



## frequently asked questions



# 24-hour group accident insurance

### COVERAGE AND BENEFITS

#### **Q. How does Group Accident Insurance work?**

**A.** Your coverage pays you or a covered family member for medical treatment due to an accidental injury. This is 24-hour coverage that includes both on- and off-the-job injuries.

#### **Q. How does the policy define an accident?**

**A.** An accident is any unforeseen, unintentional event that results in an injury.

#### **Q. Is coverage provided for medical services related to sickness?**

**A.** No. Coverage does not include medical treatment, hospitalization, or pharmacy services related to sickness.

#### **Q. Does Accident Insurance cover organized sports-related injuries?**

**A.** Yes. Your coverage includes some sports-related injuries. There are exclusions, which are listed in the brochure and on your coverage certificate.

#### **Q. When does coverage for me and my dependents begin under the accident policy?**

**A.** Coverage typically begins on the first day of the month in which deductions begin unless you are not actively at work. The coverage effective date will be listed on your coverage certificate.

#### **Q. Are there medical questions to answer to enroll in this coverage?**

**A.** No. Coverage is offered on a Guaranteed Issue basis. You must meet the “Actively at Work” requirement to be eligible. Although Guaranteed Issue is available, all exclusions and limitations will still apply to the coverage issued.

**Q. Will Group 24-Hour Accident Insurance interfere with my Health Savings Account (HSA)?**

**A.** No. Group 24-Hour Accident Insurance from Allstate Benefits is HSA-compatible. This means that when you enroll in this coverage, you are still eligible to create an HSA or continue contributing funds to an existing HSA.

**Q. What is included in the Accident Treatment and Urgent Care Rider?**

**A.** This rider pays a cash benefit when a covered person uses one of the following services: ambulance (ground or air) for transportation to or from a hospital, treatment by a physician for an accidental injury, X-ray, or treatment received at an urgent care facility.

**Q. What is included in the Dislocation or Fracture Rider?**

**A.** This rider pays a cash benefit for a dislocation or fracture as a result of a covered accident.

**Q. What is included in the Emergency Room Services Rider?**

**A.** This rider provides a cash benefit for treatment and services received in an emergency room as a result of a covered accident.

**Q. What is included in the Outpatient Physician's Treatment for Accident and Preventive Care Benefit Rider?**

**A.** Under this rider, benefits are paid to you and your covered family members when you see a doctor outside of a hospital for an accidental injury or undergo a preventative examination. Benefits under this rider are paid once per day, per covered person (not to exceed 2 days per covered person, per calendar year and a maximum of 4 days per calendar year if dependents are covered).

**Q. What is included in the Accidental Death, Dismemberment and Functional Loss Rider?**

**A.** This rider pays a cash benefit for accidental death resulting from an injury, accidental death resulting from an injury while riding as a fare-paying passenger on a commercial airline, passenger train or intercity bus line, dismemberment resulting from an injury, and functional loss (hearing or speech loss) as a result of a covered accident.

**Q. What is included in the Benefit Enhancement Rider?**

**A.** This rider pays a cash benefit when you and your covered family members receive treatment for any of the events below. Covered individuals receive six (6) accident follow-up treatments per covered accident.

Lacerations; Burns; Skin Graft; Brain Injury  
Diagnosis; Computed Tomography (CT) Scan or Magnetic Resonance Imaging (MRI); Paralysis; Coma with Respiratory Assistance; Open Abdominal or Thoracic Surgery; Tendon, Ligament, Rotator Cuff, or Knee Cartilage Surgery; Ruptured Disc Surgery; Eye Surgery; General Anesthesia; Blood and Plasma; Appliance; Medical Supplies; Medicine; Prosthesis; Physical, Occupational, or Speech Therapy; Rehabilitation Unit; Non-Local Transportation; Family Member Lodging; Post-Accident Transportation; Broken Tooth; Residence/Vehicle Modification; Pain Management (Epidural Injection); Miscellaneous Outpatient Surgery

**DEPENDENTS**

**Q. Who can be covered under the policy?**

**A.** Coverage is available for you, your spouse or domestic partner or civil union partner, and your dependent children.

**Q. When does coverage for my children end?**

**A.** Your children can be covered up to age 26.

**POLICY CONVERSION**

**Q. Can I take my coverage with me if I leave my employer or if the group policy ends?**

**A.** Yes. If your coverage terminates for reasons other than non-payment of premiums, you may obtain a "converted policy." An application for a converted policy must be made to Allstate Benefits within 31 days after the coverage terminates. The effective date of the converted policy will be the date on which coverage under the certificate terminates. For more details, see the Conversion Provision section of your certificate.

**Q. Will my premiums change with a converted policy?**

**A.** No. Your premium rates are not affected by transitioning to a converted policy.

## TOBACCO USE AND AGE

### Q. Do premiums depend on smoker status?

A. No. Smokers and non-smokers pay the same amount for premiums.

### Q. Do premiums vary based on age?

A. No. Premiums are the same at all ages.

## CLAIMS

### Q. Who may submit a claim?

A. You and your covered family members can submit claims for processing.

### Q. When can I submit a claim for benefit payment under my accident coverage?

A. You can submit claims for covered benefits any time after the coverage effective date.

### Q. How do I submit a claim?

A. After enrollment, register at [www.mybenefits.allstate.com](http://www.mybenefits.allstate.com) to view your coverage information and file claims. You can also obtain a claim form on the Allstate Benefits website at [www.allstate.com/allstate-benefits/resources-and-forms.aspx](http://www.allstate.com/allstate-benefits/resources-and-forms.aspx). For assistance, call the Allstate Benefits Customer Care Center at **866-828-8501**.

### Q. How is my benefit paid?

A. Your benefits are paid directly to you unless you assign your benefit payment to your medical provider. To assign your benefits, complete the **Assignment of Benefits Form** at [www.allstate.com/allstate-benefits/resources-and-forms.aspx](http://www.allstate.com/allstate-benefits/resources-and-forms.aspx) and return it to us using the contact information provided or register with MyBenefits and submit your form at [www.mybenefits.allstate.com](http://www.mybenefits.allstate.com).

**Offered to the employees of:**



This coverage does not constitute comprehensive health insurance coverage (often referred to as "major medical coverage") and does not satisfy the requirement of minimum essential health coverage under the Affordable Care Act.

**This material is valid as long as information remains current, but in no event later than September 15, 2026.** The coverage provided is limited benefit supplemental insurance, policy form GVAP6 or state variations thereof. This is a brief overview of the benefits available under the group policy underwritten by American Heritage Life Insurance Company (Home Office, Jacksonville, FL). The coverage has exclusions and limitations and may vary by state. Contact your Allstate Benefits Representative for costs and complete details. Allstate Benefits is the marketing name used by American Heritage Life Insurance Company, a subsidiary of The Allstate Corporation. ©2023 Allstate Insurance Company.