

# Critical Illness Insurance

Explore Your Benefits & Costs



Group Name: Tulare County  
Group Number: 701548

**There are more than just medical bills to pay after a heart attack, stroke, or other unexpected covered medical condition. Critical Illness Insurance provides a benefit payment that can help.** This document includes expanded cost and benefit information for Critical Illness Insurance. As you explore, keep in mind:



No medical questions or tests are required for coverage.



Employees get an annual Wellness Benefit of \$50 for completing an eligible health screening test.



Benefit payments go directly to you. Use them however you'd like!

Critical Illness Insurance doesn't replace your medical coverage; instead, it complements it. **The benefit payments don't go out to pay for medical bills or treatments you may need, instead they come in—directly to you—to be used however you'd like.** Choose this supplemental health insurance product for added protection if one of the following covered conditions comes your way.

Critical Illness Insurance is a limited benefit policy. It is not health insurance, and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

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## How much coverage is available?

You have the option to enroll in coverage in the amount(s) below.

	Coverage Amount
For you	\$5,000 - \$30,000 in \$5,000 increments
Your spouse	\$5,000 - \$15,000 in \$5,000 increments not to exceed 100% of employee benefit
Your children*	\$2,500

\*Child(ren) up to age 26.

## What's covered by Critical Illness Insurance?

Critical Illness Insurance provides benefits for the covered medical conditions and diagnoses shown below. The most common conditions we pay claims for include:



## Sample benefit amounts

If one of these common events happens on or after your coverage effective date, and your claim is approved, benefits are payable at 100% of the Critical Illness benefit amount shown above unless otherwise stated. Use your benefit payment however you'd like:

Covered Condition	% of Benefit
Heart attack*	100%
Cancer	100%
Stroke	100%
Major organ transplant**	100%
Coronary artery bypass	25%

\* A sudden cardiac arrest is not in itself considered a heart attack.

**This is only a small preview of the benefits available to you.**

**See the full Schedule of Benefits toward the end of this document.**

## How much does Critical Illness Insurance cost?

The table below shows how much you'll pay for Critical Illness Insurance. Rates are dependent on your age and amount of coverage selected.

Employee Coverage													
Per Pay Period Rates (24 pay periods)													
Includes Wellness Benefit Rider													
Non-Tobacco User							Tobacco User						
Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000
Under 30	\$0.93	\$1.85	\$2.78	\$3.70	\$4.63	\$5.55	Under 30	\$1.50	\$3.00	\$4.50	\$6.00	\$7.50	\$9.00
30-39	\$1.50	\$3.00	\$4.50	\$6.00	\$7.50	\$9.00	30-39	\$2.43	\$4.85	\$7.28	\$9.70	\$12.13	\$14.55
40-49	\$3.13	\$6.25	\$9.38	\$12.50	\$15.63	\$18.75	40-49	\$5.50	\$11.00	\$16.50	\$22.00	\$27.50	\$33.00
50-59	\$5.90	\$11.80	\$17.70	\$23.60	\$29.50	\$35.40	50-59	\$10.53	\$21.05	\$31.58	\$42.10	\$52.63	\$63.15
60-69	\$9.88	\$19.75	\$29.63	\$39.50	\$49.38	\$59.25	60-69	\$16.95	\$33.90	\$50.85	\$67.80	\$84.75	\$101.70
70+	\$16.13	\$32.25	\$48.38	\$64.50	\$80.63	\$96.75	70+	\$24.03	\$48.05	\$72.08	\$96.10	\$120.13	\$144.15

Spouse Coverage*								Children Coverage	
Per Pay Period Rates (24 pay periods)								Per Pay Period Rates (24 pay periods)	
Includes Wellness Benefit Rider								Includes Wellness Benefit Rider	
Non-Tobacco User				Tobacco User				Coverage Amount	Rate
Age	\$5,000	\$10,000	\$15,000	Age	\$5,000	\$10,000	\$15,000		
Under 30	\$1.10	\$2.20	\$3.30	Under 30	\$1.63	\$3.25	\$4.88	\$2,500	\$0.17
30-39	\$1.63	\$3.25	\$4.88	30-39	\$3.50	\$7.00	\$10.50		
40-49	\$3.60	\$7.20	\$10.80	40-49	\$5.88	\$11.75	\$17.63		
50-59	\$7.05	\$14.10	\$21.15	50-59	\$11.70	\$23.40	\$35.10		
60-69	\$11.25	\$22.50	\$33.75	60-64	\$18.20	\$36.40	\$54.60		
70+	\$16.85	\$33.70	\$50.55	70+	\$25.90	\$51.80	\$77.70		

\*Children birth to age 26; no limit to the number of children per family.

## Schedule of Benefits

The table below outlines a more detailed list of what's covered. Please note that the covered condition/diagnosis must happen on or after your coverage effective date. Benefits are payable at 100% of the Critical Illness benefit amount unless otherwise stated. For a complete description of benefits, exclusions and limitations, refer to your certificate of insurance and riders.

Covered Condition	% of Benefit
Heart attack*	100%
Cancer	100%
Stroke	100%
Major organ transplant**	100%
Coronary artery bypass	25%
Cancer (Non-Invasive)	25%

Type 1 Diabetes	100%
Transient ischemic attacks (TIA)	10%
Ruptured or dissecting aneurysm	10%
Abdominal aortic aneurysm	10%
Thoracic aortic aneurysm	10%
Open heart surgery for valve replacement or repair	25%
Severe burns	100%
Transcatheter heart valve replacement or repair	10%
Coronary angioplasty	10%
Implantable/internal cardioverter defibrillator (ICD) placement	25%
Pacemaker placement	10%
Benign brain tumor	100%
Skin cancer	10%
Bone marrow transplant	25%
Stem cell transplant	25%
Permanent paralysis	100%
Loss of sight, hearing or speech	100%
Coma	100%
Multiple sclerosis	50%
Amyotrophic lateral sclerosis (ALS)	50%
Parkinson's disease	50%
Advanced dementia, including Alzheimer's disease	50%
Infectious disease (hospitalization requirement)***	25%
Occupational Hepatitis B or C	100%

\* A sudden cardiac arrest is not in itself considered a heart attack.

\*\* Major organ transplant means the irreversible failure of your heart, lung, pancreas, entire kidney or liver, or any combination thereof, determined by a physician specialized in care of the involved organ.

\*\*\* Diagnosis of a severe infectious disease by a Doctor, including COVID-19, when a diagnosis occurs on or after the group's coverage effective date; AND Confinement to a Hospital for 5 or more consecutive days, or in a transitional facility for 14 or more consecutive days.

## Benefits for insured children

In addition to the covered conditions mentioned above, coverage for your insured children includes:

Covered Condition	% of Benefit
Cerebral palsy	100%
Congenital birth defects	100%
Cystic fibrosis	100%
Down syndrome	100%
Gaucher disease, type II or III	100%
Infantile Tay-Sachs	100%
Niemann-Pick disease	100%
Pompe disease	100%
Sickle cell anemia	100%

## Multiple benefit payments

You may receive a benefit payment up to 100% of the Critical Illness benefit amount for each different diagnosis, up to the total maximum benefit. (A definition of “different diagnosis” is provided in the certificate of coverage).

**Total maximum benefit:** The total maximum benefit amount is 2 times the Critical Illness benefit amount for each covered condition. Once the total maximum benefit for a covered condition has been paid, no further benefits are payable for that same covered condition.

## What else is included?

The Critical Illness Insurance available through your employer includes the following additional benefits:



**Receive \$50 to use however you'd like**

**Wellness Benefit**

Complete an eligible health screening test, and we'll send you a benefit payment to use however you'd like.

- Employees receive an annual benefit payment of \$50.
- Spouses receive an annual benefit payment of \$50.
- Children receive 50% of your benefit amount per child, with an annual maximum of \$100 for all children.

## Exclusions and limitations

Exclusions and limitations vary by state and by your employer's plan. Please review your certificate of coverage for details.



## Ready to Enroll?

Enrollment instructions will be provided by your employer. If you have additional questions before you enroll, please call:

- Voya Employee Benefits Customer Service at (877) 236-7564 or go to <https://presents.voya.com/EBRC/TulareCounty>

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 and conditions of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern. To keep coverage in force, premiums are payable up to the date of coverage termination. Critical Illness Insurance is underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya® family of companies. Policy form #RL-CI4-POL-16; Certificate form #RL-CI4-CERT-16; Spouse Critical Illness Rider form #RL-CI4-SPR-16; Children's Critical Illness Rider form #RL-CI4-CHR-16; Wellness Benefit Rider form #RL-CI4-WELL-16; Waiver of Premium Rider form #RL-CI4-WOP-16. Form numbers, provisions and availability may vary by state and employer's plan.

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**CI 2.0 Only**

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# Wellness Benefit

Tulare County  
701548



## What is the Wellness Benefit?



The Wellness Benefit is included with your Accident and Critical Illness Insurance coverage. It provides an annual benefit payment if you complete a covered 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, and may only receive a benefit payment once per calendar year, even if you complete multiple tests. You may also receive a benefit payment for your spouse and/or children if they are covered for the Wellness Benefit and complete a health screening test on or after your coverage effective date.

## Getting your Wellness Benefit is easy.

1

You, your covered spouse and/or your covered children complete a health screening test.

### What types of health screening tests are eligible?

#### Covered 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
- Hemocult stool analysis
- Serum Protein Electrophoresis (myeloma)
- Breast ultrasound, sonogram, MRI
- Molecular or antigen test (Coronavirus disease (COVID-19)\*)
- Immunizations
- 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 age 1 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

2

Visit the Voya Claims Center at [voya.com/claims](http://voya.com/claims).

Group policy name: Tulare County

Group policy number: 701548

3

Complete the questions regarding the health screening test, electronically sign and submit your Wellness Benefit claim. A confirmation number will be provided for your reference, as well as the option to save the form for your records.

4

Receive a benefit payment for each covered individual for whom an eligible claim was filed.

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## How can the Wellness Benefit help?

Every day we learn more and more about the importance of regular health screenings and the increased chances of survival 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 can be used to help pay for the cost of the test or however you like.

## It's automatically included.

The Wellness Benefit is included with your Accident and Critical Illness insurance.

## How much is the Wellness Benefit?

Your group's plan specifies the benefit amount payable for each person who completes a health screening test.

### WELLNESS BENEFIT WITH YOUR ACCIDENT INSURANCE:

**\$50**

**For yourself  
& for your covered  
spouse**

**+ \$25**

**50% of the benefit amount  
For each covered child\***

\*Maximum of \$100 for all covered children per calendar year

### WELLNESS BENEFIT WITH YOUR CRITICAL ILLNESS INSURANCE:

**\$50**

**For yourself  
& for your covered  
spouse**

**+ \$25**

**50% of the benefit amount  
For each covered child\***

\*Maximum of \$100 for all covered children per calendar year



If you have any questions about the claim process, call **1-888-238-4840**.

\*Includes COVID tests performed at a medical facility, pharmacy or at-home.

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 and conditions of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern. To keep coverage in force, premiums are payable up to the date of coverage termination. Insurance products are issued by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya® family of companies. Voya Employee Benefits is a division of ReliaStar Life Insurance Company. Product availability and specific provisions may vary by state or employer's plan.

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