

Critical Illness Insurance

Explore Your Benefits & Costs

BrightSpring Health Services

Group Name: BrightSpring Health Services
Group Number: 695840
Class: All Eligible Employees

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:

- Coverage is always Guaranteed Issue.
- 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 pays a lump-sum benefit if you are diagnosed with a covered illness or condition on or after your coverage effective date. 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 to help lessen the financial impact of a covered illness.

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?

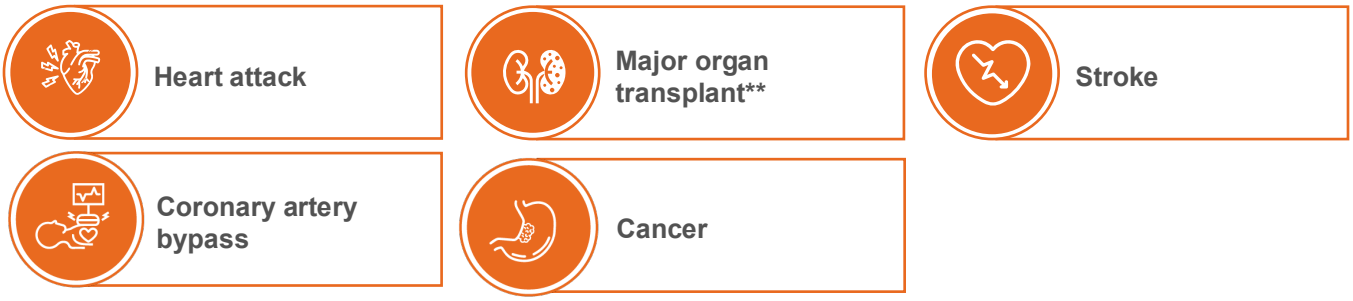
You have the option to enroll in coverage in the amount(s) below.

	Coverage Amount
For you	$10,000 I $20,000
Your spouse*	50% of the Employee Elected Amount
Your children**	50% of the Employee Elected Amount

*"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.

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.

4-Tier Rating Monthly Rates Employee: $10,000 Spouse: $5,000 Child(ren): $5,000 Includes Wellness Benefit Rider									
Non-Tobacco User					Tobacco User				
Select one	EE Only	EE+SP	EE+CH	Family	Select one	EE Only	EE+SP	EE+CH	FAMILY
Under 25	$2.60	$5.63	$6.50	$9.10	Under 25	$3.03	$6.93	$6.93	$10.40
25-29	$2.60	$6.07	$6.50	$9.53	25 - 29	$3.47	$7.37	$7.37	$10.83
30-34	$3.47	$7.80	$7.37	$11.70	30 - 34	$5.20	$10.83	$8.67	$14.73
35-39	$5.20	$10.83	$8.67	$14.73	35 - 39	$7.37	$16.03	$10.83	$19.93
40-44	$7.37	$15.60	$10.83	$19.50	40 - 44	$10.83	$24.70	$14.73	$28.60
45-49	$9.97	$23.40	$13.87	$27.30	45 - 49	$16.90	$38.13	$20.80	$42.03
50-54	$14.30	$33.37	$17.77	$37.27	50 - 54	$24.27	$55.90	$28.17	$59.80
55-59	$19.93	$46.80	$23.40	$50.70	55 - 59	$33.37	$80.17	$37.27	$83.63
60-64	$27.73	$68.03	$31.20	$71.93	60 - 64	$47.67	$117.87	$51.57	$121.33
65-69	$41.17	$101.40	$45.07	$105.30	65 - 69	$72.37	$178.10	$75.83	$181.57
70+	$63.70	$152.10	$67.60	$156.00	70 +	$112.67	$268.23	$116.13	$271.70

4-Tier Rating Monthly Rates Employee: $20,000 Spouse: $10,000 Child(ren): $10,000 Includes Wellness Benefit Rider									
Non-Tobacco User					Tobacco User				
Select one	EE Only	EE+SP	EE+CH	Family	Select one	EE Only	EE+SP	EE+CH	FAMILY
Under 25	$5.20	$11.26	$13.00	$18.20	Under 25	$6.06	$13.86	$13.86	$20.80
25-29	$5.20	$12.14	$13.00	$19.06	25 - 29	$6.94	$14.74	$14.74	$21.66
30-34	$6.94	$15.60	$14.74	$23.40	30 - 34	$10.40	$21.66	$17.34	$29.46
35-39	$10.40	$21.66	$17.34	$29.46	35 - 39	$14.74	$32.06	$21.66	$39.86
40-44	$14.74	$31.20	$21.66	$39.00	40 - 44	$21.66	$49.40	$29.46	$57.20
45-49	$19.94	$46.80	$27.74	$54.60	45 - 49	$33.80	$76.26	$41.60	$84.06
50-54	$28.60	$66.74	$35.54	$74.54	50 - 54	$48.54	$111.80	$56.34	$119.60
55-59	$39.86	$93.60	$46.80	$101.40	55 - 59	$66.74	$160.34	$74.54	$167.26
60-64	$55.46	$136.06	$62.40	$143.86	60 - 64	$95.34	$235.74	$103.14	$242.66
65-69	$82.34	$202.80	$90.14	$210.60	65 - 69	$144.74	$356.20	$151.66	$363.14
70+	$127.40	$304.20	$135.20	$312.00	70 +	$225.34	$536.46	$232.26	$543.40

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

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%
Major organ transplant (includes Major Organ Failure & End Stage Renal (Kidney) Failure)**	100%
Coronary artery bypass	100%
Carcinoma in situ	25%
Enhanced Cancer Module	
Skin cancer	$250
Bone marrow transplant	100%
Stem cell transplant	100%
Quality of Life Module	
Multiple sclerosis	25%
Amyotrophic lateral sclerosis (ALS)	25%
Advanced dementia, including Alzheimer's disease	100%
Huntington's disease	25%
Muscular dystrophy	25%
Infectious disease (hospitalization requirement)***	25%
Addison's disease	25%
Myasthenia gravis	25%
Systemic lupus erythematosus (SLE)	25%
Systemic sclerosis (scleroderma)	25%

* 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	25%
Cystic fibrosis	25%
Sickle cell anemia	25%

Multiple benefit payments

You may receive a lump-sum benefit payment for each covered condition. The number of times a benefit is payable for each covered condition is unlimited, except for skin cancer to the number of payments you may receive for each covered condition under your plan. Additional details are provided in the certificate of coverage.

What else is included?

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

Receive $50 to use however you'd like

Wellness Benefit

The Wellness Benefit provides an annual benefit if you complete a covered health screening test whether or not there is any out-of-pocket cost to you.

- Employees benefit amount is $50.
- Spouse's benefit amount is $50.
- Children receive 100% of your benefit amount per child.

Take your coverage with you

Portability

If you are in a situation where you will lose eligibility for benefits, such as reduced hours, termination or a life event such as divorce, you may want to continue your insurance coverage. Portability allows you to continue your coverage under the same group policy by paying your premiums directly to the insurance company.

Continue coverage at no cost to you

Waiver of Premium

If you aren't working because you are totally disabled, Waiver of Premium allows you to keep your Critical Illness Insurance coverage for a period of time without paying premiums. You may need to complete a waiting period of total disability before premiums are waived, during which time premiums need to be paid. Only premiums for employee coverage will be waived; all other coverage will terminate.

Exclusions and limitations

There are no exclusions and limitations.

Questions?

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

Scan the QR code to visit your Employee Benefits Resource Center to learn more about this benefit and review instructions on how to file a claim after your effective date.

https://presents.voya.com/EBRC/Brightspringhealthservices

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-CERT2-20; Spouse Rider form #RL-CI4-SPR2-20; Children's Rider form #RL-CI4-CHR2-20; Continuation Rider form #RL-CI4-CNT2-20; Absence from Employment Premium Waiver Rider form #RL-CI4-AEPW-20; Wellness Benefit Rider form #RL-CI4-WELL2-20; Waiver of Premium Rider form #RL-CI4-WOP-16; Infectious Condition Additional Benefit Rider form #RL-CI4-ICBR-22; and Additional Services Rider form #RL-CI4-VAS-20. Form numbers, provisions and availability may vary by state and employer's plan.

CI 2.1 Only

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