

Critical Illness (GVCIP2)

Group Voluntary Critical Illness Insurance from Allstate Benefits

See attached Important Information About Coverage.

Offered to the employees of: **Omaha Track**

BENEFIT AMOUNTS

† Covered Dependents Receive 50% Of Your Benefit Amount

INITIAL CRITICAL ILLNESS BENEFITS†	PLAN 1	PLAN 2
Heart Attack (100%)	\$10,000	\$20,000
Stroke (100%)	\$10,000	\$20,000
Major Organ Transplant (100%)	\$10,000	\$20,000
End Stage Renal Failure (100%)	\$10,000	\$20,000
Coronary Artery Bypass Surgery (25%)	\$2,500	\$5,000
Waiver of Premium (employee only)	Yes	Yes
CANCER CRITICAL ILLNESS BENEFITS†	PLAN 1	PLAN 2
Invasive Cancer (100%)	\$10,000	\$20,000
Carcinoma in Situ (25%)	\$2,500	\$5,000
SECOND EVENT BENEFIT†	PLAN 1	PLAN 2
Second Event Initial Critical Illness Benefit (same amount as Initial Critical Illness)	Yes	Yes
SUPPLEMENTAL CRITICAL ILLNESS BENEFITS II†	PLAN 1	PLAN 2
Benign Brain Tumor (100%)	\$10,000	\$20,000
Coma (100%)	\$10,000	\$20,000
Complete Blindness (100%)	\$10,000	\$20,000
Complete Loss of Hearing (100%)	\$10,000	\$20,000
Paralysis (100%)	\$10,000	\$20,000
Advanced Alzheimer's Disease (25%)	\$2,500	\$5,000
Advanced Parkinson's Disease (25%)	\$2,500	\$5,000
ADDITIONAL BENEFIT	PLAN 1	PLAN 2
Wellness Benefit (per year)	\$50	\$50

PLAN 1

\$10,000 Basic Benefit Amount

WEEKLY PREMIUMS

non-tobacco

AGES	EE, EE+CH	EE+SP, F
18-29	\$1.18	\$1.90
30-39	\$2.06	\$3.24
40-49	\$3.73	\$5.73
50-59	\$6.53	\$9.95
60-63	\$10.54	\$15.95
64+	\$13.68	\$20.66

MONTHLY PREMIUMS

non-tobacco

AGES	EE, EE+CH	EE+SP, F
18-29	\$5.08	\$8.23
30-39	\$8.93	\$14.02
40-49	\$16.13	\$24.82
50-59	\$28.30	\$43.08
60-63	\$45.65	\$69.11
64+	\$59.26	\$89.51

tobacco

AGES	EE, EE+CH	EE+SP, F
18-29	\$1.71	\$2.71
30-39	\$3.18	\$4.91
40-49	\$6.54	\$9.95
50-59	\$10.98	\$16.61
60-63	\$17.99	\$27.14
64+	\$23.59	\$35.53

tobacco

AGES	EE, EE+CH	EE+SP, F
18-29	\$7.39	\$11.71
30-39	\$13.78	\$21.28
40-49	\$28.32	\$43.12
50-59	\$47.55	\$71.94
60-63	\$77.96	\$117.58
64+	\$102.20	\$153.94

PLAN 2

\$20,000 Basic Benefit Amount

WEEKLY PREMIUMS

non-tobacco

AGES	EE, EE+CH	EE+SP, F
18-29	\$2.06	\$3.23
30-39	\$3.84	\$5.90
40-49	\$7.16	\$10.88
50-59	\$12.78	\$19.31
60-63	\$20.79	\$31.33
64+	\$27.07	\$40.74

MONTHLY PREMIUMS

non-tobacco

AGES	EE, EE+CH	EE+SP, F
18-29	\$8.89	\$13.97
30-39	\$16.62	\$25.55
40-49	\$31.02	\$47.15
50-59	\$55.37	\$83.67
60-63	\$90.08	\$135.73
64+	\$117.27	\$176.53

tobacco

AGES	EE, EE+CH	EE+SP, F
18-29	\$3.13	\$4.84
30-39	\$6.07	\$9.25
40-49	\$12.80	\$19.33
50-59	\$21.66	\$32.63
60-63	\$35.70	\$53.69
64+	\$46.89	\$70.47

tobacco

AGES	EE, EE+CH	EE+SP, F
18-29	\$13.55	\$20.94
30-39	\$26.27	\$40.05
40-49	\$55.43	\$83.75
50-59	\$93.85	\$141.40
60-63	\$154.70	\$232.66
64+	\$203.17	\$305.37

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



For use in enrollments situated in: NE. This rate insert is part of the approved flyer for Omaha Track, and ABJ30427-1 and is not to be used on its own.

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