



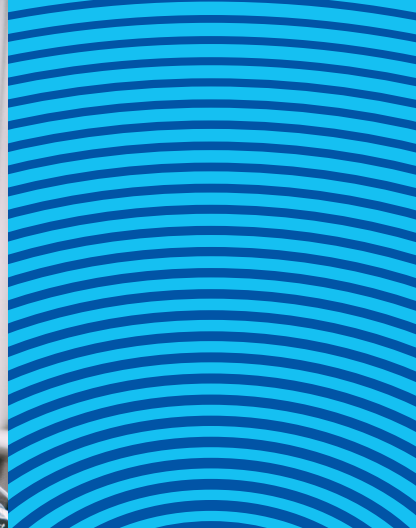
Allstate[®]
HEALTH SOLUTIONS

senior indemnity

Get more control over
health care costs with a
fixed-benefit plan.



A LIFE Association member offering.



a predictable way to pay for health care

Life is full of “what-ifs”. But when it comes to health care, questions like, “What if I get sick or injured?” and “What if I have costs Medicare doesn’t cover?” or “What if I need coverage before I’m eligible for Medicare?” can leave us wondering if we have the right amount of coverage.

Senior indemnity is fixed-benefit insurance that helps you cover the “what-ifs” of everyday health care. Our affordable plans give you a predictable way to pay for things like hospital stays, surgeries, lab tests and even doctors visits. You choose a plan with set dollar amounts, and we’ll pay your covered medical expenses. Any expenses beyond your set amounts are paid by you.

Senior indemnity plans are most effective when used in combination with a major medical plan or while you’re waiting for Medicare eligibility. There are no network restrictions, so you can see any provider you like. So you’ll get coverage at a cost that works for you.

LIFE Association benefit¹

The LIFE Association, Inc. is a not-for-profit association, established in 1990 for the purpose of improving the personal, professional, and financial lives of our members. LIFE’s industry leading educational, lifestyle and health resources are second to none. Various association membership plans include educational training, healthcare, identity theft protection, wellness savings, travel services, retail savings, family programs, and quarterly newsletters.

As a valued member, you will have access to a large variety of upgraded healthcare benefits offered through the association group insurance contracts with major insurers. These health plans are designed with cost in mind, so there is an array of excellent choices to meet each member’s budget.

Quick note about fixed-benefit insurance

Unlike major medical policies, fixed-benefit insurance is a supplemental plan, and is not subject to the 10 essential health benefits outlined in the Affordable Care Act. That means fixed-benefit insurance may exclude pre-existing conditions, and may have service benefit limits, annual benefit limits, and lifetime benefit limits. While these plans do not cap out-of-pocket costs, beneficiaries do receive direct payments for covered services.

¹ See page 9 for more details. This plan is available only through a membership with the LIFE Association. Membership fees apply.

plan overviews and features

Max plan benefits

If you're waiting for Medicare eligibility or missed your enrollment period, a max plan may be right for you. You won't need to worry about a gap in coverage. And plans include surgical², air ambulance, and nursing/transitional care benefits.

Base plan benefits

If you're looking for a good addition to Medicare Advantage, a base plan may be the right choice. They help cover out-of-pocket expenses that primary plans don't. Plus, plans include up to two emergency room visits per year.

Guaranteed issue plan benefits

Guaranteed issue plans are a great alternative to our base and max plans, covering hospital admission and confinement. You are guaranteed eligibility and there is no health questionnaire to fill out. Just pick the option that works best for you and you're all set.

Allstate identity protection (AIP)

Allstate identity protection is included with all Senior Indemnity plans at no extra cost.

You'll have access to:

- Identity, financial account, and credit monitoring.
- 24/7 alerts and fraud recovery.
- Up to \$1 million in identity theft expense reimbursement.³

Ask your agent for more details.

² Surgical benefits available only with Max plans. | ³ Identity theft insurance covering expense and stolen funds reimbursement is underwritten by American Bankers Insurance Company of Florida, an Assurant company. The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions.

pick the right plan for you

All senior indemnity plans pay set dollar amounts for specific health care services, regardless of where you receive care. Benefits cover one plan year, and then reset.

	Max plans			Base plans	
	One	Two	Three	Four	Five
Inpatient hospitalization					
Hospital admission					
Amount per admission	\$1,000	\$2,000	\$5,000	\$250	\$1,000
Maximum benefit of two admissions per plan year	✓	✓	✓	✓	✓
Daily confinement - sickness					
Amount per day of confinement	\$250	\$500	\$1,000	\$150	\$300
Maximum benefit of 31 days of confinement per year	✓	✓	✓	✓	✓
Daily confinement - injury					
Amount per day of confinement	\$250	\$500	\$1,000	\$150	\$300
Maximum benefit of 31 days of confinement per plan year	✓	✓	✓	✓	✓
Surgery					
Surgeon - Tier 1					
\$5,000 per surgery	✓	✓	✓	N/A	N/A
Maximum benefit of five surgeries per plan year	✓	✓	✓	N/A	N/A
Surgeon - Tier 2					
Amount per surgery	\$1,000	\$2,500	\$2,500	N/A	N/A
Maximum benefit of five surgeries per plan year	✓	✓	✓	N/A	N/A
Benefit waiting period					
Immediate benefits for sickness	✓	✓	✓	✓	✓
90 days from effective date for preventative care	✓	✓	✓	✓	✓



	Max plans			Base plans	
	One	Two	Three	Four	Five
Outpatient					
Office visit					
Amount per visit	\$75	\$75	\$75	\$50	\$50
Maximum benefit of two visits per plan year	✓	✓	✓	✓	✓
Preventive care office visit					
Amount per visit	\$100	\$100	\$100	\$50	\$50
Maximum visits per plan year	1	1	2	1	1
Urgent care facility visit					
Amount per visit	\$75	\$75	\$75	\$50	\$50
Maximum benefit of two visits per plan year	✓	✓	✓	✓	✓
Testing radiology and laboratory services					
Radiology					
\$50 per test	✓	✓	✓	✓	✓
Maximum benefit of two tests per plan year	✓	✓	✓	✓	✓
Laboratory					
\$50 per test	✓	✓	✓	✓	✓
Maximum benefit of two tests per day, two tests per plan year	✓	✓	✓	✓	✓
Emergency					
Ground ambulance					
Amount per trip	\$500	\$500	\$500	\$250	\$250
Maximum benefit of two trips per plan year	✓	✓	✓	✓	✓
Air ambulance					
Amount per trip	\$5,000	\$5,000	\$5,000	N/A	N/A
Maximum benefit of one trip per plan year	✓	✓	✓	N/A	N/A
Emergency room					
Amount per trip	N/A	N/A	N/A	\$50	\$50
Maximum benefit of two visits per plan year	N/A	N/A	N/A	✓	✓
Transitional care					
Skilled nursing facility					
\$250 per day	✓	✓	✓	N/A	N/A
Maximum benefit of 60 days per plan year	✓	✓	✓	N/A	N/A



consider a **guaranteed option**

Our Guaranteed Issue plan is a great alternative to our Base and Max plans. You are guaranteed eligibility and there is no health questionnaire to fill out. Just pick the option that works best for you and you're all set.

Guaranteed issue plans

	A	B	C
Inpatient hospitalization			
Hospital admission			
Amount per admission	\$100	\$100	\$100
Maximum benefit of one admission per plan year	✓	✓	✓
Daily confinement			
First plan year amount per day of confinement	\$150	\$250	\$350
Maximum benefit of 10 days of confinement per year	✓	✓	✓

Guaranteed Issue plans are only available in the following states: AL, AZ, FL, GA, IL, MI, NC, OH, SC, TN, TX, VA.



limitations and exclusions

This plan provides benefits only for Covered Services identified in the Benefits section.

We will not pay benefits for claims resulting from, or relating to, any of the following:

1. Sickness and Injury resulting directly or indirectly from a Pre-Existing Condition or a complication resulting therefrom for the first 12 months following the Covered Person's Effective Date.

Pre-Existing Condition means a sickness, injury, or condition, including any related or resulting complications:

- a. For which medical advice, consultation, diagnosis, care, or treatment (includes receipt of services, supplies, or diagnostic tests) was received or recommended from a provider or prescription drugs were prescribed during the 1 years period immediately prior to the Covered Person's Effective Date, regardless of whether the condition was diagnosed, misdiagnosed or not diagnosed; or
- b. That produced signs or symptoms during the 1 year period immediately prior to the Covered Person's Effective Date.
The signs or symptoms were significant enough to establish manifestation or onset by one of the following:
 - i. The signs or symptoms reasonably should have allowed or would have allowed a medical provider to diagnose the condition; or
 - ii. The signs or symptoms reasonably should have caused or would have caused an ordinarily prudent person to seek medical advice, consultation, diagnosis, care, or treatment.

A pregnancy that exists on the day before the Covered Person's Effective Date will be considered a Pre-Existing Condition.

2. Treatment, services, or supplies received before the Effective Date or after this Certificate terminates in accordance with the Termination provision.
3. Treatment, services, or supplies not specifically listed as a Covered Services in the Benefits section.
4. Complications of non-covered treatment, services, or supplies.
5. Treatment, services, or supplies that are Experimental or Investigational Services.
6. Treatment, services, or supplies provided while participating in a clinical trial.
7. Charges for preventive services except as otherwise covered in the Benefits section.
8. Prophylactic services, including prophylactic surgery or other procedures performed to prevent a disease process from becoming evident in the organ or tissue at a later date.
9. Suicide or attempted suicide, Health Care Practitioner assisted suicide, or intentionally self-inflicted injury.
10. War or any act of war; participation in the military service of any country.
11. A Covered Person's voluntary attempt to commit, participation in, or commission of a felony, whether or not charged.
12. Injury resulting from or related to being under the influence of:
 - a. Illegal narcotics or non-prescribed controlled substances.
 - b. Alcohol such that the Covered Person is intoxicated (where the blood-alcohol content meets or exceeds the legal presumption of intoxication under the law in the state where the Injury took place).
13. Charges for routine eye exams, eyeglasses, and contact lenses.
14. Eye surgery for cataracts, nearsightedness, farsightedness, or astigmatism.
15. Charges for routine hearing exams.
16. Cochlear implant, auditory prosthesis or other electrical, digital, mechanical or surgical means of enhancing, creating or restoring auditory comprehension.
17. Snoring, sleep disorders, the treatment or prevention for hair loss, change in skin pigmentation, or cognitive enhancement.
18. Gastric bypass, surgery for weight control, obesity or morbid obesity, including but not limited to any type of gastric bypass or other weight loss surgery, suction lipectomy.
19. Custodial Care, respite care, rest care, supportive care, homemaker services, personal comfort or convenience of the Covered Person, the Covered Person's family, a Health Care Practitioner or a provider.
20. Cosmetic Services, including but not limited to cosmetic or plastic surgery, except for Reconstructive Surgery.
21. Capsular contraction, augmentation or reduction mammoplasty, except for Reconstructive Surgery.
22. Mental Illness or Substance Abuse.
23. An injury sustained while participating in, instructing, demonstrating, guiding or accompanying others in any hazardous activity, whether or not compensation is received including, but not limited to:
 - a. Parachute jumping.
 - b. Hang-gliding.
 - c. Bungee jumping.
 - d. Rodeo activities.
 - e. Racing any motorized vehicle or conveyance.
 - f. Rock or mountain climbing.



limitations and exclusions

- g. Skydiving.
- h. Parkour.
- 24. An injury sustained while participating in, instructing, demonstrating, guiding or accompanying others in any hazardous occupation or other activity for which compensation is received including, but not limited to:
 - a. Racing any non-motorized vehicle or conveyance.
 - b. Professional or semi-professional contact sports.
- 25. Injury sustained while participating in any inter-collegiate sport, contest or competition for any such sport, contest or competition.
- 26. Treatment, services, or supplies received outside of the United States or its possessions or Canada. Drugs or medications obtained from pharmacy provider sources outside the United States.
- 27. Treatment, services, or supplies resulting from or related to chronic pain disorders.
- 28. Foot conditions including, but not limited to, flat foot conditions, bunion, corns.
- 29. Reproductive or contraceptive treatment, services, or supplies including, but not limited to:
 - a. Pregnancy, except for Complications of Pregnancy.
 - b. Childbirth.
 - c. Fetal reduction surgery.
 - d. Infertility diagnosis and treatment.
 - e. Cryopreservation of sperm or eggs.
 - f. Surrogate pregnancy.
 - g. Umbilical cord stem cell or other blood component harvest.
 - h. Sterilization, drugs or devices used directly or indirectly to promote or prevent conception.
 - i. Abortion.
- 30. Treatment, services, or supplies, regardless of underlying causes, including, but not limited to:
 - a. Sex transformation.
 - b. Gender dysphoric disorder.
 - c. Gender reassignment.
 - d. Sexual function, dysfunction or inadequacy.
- 31. Dental treatment, services, or supplies
- 32. Orthodontic treatment, services or supplies, including, but not limited to, dental braces and dental appliances.
- 33. Care for supporting structures of the teeth.
- 34. Temporomandibular or craniomandibular joint dysfunction.
- 35. Maxillary or mandibular hypoplasia.
- 36. Malocclusion or mandibular protrusion or recession.
- 37. Maxillary or mandibular hyperplasia.
- 38. Sclerotherapy or other treatment, services, or supplies resulting from or related to varicose veins or spider veins.
- 39. Growth hormone therapy, including growth hormone medication and its derivatives or other drugs used to stimulate, promote or delay growth or to delay puberty to allow for increased growth.
- 40. Allergies (including allergy testing, allergy shots, and allergy immunotherapy), except for Emergency treatment of allergic reactions.
- 41. Services provided by or through any employer of a Covered Person or the employer of a Covered Person's Immediate Family member.
- 42. Services provided by or through any Covered Person's Immediate Family member or any entity in which a Covered Person or their Immediate Family member receives, or is entitled to receive, any direct or indirect financial benefit, including but not limited to an ownership interest in any such entity.
- 43. End stage kidney or end stage renal disease.
- 44. Treatment, services, or supplies related to transplants and organ donation.
- 45. Congenital conditions, except when provided to a newborn or newly adopted child who is a Covered Person.
- 46. Products, drugs or medicines in the following categories, whether or not prescribed by a Health Care Practitioner:
 - a. Herbal or homeopathic medicines or products.
 - b. Minerals and vitamins.
 - c. Health and beauty aids.
 - d. Batteries.
 - e. Appetite suppressants.
 - f. Dietary or nutritional substances or dietary supplements.
 - g. Nutraceuticals.
 - h. Tube feeding formulas and infant formulas.
 - i. Medical foods.
 - j. Devices or supplies including, but not limited to, support garments, bandages and non-medical items regardless of intended use.
- 47. Outpatient prescription drugs.

Allstate Health Solutions Senior Indemnity plans are fixed indemnity insurance plans that pay limited benefits. This plan does not meet the definition of "Minimum Essential Coverage" under the Affordable Care Act. This is not major medical insurance. This is not a Medicare supplement policy or certificate. This plan does not provide expense reimbursement for charges based on your health care provider's bill. This plan provides fixed indemnity benefits for hospital confinement and specified medical and surgical covered services. Fixed indemnity benefits are paid in the amount shown in the benefit schedule for the covered services without regard to the cost of services rendered.



**Empowered Members,
Informed Choices**

About the LIFE Association

The LIFE Association is a not-for-profit, members-only association. Memberships provide access to Allstate Health Solutions plus many other lifestyle-related benefits and discounts on everyday services and needs.

Telemed for LIFE

Telemedicine is a modern, easy-to-use solution for non-emergency illnesses like colds, the flu, rashes, and more. Doctors are available 24 hours a day, 365 days a year.

Travel

Whether you're flying home for the holidays, planning a romantic getaway, or just need tickets to a sold-out Broadway show, LIFE Association has benefits and savings you're going to love.

ID Protection

LIFE Association will monitor thousands of databases and millions of records to keep your identity safe. Should you become a victim of identity theft, recovery specialists will help you restore your pre-theft status.

Wellness

Get access to the lowest rates at over 14,000 high quality fitness facilities and take the first step towards a healthier lifestyle.

Diagnostic Facility and Hospital Negotiations²

Members in need of a diagnostic radiology procedure (MRI, MRA, CT scan, PET scan, etc.) may save 5%-60% through the savings program. Members facing hospitalization may also use the LIFE Association negotiation services, which may significantly reduce costs.

Learn more at: lifeassociation.org

LIFE Association memberships are made available through AHCP,
LIFE's exclusive Member & Agent Support.

For questions call 800-557-5024, or email benefits@LIFEAssociation.org.

Ask your agent for a life membership book for details.

LIFE Association Membership benefits may vary by state. Lifestyle and wellness benefits and discounts are not insurance. Your agent and Allstate Health Solutions may receive financial compensation in connection with membership fees.

² Negotiations are not available for services that have been paid for, are already in collections, have already been negotiated, or are older than 60 days. Other restrictions may apply. Negotiations may not be applicable if services have already been discounted through other networks and benefits provided by this plan.



Allstate[®]
HEALTH SOLUTIONS

about

The Allstate Corporation (NYSE: ALL) is one of the largest publicly held personal lines insurers in the United States. As part of the Allstate Corporation, Allstate Health Solutions is focused on providing supplemental and short-term coverage options to individuals and associations. Allstate Health Solutions is the marketing name for products underwritten by National Health Insurance Company, Integon National Insurance Company, and Integon Indemnity Corporation. These three companies, together, are authorized to provide health insurance in all 50 states and the District of Columbia. Each underwriting company is responsible for its respective products. National Health Insurance Company underwrites policies in AL, AR, AZ, DC, DE, FL, GA, IL, KY, LA, MI, MS, NC, NE, OH, OK, SC, TN, TX, VA, WV, WY.



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