What is the Wellness Benefit?
The Wellness Benefit is a rider that is included with your Accident, Critical Illness, and Hospital Indemnity Insurance coverage. It provides an annual benefit payment if you complete a health screening test on or after your coverage effective date, whether or not there is any out-of-pocket cost to you. You only need to complete one health screening test. Note that you may only receive a benefit payment once per year, even if you complete multiple health screening tests. If your spouse and children are covered for Accident Insurance, Critical Illness Insurance, and Hospital Indemnity Insurance, they are also covered for this benefit.

How can the Wellness Benefit help?
Regular health screenings increase the chance of a positive outcome when serious illnesses are detected early. The Wellness Benefit encourages you to get regular health screenings. The benefit payment you receive for your health screening test can be used to help pay for the cost of the test or however you like.

What types of health screening tests are eligible?
Health screening tests include but are not limited to:

- Blood test for triglycerides
- Pap smear or thin prep pap test
- Flexible sigmoidoscopy
- CEA (blood test for colon cancer)
- Bone marrow testing
- Serum cholesterol test for HDL & LDL levels
- Hemoccult stool analysis
- Serum Protein Electrophoresis (myeloma)
- Covid-19 testing
- Breast ultrasound, sonogram, MRI
- Chest x-ray
- Mammography
- Colonoscopy
- CA 15-3 (breast cancer)
- Stress test on bicycle or treadmill
- Fasting blood glucose test
- Thermography
- PSA (prostate cancer)
- Hearing test
- Routine eye exam
- Routine dental exam
- Well child/preventative exams through age 18
- Biometric screenings
- Electrocardiogram (EKG)
- Annual Physical Exam – adults
- CA 125 (ovarian cancer)
- Tests for sexually transmitted infections (STIs)
- Ultrasound screening for abdominal aortic aneurysms
- Hemoglobin A1C (HbA1c)
- Bone density screening

How much does it cost?
The Wellness Benefit is a rider that is automatically included with your Critical Illness Insurance, Accident Insurance, and Hospital Indemnity Insurance coverage at no additional cost to you.

What is my Wellness Benefit amount?

<table>
<thead>
<tr>
<th></th>
<th>Accident Insurance</th>
<th>Critical Illness</th>
<th>Hospital Indemnity Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>You (employee)</td>
<td>$75</td>
<td>$50</td>
<td>$50</td>
</tr>
<tr>
<td>Spouse</td>
<td>$75</td>
<td>$50</td>
<td>$50</td>
</tr>
<tr>
<td>Child</td>
<td>$37.50 each up to a maximum of $150 per year for all children</td>
<td>$25 each up to a maximum of $100 per year for all children</td>
<td>$25 each up to a maximum of $100 per year for all children</td>
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How do I file a claim?
You can quickly and easily file your Wellness Benefit claim online.
1. Go to Voya.com/claims.
2. Scroll down to the "Have a Wellness Benefit Claim?" section and click the “Submit your claim” button.
3. Check all products that apply – Accident Insurance, Critical Illness, and Hospital Indemnity Insurance.
4. Click "Continue" and follow the screen prompts. Once all questions are answered, click “Submit”.

Your Group Name is: Washington County School District
Your Group Number is: 728497

Our Compass insurance products pay a fixed benefit amount upon the occurrence of specified events that occur on or after the insured person’s coverage effective date. They are not health insurance and do not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

This is a summary of benefits only. A complete description of benefits, limitations, exclusions, and termination of coverage will be provided in the certificate of insurance and riders. All coverage is subject to the terms of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern. Insurance products are issued and underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya® family of companies. Critical Illness/Specified Disease Insurance Policy form # RL-CI4-POL-16; Certificate form # RL-CI4-CERT-16; Wellness Benefit Rider form # RL-CI4-WELL-16. Accident Insurance Policy form # RL-ACC3-POL-16; Certificate form # RL-ACC3-CERT-16; Wellness Benefit Rider form # RL-ACC3-WELL-16. Hospital Confinement Indemnity Insurance Policy Form #RL-HI2-POL-18; Certificate Form #RL-HI2-CERT-18; Wellness Benefit Rider Form #RL-HI2-WELL-18. Form numbers, provisions and availability may vary by state.

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