

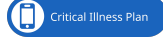
PERSONALIZED BENEFITS 2026



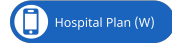
Accident Coverage



Critical Illness Coverage



Hospital Coverage



*Short Term Disability * Long Term Disability * Term Life Insurance*



Permanent Life Insurance w/ Chronic Care Rider



Pet Insurance

Supplemental Health Benefits



See The Value
Even with medical coverage you may still have out-of-pocket medical costs, such as deductibles, copay's and coinsurance, as well as indirect living expenses.

Life doesn't announce surprises, so by signing up for personalized supplemental health benefits, you can help cover unexpected expenses. These benefits can provide you and your family with the coverage and additional financial protection you may need for expenses associated with an unplanned covered accident, illness or hospitalization. They can help you bounce back physically, emotionally, and financially.

Key Features to Consider:

- ▶ **Cash Benefit paid directly to you:** No copays, deductibles, coinsurance, or network requirements.
- ▶ **Use the money however you want:** Pay for medical copays and deductibles, travel to see a specialist, child care, help around the house, alternative treatments and more, it is up to you.
- ▶ **Cost effective:** By signing up through your employer, you get coverage at a low group rate and coverage is guaranteed issue, regardless of your medical history. These plans are portable at the same costs and coverages.

Accident Insurance:

Accident insurance pays a fixed cash benefit directly to you when you have a covered accident-related injury, like a sprain or bone fracture.

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Accident Plan (W)

Examples of covered expenses include:

- ▶ Doctor's office visits
- ▶ Rehab treatment
- ▶ Physical therapy sessions
- ▶ Diagnostic exams

Critical Illness Insurance:

Critical illness insurance provides a fixed, lump-sum cash benefit directly to you when you are diagnosed with a covered health condition such as a heart attack or stroke. You can use this benefit however you like, including to help pay for: Increased living expenses, travel expenses, prescriptions, treatments.

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Critical Illness Plan

Hospital Indemnity Insurance:

When you or a dependent need to be hospitalized, your family deserves to focus on their well-being, not the stress of a stint at the hospital, which can cost an average of \$3,025 per inpatient day.* Hospital indemnity pays a fixed cash benefit directly to you when you experience: Hospital admissions, hospital stays (such as childbirth, Intensive care unit stays

Scan for Video



Hospital Plan (W)

Accident Insurance in Practice

Situation	Alan broke his leg in a bike accident.
Covered Benefits	<ul style="list-style-type: none"> ▶ Doctor's office visits ▶ Diagnostic exams ▶ Broken leg rehab treatment ▶ Physical therapy sessions
Total Benefits Paid Directly to Employee	\$4,250

Critical Illness Insurance in Practice

Situation	Brittney had a heart attack while raking.
Covered Benefits	<ul style="list-style-type: none"> ▶ Heart attack diagnosis
Total Benefits Paid Directly to Employee	\$15,000

Hospital Indemnity Insurance in Practice

Situation	Craig was hospitalized following a car accident.
Covered Benefits	<ul style="list-style-type: none"> ▶ Hospital admission ▶ Hospital stay ▶ Intensive care unit stay
Total Benefits Paid Directly to Employee	\$2,250

Please note the above are only examples **and** are provided for illustrative purposes only. Refer to your Personalized Benefits Guide for more details on your coverage, election options, and rates.

Accident Insurance

How much does it cost?

You have the option to elect supplemental Accident Insurance to meet your needs.

This table shows your rates for Accident Insurance. The cost provided below includes Accident Insurance premium and a fee for Voya Travel Assistance.

Monthly Rates			
Employee	Employee and Spouse	Employee and Children	Family
\$9.73	\$18.53	\$23.31	\$32.11

Your spouse will be covered for the same Accident benefits as you. "Spouse" may include domestic partners or civil union partners as defined by your employer's plan.

If you have coverage on yourself, your natural children, stepchildren, adopted children or children for whom you are legal guardian can be covered up to age 26. Your children will be covered for the same benefit amounts as you. One premium amount covers all of your eligible children. Your children will be covered for the same Accident benefits as you are and one premium amount covers all of your eligible children. If both you and your spouse are covered under this policy as an employee; then only one, but not both, may cover the same children for Accident Insurance. If the parent who is covering the children stops being insured as an employee, then the other parent may apply for children's coverage.

What's covered?

Accident Insurance provides a benefit payment after a covered accident that results in the specific injuries and treatments listed in this document. You may be required to seek care for your injury within a set amount of time. Some of the specific covered treatments and conditions we pay benefits for include those shown below. For a complete description of your available benefits, exclusions and limitations, see your certificate of insurance and any riders.



ER treatment



X-rays



Physical therapy



Stitches



Follow-up doctor
treatment(s)

Accident Insurance

Sample payment amounts

If one of these events happens to you, and your claim is approved, you'd receive a benefit payment in the amount listed below. Use it however you'd like:

Accident-related treatment	Benefit
Emergency room treatment	\$350
X-ray	\$100
Physical therapy (up to 10 per accident)	\$75
Stitches (for lacerations, up to 2")	\$120
Follow-up doctor treatment	\$150
Hospital admission	\$2,000
Hospital confinement (per day, up to 365 days)	\$350

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

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

When is my coverage effective?

If you are already enrolled in Accident Insurance, enhancements to your coverage will be effective on 01/01/2025. Any claims submitted for a covered confinement that occurred prior to 01/01/2025 will result in any approved benefits being payable accordingly to the provisions in effect under the Policy at that time.

Your employer's policy has been enhanced to provide additional benefits starting 01/01/2025. Please note: if you have already purchased this coverage, the benefit offering will not change until this effective date, and any claims submitted for a covered event that occurred prior to this date will result in benefits payable according to the initial benefit schedule.

What else is included?

The Accident Insurance available through your employer also features the following:



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

Wellness Benefit

Complete an eligible health screening test and we'll send you a benefit payment.

- Employees benefit amount is \$50. Spouse's benefit amount is \$50.
- Child receive 100% of your benefit amount per child, with an annual maximum of \$200 for all children.

Accident Insurance

For a list of standard exclusions and limitations, please refer to the end of this document. For a complete description of your available benefits, exclusions and limitations, see your certificate of insurance and any riders.

Additional non-insurance service(s)

Voya Travel Assistance

Access **support** next time you travel

Being in an unfamiliar place can cause stress, especially if something goes wrong. Voya Travel Assistance offers you and your dependents services when traveling 100 miles or more from home, including: medical assistance services, emergency medical transport services, travel assistance services such as pre-trip and cultural information, security services and accessible technology.

Voya Travel Assistance services are provided by International Medical Group, Inc. Indianapolis, IN.

Schedule of Benefits

The following list is a summary of the benefits provided by Accident Insurance. You may be required to seek care for your injury within a set amount of time. Note that there may be some variations by state. For a list of standard exclusions and limitations, go to the end of this document.

- ✓ **Your coverage includes a Sport Accident Benefit.** This means that if your accident occurs while participating in an organized sporting activity (as defined in the certificate of coverage); the benefit amounts in the accident hospital care, accident care or common injuries sections below will be increased by 25%; to a maximum additional benefit of \$1,000.

Event	Benefit
Accident Hospital Care	
Surgery (open abdominal, thoracic)	\$2,500
Surgery (exploratory or without repair)	\$350
Blood, Plasma, Platelets	\$650
Hospital Admission	\$2,000
Hospital Confinement (per day, up to 365 days)	\$350
Critical Care Unit (CCU) Admission	\$2,000
Critical Care Unit Confinement (per day up to 30 days)	\$500
Rehabilitation Facility Confinement (per day up to 90 days)	\$250
Observation Unit Stay	\$400
Induced Coma (up to 14 days)	\$250
Non-Induced Coma (duration of 14 or more days)	\$20,000
Transportation (per trip up to 3 per accident)	\$850
Lodging (per day up to 30 days)	\$225
Family care (per child/adult up to 45 days)	\$40

Accident Insurance

Event	Benefit
Accident Care	
Initial Doctor Visit	\$150
Urgent Care Facility Treatment	\$300
Emergency Room Treatment	\$350
Ground Ambulance	\$600
Air ambulance	\$2,500
Follow-up Doctor Treatment	\$150
Chiropractic Treatment (up to 6 per accident)	\$75
Prescription Medicine	\$20
Medical Equipment	\$500
Physical or Occupational Therapy (per treatment up to 10)	\$75
Speech Therapy (per treatment up to 10)	\$75
Mental Health Therapy (per treatment up to 10)	\$75
Prosthetic Device (one)	\$1,500
Prosthetic Device (two or more)	\$2,400
Major Diagnostic Exams	\$500
CT (computerized tomography) or CAT scan (computerized axial tomography)	
MRI (magnetic resource imaging)	
EEG (electroencephalogram)	
PET (positron emission tomography) scan	
Ultrasound	
Outpatient Surgery	\$300
X-ray	\$100
Common Injuries	
Burns (2 nd degree, at least 36% of body)	\$1,750
Burns (3 rd degree, at least 2% but less than 4% of the total body surface area)	\$10,000
Burns (3 rd degree, 4% or more of the total body surface area)	\$22,000
Skin Grafts (of burn benefit)	50%
Emergency Dental Work (Crown)	\$480
Emergency Dental Work (Extraction)	\$180
Eye Injury (removal of foreign object)	\$120
Eye Injury (surgery)	\$420
Torn Hip, Knee or Shoulder Cartilage (surgery with no repair or if cartilage is shaved)	\$280
Torn Hip, Knee or Shoulder Cartilage (surgical repair)	\$1,000
Laceration ¹ (treated - no sutures)	\$60
Laceration ¹ (sutures up to 2")	\$120
Laceration ¹ (sutures 2" to 6")	\$480
Laceration ¹ (sutures over 6")	\$960
Puncture Wound ¹	\$75
Ruptured Disk (surgical repair)	\$1,000
Tendon, Ligament, Rotator Cuff (exploratory arthroscopic surgery with no repair)	\$720
Tendon, Ligament, Rotator Cuff (1, surgical repair)	\$1,020
Tendon, Ligament, Rotator Cuff (2 or more, surgical repair)	\$1,520

Accident Insurance

Event	Benefit
Concussion	\$450
Traumatic Brain Injury	\$2,500
Paralysis (monoplegia)	\$15,500
Paralysis (hemiplegia)	\$20,000
Paralysis (paraplegia)	\$20,000
Paralysis (quadriplegia)	\$30,000
Dislocations Complete²/Complete Requiring Surgical Repair³	
Hip Joint	\$5,000/\$10,000
Knee	\$3,000/\$6,000
Ankle or foot bone(s) (other than toes)	\$1,800/\$3,600
Shoulder	\$2,200/\$4,400
Elbow	\$1,500/\$3,000
Wrist	\$1,500/\$3,000
Finger/toe	\$350/\$700
Hand bone(s) (other than fingers)	\$1,500/\$3,000
Lower jaw	\$1,500/\$3,000
Collarbone	\$1,500/\$3,000
Incomplete dislocations: % of the complete amount	25%
Fractures Non-Surgical Repair Fracture⁴/Fracture Requiring Surgical Repair⁵	
Hip	\$6,000/\$12,000
Leg	\$2,800/\$5,600
Ankle	\$2,500/\$5,000
Heel	\$2,500/\$5,000
Kneecap	\$2,500/\$5,000
Foot (excluding toes, heel)	\$2,500/\$5,000
Upper arm	\$2,750/\$5,500
Forearm, hand, wrist (except fingers)	\$2,500/\$5,000
Finger, Toe	\$400/\$800
Vertebral body	\$4,200/\$8,400
Vertebral processes	\$2,000/\$4,000
Pelvis (except coccyx)	\$4,000/\$8,000
Coccyx	\$500/\$1,000
Bones of the face (except nose)	\$1,400/\$2,800
Nose	\$750/\$1,500
Upper jaw	\$1,750/\$3,500
Lower jaw	\$2,000/\$4,000
Collarbone	\$2,000/\$4,000
Rib	\$600/\$1,200
Skull – Simple (except bones of the face)	\$1,750/\$3,500
Skull – Depressed (except bones of face)	\$5,000/\$10,000
Sternum	\$500/\$1,000
Shoulder blade	\$2,500/\$5,000
Chip Fractures: % of the Non-Surgical Repair	25%

Accident Insurance

Accidental Death & Dismemberment

Your coverage also includes Accidental Death & Dismemberment benefits. This means that if you are severely injured or pass away due to an accident, additional benefits may apply. See the chart below for more details. A “common carrier” is commercial transportation that operates on a regular schedule, between predetermined points or cities (such as a bus or airline route).

	Benefit
Accidental Death Benefits	
Common carrier accident	
Employee	\$200,000
Spouse	\$100,000
Children	\$50,000
Other accident	
Employee	\$100,000
Spouse	\$50,000
Children	\$20,000
Accidental Dismemberment Benefits	
Loss of both hand or both feet or sight in both eyes	\$40,000
Loss of one hand or one foot AND the sight of one eye	\$30,000
Loss of one hand AND one foot	\$30,000
Loss of one hand OR one foot	\$15,000
Loss of two or more fingers or toes	\$2,500
Loss of one finger or one toe	\$1,500

Catastrophic Accident

Your coverage also includes Catastrophic Accident benefits. This means that if you are severely injured in a covered accident, you may receive an additional benefit payment. Note that you will be eligible to receive this benefit payment 365 days after the covered accident. A catastrophic accident leads to the total and permanent loss of any of the following: both hands or both feet, the use of both arms or both legs, one hand and one foot, one arm and one leg, the sight of both eyes, hearing in both ears, or the ability to speak.

	Benefit
Catastrophic Accident Benefits	
Employee	\$120,000
Spouse	\$60,000
Children	\$30,000
Home Modification Benefit	\$5,000
Vehicle Modification Benefit	\$5,000

Critical Illness Insurance

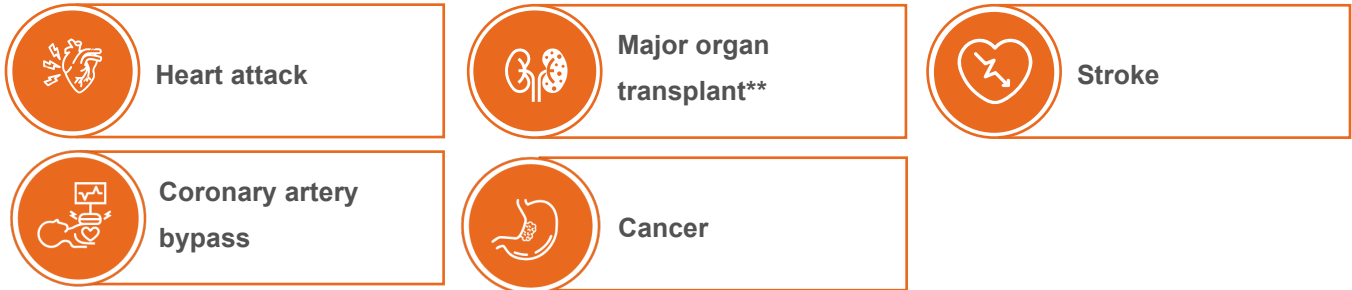
Coverage Amount	
For you	Choice of \$5,000, \$10,000, \$15,000, or \$20,000
Your spouse*	50% of employee benefit
Your children**	50% of employee benefit

*"Spouse" may include domestic partners or civil union partners as defined by your employer's plan.

**Child(ren) up to age 26.

What's covered by Critical Illness Insurance?

Critical Illness Insurance provides a benefit payment for the diagnoses of a covered illness or condition such as:



Sample benefit amounts

If one of these 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	50%

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

** Listed in the certificate of coverage as "major organ transplant," which 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.

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

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

Critical Illness Insurance

Employee Coverage									
Monthly Rates									
Non-Tobacco User					Tobacco User				
Attained Age	\$5,000	\$10,000	\$15,000	\$20,000	Attained Age	\$5,000	\$10,000	\$15,000	\$20,000
Under 30	\$0.90	\$1.80	\$2.70	\$3.60	Under 30	\$1.40	\$2.80	\$4.20	\$5.60
30-39	\$1.50	\$3.00	\$4.50	\$6.00	30-39	\$2.45	\$4.90	\$7.35	\$9.80
40-49	\$2.45	\$4.90	\$7.35	\$9.80	40-49	\$4.10	\$8.20	\$12.30	\$16.40
50-59	\$6.00	\$12.00	\$18.00	\$24.00	50-59	\$9.95	\$19.90	\$29.85	\$39.80
60-64	\$8.35	\$16.70	\$25.05	\$33.40	60-64	\$14.25	\$28.50	\$42.75	\$57.00
65-69	\$8.35	\$16.70	\$25.05	\$33.40	65-69	\$14.25	\$28.50	\$42.75	\$57.00
70+	\$14.35	\$28.70	\$43.05	\$57.40	70+	\$22.05	\$44.10	\$66.15	\$88.20

Spouse Coverage									
Monthly Rates									
Non-Tobacco User					Tobacco User				
Attained Age	\$2,500	\$5,000	\$7,500	\$10,000	Attained Age	\$2,500	\$5,000	\$7,500	\$10,000
Under 30	\$0.45	\$0.90	\$1.35	\$1.80	Under 30	\$0.70	\$1.40	\$2.10	\$2.80
30-39	\$0.75	\$1.50	\$2.25	\$3.00	30-39	\$1.23	\$2.45	\$3.68	\$4.90
40-49	\$1.23	\$2.45	\$3.68	\$4.90	40-49	\$2.05	\$4.10	\$6.15	\$8.20
50-59	\$3.00	\$6.00	\$9.00	\$12.00	50-59	\$4.98	\$9.95	\$14.93	\$19.90
60-64	\$4.18	\$8.35	\$12.53	\$16.70	60-64	\$7.13	\$14.25	\$21.38	\$28.50
65-69	\$4.18	\$8.35	\$12.53	\$16.70	65-69	\$7.13	\$14.25	\$21.38	\$28.50
70+	\$7.18	\$14.35	\$21.53	\$28.70	70+	\$11.03	\$22.05	\$33.08	\$44.10

Children Coverage	
Monthly Rates	
Coverage Amount	Rate
\$2,500	\$0.85
\$5,000	\$1.70
\$7,500	\$2.55
\$10,000	\$3.40

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

Critical Illness Insurance

Schedule of Benefits

The table below presents a more detailed list of the conditions covered under Critical Illness Insurance. 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 list of standard exclusions and limitations, please refer to the exclusions section later in this document. For a complete description of your benefits, along with applicable provisions, conditions on benefit determination, exclusions and limitations, see your certificate of insurance and any riders.

Covered Condition	% of Benefit
Base Module	
Heart attack*	100%
Cancer	100%
Stroke	100%
Sudden cardiac arrest	100%
Major organ transplant (includes Major Organ Failure & End Stage Renal (Kidney) Failure)**	100%
Coronary artery bypass	50%
Carcinoma in situ	50%
Major Organ Module	
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%

Critical Illness Insurance

Enhanced Cancer Module

Benign brain tumor	100%
Skin cancer	10%
Bone marrow transplant	25%
Stem cell transplant	25%

Quality of Life Module

Permanent paralysis	100%
Loss of sight	100%
Loss of hearing	100%
Loss of speech	100%
Coma	100%
Multiple sclerosis	100%
Amyotrophic lateral sclerosis (ALS)	100%
Parkinson's disease	100%
Advanced dementia, including Alzheimer's disease	100%
Huntington's disease	100%
Muscular dystrophy	100%
Infectious disease (hospitalization requirement)***	25%
Addison's disease	10%
Myasthenia gravis	50%
Systemic lupus erythematosus (SLE)	50%
Systemic sclerosis (scleroderma)	10%

* 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.

Critical Illness Insurance

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%
Type 1 diabetes	100%
Type IV glycogen storage disease	100%
Zellweger syndrome	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 unlimited 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.

For skin cancer, the benefit is payable up to 1 times per calendar year, 10 times lifetime maximum limit.

Hospital Indemnity Insurance

Hospital Confinement Indemnity Rates by Level		
Coverage Type	Daily Benefit	Monthly Rates (12 Pay period)
Employee	\$150	\$16.54
Employee + Spouse	\$150	\$33.16
Employee + Children	\$150	\$26.51
Employee + Family	\$150	\$43.13

*Child(ren) birth to age 26; no limit to the number of children per family.

How does it work?

Hospital Indemnity Insurance pays a benefit for an eligible confinement or other covered loss that occurs on or after your coverage effective date and subject to any exclusions in your Certificate. The following is a summary of the benefits provided by Hospital Indemnity Insurance. For a list of standard exclusions and limitations, go to the end of this document. For a complete description of your available benefits, exclusions and limitations, see your certificate of insurance and any riders. The coverage amounts are listed below.

Each available admission benefit is payable up to a maximum of 2 per calendar year.

The admission and daily confinement benefit amounts depend on the type of facility and the number of days of confinement. Only one type of confinement or admission benefit is payable per day. Any combination of confinement and admission benefits payable will not exceed a total of 125 days during a period of confinement.



When your stay begins

When you are admitted to a covered medical facility, you become eligible for an admission benefit for the first day of confinement. This benefit is payable once per confinement, up to a maximum of 2 admission (s) per calendar year:

Type of Admission	Benefit Amount
Hospital Admission	\$1,000



As your stay continues

Beginning on Day 2 of your confinement, for each day that you have a stay in a covered facility, you'll be eligible for a fixed daily benefit payment. The benefit amount and maximum number of days per confinement varies by facility:

Hospital Indemnity Insurance

Type of Facility	Daily Benefit
Hospital confinement (1 x the daily benefit amount, up to 31 days maximum per confinement)	\$150
Critical Care Unit (CCU) confinement (2 x the daily benefit amount, up to 31 days maximum per confinement)	\$300
CCU Step down confinement (1 ½ x the daily benefit amount per day, up to a 31 day maximum per confinement)	\$225
Rehabilitation Facility confinement (1x the daily benefit amount, up to 31 days maximum per confinement)	\$150

Observation Unit

At least 4 consecutive hours but less than 20 consecutive hours, other than as an inpatient. Not payable for any day that a facility confinement or admission benefit is payable.

\$100



If you add a child to your family

Hospital Indemnity Insurance benefits are available if you have employee or spouse coverage and the insured employee or spouse is hospitalized for childbirth. In addition, your newborn children may be covered as well. See below for more details and for a complete description of your available benefits, exclusions and limitations, see your certificate of insurance and any riders.

If child coverage is effective before the child is born

- Benefits will apply just as they would for any other child.

If child coverage is NOT effective before the child is born

- A one-time benefit of \$100 is payable for the newborn child's birth
- No admission benefit is payable.

Hospital Indemnity Insurance

What else is included?

The Hospital Indemnity Insurance available through your employer includes the following additional benefits.



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

Wellness Benefit

This provides an annual benefit payment if you complete an eligible health screening test (such as an annual physical) or experience a covered hospital stay, and receive a benefit payment.

- For employees, the annual benefit amount is \$50.
- Your spouse's annual benefit amount is \$50.
- The annual benefit for child coverage is \$50.

A benefit is payable only once per year, even if the covered person receives multiple health screening tests.

How to file an insurance claim



For certificate holders of Accident, Critical Illness* and/or Hospital Indemnity Insurance.

Wellness Benefit claims can even be submitted from your mobile device at voya.com/claims

Helpful tip:



Don't feel like printing? Forms may be completed, signed and submitted electronically.

Step 1

Visit the Voya Claims Center at voya.com/claims and click on "Start A Claim"

Step 2

Complete the questionnaire so that a custom claim form package can be generated for you.

Step 3

Download your claim form package.

Step 4

Have each form completed by the appropriate party, as outlined by the claim form package.

Step 5

Gather any additional supporting documents as instructed on the claim form "for you".

Step 6

Submit your completed and signed forms, and any supporting documents using your preferred method.

- Submit your claim through secure upload
- Go to voya.com/claims and click on "Submit your Forms"
- Mail information is provided at the top of the form



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

*Referred to as Specified Disease in some states.

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.

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Short Term Disability Insurance

Coverage Amount

\$100 increments of coverage, not to exceed of 60% of weekly earnings. Minimum weekly benefit \$25 and maximum weekly benefit \$1,500.



Waiting period

Waiting period

If you become disabled, you must complete a waiting period before Weekly Income Benefits are payable.

Option 1

- The benefit waiting period for a disability caused by an accidental injury* is 14 days.
- The benefit waiting period for a disability caused by a sickness is 14 days.

Option 2

- The benefit waiting period for a disability caused by an accidental injury* is 30 days.
- The benefit waiting period for a disability caused by a sickness is 30 days.

*You must see a doctor within 48 hours of the accident. If you do not, the benefit waiting period for sickness will apply.



How long benefit payments last

Short Term Disability Income Insurance is intended to replace income for a disability that lasts just a few weeks. The maximum amount of time that you're able to receive Short Term Disability benefit payments is 26 weeks.

Short Term Disability Insurance

Evidence of Insurability (health questions)

New Hires

- You do not need to provide evidence of insurability to be covered.

Annual Enrollment

- If you do not have current coverage, and you apply more than 31 days after the date you first become eligible, you will need to submit evidence of insurability for any coverage elected.
- Any elections for increased coverage will require evidence of insurability.
- When evidence of insurability is required, the insurance company will need to approve it before coverage becomes effective.

How much does it cost?

Your premiums are deducted on a post-tax basis.

Use the chart below to find your monthly cost, based on the amount of coverage you'd like to elect. You can elect up to 60% of your basic weekly earnings. (Your "basic weekly earnings" are the weekly salary or wage you receive from your employer, not including commissions, bonuses, overtime pay, any other extra compensation, or income received from sources other than your Employer).

Short Term Disability rates – 14/14 EP	
Age*	Monthly rate per \$100 of weekly benefit
0-29	\$0.85
30-34	\$0.97
35-39	\$0.99
40-44	\$1.08
45-49	\$1.33
50-54	\$1.63
55-59	\$2.05
60-64	\$2.67
65+	\$2.90

Short Term Disability Insurance

Short Term Disability rates – 30/30 EP

Age*	Monthly rate per \$100 of weekly benefit
0-29	\$0.74
30-34	\$0.83
35-39	\$0.85
40-44	\$0.92
45-49	\$1.15
50-54	\$1.40
55-59	\$1.77
60-64	\$2.30
65+	\$2.51

Long Term Disability Insurance

Coverage Amount

Eligible employees may elect \$100 increments of coverage, not to exceed 60% of monthly earnings, with a minimum benefit election of \$300 and a maximum benefit of \$6,000.



Waiting period

Waiting period: 180 consecutive days within 360 calendar days.

Any days that you are able to work after the start of your disability will not count toward your waiting (elimination) period. You may be eligible for Short Term Disability payments during this time.



How long benefit payments last

Long Term Disability Income benefits are available until you recover from your disability, or until you reach the maximum period of payment listed below.

For a disability which begins before you reach age 60, the maximum period of payment will be until the Social Security Normal Retirement Age (SSNRA), as shown in the following table:

Year of birth	Social Security retirement age (SSNRA)*
Before 1938	65 years
1938	65 years and 2 months
1939	65 years and 4 months
1940	65 years and 6 months
1941	65 years and 8 months
1942	65 years and 10 months
1943-1954	66 years
1955	66 years and 2 months
1956	66 years and 4 months

Long Term Disability Insurance

1957	66 years and 6 months
1958	66 years and 8 months
1959	66 years and 10 months
After 1959	67 years

For a disability which starts on or after you reach age 60, the maximum period of payment will be determined according to the following table:

Age when Disability begins	Maximum period of payment
60	60 months or to SSNRA*, whichever is greater
61	48 months or to SSNRA*, whichever is greater
62	42 months or to SSNRA*, whichever is greater
63	36 months or to SSNRA*, whichever is greater
64	30 months or to SSNRA*, whichever is greater
65	24 months
66	21 months
67	18 months
68	15 months
69 and over	12 months

*Age at which you are entitled to unreduced Social Security benefits based on the Social Security Amendments of 1983.

How much does it cost?

Rates shown are guaranteed until: 1/1/2027. Your contributions are deducted on a post-tax basis.

The cost is calculated based on your age at the start of the plan's current policy year.

Long Term Disability monthly rates	
Age	rates per \$100 of monthly benefit
Under 25	\$0.13
25-29	\$0.17
30-34	\$0.27
35-39	\$0.42
40-44	\$0.63
45-49	\$0.72
50-54	\$0.88
55-59	\$1.05
60 and over	\$0.68

Long Term Disability Insurance

What else is included?

The Long Term Disability Income Insurance available through your employer includes the following additional benefits. For a complete description of your available benefits, along with applicable provisions, exclusions and limitations, see your certificate of insurance and any riders.



Maintain coverage at no cost

Waiver of Premium

While you're receiving Long Term Disability Income Insurance benefits from us, you won't need to pay premiums.



Get help filing for Social Security

Social Security Disability Income (SSDI) filing assistance

When appropriate, we will help you file for SSDI benefits, which can be a very difficult process.



Leave a benefit behind for a loved one

Survivor Benefit

If you pass away while receiving Disability benefits, we may pay your eligible survivor a lump-sum benefit equal to three times your monthly payment.






Prepare for a return to work

Vocational rehabilitation

We have vocational rehabilitation services available to assist you in returning to work when possible. If applicable, we will provide you with a written plan developed specifically for you.

Group Term Life Insurance

	Coverage Amount
 For you	Your employer provides you with Basic Life Insurance and Basic AD&D Insurance of 2 times your annual salary to a maximum of \$500,000.
 Your spouse*	Your employer provides you with \$1,000 of Basic Life Insurance on your spouse. There is no cost to you for this insurance.
 Your child(ren)*	Your employer provides you with \$1,000 of Basic Life Insurance on your children. There is no cost to you for this insurance.




Add supplemental coverage based on your needs

In addition to the basic coverage being provided at no cost to you, you have the opportunity to elect additional coverage called Supplemental Life Insurance. Supplemental Employee Accidental Death & Dismemberment insurance is also included, which provides the insured person or their beneficiary a payment separate from the life insurance benefit if the insured person dies or is severely injured in a covered accident.

When you enroll, you'll have the opportunity to choose up to the following amount(s):



Not sure how much you need? Try the Life Insurance Calculator at go.voya.com/lifecalc to learn more.

	Coverage Amount	Guaranteed Issue Limit
 For you	\$10,000 to \$300,000 in \$10,000 increments.	\$100,000
 Your spouse*	\$5,000 to \$250,000 in \$5,000 increments, not to exceed 50% of your approved employee Supplemental Life Insurance amount.	\$20,000
 Your child(ren)*	\$10,000 on your children from birth to age 26.	\$10,000

Group Term Life Insurance

Employee and Spouse Supplemental Life Insurance Rates

Age	Monthly rate per \$1,000 of coverage
Under 25	\$0.070
25-29	\$0.083
30-34	\$0.106
35-39	\$0.130
40-44	\$0.165
45-49	\$0.280
50-54	\$0.440
55-59	\$0.680
60-64	\$0.860
65-69	\$1.500
70 +	\$3.450

The rates are per individual.

Supplemental Accidental Death and Dismemberment (AD&D) Insurance Rates

Coverage type	Monthly rate per \$1,000 of coverage
Employee Supplemental AD&D	\$0.02

Children Life Insurance Rates

Monthly cost for all eligible children

Monthly rate per \$1,000 of coverage

\$0.10



To calculate your total monthly cost:

	Employee	Spouse	Child(ren)
1. Enter the amount of coverage you'd like for you, your spouse, and your child(ren).			
2. Divide each amount by 1,000.			
3. Using the rate tables above, find the appropriate rate per \$1,000 of coverage for each person.			
4. Multiply each answer from Step 2 by the appropriate rate.			
5. Add your answers from Step 4 together to find your total monthly cost.			

Group Term Life Insurance

What else is included?



**receive a
portion of
the benefit
early**

Accelerated Death Benefit

If you have a medical condition that requires permanent continuous confinement in an institution or are diagnosed with a terminal illness with a limited life expectancy, you may receive a portion of your death benefit while still living. Receipt of the accelerated benefit may be taxable, or may adversely affect your eligibility for Medicaid or other government benefits. You should consult your personal tax advisor to assess the impact of this benefit.



**continue
coverage at
no cost**

Waiver of Premium benefit

If you aren't working because you are totally disabled, Waiver of Premium allows you to keep your Group Term Life Basic and Supplemental coverage for a period of time without paying premiums.



**keep
coverage if
employment
ends**

Continue or convert coverage

The portability provision allows for if your employment ends or you no longer meet your employer's eligibility criteria, you have the option to continue coverage by paying premiums directly to the insurance company. Or you may choose to convert coverage into an individual Whole Life Insurance policy. Coverage for your spouse or children is also available.

A complete description of benefits, limitations, exclusions and termination of coverage will be provided in the certificate of insurance and riders.

Group Term Life Insurance

The following non-insurance services are also provided:

Obtain support when experiencing a loss.

Bereavement Support, including Funeral Planning & Will Preparation

We work with Empathy to offer you Bereavement Support, including Funeral Planning & Will Preparation services. Combining technology and human care, Empathy helps families prepare for the future and navigate the emotional and practical challenges associated with loss.

From planning a funeral to the logistics of winding down an estate, Empathy offers an impactful solution to you and your family after the loss of a loved one.

Empathy's bereavement support is also fully accessible to your loved ones, and various family members can share and join your account.

Bereavement Support, including Funeral Planning & Will Preparation services are provided by The Empathy Project, Inc., New York, NY.

Access **extra support** the next time you travel.

Voya Travel Assistance

Being in an unfamiliar place can cause stress, especially if something goes wrong. Voya Travel Assistance offers you and your dependents services when traveling 100 miles or more from home, including: medical assistance services, emergency medical transport services, travel assistance service such as pre-trip and cultural information, security services and accessible technology.

Voya Travel Assistance services are provided by International Medical Group, Inc. Indianapolis, IN.

AFLAC GROUP LIFE TERM TO 120

Aflac makes simple and affordable life coverage available to help keep your loved ones financially secure, even if you can no longer provide for them.

While we all know that life insurance helps protect our loved ones for the long term, sometimes we don't consider that there are other benefits of a whole life insurance plan as well.

Aflac Group Life Term to 120 offers guaranteed-issue living and death benefits, with the predictability of a whole-life plan, at rates that won't increase, allowing you to help prepare your family for a financially secure future.

Your family depends on you to help protect their financial future. Count on Aflac for more than just life.

Aflac Group Life Term to 120 insurance doesn't only look out for your family's tomorrow--it also works hard for you today.

Product Features:

- You may apply for guaranteed-issue benefit amounts without any medical questions.
- Premiums will not increase.
- Benefits may be paid directly to your named beneficiary.
- Once your Term Life insurance application has been approved and payroll deductions have started, the coverage is yours to keep as long as you continue to pay premiums.
- Coverage is portable (with certain stipulations), which means you can take it with you if you change jobs or retire.

Aflac Group Life Term to 120 insurance is flexible, too. You can apply for coverage that fits your budget and lifestyle.

Aflac Group Life Term to 120 Benefit Coverage Options:

- Employee
- Spouse
- Child coverage is available through the Child Term Life Insurance Rider

Benefits Overview

Death Benefit (Employee and Spouse (see eligibility) coverage available)

In the event of the insured's death, a one-time lump sum Death Benefit payment will be paid to the beneficiary.

Age Reductions (Employee and Spouse)

- If issued prior to age 60, benefits reduce by 50% at age 70
- If issued at or after age 60, benefits reduce by 50% at 10 years after coverage effective date.

The plan has limitations and exclusions that may affect benefits payable. This brochure is for illustrative purposes only. Refer to your certificate for complete details, definitions, limitations, and exclusions.

For more information, ask your insurance agent/producer or call 1.800.433.3036. aflacgroupinsurance.com

CHILD TERM LIFE INSURANCE RIDER

WHAT DOES THIS RIDER PROVIDE?

The rider provides life insurance coverage on the primary insured's covered children under age 26. We will pay the Death Benefit to the primary insured, if living, unless another beneficiary has been elected in writing.

CAN COVERAGE CONTINUE FOR A COVERED CHILD WITH A DISABILITY?

Coverage may continue for a child who is incapable of self-sustaining employment by reason of mental or physical disability and who continues to meet the definition of child except for the age limit. See certificate for details.

WHAT HAPPENS IF THE PRIMARY INSURED DIES?

If the primary insured dies while this coverage is in force the rider will terminate. We will refund any portion of premium paid on the rider for the period beyond the date of the primary insured's death.

CAN THE RIDER BE CONVERTED?

When the child's coverage under the rider ends for any reason other than nonpayment of premium or the child attaining the limiting age for coverage under the certificate, the rider may be eligible for conversion to a new individual life insurance policy.

WHAT IS THE TERM PERIOD?

The term period of the rider begins on the date this rider becomes effective and ends for each covered child on the covered child's 26th birthday.

ACCIDENTAL DEATH BENEFIT RIDER

WHAT DOES THE RIDER PROVIDE?

We will pay an additional benefit equal to the Death Benefit amount if the insured dies as the result of a covered accidental injury.

Death must occur as a direct result of injuries sustained in a covered accident and must occur within 180 days of such accident. Unless prohibited by law, we have the right to examine the body and have an autopsy done at any time.

WAIVER OF PREMIUM BENEFIT RIDER

WHAT DOES THIS BENEFIT PROVIDE?

If you, the primary insured, are totally disabled for 3 continuous months, we will waive premiums for up to 24 months, and the amount payable will not be reduced. See certificate for full details.

ACCELERATED BENEFIT RIDER

The Accelerated Benefit Rider is for the primary insured and spouse only.

Issue Ages: 18-70

WHAT WE WILL PAY

If the insured is diagnosed with a terminal illness, a one-time lump sum benefit of up to 50% of the Life Insurance Benefit is payable.

If the insured is diagnosed with a chronic condition, you can choose a one-time lump sum benefit of up to 50% of the Life Insurance Benefit

– OR –

Periodic payments in the amount of 4% of the Life Insurance Benefit (maximum of 25 payments). Each additional periodic payment must be separated by a period of 30 days or more.

Any payment made under the Accelerated Benefit Rider will automatically reduce the Death Benefit payable under the certificate by the amount paid under the rider.

If periodic payments have been made for a chronic condition and you later request a lump sum benefit for terminal illness, the amount payable will be less any amount paid previously under the rider.

Once a lump sum benefit has been paid under the rider, no further benefits will be paid and rider coverage will end for the insured.

AFLAC GROUP LIFE TERM TO 120 INSURANCE

CHILD TERM LIFE INSURANCE RIDER SUMMARY PAGE

CHILD TERM LIFE INSURANCE RIDER

WHAT DOES THE RIDER PROVIDE?

The rider provides life insurance coverage on the primary insured's covered children under age 26. We will pay the Death Benefit to the primary insured, if living, unless another beneficiary has been elected in writing.

CAN COVERAGE CONTINUE FOR A COVERED CHILD WITH A DISABILITY?

Coverage may continue for a child who is incapable of self-sustaining employment by reason of mental or physical disability and who continues to meet the definition of child except for the age limit. See certificate for details.

WHAT HAPPENS IF THE PRIMARY INSURED DIES?

If the primary insured dies while the coverage is in force, the rider will terminate. We will refund any portion of premium paid on the rider for the period beyond the date of the primary insured's death.

CAN THE RIDER BE CONVERTED?

When the child's coverage under the rider ends for any reason other than nonpayment of premium or the child attaining the limiting age for coverage under the certificate, the rider may be eligible for conversion to a new individual life insurance policy.

WHAT IS THE TERM PERIOD?

The term period of the rider begins on the date this rider becomes effective and ends for each covered child on the covered child's 26th birthday.

IS THERE A BENEFIT LIMITATION IF THE COVERED CHILD COMMITS SUICIDE?

If the covered child commits suicide, while sane or insane, within one year from the rider effective date, death benefits will not be paid. We will refund all premiums paid for the rider.

Underwritten by:
Continental American Insurance Company (CAIC)



aflacgroupinsurance.com | 1.800.433.3036 | 1.866.849.2970 fax

Continental American Insurance Company (CAIC), a proud member of the Aflac family of insurers, is a wholly-owned subsidiary of Aflac Incorporated and underwrites group coverage. CAIC is not licensed to solicit business in New York, Guam, Puerto Rico, or the Virgin Islands. This advertisement is intended to be used in conjunction with the Aflac Group Life Term to 120 product brochure, and further details pertaining to this coverage can be found there. However, this advertisement is a brief description of coverage and is not a contract. Read your certificate carefully for exact terms and conditions. This piece is subject to the terms, conditions, and limitations of Policy Form ICC22 C93100.

All provisions of the certificate that do not conflict with the rider provisions will also apply to the rider. The rider has no cash value or loan value and does not participate in dividends.

Continental American Insurance Company • Columbia, South Carolina

AFLAC GROUP LIFE TO TERM 120 INSURANCE

EXTENSION OF CHRONIC CONDITION PERIODIC PAYMENTS RIDER SUMMARY PAGE

This rider is not long-term care coverage.

EXTENSION OF CHRONIC CONDITION PERIODIC PAYMENTS RIDER

WHAT DOES THE RIDER PROVIDE?

Maximum of 25 payments of 4% of the life insurance benefit amount. Each additional periodic payment must be separated by a period of 30 days or more.

Once periodic benefit payments have been exhausted under the Accelerated Benefit Rider and a period of 30 days has passed, you can extend benefits payable for a chronic condition.

If the lump-sum payment method is chosen under the Accelerated Benefit Rider, no benefits are available under the rider and coverage will end for that insured.

ARE THERE ANY LIMITATIONS ON PAYMENT?

Payment cannot be made if:

- The Lump-Sum Payment Method was selected for a chronic condition under the Accelerated Benefit Rider;
- You or your doctor reside outside the United States and its territories;
- You or your spouse are required by law to accelerate benefits to meet the claims of creditors; or
 - In Connecticut, this limitation does not apply.
- A government agency requires you or your spouse to apply for benefits to qualify for a government benefit or entitlement.
 - In Connecticut, this limitation does not apply.

NOTICE: Payment under this Extension of Chronic Condition Periodic Payments Rider may be taxable. As with all tax matters, you should consult a personal tax advisor before requesting payment of proceeds to assess any applicable tax implications. Payment under this Extension of Chronic Condition Periodic Payments Rider may also affect eligibility for Medicaid, Supplementary Social Security Disability Income (SSDI), or other state assistance programs.

**Underwritten by:
Continental American Insurance Company (CAIC)**



Group Life Insurance

Premium Rates

Employee Non-Tobacco Monthly Premiums

Issue Age	\$25,000	\$50,000	\$75,000	\$100,000	\$125,000	\$150,000
18-25	\$11.75	\$23.50	\$35.25	\$47.00	\$58.75	\$70.50
26-30	\$13.67	\$27.33	\$41.00	\$54.67	\$68.34	\$82.00
31-35	\$16.19	\$32.38	\$48.56	\$64.75	\$80.94	\$97.13
36-40	\$20.31	\$40.63	\$60.94	\$81.25	\$101.56	\$121.88
41-45	\$26.27	\$52.54	\$78.81	\$105.08	\$131.35	\$157.62
46-50	\$34.27	\$68.54	\$102.81	\$137.08	\$171.36	\$205.63
51-55	\$47.54	\$95.08	\$142.63	\$190.17	\$237.71	\$285.25
56-60	\$70.08	\$140.17	\$210.25	\$280.33	\$350.42	\$420.50
61-65	\$91.21	\$182.42	\$273.63	\$364.83	\$456.04	\$547.25
66-70	\$140.90	\$281.79	\$422.69	\$563.58	\$704.48	\$845.37

Spouse Non-Tobacco Monthly Premiums

Issue Age	\$12,500	\$25,000	\$37,500	\$50,000
18-25	\$6.54	\$13.08	\$19.62	\$26.17
26-30	\$7.63	\$15.25	\$22.88	\$30.50
31-35	\$9.03	\$18.06	\$27.09	\$36.13
36-40	\$11.32	\$22.65	\$33.97	\$45.29
41-45	\$14.55	\$29.10	\$43.66	\$58.21
46-50	\$18.66	\$37.31	\$55.97	\$74.63
51-55	\$25.10	\$50.21	\$75.31	\$100.42
56-60	\$35.39	\$70.77	\$106.16	\$141.54
61-65	\$52.34	\$104.69	\$157.03	\$209.38
66-70	\$80.08	\$160.17	\$240.25	\$320.33

Employee Tobacco Monthly Premiums

Issue Age	\$25,000	\$50,000	\$75,000	\$100,000	\$125,000	\$150,000
18-25	\$15.29	\$30.58	\$45.88	\$61.17	\$76.46	\$91.75
26-30	\$18.44	\$36.88	\$55.31	\$73.75	\$92.19	\$110.63
31-35	\$23.21	\$46.42	\$69.63	\$92.83	\$116.04	\$139.25
36-40	\$29.31	\$58.63	\$87.94	\$117.25	\$146.56	\$175.88
41-45	\$37.67	\$75.33	\$113.00	\$150.67	\$188.34	\$226.00
46-50	\$49.90	\$99.79	\$149.69	\$199.58	\$249.48	\$299.38
51-55	\$68.19	\$136.38	\$204.56	\$272.75	\$340.94	\$409.13
56-60	\$101.33	\$202.67	\$304.00	\$405.33	\$506.67	\$608.00
61-65	\$142.90	\$285.79	\$428.69	\$571.58	\$714.48	\$857.38
66-70	\$213.94	\$427.88	\$641.81	\$855.75	\$1069.69	\$1283.63

Spouse Tobacco Monthly Premiums

Issue Age	\$12,500	\$25,000	\$37,500	\$50,000
18-25	\$8.65	\$17.29	\$25.94	\$34.58
26-30	\$10.45	\$20.90	\$31.34	\$41.79
31-35	\$13.18	\$26.35	\$39.53	\$52.71
36-40	\$16.61	\$33.23	\$49.84	\$66.46
41-45	\$21.23	\$42.46	\$63.69	\$84.92
46-50	\$27.80	\$55.60	\$83.41	\$111.21
51-55	\$37.16	\$74.31	\$111.47	\$148.63
56-60	\$53.55	\$107.10	\$160.66	\$214.21
61-65	\$82.13	\$164.25	\$246.38	\$328.50
66-70	\$121.69	\$243.38	\$365.06	\$486.75

Child Term Rider Monthly Premiums

Age Band	\$25,000
Under age 26	\$10.42

Pet insurance

from Nationwide®



Fetch the best health coverage for your pet through your voluntary benefits package. With two budget-friendly plans, there's never been a better time to sign up for My Pet Protection®, available only through your workplace benefits program.

Nationwide offers two plans for you to choose from: My Pet Protection® and My Pet Protection® with Wellness500.¹

Both plans are guaranteed issuance,² have a \$250 annual deductible and include medical coverage with the choice of 50% or 70% reimbursement levels.³

	My Pet Protection®	My Pet Protection® with Wellness500
Accidents	✓	✓
Injuries	✓	✓
Illnesses	✓	✓
Hereditary and congenital conditions	✓	✓
Diagnostics and imaging	✓	✓
Procedures and surgeries	✓	✓
Wellness exams		✓
Vaccinations		✓
Flea prevention		✓
Spay or neuter		✓
And more	✓	✓



Did you know? Nationwide is the industry-first provider of coverage for birds and exotic pets.

How to use your pet insurance plan

1 Visit any vet, anywhere.

2 Submit claim.

3 Get reimbursed for eligible expenses.



Get a quote at [PetsNationwide.com](https://www.PetsNationwide.com) • 877-738-7874



Nationwide®

Nationwide[®] is the industry-first provider of pet health coverage for birds and exotic pets



Owners of birds, reptiles and exotic pets can get 50% or 70% reimbursement on eligible veterinary expenses with coverage from Nationwide.¹



- Includes veterinary exams, surgeries, diagnostic testing, prescriptions, wellness² and more
- \$250 annual deductible applies just once per policy term, no matter which plan you choose
- Use any veterinarian, anywhere

Coverage available for:

- Amphibians
- Birds
- Chameleons
- Chinchillas
- Ferrets
- Geckos
- Gerbils
- Guinea pigs
- Hamsters
- Iguanas
- Lizards
- Mice
- Rats
- Rabbits
- Snakes
- Tortoises
- Turtles
- And more



Call 877-738-7874 to learn about avian and exotic pet coverage from Nationwide

Product availability may vary by state.



Nationwide[®]

How to apply for a pet insurance policy

Nationwide® pet insurance provides coverage for veterinary expenses related to accidents, illnesses, wellness,¹ and more.²

Policies are available for dogs, cats, birds, reptiles and other exotic pets.

Choose from two easy ways to sign up:

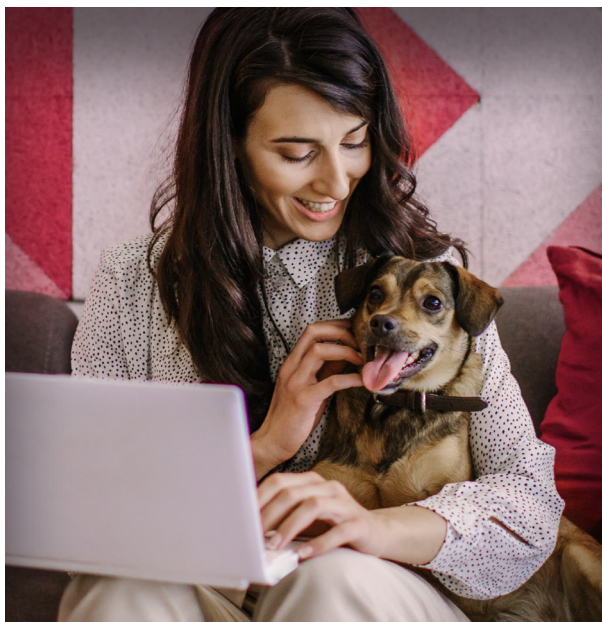


Visit PetsNationwide.com and enter the name of your organization to enroll online.



Call 877-738-7874 and tell the pet insurance professional the name of your organization.

You may be asked for the following information during enrollment:



- Name
- Address
- Home or primary telephone number
- E-mail address
- Name and age of your pet(s)
- Pet's species (canine, feline, etc.)
- Payment information/plan*

*Applications approved between the 1st and the 15th of the month

become effective on the 1st of the following month. Applications approved from the 16th through the end of the month become effective on the 1st of not the following month, but the month thereafter.

Example: May 1 approval = June 1 effective date

May 16 approval = July 1 effective date



Nationwide®

Voluntary Benefits Contact Information

Carrier	Website / Email	Phone #
Voya	https://presents.voya.com/StageEBRC/Home/Pueblo	800-584-6001
Aflac	www.aflacgroupinsurance.com	800-433-3036
Nationwide	www.benefits.petinsurance.com/pueblacityschools	877-738-7874