - once per continuous confinement per covered person, per coverage year. Not paid for normal pregnancy or complications of pregnancy, or for a newborn child's initial confinement after birth. A newborn child's initial hospitalization includes any transfers to another hospital before the child is discharged home

Daily Hospital Confinement - up to 180 days per continuous confinement in the United States except in the case of an emergency. Not paid for a newborn child's routine nursing or well-baby care during the initial hospital confinement

Hospital Intensive Care - up to 60 days per continuous confinement. Pays in addition to the Daily Hospital Confinement benefit

SURGERY BENEFITS

Surgery - for surgery performed in a hospital or ambulatory surgical center. Amount paid depends on type of surgery. Two or more surgeries performed at the same time through one incision are considered one surgery. Payable once per day per covered person

Anesthesia - 25% of the Surgery benefit

Inpatient Physician's Treatment - for physician services (other than a surgeon) when hospital confined. Payable once per day per covered person and for the number of days the Daily Hospital Confinement Benefit is payable

OUTPATIENT BENEFITS

Outpatient Emergency Accident - medical or surgical treatment received in an emergency treatment center. Payable once per day up to 2 days per person per coverage year

Outpatient Physician's Treatment - physician treatment received outside a hospital for any cause. Payable once per day per covered person. Maximum of: 5 days per covered person, per coverage year; 10 days per coverage year if Employee + Spouse or Employee + Child(ren) coverage; 15 days per coverage year if Family coverage

At Home Nursing - pays a benefit for nursing care authorized by the attending physician, within 60 days after hospital confinement. Pays once per day for up to 30 days

Ambulance - transportation by ground or air to a hospital or emergency treatment center by a licensed or hospital-owned ambulance. Payable up to a maximum number of 3 days per person per coverage year

Non-Local Transportation - first day of confinement for treatment in a non-local hospital 100 miles or more away from home. Payable once for each confinement, up to 3 days per person per coverage year

CERTIFICATE SPECIFICATIONS

Eligibility

Coverage may include you, your spouse and children.

Termination of Coverage

Coverage under the policy ends on the date the policy is canceled; the last day premium payments were made; the last day of active employment, except as provided under the Temporary Layoff, Leave of Absence or Family Medical Leave of Absence provision; or the date you or your class is no longer eligible.

Spouse coverage ends upon valid decree of divorce or your death. Coverage for children ends when the child reaches age 26, unless he or she continues to meet the requirements of an eligible dependent.

LIMITATIONS AND EXCLUSIONS

Pre-Existing Condition

We do not pay benefits due to a pre-existing condition if the loss occurs during the first 12 months of coverage. A pre-existing condition is a disease or physical condition 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 member of the medical profession within a 12-month period prior to the effective date. A pre-existing condition can exist even though a diagnosis has not yet been made.

Limitations and Exclusions

Benefits are not paid for: injury or sickness occurring before the effective date; any act of war during military service or participation in a riot, insurrection or rebellion; suicide or attempted suicide; loss sustained or contracted in consequence of the covered person being intoxicated or under the influence of narcotics unless taken on the advice of a physician; participation in aeronautics unless a fare-paying passenger on a licensed common-carrier aircraft; committing or attempting a felony; cosmetic dental or plastic surgery, except when required to correct a disorder; alcoholism, drug addiction, or dependence upon any controlled substance; mental or nervous disorders; self-inflicted injuries; newborn child's nursing or routine well-baby care during initial hospital confinement; childbirth within the first 10 months of the effective date (complications of pregnancy are covered the same as sickness); hospitalization beginning before the effective date; reversal of tubal ligation or vasectomy; artificial insemination, in vitro fertilization, and test tube fertilization (including testing, medications and doctor services), unless required by law; routine eye exams or fittings; hearing aids or fittings; or dental exams and care unless from an accident.

Hospital Intensive Care Benefit Exclusions

We do not pay any benefits under the hospital intensive-care unit benefit for confinement in any care unit that does not qualify as a hospital intensive-care unit. Progressive care, sub-acute intensive care, intermediate care or step-down units, private rooms with monitoring or any other lesser care treatment units do not qualify.

This brochure is for use in enrollments situated in TX and is incomplete without the accompanying rate insert.

This material is valid as long as information remains current, but in no event later than September 1, 2022.

Group Supplemental Health benefits are provided under policy form GVSP1, or state variations thereof.

The coverage provided is limited benefit supplemental health insurance. The policy is not a Medicare Supplement Policy. If eligible for Medicare, review Medicare Supplement Buyer's Guide available from Allstate Benefits. There may be instances when a law requires that benefits under this coverage be paid to a third party rather than to you. If you or a dependent have coverage under Medicare, Medicaid, or a state variation, please refer to your health insurance documents to confirm whether assignments or liens may apply.

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.



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www.allstate.com or
allstatebenefits.com

Group Supplemental Health (GVSP1) from Allstate Benefits

Offered to the employees of:
Donna ISD

BENEFIT AMOUNTS

HOSPITALIZATION BENEFITS*		PLAN 1	PLAN 2
Initial Hospital Confinement (daily, once per year)		\$250	\$500
Daily Hospital Confinement (daily)		\$100	\$200
Hospital Intensive Care (daily)		\$100	\$200
SURGERY BENEFITS*		PLAN 1	PLAN 2
Surgery (according to schedule)		\$20 - \$500	\$20 - \$500
Anesthesia (% of Surgery)		25%	25%
Inpatient Physician's Treatment (daily)		\$25	\$25
OUTPATIENT BENEFITS*		PLAN 1	PLAN 2
Outpatient Emergency Accident (daily)		\$250	\$250
Outpatient Physician's Treatment (daily)		\$25	\$25
At Home Nursing (daily)		\$50	\$50
Ambulance (daily)	Ground	\$150	\$150
	Air	\$300	\$300
Non-Local Transportation (daily)		\$150	\$150

*Policy benefit dollar amounts increase by 5% after the first coverage year and each coverage year thereafter, for the next 5 years. The benefit dollar amounts in coverage years 6 and later are 125% of the initial benefit amounts stated here.

PLAN 1 MONTHLY PREMIUMS

AGES	EE	EE + SP	EE + CH	F
18-35	\$21.33	\$40.86	\$35.87	\$54.28
36-49	\$24.84	\$47.70	\$41.17	\$62.86
50-59	\$30.42	\$59.85	\$47.23	\$75.38
60-64	\$39.78	\$79.56	\$57.06	\$95.33
65+	\$52.38	\$104.76	\$71.28	\$121.88

PLAN 2 MONTHLY PREMIUMS

AGES	EE	EE + SP	EE + CH	F
18-35	\$31.95	\$60.30	\$51.62	\$78.85
36-49	\$37.44	\$70.92	\$59.62	\$91.93
50-59	\$46.62	\$91.26	\$68.29	\$111.65
60-64	\$62.28	\$124.56	\$82.44	\$143.21
65+	\$83.43	\$166.86	\$103.68	\$185.33

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

Issue Ages: 18 and over if Actively at Work



For use in enrollments situated in: TX

This rate insert is part of form ABJ35838X and is not to be used on its own.

This material is valid as long as information remains current, but in no event later than September 1, 2022. Allstate Benefits is the marketing name used by American Heritage Life Insurance Company (Home Office, Jacksonville, FL), a subsidiary of The Allstate Corporation. ©2019 Allstate Insurance Company. www.allstate.com or allstatebenefits.com.