



**Allstate<sup>®</sup>**  
**BENEFITS**

Provides a monthly benefit  
if you are disabled and  
cannot work

## Disability Insurance

Like most, unless you know someone who has been disabled, you may not see the value of Disability Insurance. You may think it won't happen to you, but if it does, you are vulnerable to lost income.

An injury or sickness may slow you down, but it won't slow down your monthly bills. Expenses such as house and car payments, or even daily expenses such as groceries and gas, will still need to be paid. Disability insurance can help replace your lost income and help ensure your finances are not depleted.

### Here's How It Works

You choose the maximum monthly benefit level that meets your needs. Then, if you are faced with a period of unexpected sickness or off-the-job injury, you will receive cash benefits to use as you see fit. This could include medical treatments, daily living expenses and more.

### Meeting Your Needs

- You choose the monthly maximum benefit level that meets your needs
- Premiums are affordable and conveniently payroll deducted
- You can take your coverage with you if you leave your job or your employer cancels coverage

With Allstate Benefits, you gain the power to make treatment decisions without putting your finances at risk.

**Are you in Good Hands? You can be.**

**DID YOU  
KNOW ?**

**57%**

of working Americans have no disability insurance and are therefore vulnerable to losing their income due to an illness or injury.<sup>1</sup>



<sup>1</sup>Council for Disability Awareness, 2014 Disability Awareness Study

# Meet Joan

Joan is painting her home when she falls from a ladder. She immediately feels sharp pain in her lower back. Following a trip to the emergency room, Joan sees a neurosurgeon who diagnoses Joan with a torn disk. Joan's doctor schedules surgery and estimates that she will be away from work for six to eight weeks.

While concerned about Joan's health, her family also worries about their finances, including:

- Joan's missing or reduced paycheck for up to eight weeks
- The mortgage on the family home
- The children's school and activity expenses
- Everyday living costs, such as groceries, electricity and more



Joan's absence from work due to her disability and recovery totals nine weeks. Fortunately, Joan was protected with Short Term Disability insurance that helped replace her paycheck while she was out of work.



## CHOOSE

Joan purchased Short Term Disability insurance to help protect the family's finances if she had to miss work due to a disability.



## USE

Following Joan's diagnosis, and realizing she would miss work for two months or more, Joan filed her Short Term Disability claim. She received a monthly, lump-sum cash benefit for the duration of her treatment and recovery.

Joan's Short Term Disability benefit gave Joan and her family monthly cash benefits which helped them pay expenses, such as:

- Their home mortgage
- The children's school and activity costs
- Everyday necessities, like groceries



## CLAIM

In addition to her medical coverage, Joan's Short-Term Disability insurance provided the following benefit:

Total Disability



## Using your cash benefits

Our cash benefits provide greater coverage options because you get to determine how to use them.



### Finances

Can help protect your savings, retirement plans and 401ks from being depleted.



### Travel

You can use your cash benefits to help pay for expenses while receiving treatment in another city.



### Home

Your beneficiary can use the cash benefits to help pay the mortgage, continue rental payments, or perform needed home repairs.



### Expenses

The lump-sum cash benefit can be used to help pay your family's living expenses such as bills, electricity and gas.



## MyBenefits: 24/7 Access [allstatebenefits.com/mybenefits](http://allstatebenefits.com/mybenefits)

An easy-to-use website that offers 24/7 access to important information about your benefits. Plus, you can submit and check your claims (including claim history), request your cash benefit to be direct deposited, make changes to personal information, and more.

## BENEFITS

**Total Disability** - Pays when totally disabled. Monthly benefit starts after the waiting period has been satisfied. Disability must begin while actively at work. Benefits continue while totally disabled up to the length of the benefit period.

**Partial Disability** - Pays a monthly benefit when partially disabled from the same sickness or injury, and earnings are 20%-80% of pre-disability earnings. Payments continue while partially disabled up to the length of the benefit period.

**Recurrent Disability** - Pays when disabled from the same or related cause after performing your regular occupation for 14 consecutive days, without a new waiting period or maximum benefit period.

**Pregnancy** - Pays for total disability due to pregnancy the same as any other total disability.

**Waiver of Premium** - Pays the premium after monthly disability benefits are payable for 90 days in a row.

Monthly Benefit: **\$650.00**

Benefit Period: **3 Months**

Elimination Period for Accident: **7 Days**

Elimination Period for Sickness: **7 Days**

## DEFINITIONS

### Total Disability

When, because of sickness or injury, you are unable to perform the material and substantial duties of your regular occupation.

### Partial Disability

You are partially disabled when you are unable to perform the material and substantial duties of your regular occupation due to sickness or injury; and have a 20% or more loss in monthly earnings due to the same sickness or injury; and during the elimination period, are unable to perform the material and substantial duties of your regular occupation and are not working in any occupation.

A disability benefit will continue to be paid after you have received benefits under this plan for at least one month if: you begin performing at least one of the material and substantial duties of your regular occupation or another occupation; and continue to have a 20% or more loss in monthly earnings due to the same sickness or injury.

The loss of a professional or occupational license or certification does not, in itself, constitute disability. Insurer may require you to be examined by a doctor, other medical practitioner, or vocational expert of Insurer's choice. Insurer will pay for this examination. Insurer can require an examination as often as it is reasonable to do so. Insurer may also require employee to be interviewed by an Insurer's authorized representative.

### Elimination Period

A period of continuous total disability which must be satisfied before you are eligible to receive benefits from Allstate Benefits.

### Regular Occupation

The occupation you are performing when disability begins.

## CERTIFICATE SPECIFICATIONS

### Your Eligibility

Your employer decides who is eligible for your group (such as length of service and hours worked each week). Issue ages are 18 and over.

### Leave Provision

We will continue your coverage in accordance with the Policyholder's Human Resource policy on temporary layoff or leave of absence, if premium payments continue and the Policyholder approved your leave in writing. Coverage will be continued for one month following the date you ceased active employment.

If the Policyholder's Human Resource policy does not provide for continuation of your coverage during a family and medical leave of absence, your coverage will be reinstated when you return to active employment.

We will not apply a new waiting period, or apply a new pre-existing conditions exclusion, or require evidence of insurability.

### Termination of Coverage

Coverage ends on the date the group policy is canceled; the last day premium payments were made; the last day of active employment, except as provided under the "Temporarily Not Working" provision; the date you are no longer in an eligible class; or the date you or your class is no longer eligible.

### Continuation of Coverage

Coverage continues for up to 24 months if employment with the policyholder ends. However, to be eligible to continue insurance, you must meet the following requirements on the date your employment ends: have been insured under this policy for at least 12 consecutive months just before your employment ends; and are not disabled; and are not on a leave of absence; and are not retired; and are not covered under any other group disability plan.

You must apply in writing and pay the first premium to us within 31 days after the date employment with the policyholder ends. The continued coverage is the same coverage in effect on the last day of employment, including the monthly earnings.

### How We Calculate Your Monthly Benefit

We follow the below process to calculate your monthly benefit: (1) Multiply your monthly earnings by 60%. (2) Subtract deductible sources of income from item 1. (3) Determine the lesser of item 2 and the maximum monthly benefit amount issued to you. (4) Pay the greater of item 3 or \$100.

### Deductible Sources of Income

The amount that you receive, or are eligible to receive, as disability income payments such as state benefit plans, other employee benefits, salary continuation or sick leave, Social Security or other federal benefits. Your certificate of coverage will give you a complete list based on the group policy issued to your group.

### Pre-Existing Condition Limitation

We do not pay benefits for disability that starts within 12 months of your effective date from a pre-existing condition. You have a pre-existing condition if you received medical treatment, consultation, care or services, including diagnostic measures or took prescribed medications in the 12 months prior to the effective date of coverage.

### Certificate Exclusions

(a) We do not pay benefits for disabilities resulting from: loss of professional or occupational license or certification; or participation in a felony; or intentionally self-inflicted injuries; or active participation in a riot; or committing a crime for which you are convicted under state or federal law; or pre-existing condition; or occupational sickness or injury for which benefits are paid or payable under any Workers' Compensation law. (b) This plan will not cover a disability due to war, declared or undeclared, or any act of war. (c) Insurer will not pay a benefit for any period of disability during which the employee is incarcerated.

### Workers' Compensation or State Disability Insurance

This certificate does not replace or affect the requirements for coverage by any Workers' Compensation or state disability insurance.



Allstate Benefits is the marketing name used by American Heritage Life Insurance Company, a subsidiary of The Allstate Corporation. ©2017 Allstate Insurance Company.  
[www.allstate.com](http://www.allstate.com) or  
[allstatebenefits.com](http://allstatebenefits.com)

This brochure is for use in the Lowe's enrollment which is situated in: NC

Rev. 5/17. This material is valid as long as information remains current, but in no event later than May 15, 2020. Benefits are provided by Group Voluntary Short Term Disability insurance policy GVD-4000, or state variations thereof.

This information highlights some features of the policy but is not the insurance contract. This is a brief overview of the benefits available under the Group Voluntary Policy underwritten by American Heritage Life Insurance Company (Home Office, Jacksonville, FL). Details of the insurance, including exclusions, restrictions and other provisions are included in the certificates issued. For costs and complete details, exclusions, and limitations, contact the Allstate Benefits Lowe's call center at 1-877-215-0939 or go to [www.allstatebenefits.com/lowes](http://www.allstatebenefits.com/lowes).

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