OFF-THE-JOB BENEFIT AMOUNTS

Benefits are paid once per accident unless otherwise noted

BASE POLICY BENEFITS		PLAN 1	PLAN 2
Initial Hospital Confinement (pays once/	'year)	\$1,000	\$1,500
Daily Hospital Confinement (pays daily)		\$200	\$300
ntensive Care (pays daily)		\$400	\$600
RIDER BENEFITS		PLAN1	PLAN 2
Accident Treatment and Urgent Care	Rider		
Ambulance	Ground	\$200	\$300
	Air	\$600	\$900
Accident Physician's Treatment		\$100	\$150
X-ray		\$200	\$300
Urgent Care		\$100	\$150
Dislocation or Fracture Enhanced Rider	4		
Open Reduction (300% of Closed Red	uction)	\$12,000	\$18,000
Closed Reduction		\$4,000	\$6,000
Avulsion and Chip Fracture (25% of	Closed Reduction)	\$1,000	\$1,500
Stress Fracture (10% of Closed Reduction	on)	\$400	\$600
Emergency Room Services Rider		\$200	\$300
Outpatient Physician's Treatment for Preventive Care Benefit Rider (pays dai		\$50	\$50
Accidental Death, Dismemberment ⁴		\$40,000	\$60,000
and Functional Loss ⁴ Rider			
Common Carrier Accidental Death (f	are-paying passenger)	\$100,000	\$150,000
BENEFIT ENHANCEMENT RIDER		PLAN1	PLAN 2
Accident Follow-Up Treatment (pays dat	y)	\$100	\$150
Lacerations		\$100	\$150
Burns	< 15% body surface 15% or more	\$200 \$1,000	\$300 \$1,500
Skin Graft (% of Burns Benefit)		50%	50%
Brain Injury Diagnosis		\$600	\$900
Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI) (pays once/year)		\$200	\$300
Paralysis (pays once)	Paraplegia	\$15,000	\$22,500
	Quadriplegia	\$30,000	\$45,000
Open Abdominal or Thoracic Surgery		\$2,000	\$3,000
Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery	Surgery Exploratory	\$1,000 \$300	\$1,500 \$450
Ruptured Spinal Disc Surgery		\$1,000	\$1,500
Eye Surgery		\$200	\$300
General Anesthesia		\$200	\$300
Blood and Plasma		\$600	\$900
Appliance		\$250	\$375
		\$10	\$15
iviedical supplies		÷. •	
		\$10	315
Medicine	1 device 2 or more devices	\$10 \$1,000 \$2,000	\$15 \$1,500 \$3,000
Medicine Prosthesis	2 or more devices	\$1,000 \$2,000	\$1,500 \$3,000
Medicine Prosthesis Physical, Occupational or Speech Thera	2 or more devices	\$1,000 \$2,000 \$60	\$1,500 \$3,000 \$90
Medicine Prosthesis Physical, Occupational or Speech Thera Rehabilitation Unit (pays daily)	2 or more devices	\$1,000 \$2,000 \$60 \$200	\$1,500 \$3,000 \$90 \$300
Medicine Prosthesis Physical, Occupational or Speech Thera Rehabilitation Unit (pays daily) Non-Local Transportation	2 or more devices	\$1,000 \$2,000 \$60 \$200 \$500	\$1,500 \$3,000 \$90 \$300 \$300 \$750
Medicine Prosthesis Physical, Occupational or Speech Thera Rehabilitation Unit (pays daily) Non-Local Transportation Family Member Lodging (pays daily)	2 or more devices Ipy (pays daily)	\$1,000 \$2,000 \$60 \$200 \$500 \$200	\$1,500 \$3,000 \$90 \$300 \$750 \$300
Medicine Prosthesis Physical, Occupational or Speech Thera Rehabilitation Unit (pays daily) Non-Local Transportation Family Member Lodging (pays daily) Post-Accident Transportation (pays once	2 or more devices Ipy (pays daily)	\$1,000 \$2,000 \$60 \$200 \$500 \$200 \$200 \$400	\$1,500 \$3,000 \$90 \$300 \$750 \$300 \$300 \$600
Medicine Prosthesis Physical, Occupational or Speech Thera Rehabilitation Unit (pays daily) Non-Local Transportation Family Member Lodging (pays daily) Post-Accident Transportation (pays once Broken Tooth	2 or more devices Ipy (pays daily)	\$1,000 \$2,000 \$60 \$200 \$500 \$200 \$400 \$200	\$1,500 \$3,000 \$90 \$300 \$750 \$300 \$600 \$300
Medical Supplies Medicine Prosthesis Physical, Occupational or Speech Thera Rehabilitation Unit (pays daily) Non-Local Transportation Family Member Lodging (pays daily) Post-Accident Transportation (pays once Broken Tooth Residence/Vehicle Modification Pain Management (Epidural Injection)	2 or more devices Ipy (pays daily)	\$1,000 \$2,000 \$60 \$200 \$500 \$200 \$200 \$400	

Alistate BENEFITS



Monthly Premiums

		Plan 1	Plan 2
Member		\$9.09	\$12.51
Member +	Spouse	\$15.92	\$21.94
Member +	Child (ren)	\$21.00	\$29.27
Family		\$28.46	\$39.31

Enroll Now!

 ^4Up to amount shown; see Injury Benefit Schedule on page 5. Multiple losses from same injury pay only up to amount shown above.



INJURY BENEFIT SCHEDULE

Benefit amounts for coverage and one occurrence are shown below. *Covered children get 50% of the amount shown





DISLOCATION*	REDUCTION **	PLAN 1	PLAN 2
Hip joint	Open	\$12,000	\$18,000
	Closed	\$4,000	\$6,000
Knee or ankle joint [*] , bone or bones of the foot [*]	Open	\$4,800	\$7,200
	Closed	\$1,600	\$2,400
Wrist joint	Open	\$4,200	\$6,300
	Closed	\$1,400	\$2,100
Elbow joint	Open	\$3,600	\$5,400
	Closed	\$1,200	\$1,800
Shoulder joint	Open	\$2,400	\$3,600
	Closed	\$800	\$1,200
Bone or bones of the hand [*] , collarbone	Open	\$1,800	\$2,700
	Closed	\$600	\$900
Two or more fingers or toes	Open	\$840	\$1,260
	Closed	\$280	\$420
One finger or toe	Open	\$360	\$540
	Closed	\$120	\$180
FRACTURE*	REDUCTION **	PLAN 1	PLAN 2
Hip, thigh (femur), pelvis**	Open	\$12,000	\$18,000
	Closed	\$4,000	\$6,000
Skull**	Open	\$11,400	\$17,100
	Closed	\$3,800	\$5,700
Arm, between shoulder and elbow (shaft),	Open	\$6,600	\$9,900
shoulder blade (scapula), leg (tibia or fibula)	Closed	\$2,200	\$3,300
Ankle, knee cap (patella), forearm (radius or ulna), collarbone (clavicle)	Open	\$4,800	\$7,200
	Closed	\$1,600	\$2,400
Foot**, hand or wrist**	Open	\$4,200	\$6,300
	Closed	\$1,400	\$2,100
Lower jaw**	Open	\$2,400	\$3,600
	Closed	\$800	\$1,200
Two or more ribs, fingers or toes, bones of face or nose	Open	\$1,800	\$2,700
	Closed	\$600	\$900
One rib, finger or toe, coccyx	Open	\$840	\$1,260
	Closed	\$280	\$420
LOSS	PLAN 1	PLAN 2	
Life, hearing, speech, or both eyes, hands, arms, feet, or le or arm and one foot or leg	\$40,000	\$60,000	
One eye, hand, arm, foot, or leg	\$20,000	\$30,000	
One or more entire toes or fingers		\$4,000	\$6,000

*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). **Avulsion & Chip fracture pays 25% of the Closed Reduction amount. Stress fracture pays 10% of the Closed Reduction amount.

