



frequently asked questions



critical illness insurance with medical care support services from Allstate Benefits

COVERAGE AND BENEFITS

Q. Why should I purchase Critical Illness insurance?

A. Critical Illness coverage not only provides financial support if you are diagnosed with a covered critical illness, but also offers advisory services to help address your concerns and provide peace of mind. If you or a covered dependent is diagnosed with one of the critical illnesses covered in the policy, Allstate Benefits will pay you a cash benefit based on the amount of insurance you selected. This money can be used any way you choose. You can use it to pay for experimental therapies, medically-necessary home renovations or additional medical treatment that is not covered through Provincial Health Insurance or your group benefit plan. You can even use it to pay your mortgage, child care and electricity bills. The choice is yours.

Q. How does the Critical Illness coverage work?

A. The Critical Illness plan pays the insured a cash benefit when a covered person is diagnosed with any of the critical illnesses listed in your certificate. The diagnosis must occur after the plan's effective date.

Q. Is skin cancer covered?

A. While most skin cancer is not covered under this policy, certain types of skin cancer may be covered if a biopsy or pathology report shows that the skin cancer is invasive, meaning it has spread to surrounding tissue. In that case, it would be considered an invasive cancer (for example, malignant melanoma).

Q. What is carcinoma in situ?

A. Carcinoma in situ is a cancer where the tumour cells still lie within the tissue of origin without having invaded neighbouring tissue. Carcinoma in situ is payable at 25% of the insured's benefit amount.

Q. If I had cancer within the past five years, am I eligible for coverage?

A. Yes, you are eligible for the Guaranteed Issue amount, subject to any applicable exclusions and limitations. If a previously diagnosed cancer reoccurs after the effective date, we will pay the claim as long as the insured has been symptom- and treatment-free for any 12 consecutive months. This provision does not include the use of maintenance drugs or routine follow-up visits.

Q. How much does Critical Illness insurance cost?

- A.** Refer to the Critical Illness brochure or log into the benefits selection enrolment tool to review premium costs.

Q. Are there any limits on the number of critical illnesses that can be covered?

- A.** A covered person can receive benefits for each critical illness listed in the brochure as long as the events are separated by at least 90 days.

Example: An insured has a heart attack as defined by the certificate of coverage after the effective date; a cash benefit is paid to the insured.

- 72 days after the heart attack, the insured is diagnosed with invasive cancer. No benefit is payable since the events were not separated by 90 days.
- 103 days after the heart attack, the insured has a stroke. A cash benefit is paid to the insured since the events were separated by more than 90 days.

Q. What does the TELUS® Health Care Centres medical concierge service provide?

- A.** Because you have Critical Illness coverage from Allstate Benefits, you have access to medical care support services through TELUS® Health Care Centres, Canada's leading network of diagnostic and consultative health care services. TELUS® Health Care Centres will connect you with a Nurse Navigator, a Registered Nurse who will provide one-on-one personalized support centered on your specific or suspected diagnosis. Concierge services include organization of medical records, facilitation of second opinions and specialist appointments, discussion of treatment options, and assistance with the initial claims process.

Q. How can I connect with a Nurse Navigator?

- A.** Once coverage is effective, you can contact TELUS® Health Care Centres at 1-866-780-2756. You will be directly connected with a Nurse Navigator to help guide you through your health care challenge.

Q. What is PinnacleCare?

- A.** PinnacleCare provides health care advocacy and decision support services in the U.S. If you wish to obtain a second medical opinion in the U.S. or decide to receive treatment for your covered critical illness in the U.S., your TELUS® Health Care Centres Nurse Navigator will coordinate a consultation with PinnacleCare. With your permission, your Nurse Navigator will share your medical records with your assigned PinnacleCare representative so they can guide and support you through the second opinion process and/or during your treatment in the U.S.

DEPENDENTS

Q. Are my dependents covered?

- A.** Refer to the Critical Illness brochure or log into the benefits selection enrolment tool to review dependent information.

Q. What happens if I die after being diagnosed with a covered critical illness?

- A.** If you die soon after diagnosis, the beneficiary you designated during enrolment can submit a claim form and supporting documentation for consideration. As long as your employer or administrator has your Designation of Beneficiary information on file, your beneficiary is eligible to receive any benefits you are due. There is no survival period, which means there is no set amount of time you must remain alive after the policy effective date to be eligible to receive benefits.

PORTABILITY

Q. Are the benefit terms, exclusions and limitations the same if I leave my employer and switch to self-pay?

- A.** Yes, the benefit terms, exclusions and limitations will be the same as those provided under the group policy with the employer. Portable coverage may include any eligible dependents who were covered under the policy. Portability is effective on the day after coverage under the employer's policy ends.

Q. Is the Critical Illness coverage portable?

- A.** Yes, you can continue your coverage after leaving your employer. You must submit a Request to Exercise Portability Privilege form and a form to establish a pre-authorized debit (PAD) from your personal bank account. You can obtain the forms by calling 1-844-436-1105 or by emailing admin@allstatevoluntary.ca and returning the completed forms:

- By email to admin@allstatevoluntary.ca
- By fax to 1-844-436-1107
- By mail to:
Allstate Insurance Company of Canada
Allstate Benefits
PO Box 8100 STN T
Ottawa, ON
K1G 3H6

Both completed forms must be received by Allstate Benefits within 30 days of your termination date.

CLAIMS

Q. How do I submit a claim?

- A. Claim forms and support documentation can be submitted:
- By email to claims@allstatevoluntary.ca
 - By fax to 1-844-436-1107
 - By mail to the address listed on the claim form

Q. What documents are required for a claim to be paid?

- A. A claim form and supporting documentation for the critical illness are required for claims review. The diagnosis must fall under the Certificate of Coverage's definition for the critical illness. The claim form can be obtained by calling 1-844-436-1105 or emailing a request to admin@allstatevoluntary.ca. The claim form explains the specific type of documentation needed to evaluate each claim.

TOBACCO USE

Q. Do premiums depend on smoker status?

- A. Yes. If you or your dependents smoke or use tobacco products, you would pay the Tobacco premium amount.

AGE

Q. Do benefits decrease with age?

- A. Refer to the Critical Illness brochure or log into the benefits selection enrolment tool to review age information.

Q. Will my premium amounts change?

- A. Premiums are calculated based on the primary insured's age. Critical Illness insurance is an age-banded product that could change every five years. Your premium will depend on where your age falls in the age band.

UNDERWRITING

Q. Is this coverage Guaranteed Issue?

- A. During the initial enrolment period, coverage is Guaranteed Issue, meaning you are not required to answer medical questions. You must meet the "Actively at Work" requirement to be eligible, and all exclusions and limitations will still apply to the coverage issued.



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Rev. 5/24. This material is valid as long as information remains current, but in no event later than May 15, 2026. The coverage provided is limited benefit supplemental critical illness insurance. Group Critical Illness benefits are provided under policy form GCIP. Details of the insurance, including exclusions, restrictions, and other provisions are included in the certificates issued. For additional information, you may contact your Allstate Benefits Representative. This is a brief overview of the benefits available under the group policy underwritten by Allstate Insurance Company of Canada (Home Office, Markham, Ontario). Allstate Benefits is a trademark of Allstate Insurance Company, used under license by Allstate Insurance Company of Canada. ©2024 Allstate Insurance Company of Canada. www.AllstateBenefits.ca