



Allstate[®]
HEALTH SOLUTIONS

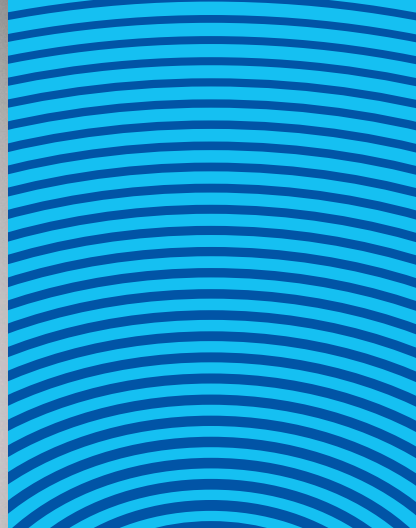
WISCONSIN

Medicare supplement insurance

A little extra protection
goes a long way.



allstatehealth.com



better protection starts with the right plan

Medicare supplement insurance helps you manage your budget, and your health care expenses. With Allstate Health Solutions plans, you'll have protection against the out-of-pocket costs that Medicare Parts A and B might not cover. So unexpected medical care doesn't have to put a strain on your savings. And our plans include added perks and discounts that not only help improve your financial health, but also your overall health and wellness.

Customer care from people who care

- Live support is standing by when you need help with your plan or a claim.
- Our industry professionals offer personalized service and advice to give you the best possible experience.

Wellness perks

Active&Fit Direct™

Choose from 10,000+ fitness centers and 800+ on-demand workout videos to use at home or on the go. No long-term contracts and you can change fitness centers at any time.¹

¹ The Active&Fit Direct program is provided by American Specialty Health Fitness, Inc., a subsidiary of American Specialty Health Incorporated (ASH). Active&Fit Direct is a trademark of ASH and used with permission herein. This is a discount program and is not insurance. The Active&Fit Direct program is separate from any Medicare supplement insurance plan benefits. Registration and membership pricing subject to change. Fees apply.

pick the right plan for you

Provided service:	Medicare pays:	Medicare supplement insurance basic plan pays:
Medicare Part A hospital coverage		
Hospitalization	With Medicare, you have a \$1,632 deductible that must be paid before Medicare pays benefits	Nothing (Optional Part A Deductible Rider Available)
First 60 days of hospital confinement ¹	100% after deductible	Nothing (Optional Part A Deductible Rider Available)
Days 61-90 of hospital confinement ¹	All but \$408 a day	\$408 per day
Day 91 and after of hospital confinement ¹ while using 60 Lifetime Reserve days	All but \$816 a day	\$816 per day
Additional 365 days after use of Lifetime Reserve days ¹	Nothing	100% Medicare eligible expenses
Beyond the additional 365 days	Nothing	Nothing
Blood	All but first three pints	First three pints
Inpatient Psychiatric Care	190 days per lifetime	175 additional days per lifetime
Non-Covered Preventative Care		
Hospice care²		
	All but limited coinsurance/copayments for outpatient drugs and inpatient respite care	Medicare coinsurance/copayment
Skilled Nursing Facility Care³		
First 20 days	100% of Medicare-approved amounts	Nothing
Days 21-100 of admission	All but \$204 per day	Up to \$204 per day
Days 101 and after	Nothing	Nothing

¹ Does not include Nursing Home stays.

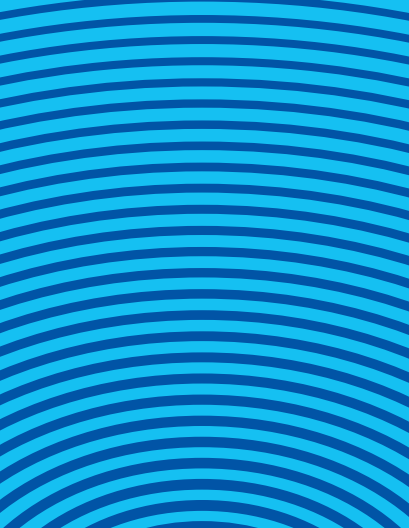
² Must meet Medicare requirements for admission.

Hospital means a Hospital that is approved or eligible to be approved to receive payments from Medicare and is accredited by the Joint Commission on Accreditation of Hospitals. Premium amounts may vary plan and benefit selection.



Provided service:	Medicare pays:	Medicare supplement insurance basic plan pays:
Medicare Part B Outpatient Medical Coverage		
Medical Expenses ³	With Medicare, you have a \$240 deductible that must be paid before Medicare pays benefits	Nothing (Optional Part B Deductible Rider Available) Note: If you are eligible for Medicare on, or after, January 1, 2020, you are not eligible for the Part B Deductible Rider E-B.
Medicare Part B Co-Insurance	80% of the approved charges after you pay the \$240 deductible	20% of Medicare approved charges (Optional Part B Deductible or Part B Copay Rider Available) Note: If you are eligible for Medicare on, or after, January 1, 2020, you are not eligible for the Part B Deductible Rider E-B. Note 2: The Part B Deductible Rider cannot be used in conjunction with the Part B Copay Rider.
Excess Charges (Charges above Medicare approved charges)	Nothing	Nothing (Optional Part B Excess Charges Rider Available)
Benefit for Blood	First three pints: \$0 Additional pints: 80% coinsurance after you pay the \$240 deductible	First three pints: 100% Additional pints: 20% coinsurance after the deductible (Optional Part B Deductible Rider Available)
Clinical Laboratory Services	Medicare pays 100%	Nothing
Home Health Care³		
Medically necessary Skilled Care services and medical supplies	Medicare pays 100%	40 visits (Optional Home Care Rider Available)
Additional Benefits		
Foreign Travel	Medicare pays nothing	Nothing (Optional Foreign Travel Emergency Rider Available)
Available Riders		
Part A Deductible Rider	This optional rider pays 100% of the Medicare Part A deductible.	
Part B Deductible Rider	This optional rider pays 100% of the Medicare Part B deductible. Note: If you are eligible for Medicare on, or after, January 1, 2020, you are not eligible for the Part B Deductible Rider E-B. Note 2: The Part B Deductible Rider cannot be used in conjunction with the Part B Copay Rider.	
Part B Copay Rider	This optional rider pays the remaining balance after you pay \$20 copayment for office visits, \$50 copay for emergency room visit. Waived if admitted. Note: The Part B Copay Rider cannot be used in conjunction with the Part B Deductible Rider.	
Excess Charges Rider	This optional rider pays the difference between what Medicare pays and the amount charged by the provider which may be no greater than the actual charges or the limiting charge allowed by Medicare, whichever is less.	
Home Care Rider	This optional rider provides an additional 325 visits for an aggregate of 365 visits per year when including those covered by Medicare.	
Foreign Travel Emergency Rider	This optional rider pays 80% of billed charges for the first 60 consecutive days you are outside the U.S.	

³ Must meet Medicare requirements for admission.



all the benefits with none of the hassle



Flexibility

See any doctor or go to any hospital without network restrictions. There are also no referrals required for specialists.



No paperwork

All you have to do is present your ID card at the time of service, and the benefits are paid directly to the doctor or hospital.



No waiting

You're able to take advantage of your benefits as soon as your policy is in place — there's no waiting period.



Renewability guaranteed

Your policy automatically renews as long as you pay your premium on time. Coverage increases as Medicare deductibles and coinsurance increases. Premiums may change to reflect these changes.



Satisfaction guaranteed

If you aren't completely satisfied with your plan, you can cancel it within 30 days, and we'll refund you premiums you've paid.

plan details and exclusions

Medicare supplement insurance

- Does not provide “stand-alone” coverage, requires enrollment in Medicare Part A and Part B.
- Does not provide prescription drug benefits.
- Does not provide benefits for vision, dental care, hearing aids, eyeglasses, and private duty nursing.
- Does not duplicate a benefit paid by Medicare.

Rate guarantee

Members get a 12-month rate guarantee for the first year. After the first year, your premium may increase each year, but we will never change premiums unless we do so for all policies like yours in your state on a class basis. We will notify you in advance of any change in premium as required by state law.

Terms and conditions

- A benefit period starts the day you go to a hospital or skilled nursing facility and ends when you have not received hospital or skilled nursing facility care for 60 consecutive days.
- Eligible expenses are costs that are deemed medically necessary by Medicare and covered expenses under your plan.
- Medicare-approved amount is the amount that a physician who accepts assignment can be paid, including what Medicare pays and any other deductibles, coinsurance, or copayments with your original Medicare plan.

Limitations and exclusions

- Expenses incurred while coverage is not in force except as provided as an extension of benefits.
- Hospital or skilled nursing facility confinement incurred during a Medicare Part A benefit period that begins while coverage is not in force.

- That portion of any expense incurred which is paid for by Medicare.
- Services for non-Medicare eligible expenses unless specifically covered under the policy, including, but not limited to, routine exams, take-home drugs and eye refractions.
- Services for which a charge is not normally made in the absence of insurance; or,
- Loss or expense that is payable under any other Medicare supplement insurance policy or certificate.

Note to applicants under age 65

In WI all Medicare supplement standardized plans are offered to qualified individuals under the age of 65.

With all plan selections, you have unlimited lifetime benefits and your coverage keeps up with the changing deductibles and coinsurance amounts whenever Medicare changes — it’s automatic. Your Outline of Coverage will describe each additional benefit in the plan you select.

Summary of benefits

This is a brief description of your coverage. Policies have exceptions and limitations that may limit coverage. For a complete description of benefits, exceptions and limitations, please read your Outline of Coverage and your policy. The premium rate may vary between plans. Coverage ceases upon termination of the policy.



Allstate®

HEALTH SOLUTIONS

about

Allstate Health Solutions is a marketing name for products underwritten by National Health Insurance Company, Integon National Insurance Company, Integon Indemnity Corporation and American Heritage Life Insurance Company. National Health Insurance Company underwrites Medicare supplement products in AK, AL, AR, AZ, CA, CO, DC, DE, IA, ID, IL, IN, KS, KY, LA, MD, MI, MN, MO, MS, MT, NC, ND, NE, NJ, NM, NV, OH, OK, OR, PA, SC, SD, TN, TX, UT, VA, WI, WV, and WY. Products sold in IL, SC, TX, AZ, and CO are underwritten by American Heritage Life Insurance Company.

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, associations and groups. Products are underwritten by National Health Insurance Company, Integon National Insurance Company, Integon Indemnity Corporation and American Heritage Life Insurance Company. These four companies, together, are authorized to provide health insurance in all 50 states and the District of Columbia.



[allstatehealth.com](https://www.allstatehealth.com)

Allstate Health Solutions

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This plan provides limited benefits. This is a limited policy designed to cover only those expenses which Medicare approves but does not cover. Neither Allstate nor its agents are connected with or endorsed by the United States government or the federal Medicare program.

This is a solicitation of insurance. An agent (or the Company) may contact you.

For use in: WI.

Policy Forms 38020 WI, E-A, E-HHC, E-B, E-BEX, E-FTE.

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