



Allstate BENEFITS

Protection when faced with
a critical illness diagnosis
and you need treatment

Comprehensive Critical Illness Insurance

No one is ever really prepared for a life-altering critical illness diagnosis. The whirlwind of appointments, tests, treatments and medications can add to your stress levels.

The treatment to recovery is vital, but it can also be expensive. Your medical coverage may only cover some of the costs associated with treatment. You may still be responsible for out-of-pocket expenses. If treatment keeps you out of work, the financial worries can grow quickly and stress levels may rise.

Comprehensive Critical Illness coverage helps provide financial support if you are diagnosed with a covered critical illness. With the expense of treatment often high, seeking the treatment you need could seem like a financial burden. When a diagnosis occurs, you need to be focused on getting better and taking control of your health, not stressing over financial worries.

Here's How It Works

You choose benefits to protect yourself and any family members if diagnosed with a critical illness. Then, if diagnosed with a covered critical illness, you will receive a cash benefit based on the percentage payable for the condition.

Meeting Your Needs

- Guaranteed Issue, meaning no medical questions to answer at initial enrolment*
- Coverage available for dependents
- Covered dependents, if included, receive 50% of your Basic-Benefit Amount
- Benefits paid regardless of any other medical or disability plan coverage
- Premiums are affordable and conveniently payroll deducted
- Coverage may be continued; refer to your certificate for details
- 25% of your Basic-Benefit Amount is paid for Carcinoma in Situ

With Allstate Benefits, you can make treatment decisions without putting your finances at risk. **Are you in Good Hands? You can be.**

*Enrolling after your initial enrolment period requires evidence of insurability

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DID YOU KNOW ?



Heart disease and stroke are
the second leading cause
of death in Canada**

524

On average, 524 Canadians
will be diagnosed with
cancer every day***

**2015 Report: Research holds
key to heart disease,
www.heartandstroke.ca

***<https://tinyurl.com/lkax89z>

Meet Ashley

Ashley is like any single parent who has been diagnosed with a critical illness. She's worried about her future, her children and how they will cope with her treatments. Most importantly, she worries about how she will pay for it all.

Here is what weighs heavily on her mind:

- My group benefits plan doesn't cover all of the expenses related to my treatment
- My drug coverage still requires me to pay a portion of my drug costs
- If I am not working due to my treatments, I must cover my bills, rent/mortgage, groceries and my children's education
- If the right treatment is not available locally, I will have to travel to get the treatment I need



Ashley's story of diagnosis and treatment turned into a happy ending, because she had Comprehensive Critical Illness Insurance to help with expenses.



CHOOSE

Ashley chooses Comprehensive Critical Illness benefits to help protect her and her children, if they are diagnosed with a critical illness.



USE

During Ashley's annual wellness exam, her doctor noticed an irregular heartbeat. She underwent an electrocardiogram (EKG) test and stress test, which confirmed she had a blockage in one of her coronary arteries.

Here's Ashley's treatment path:

- Ashley has her annual wellness exam
- Her doctor notices an abnormality in her heartbeat; tests are performed and she is diagnosed with coronary artery disease
- After visits with doctors, surgeons and an anesthesiologist, Ashley undergoes surgery
- Surgery is performed to remove the blockage with a bypass graft. She is visited by her doctor during a 4-day hospital stay and released
- Ashley followed her doctor required treatment during a 2-month recovery period, and had regular doctor office visits

Ashley is doing well and is on the road to recovery.



CLAIM

Ashley's Comprehensive Critical Illness claim paid her cash benefits for the following:

Coronary Artery Bypass Surgery

The cash benefits were direct deposited into her bank account.

For a listing of benefits and benefit amounts, see your company's rate insert.

Using your cash benefits

Cash benefits provide you with options, because you decide how to use them.



Finances

Can help protect savings and retirement plans 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.

Benefits (subject to maximums as listed on the attached rate insert)

Benefit paid upon diagnosis of one of the following conditions

COMPREHENSIVE CRITICAL ILLNESS BENEFITS*

Heart Attack - the death of a portion of the heart muscle due to inadequate blood supply. Not payable for incidental finding of ECG changes suggesting a prior myocardial infarction (in absence of a corroborating event) or elevation of cardiac markers to coronary angioplasty unless diagnostic changes of new Q wave infarction on the ECG

Stroke - acute cerebrovascular event caused by intracranial thrombosis or haemorrhage, or embolism from an extracranial source. Not payable for transient ischemic attacks (TIAs), intra-cerebral vascular events due to trauma, or lacunar infarct which do not meet the definition of stroke as described above

Major Organ Failure (Transplant or Waiting List) - irreversible failure of heart, lung, liver, kidney or bone marrow, with either transplantation deemed necessary, or the covered person enrolling on a major transplant list in Canada or the U.S.

Kidney Failure - irreversible failure of both kidneys resulting in peritoneal dialysis, haemodialysis or renal transplantation being initiated. Does not include failure of both kidneys to function caused by traumatic event, including surgical traumas

Carcinoma In Situ - non-invasive cancer, including melanoma that has not invaded the dermis. Other skin malignancies are not covered

Invasive Cancer - malignant tumour with uncontrolled growth and spread of malignant cells into other tissue. Includes invasive malignant melanoma in the dermis or deeper or skin malignancies that have become metastatic. Other skin cancers are not covered

Alzheimer's Disease - must be diagnosed with a progressive degenerative brain disease and exhibit loss of intellectual capacity involving impaired memory and judgment, resulting in a reduction of mental and social functions, which requires eight hours of daily supervision

Parkinson's Disease - must exhibit two or more of the following: muscle rigidity, tremor, or bradykinesia (slowness in physical and mental responses); and be certified unable to perform at least two daily activities¹ without adult assistance

Coronary Artery Bypass Surgery - to correct narrowing or blockage of one or more coronary arteries with bypass graft. Balloon angioplasty, laser embolectomy, atherectomy, stent placement, and other non-surgical procedures are not covered

Multiple Sclerosis - a diagnosis confirmed by MRI to show multiple lesions of demyelination associated with one of the following: two or more separate clinical attacks; well-defined neurological abnormalities lasting more than six months; or a single attack with lesions of demyelination having developed in intervals of one per month

Paralysis - total and permanent loss of muscle function of 2 or more limbs

Deafness - total and irreversible loss of hearing in both ears

Blindness - total and irreversible loss of sight in both eyes

Aortic Surgery - surgical removal and replacement of the diseased thoracic or abdominal aorta with a graft. Does not include the branches of the aorta

Benign Brain Tumour - a non-malignant tumour located in the cranial vault and limited to the brain, meninges, cranial nerves or pituitary gland that requires surgery or radiation treatment, or causes irreversible neurological deficits. Pituitary adenomas less than 10mm, tumours of the skull and germinomas are not covered

Coma - unconsciousness with no reaction to external stimuli or responses to internal needs for a continuous period of at least 96 hours. Glasgow coma score must be four or less. Medically-induced coma, a coma which results directly from alcohol or drug use, and a diagnosis of brain death are not covered

Severe Burns - diagnosis of third degree burns over at least 20% of the body surface

Loss of Speech - total and irreversible loss of the ability to speak as the result of an accidental injury or disease

Waiver of Premium (Employee only) - premiums waived if disabled for 90 consecutive days due to a critical illness

*Benefits paid once per covered person. When all benefits have been used, the coverage terminates. ¹Daily activities include: bathing, dressing, toileting, bladder and bowel continence, transferring and feeding.

CERTIFICATE SPECIFICATIONS

Eligibility

Your employer decides who is eligible for your group (such as length of service and hours worked each week). Issue ages are 15-99.

Dependent Eligibility/Termination

Family members eligible for coverage are your spouse or domestic partner and children. Coverage for children ends when the child reaches age 21, 25 if in full-time attendance at an institution of higher learning. Spouse coverage ends upon valid decree of divorce or your death. Domestic partner coverage ends when the domestic partnership ends or your death.

When Coverage Ends

Coverage under the policy ends on the earliest of: the date the certificate is canceled; the date the policy is canceled; you stop paying your premium; the last day of active employment or membership; you or your class are no longer eligible; when all benefits have been paid under the policy and riders, if applicable; upon discovery of claim fraud or material misrepresentation.

Portability Privilege

You may continue coverage under the Portability Privilege provision when coverage under the policy ends. Refer to your Certificate of Insurance for details.

BENEFIT CONDITIONS

Conditions and Limits

A diagnosis occurring before your coverage begins is not payable; however, a diagnosis of any covered critical illness or specified disease after your effective date will be payable. Each critical illness is only payable provided that we have not previously paid a benefit for that illness. 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 outside of Canada will be considered by a Canadian physician on foreign soil or when you return to Canada.

If the first diagnosis of cancer occurs before the effective date of coverage, benefits are paid for a subsequent diagnosis of cancer after the effective date, subject to the terms and conditions in the certificate.

Exclusions and Limitations

Benefits are not paid for: war, participation in a riot, insurrection or rebellion; intentionally self-inflicted injuries; injury incurred while engaging in an illegal occupation or committing or attempting a felony; attempted suicide while sane or insane; injuries while under the influence of alcohol, narcotics, or controlled substances or drugs, unless doctor prescribed; participation in aeronautics unless a fare-paying passenger on a licensed common-carrier aircraft; alcohol abuse or alcoholism, drug addiction or controlled substance dependency.

Contact Information:

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This brochure is for use in enrolments situated in Canada, and is incomplete without the accompanying rate insert.

This material is valid as long as information remains current, but in no event later than February 5, 2020.

Group Comprehensive Critical Illness benefits are provided by policy form GCIP.

Coverage is provided by Limited Benefit Supplemental Critical Illness Insurance. The policy does not provide benefits for any other sickness or condition.

This information highlights some features of the policy but is not the insurance contract. For complete details, contact your Allstate Benefits Representative. This is a brief overview of the benefits available under the Group Comprehensive Critical Illness Policy underwritten by Allstate Insurance Company of Canada (Home Office, Markham, Ontario). Details of the insurance, including exclusions, restrictions, and other provisions are included in the certificates issued.

Critical Illness Insurance (GCIP)

from Allstate Benefits

BENEFIT AMOUNTS

Percentages below are based on the **Comprehensive PLAN 1** benefit amount of \$10,000, and **Comprehensive PLAN 2** benefit amount of \$20,000 chosen by your employer.

†Covered spouses receive 50% of your basic-benefit amount. Covered children receive 50% of your basic-benefit amount.

CRITICAL ILLNESS BENEFITS†	PLAN 1	PLAN 2
Heart Attack (100%)	\$10,000	\$20,000
Stroke (100%)	\$10,000	\$20,000
Major Organ Failure (Transplant or Waiting List) (100%)	\$10,000	\$20,000
Kidney Failure (100%)	\$10,000	\$20,000
Carcinoma in Situ (25%)	\$2,500	\$5,000
Invasive Cancer (100%)	\$10,000	\$20,000
Alzheimer's Disease (100%)	\$10,000	\$20,000
Parkinson's Disease (100%)	\$10,000	\$20,000
Coronary Artery Bypass Surgery (100%)	\$10,000	\$20,000
Multiple Sclerosis (100%)	\$10,000	\$20,000
Paralysis (100%)	\$10,000	\$20,000
Deafness (100%)	\$10,000	\$20,000
Blindness (100%)	\$10,000	\$20,000
Aortic Surgery (100%)	\$10,000	\$20,000
Benign Brain Tumour (100%)	\$10,000	\$20,000
Coma (100%)	\$10,000	\$20,000
Severe Burns (100%)	\$10,000	\$20,000
Loss of Speech (100%)	\$10,000	\$20,000
Waiver of Premium (employee only)	Yes	Yes

This insert is for use in Canada.

This insert is part of the GCIP brochure for Employer Name and is not to be used on its own.

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MONTHLY PREMIUMS

Plan 1 - \$10,000 Basic Benefit Amount

Non-Tobacco

AGE	ME	FE	ME + F	FE + F
15-19	\$0.70	\$0.60	\$1.00	\$1.00
20-24	\$0.80	\$1.00	\$1.30	\$1.40
25-29	\$1.10	\$1.50	\$1.90	\$2.10
30-34	\$1.50	\$2.20	\$2.60	\$3.00
35-39	\$2.10	\$3.10	\$3.70	\$4.20
40-44	\$3.10	\$4.20	\$5.20	\$5.80
45-49	\$4.90	\$5.70	\$7.80	\$8.20
50-54	\$7.90	\$7.70	\$11.80	\$11.70
55-59	\$14.30	\$11.30	\$20.00	\$18.50
60-64	\$22.60	\$16.20	\$30.70	\$27.50
65-69	\$37.30	\$24.10	\$49.40	\$42.80
70-74	\$49.10	\$32.10	\$65.20	\$56.70
75-79	\$61.60	\$42.30	\$82.80	\$73.10
80-84	\$77.20	\$57.40	\$105.90	\$96.00
85-89	\$102.20	\$80.80	\$142.60	\$131.90
90-94	\$132.30	\$112.40	\$188.50	\$178.60
95-99	\$139.00	\$119.50	\$198.80	\$189.00

Tobacco

AGE	ME	FE	ME + F	FE + F
15-19	\$0.80	\$0.70	\$1.20	\$1.10
20-24	\$1.00	\$1.10	\$1.60	\$1.60
25-29	\$1.30	\$1.70	\$2.20	\$2.40
30-34	\$2.00	\$2.90	\$3.50	\$3.90
35-39	\$2.90	\$4.60	\$5.20	\$6.10
40-44	\$5.10	\$7.60	\$8.90	\$10.20
45-49	\$9.60	\$11.50	\$15.40	\$16.30
50-54	\$17.80	\$16.40	\$26.00	\$25.30
55-59	\$34.50	\$23.50	\$46.30	\$40.80
60-64	\$53.30	\$30.70	\$68.70	\$57.40
65-69	\$87.90	\$45.60	\$110.70	\$89.60
70-74	\$115.80	\$60.70	\$146.20	\$118.60
75-79	\$145.30	\$80.00	\$185.30	\$152.70
80-84	\$182.10	\$108.50	\$236.40	\$199.60
85-89	\$241.10	\$152.60	\$317.40	\$273.20
90-94	\$312.30	\$212.40	\$418.50	\$368.60
95-99	\$328.00	\$225.80	\$440.90	\$389.80

MONTHLY PREMIUMS

Plan 2 - \$20,000 Basic Benefit Amount

non-tobacco

AGE	ME	FE	ME + F	FE + F
15-19	\$1.40	\$1.20	\$2.00	\$2.00
20-24	\$1.60	\$2.00	\$2.60	\$2.80
25-29	\$2.20	\$3.00	\$3.80	\$4.20
30-34	\$3.00	\$4.40	\$5.20	\$6.00
35-39	\$4.20	\$6.20	\$7.40	\$8.40
40-44	\$6.20	\$8.40	\$10.40	\$11.60
45-49	\$9.80	\$11.40	\$15.60	\$16.40
50-54	\$15.80	\$15.40	\$23.60	\$23.40
55-59	\$28.60	\$22.60	\$40.00	\$37.00
60-64	\$45.20	\$32.40	\$61.40	\$55.00
65-69	\$74.60	\$48.20	\$98.80	\$85.60
70-74	\$98.20	\$64.20	\$130.40	\$113.40
75-79	\$123.20	\$84.60	\$165.60	\$146.20
80-84	\$154.40	\$114.80	\$211.80	\$192.00
85-89	\$204.40	\$161.60	\$285.20	\$263.80
90-94	\$264.60	\$224.80	\$377.00	\$357.20
95-99	\$278.00	\$239.00	\$397.60	\$378.00

tobacco

AGE	ME	FE	ME + F	FE + F
15-19	\$1.60	\$1.40	\$2.40	\$2.20
20-24	\$2.00	\$2.20	\$3.20	\$3.20
25-29	\$2.60	\$3.40	\$4.40	\$4.80
30-34	\$4.00	\$5.80	\$7.00	\$7.80
35-39	\$5.80	\$9.20	\$10.40	\$12.20
40-44	\$10.20	\$15.20	\$17.80	\$20.40
45-49	\$19.20	\$23.00	\$30.80	\$32.60
50-54	\$35.60	\$32.80	\$52.00	\$50.60
55-59	\$69.00	\$47.00	\$92.60	\$81.60
60-64	\$106.60	\$61.40	\$137.40	\$114.80
65-69	\$175.80	\$91.20	\$221.40	\$179.20
70-74	\$231.60	\$121.40	\$292.40	\$237.20
75-79	\$290.60	\$160.00	\$370.60	\$305.40
80-84	\$364.20	\$217.00	\$472.80	\$399.20
85-89	\$482.20	\$305.20	\$634.80	\$546.40
90-94	\$624.60	\$424.80	\$837.00	\$737.20
95-99	\$656.00	\$451.60	\$881.80	\$779.60

ME = Male Employee (includes children) • FE = Female Employee (includes children) • F = Family (includes spouse and children)

Attained Ages: 15 and over if Actively at Work

Premium amounts listed above do not include taxes, which may be applicable to your coverage.

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