Critical Illness Insurance

Explore Your Benefits & Costs



Group Name: Powell Industries, Inc. Group Number: 731056

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:



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.

ReliaStar Life Insurance Company a member of the Voya® family of companies



How much coverage is available?

You have the option to enroll in Critical Illness coverage in the amounts below. You do not need to be enrolled in a Powell medical plan to elect coverage for Critical Illness Insurance.

	Coverage Amount
For you	\$15,000 or \$30,000
Your spouse	100% of the employee benefit
Your children*	50% of the employee benefit

*Child(ren) up to age 26 are included with employee coverage at no additional cost.

What's covered by Critical Illness Insurance?

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



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%
Kidney failure**	100%
Coronary artery bypass	25%

* 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. The cost of Child coverage is included in the employee rate*.

Premiums are based on your age at the time of your coverage effective date and will not increase as long as you maintain the same coverage amount and continue the timely payment of premiums. If you choose to make a change to increase or decrease your coverage at any time in the future, your new rate will be based on your age as of the effective date of the change. Coverage is portable, meaning you can continue to be covered at the same rate if you leave Powell as long as you continue to pay the required premium to Voya.

Employee Coverage Semi-Monthly (24) Rates			ise Covera ⁄Ionthly (24)		
Issue Age	\$15,000	\$30,000	Issue Age	\$15,000	\$30,000
Under 30	\$3.53	\$7.05	Under 30	\$3.53	\$7.05
30-39	\$5.48	\$10.95	30-39	\$5.48	\$10.95
40-49	\$10.28	\$20.55	40-49	\$10.28	\$20.55
50-59	\$19.35	\$38.70	50-59	\$19.35	\$38.70
60-64	\$29.10	\$58.20	60-64	\$29.10	\$58.20
65-69	\$29.10	\$58.20	65-69	\$29.10	\$58.20
70+	\$48.60	\$97.20	70+	\$48.60	\$97.20

Employee Coverage Weekly (52) Rates						
Issue Age	\$15,000	\$30,000		Issue Age	\$15,000	\$30,000
Under 30	\$1.63	\$3.25		Under 30	\$1.63	\$3.25
30-39	\$2.53	\$5.05		30-39	\$2.53	\$5.05
40-49	\$4.74	\$9.48		40-49	\$4.74	\$9.48
50-59	\$8.93	\$17.86		50-59	\$8.93	\$17.86
60-64	\$13.43	\$26.86		60-64	\$13.43	\$26.86
65-69	\$13.43	\$26.86		65-69	\$13.43	\$26.86
70+	\$22.43	\$44.86		70+	\$22.43	\$44.86

*Children birth to age 26; no limit to the number of children per family. **Spouse rate is based on spouse age.

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 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.



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	Infectious disease (hospitalization requirement)***	25%



Addison's disease	10%
Myasthenia gravis	25%
Systemic lupus erythematosus (SLE)	25%
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.

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 can receive a lump–sum benefit payment (up to 100% of the benefit amount associated with that condition) for each covered condition. The number of times a benefit is payable for each covered condition is unlimited, except for skin cancer. Skin cancer is limited to one payout per calendar year and no more than ten lifetime payouts. 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:

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 of \$50.
- Covered Spouses and Children receive an annual benefit of \$50.

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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

For detailed information on Critical Illness Insurance, please visit https://presents.voya.com/EBRC/Powell

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; Wellness Benefit Rider form #RL-CI4-WELL2-20. Form numbers, provisions and availability may vary by state and employer's plan.

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