

# Wellness Benefit

## At a glance



For employees of Bloomington Independent School District #271 enrolled in Accident Insurance.

### What is the Wellness Benefit?

The Wellness Benefit is a rider that is included with your Accident 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 or children are covered for Accident Insurance, they are also covered for this benefit.

### 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)
- 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

### What is my Wellness Benefit amount?

The annual benefit for you and your covered spouse is \$100 each for completing a health screening test. The annual benefit for any covered child is \$50 up to a maximum of \$200 for all children per calendar year.

### How do I file a claim?

You can quickly and easily file your Wellness Benefit claim online.

1. Go to [Voya.com/claims](http://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.
4. Click “Continue” and follow the screen prompts. Once all questions are answered, click “Submit”.

Your Group Name is: Bloomington Independent School District #271

Your Group Number is: 0065768-9

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. Accident Insurance Policy form # RL-ACC3-POL-16; Certificate form # RL-ACC3-CERT-16; Wellness Benefit Rider form # RL-ACC3-WELL-16 Form numbers, provisions and availability may vary by state. ©2018 Voya Services Company. All rights reserved. CN0208-40038-0219 175518-03/01/2018

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