

What you do every day
may lead to an accident.



SPORTS



TRAVEL



WORK



VACATION

On the average, there are 13 unintentional-injury deaths and about 2,900 disabling injuries every hour during the year.¹

¹ *Injury Facts 2010 Edition*, National Safety Council.

ACCIDENT INSURANCE

the right coverage • your future • great choice

ABJ23120NY

Allstate Life Insurance
Company of New York



Allstate[®]

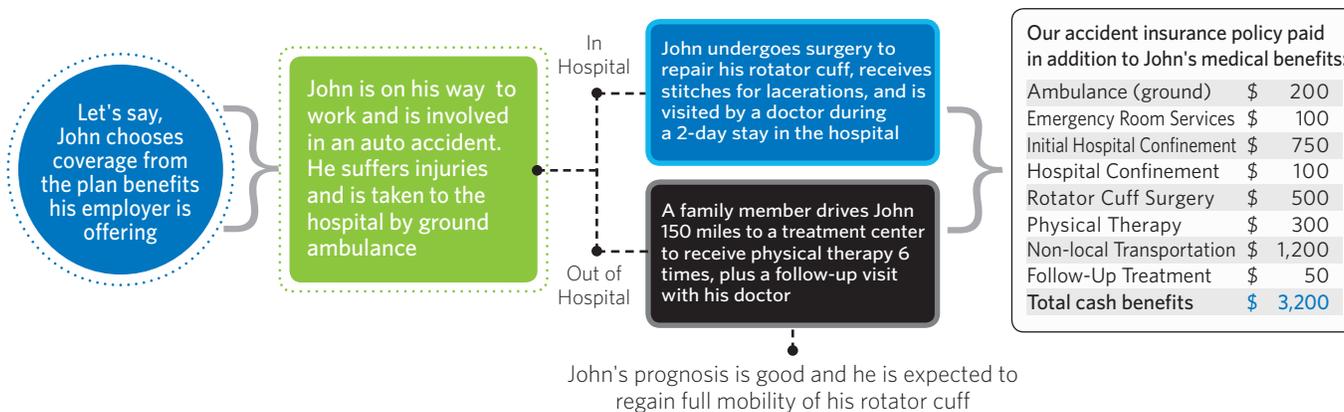
Benefits

accident

Allstate Benefits accident coverage pays cash benefits for either on- or off-the-job (AP5NY) accidental injuries, and can help cover the costs associated with injury treatments.

Unexpected accidents can also mean unexpected out-of-pocket expenses. Hospital stays, medical or surgical treatments, dislocations or fractures, and transportation by air or ground ambulance can add up quickly and be very costly. Our coverage can help with some of these expenses so your finances can remain healthy.

Accident coverage can help offer peace of mind when you are injured and seek medical treatment. Below is an example of how benefits might be paid.*



i meeting your needs

Our coverage can help provide financial support when an on- or off-the-job (AP5NY) accidental injury occurs.

Here's what you get:

- Coverage is available for you or your entire family
- Benefits paid directly to you, unless assigned to someone else
- Pays in addition to insurance you may already have
- Affordable premiums
- Coverage can be enhanced by the addition of rider benefits
- Portable coverage. If you leave your job you can take the coverage with you

👍 your benefit coverage†

Accidental Death - Pays for accidental death.

Common Carrier Accidental Death - Pays for accidental death while riding as a fare-paying passenger on a scheduled common carrier.

Loss of Limbs - Pays for loss of limb.

Dislocation or Fracture - Pays for dislocation or fracture.

Initial Hospitalization Confinement - Pays for the first hospital confinement during a calendar year.

Hospital Confinement - Pays for confinement in a hospital up to 90 days.

Intensive Care - Pays for confinement in a hospital intensive care unit up to 90 days for each confinement.

Ambulance Services - Pays for ambulance service to or from a hospital.

Physician Treatment Expenses - Pays for treatment by a physician one time per accident.

X-Ray Expenses - Pays for an X-ray.

Emergency Room Services - Pays for emergency room services.

*The example shown may vary from the plan your employer is offering. Your individual experience may also vary. See pages 2a and 2b for your plan details.



Nearly 1 in 9 people sought medical attention because of an injury.²

²Injury Facts 2010 Edition, National Safety Council.

Accident Follow-Up Treatment - Pays for follow-up treatment from a physician (up to 6 treatment per accident) within 6 months after the accident. Not paid for the same visit Physical Therapy benefit is paid.

Lacerations* - Pays for treatment of cuts.

Burns* - Pays for treatment of burns, other than sun burns.

Skin Graft - Pays for a skin graft for a covered burn.

Brain Injury Diagnosis* - Pays when diagnosed with 1 of these: concussion; cerebral laceration; cerebral contusion; or intracranial hemorrhage.

Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI)* - Pays for one CT scan or MRI within 180 days of an accident.

Open Abdominal or Thoracic Surgery* - Pays for surgery for internal injuries; or for exploratory surgery.

Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery** - Pays for surgery to repair a tendon, ligament, rotator cuff or knee cartilage; or for exploratory arthroscopic surgery.

Ruptured Disc Surgery** - Pays for a surgery to repair a ruptured spinal disc.

Eye Surgery - Pays for eye surgery or to remove a foreign object from the eye.

Anesthesia** - Pays for general anesthesia.

Blood and Plasma* - Pays for a blood transfusion or plasma.

Appliance - Pays for 1 of the following: wheelchair; crutches; or walker.

Medical Supplies - Pays for over-the-counter medical supplies when the Physician Treatment or Emergency Room Services benefits are also paid.

Medicine - Pays for prescription or over-the-counter medicine when the Physician Treatment or Emergency Room Services benefits are also paid.

Prosthesis** - Pays for a physician-prescribed prosthetic arm, leg, hand, foot or eye when a benefit is also paid under the Loss of Limbs benefit.

Physical Therapy - Pays for physician-prescribed physical therapy (up to 6 treatments per accident) within 6 months after the accident. Not paid for the same visit Accident Follow-Up Treatment benefit is paid.

Rehabilitation Unit - Pays for confinement in a rehabilitation unit after a hospital stay up to 30 days per confinement (maximum of 60 days per year).

Non-Local Transportation - Pays for physician-prescribed treatment at a hospital or treatment center more than 100 miles from your home. Paid up to 3 times per accident.

Family Member Lodging - Pays lodging for one adult family member to accompany you to receive treatment at a hospital or treatment center more than 100 miles from the family member's home, up to 30 days.

Post-Accident Transportation - Pays for transportation by common carrier when hospital confined 3 or more days in a row more than 250 miles from home.

POLICY SPECIFICATIONS

Please read your policy carefully. This section details some specifics of the policy.

Conditions and Limits - When an injury results in a covered loss within 90 days (180 days for dismemberment or death), from the date of the accident, AB will pay benefits as stated.

The Post Accident Transportation Benefit is paid only when the Hospital Confinement benefit is paid and the covered person returns home within 48 hours of discharge from the hospital.

Eligibility - Coverage may include you, your spouse and children under age 26.

Termination - Coverage terminates at the end of the grace period or age 75. Spouse coverage ends upon divorce or annulment. Coverage for children ends when the child reaches age 26, unless he or she continues to meet the requirements of an eligible dependent.

Renewability - Coverage is guaranteed renewable until age 75, subject to change in premiums by class.

Pre-Existing Condition Limitation - If a covered person has a pre-existing condition we will not pay benefits for such condition during the 6-month period beginning on the effective date. A pre-existing condition is a condition for which: medical advice or treatment was recommended or received from a licensed health care provider within 6 months prior to the effective date.

Exclusions and Limitations - Benefits are not paid for: injury incurred prior to the effective date; any act of war, participation in a riot, insurrection or rebellion; intentionally self-inflicted injuries or attempted suicide; commission of a felony; engaging in an illegal occupation; being intoxicated or under the influence of any narcotic unless taken on the advice of a physician; aviation, other than as a fare-paying passenger on a scheduled or charter flight; alcoholism or drug addiction; mental or emotional disorders; plastic surgery for cosmetic purposes, unless required to treat an injury; or dental care or treatment, unless due to injury to sound natural teeth.

The policy does not pay benefits for treatment that is received outside the United States, the U.S. territories or the countries of Canada and Mexico.



Don't Wait for A Sign

Accidents can happen unexpectedly and can be costly, especially if you are financially unprepared. Your current medical coverage will help pay for expenses associated with an injury, but won't cover all of the out-of-pocket expenses you may face. Don't wait until you are on the road to recovery after an accidental injury to realize you need more protection.

Start thinking about the future of your finances today and plan for the road ahead. You can rely on our Accident Insurance to help provide the financial assistance you need, when you need it most so you can cope with the challenges of recovery.



The most commonly mentioned body sites for injuries were wrist, hand, and fingers followed by lower leg and ankle.⁴

If you suffer an accidental injury, would you be able to handle the extra expenses associated with your recovery?

Accident coverage is provided by a Limited Benefit insurance.

This material is valid as long as information remains current, but in no event later than March 15, 2015. Accident insurance benefits provided by policy form AP5NY. AP5NY is an accident only policy and does not pay benefits for sickness or any other condition. The policy is not a Medicare Supplement Policy. This brochure highlights some features of the policy but is not the insurance contract. Only the actual policy provisions control. The policy sets forth, in detail, the rights and obligations of both the insured and the insurance company. Policy issued by Allstate Life Insurance Company of New York.

This brochure is for use in: NY



Allstate
Benefits

Allstate Benefits is a marketing name for Allstate Life Insurance Company of New York (Home Office, Hauppauge, NY).

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on- and off-the-job accident

Listed below are benefits and amounts associated with the benefits described in the brochure.

ACCIDENT BENEFITS*

| | | PLAN |
|--|-------------|----------|
| Accidental Death (common carrier pays 5Xs the benefits listed) | Employee | \$50,000 |
| | Spouse | \$25,000 |
| | Child(ren) | \$12,500 |
| Loss of Limbs ^{1,2} | Employee | \$50,000 |
| | Spouse | \$25,000 |
| | Child(ren) | \$12,500 |
| Dislocation or Fracture ^{1,2} | Employee | \$2,000 |
| | Spouse | \$1,000 |
| | Child(ren) | \$500 |
| Initial Hospitalization Confinement (per year) | | \$750 |
| Hospital Confinement ³ (daily) | | \$50 |
| Intensive Care ³ (daily) | | \$400 |
| Ambulance Services | Ground | \$200 |
| | Air | \$600 |
| Physician Treatment Expenses | | \$50 |
| X-Ray Expenses | | \$100 |
| Emergency Room Services | | \$100 |
| Accident Follow-Up Treatment ⁴ (daily) | | \$50 |
| Lacerations (per year) | | \$50 |
| Burns (% body surface) | < 15% | \$100 |
| | > 15% | \$500 |
| Skin Graft (% of burns benefit) | | 50% |
| Brain Injury Diagnosis (one time benefit per person) | | \$150 |
| Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI) (per year) | | \$50 |
| Open Abdominal or Thoracic Surgery | | \$1,000 |
| Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery | Surgery | \$500 |
| | Exploratory | \$150 |
| Ruptured Disc Surgery | | \$500 |
| Eye Surgery | | \$100 |
| General Anesthesia (% of surgery benefit) | | 15% |
| Blood and Plasma | | \$300 |
| Appliance | | \$125 |
| Medical Supplies | | \$5 |
| Medicine | | \$5 |
| Prosthesis | One Device | \$500 |
| | Two or More | \$1,000 |
| Physical Therapy ⁴ (daily) | | \$50 |
| Rehabilitation Unit ⁵ (daily) | | \$100 |
| Non-Local Transportation ⁶ (per trip) | | \$400 |
| Family Member Lodging ⁷ (daily) | | \$100 |
| Post-Accident Transportation (per year) | | \$200 |

* amounts shown are per accident/covered person unless otherwise noted

¹ see Injury Benefit Schedule

² up to amount shown; multiple losses from same injury pay only up to the amount shown

³ max. 90 days per accident

⁴ max. 6 treatments per person/accident

⁵ max. 30 days per confinement/
max. 60 days per year

⁶ max. 3 per accident

⁷ max. 30 days per accident

Allstate Life Insurance Company of New York

ACCIDENT INSURANCE

the right coverage • your future • great choice



Allstate®

Benefits

injury benefit schedule

Benefit amounts for coverage and one occurrence are shown below. Covered spouse gets 50% of the amounts shown and children 25%.

| | |
|--|-------------|
| Loss of Life or Limb | PLAN |
| Life, or both eyes, hands, arms, feet, or legs, or one hand or arm and one foot or leg | \$50,000 |
| One eye, hand, arm, foot, or leg | \$25,000 |
| One or more entire toes | \$2,500 |
| One or more entire fingers | \$2,000 |
| <hr/> | |
| Complete Dislocation | PLAN |
| Hip joint | \$2,000 |
| Knee or ankle joint*, bone or bones of the foot* | \$800 |
| Wrist joint | \$700 |
| Elbow joint | \$600 |
| Shoulder joint | \$400 |
| Bone or bones of the hand*, Collarbone | \$300 |
| Two or more fingers or toes | \$140 |
| One finger or toe | \$60 |
| <hr/> | |
| Complete, Simple or Closed Fracture | PLAN |
| Hip, thigh (femur), pelvis** | \$2,000 |
| Skull** | \$1,900 |
| Arm, between shoulder and elbow (shaft), shoulder blade (scapula), leg (tibia or fibula) | \$1,100 |
| Ankle, knee cap (patella), forearm (radius or ulna), collarbone (clavicle) | \$800 |
| Foot**, hand or wrist** | \$700 |
| Lower jaw** | \$400 |
| Two or more ribs, fingers or toes, bones of face or nose | \$300 |
| One rib, finger or toe, coccyx | \$140 |

*Knee joint (except patella). Bone or bones of the foot (except toes). Bone or bones of the hand (except fingers).

**Pelvis (except coccyx). Skull (except bones of face or nose). Foot (except toes). Hand or wrist (except fingers). Lower jaw (except alveolar process).

premiums

| MODE | PLAN | EE | EE + SP | EE + CH | F |
|---------|------|---------|---------|---------|---------|
| Weekly | PLAN | \$2.40 | \$4.50 | \$4.10 | \$6.30 |
| Monthly | PLAN | \$10.40 | \$19.50 | \$17.77 | \$27.30 |

Issue Ages: 18-70

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

This insert is for use in: NY

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