

Wellness Benefit



What is the Wellness Benefit?

The Wellness Benefit is included with your Critical Illness Insurance coverage. It provides an annual benefit payment after you complete a covered health screening test, even if you didn't have out-of-pocket costs for the health screening test.



How can the Wellness Benefit help?

Receiving regular health screenings is felt to help with detecting serious illnesses early and exercising preventative care. The Wellness Benefit encourages you to get regular health screenings by providing a benefit payment for health screenings, which can be used to help pay for the cost of the test or however you like.



Who qualifies for the Wellness Benefit?

By completing a health screening test, you, your spouse, and/or your children may be eligible if enrolled in Critical Illness coverage. Below are some examples of covered health screening tests.

- Routine exams (Physicals – Adult, dental, eye)
- Mammography
- Colonoscopy
- Well child/preventative exams ages 1 – 18
- Biometric screenings
- Electrocardiogram (EKG)
- Blood testing (ex. Triglyceride, HDL, LDL, fasting glucose, HbA1c)
- Pap smear or thin prep pap test
- Serum cholesterol test for HDL & LDL levels
- Immunizations
- Cancer screenings (ex. CA 15-3, CA 125, CEA, PSA)
- Chest x-ray
- Mental health assessments
- Bone density screening
- Breast ultrasound, sonogram, MRI
- Tests for sexually transmitted infections (STIs)
- Covid test



How much is the Wellness Benefit?

Your employer's policy specifies the benefit amount payable for each person who completes a covered health screening test for the listed coverage below. Please note, you may only receive one benefit payment annually per coverage, even if multiple health screening tests are completed.

Critical Illness

For yourself & for your covered spouse: \$50
For each covered child*: \$50

* Maximum amount for all children may apply



Getting your Wellness Benefit is easy

You can access the Wellness Benefit automatically included in your Critical Illness Insurance coverage by following the short steps below.



Step 1: Complete a health screening test

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



Step 2: Start your claim

Visit the your Employee Benefits Resource Center (EBRC) at <https://presents.voya.com/EBRC/TexasHealthResources>. You can also scan the QR code to file your claim. You'll want to have the following details ready to submit your claim:

Group Name: Texas Health Resources

Group Policy Number: 751766



Step 3: Submit your claim

Complete the questions regarding the health screening test, electronically sign and submit your claim. You will immediately receive a **confirmation number** letting you know the claim submission was successful. Once the claim is set up, you will receive an email with a **claim number**.



Step 4: Check status

To check your claim's status in real-time, visit voya.com/claims and enter your **claim number**. When your claim is approved, you will receive a benefit payment for each covered individual for whom an eligible claim was filed.

If you have any questions about the claim process, call **1-877-236-7564**.



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 is underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya® family of companies. Provisions and availability may vary by state.

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