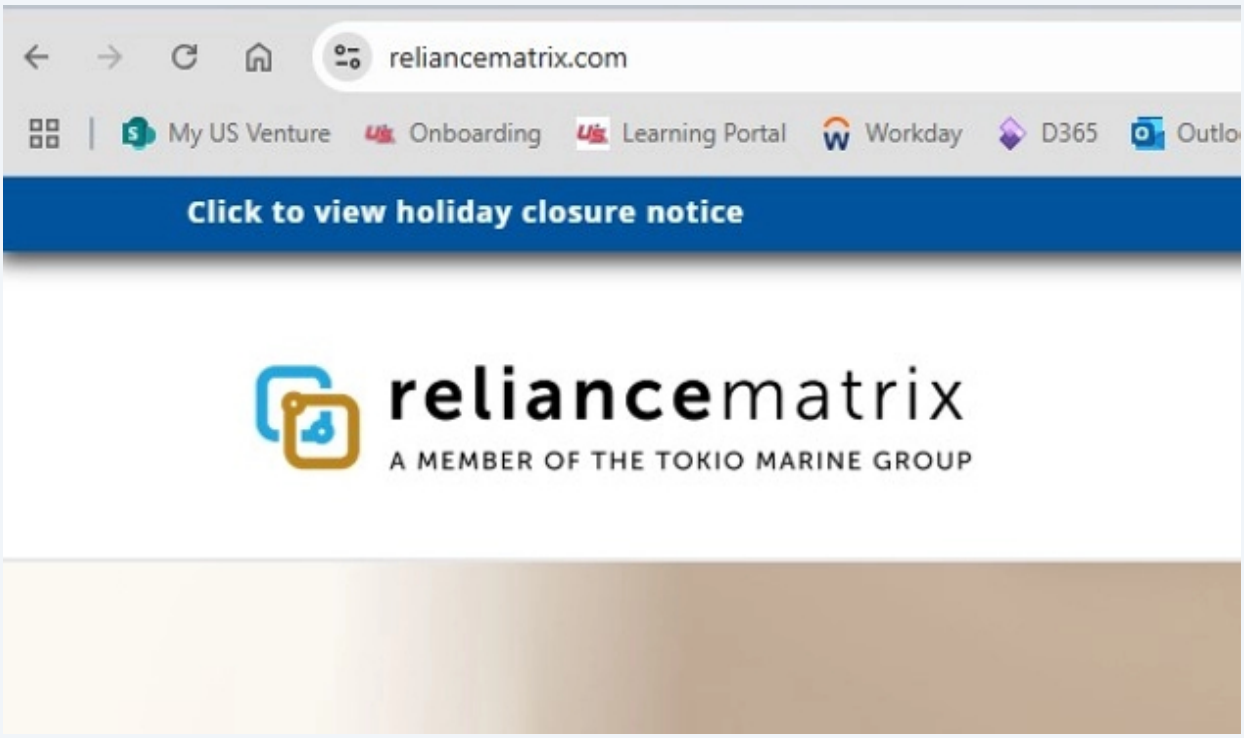
Filing a Wellness Benefit Claim - Accident/Critical Illness

If you are enrolled in the voluntary Accident, Hospital Indemnity, and/or Critical Illness plans, you can receive a $100 Wellness Benefit for completing covered health screenings.

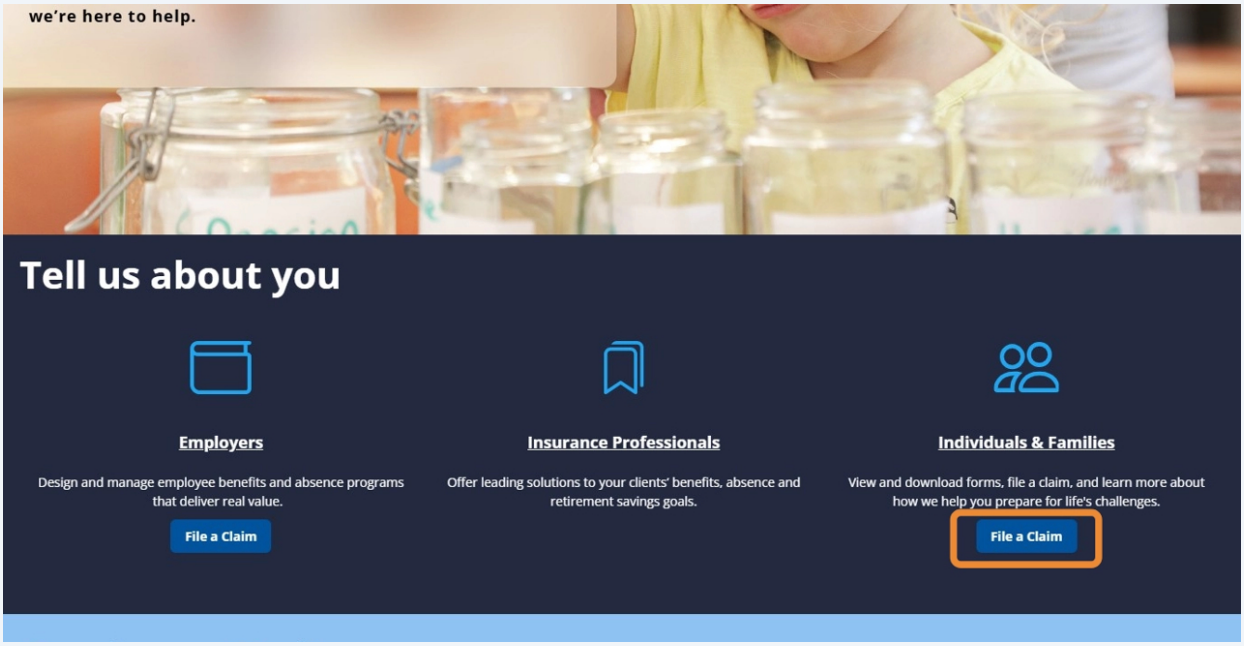
How it works: you can earn $100 per plan, per year, per covered dependent up to $600 per plan, per person for a maximum of $1800 annually.

Covered screenings include annual physicals, preventive exams, bloodwork, cancer screenings, dental and vision exams, and more. For full details visit reliancematrix.com.

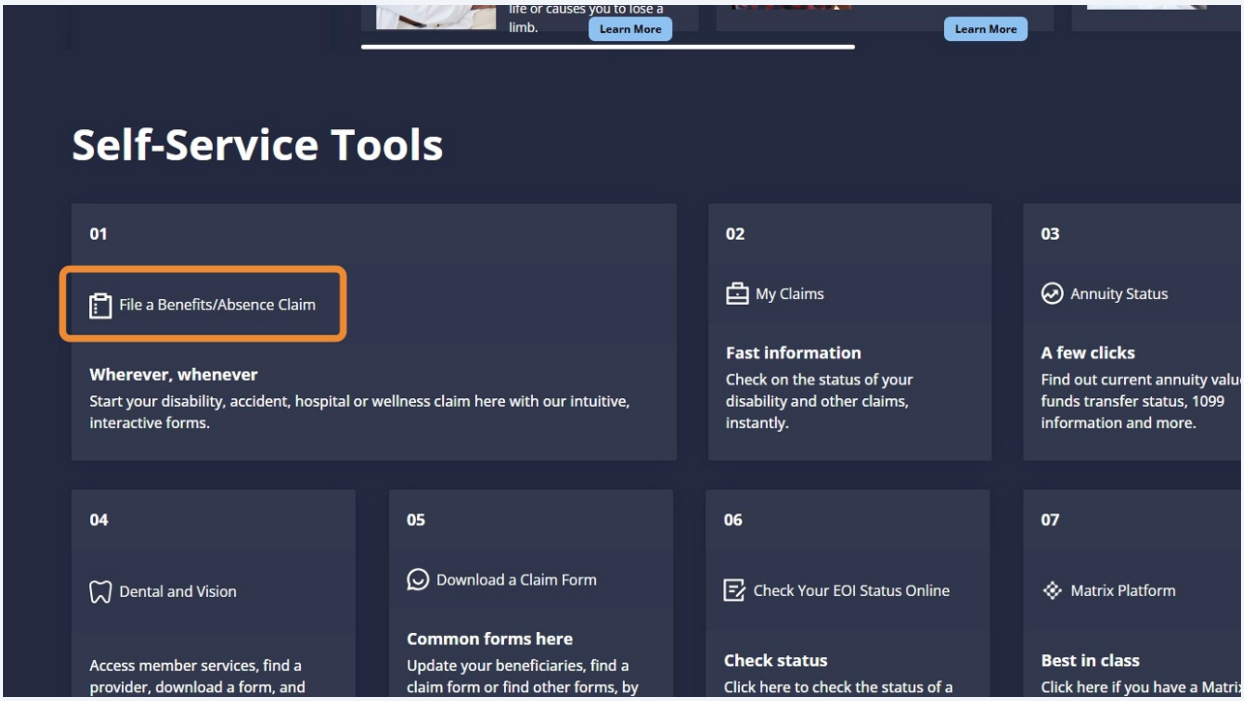
1 Navigate to https://www.reliancematrix.com/



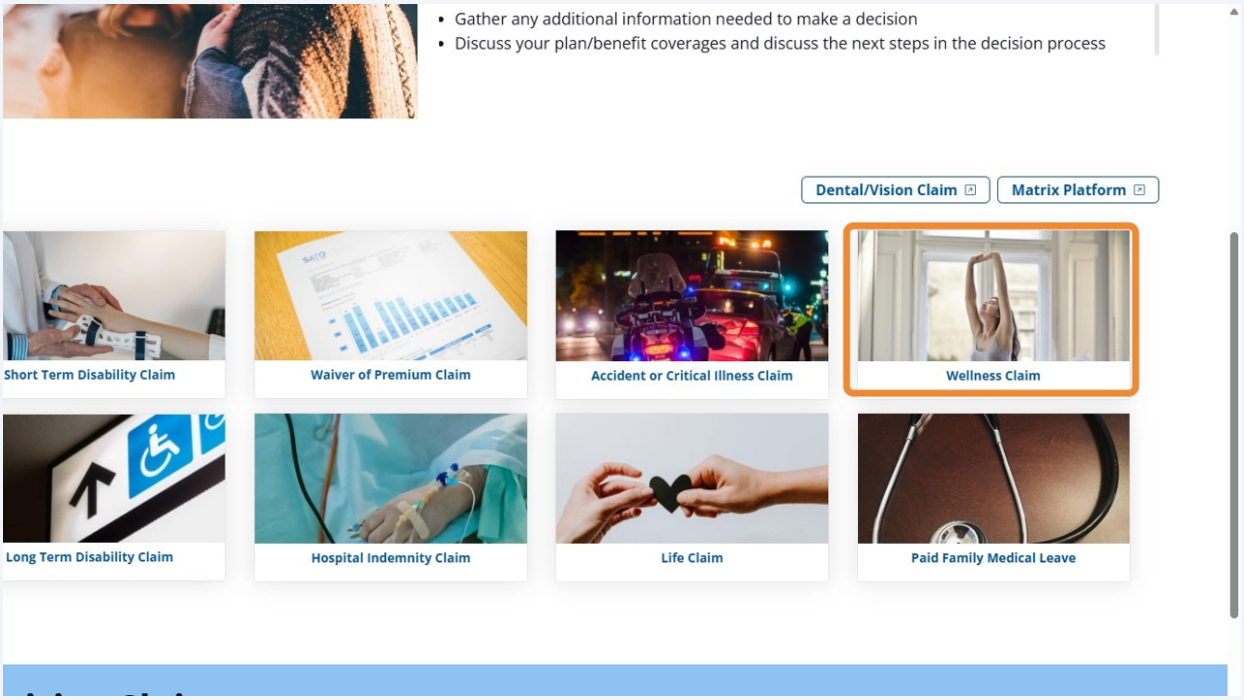
2 Under "Individuals & Families" Click "File a Claim"



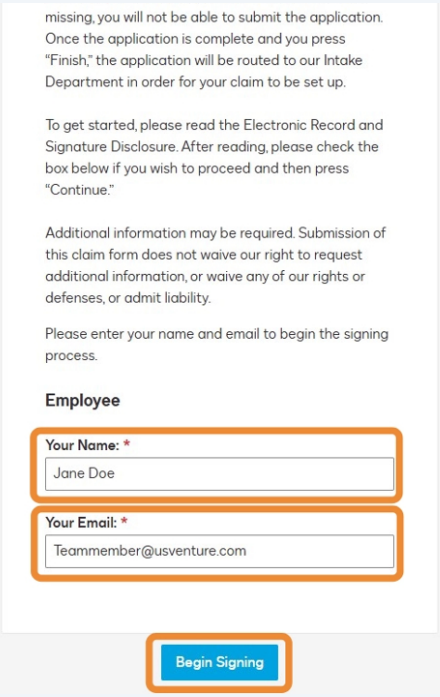
3 Click "File a Benefits/Absence Claim"



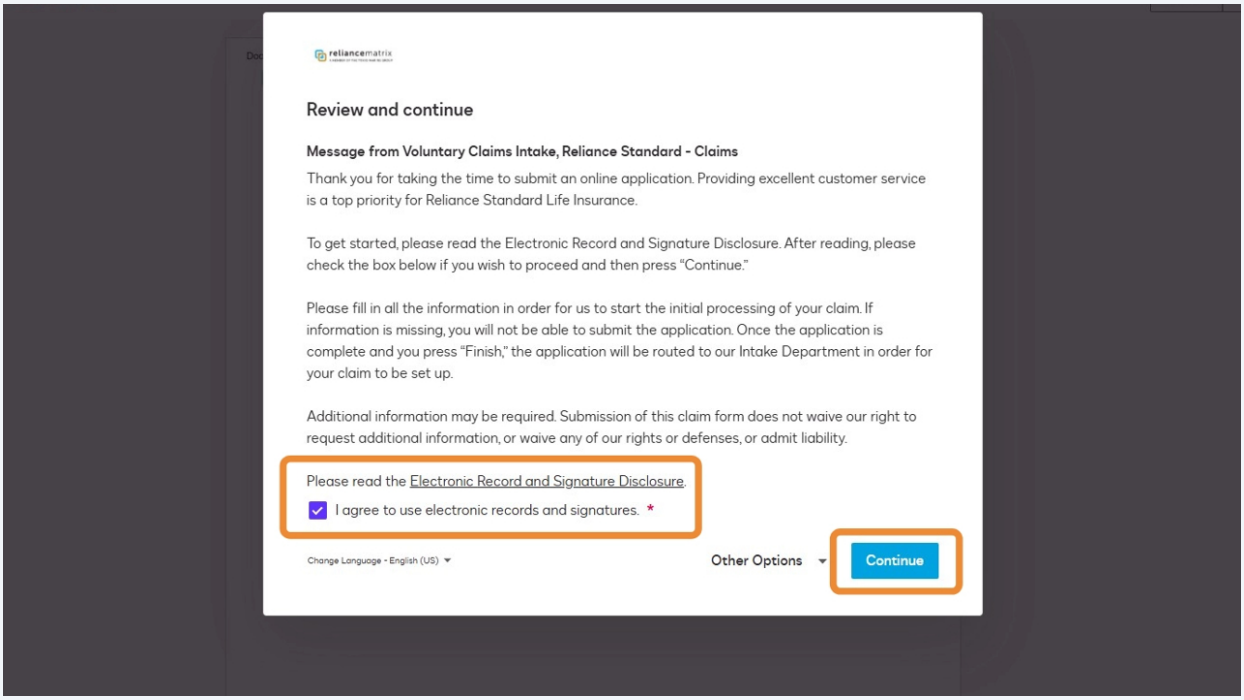
4 Click "Wellness Claim"



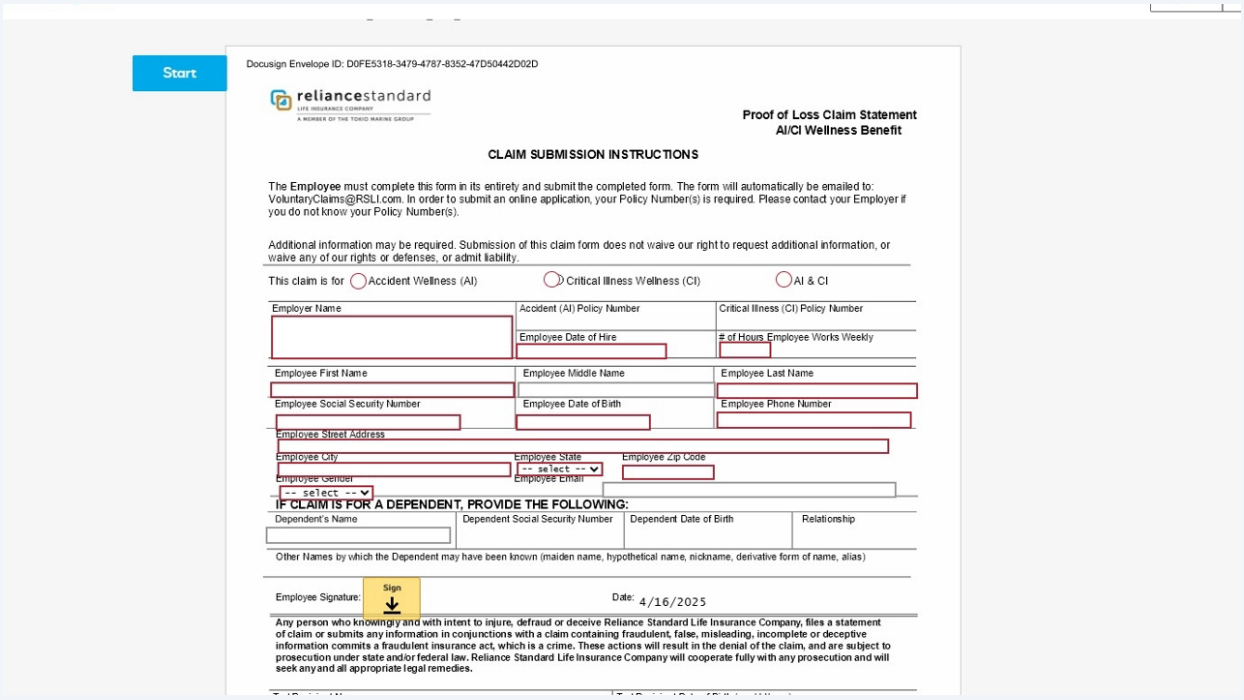
5 This will open up a separate Docusign tab. Enter your name and email, then click "Begin Signing"



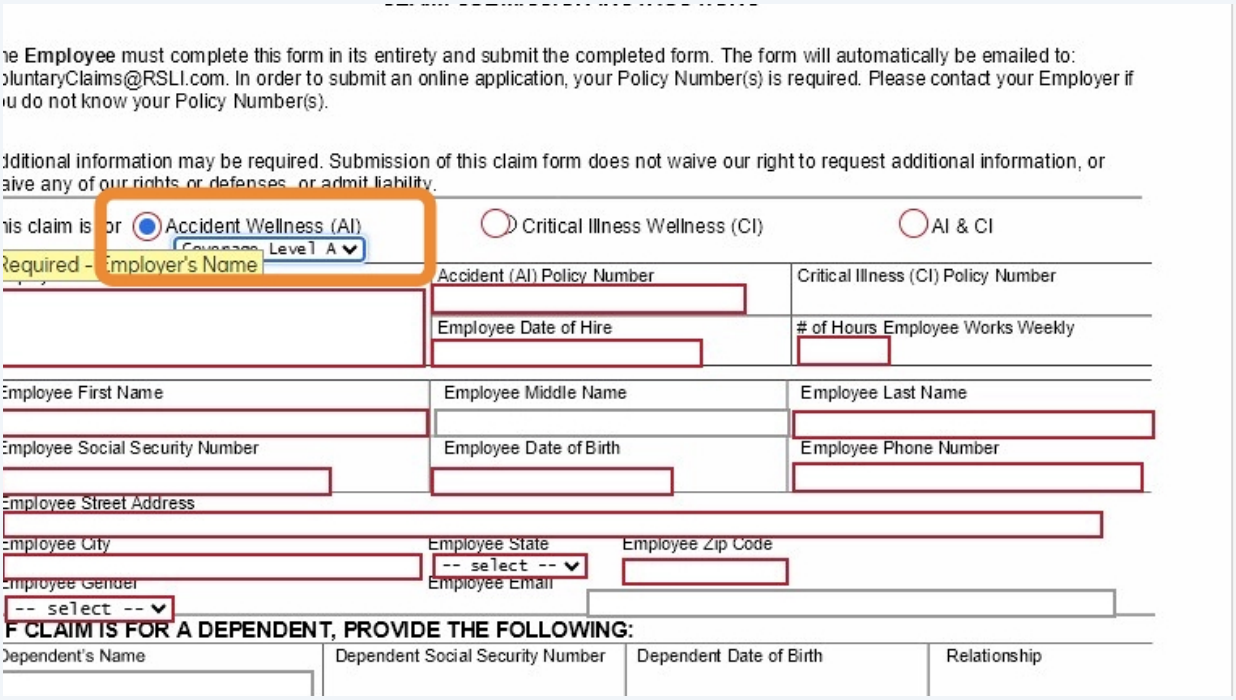
6 Review and click "Continue"



7 Complete the claim form. All boxed outlines in red are required fields.



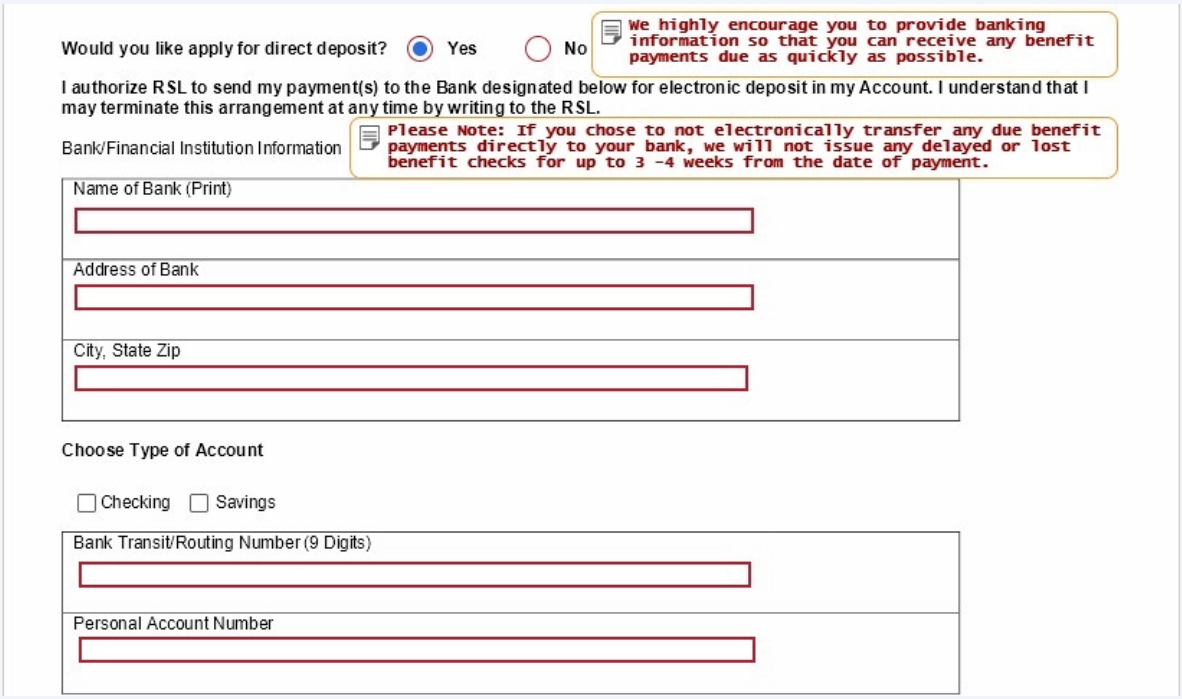
8 If you are selecting accident, select the "Coverage Level A" option.



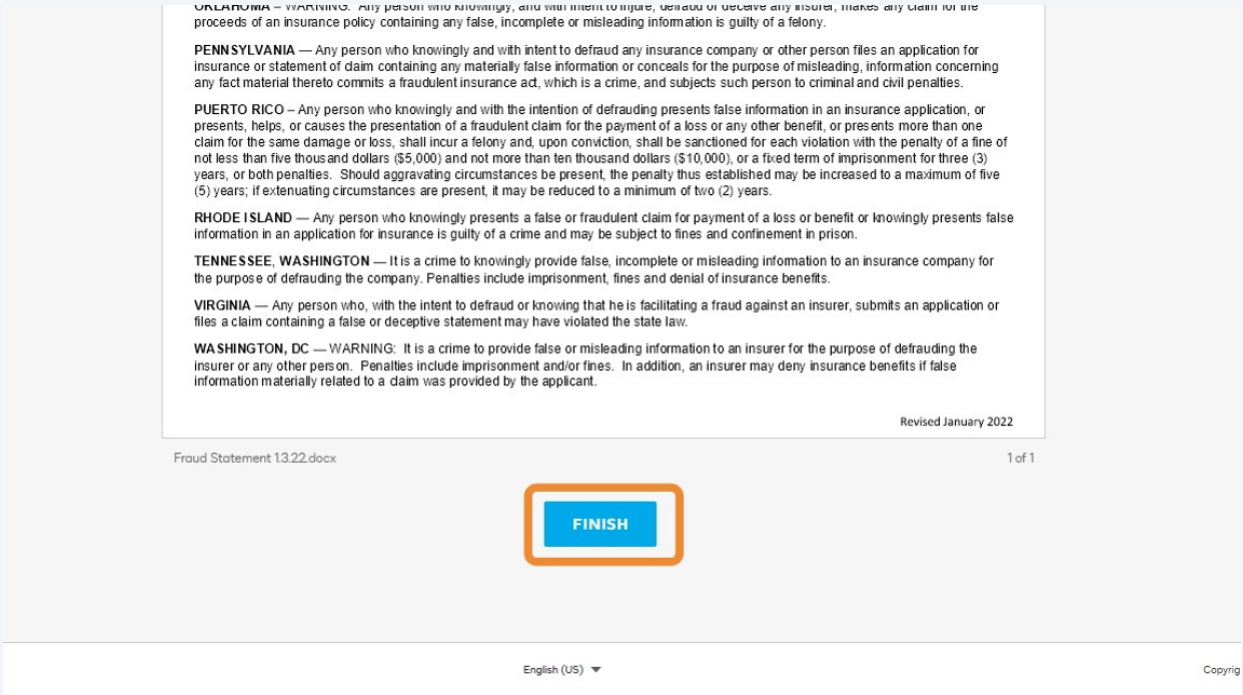
Accident Policy# 2000013182

Critical Illness Policy# 2000013179

9 If you wish to recieve your money via direct deposit, your bank information is required. Otherwise, you will be sent a check in the mail.



10 Once you have completed the form, click finish and the process is complete. Please reach out to Total Rewards if you have any questions.

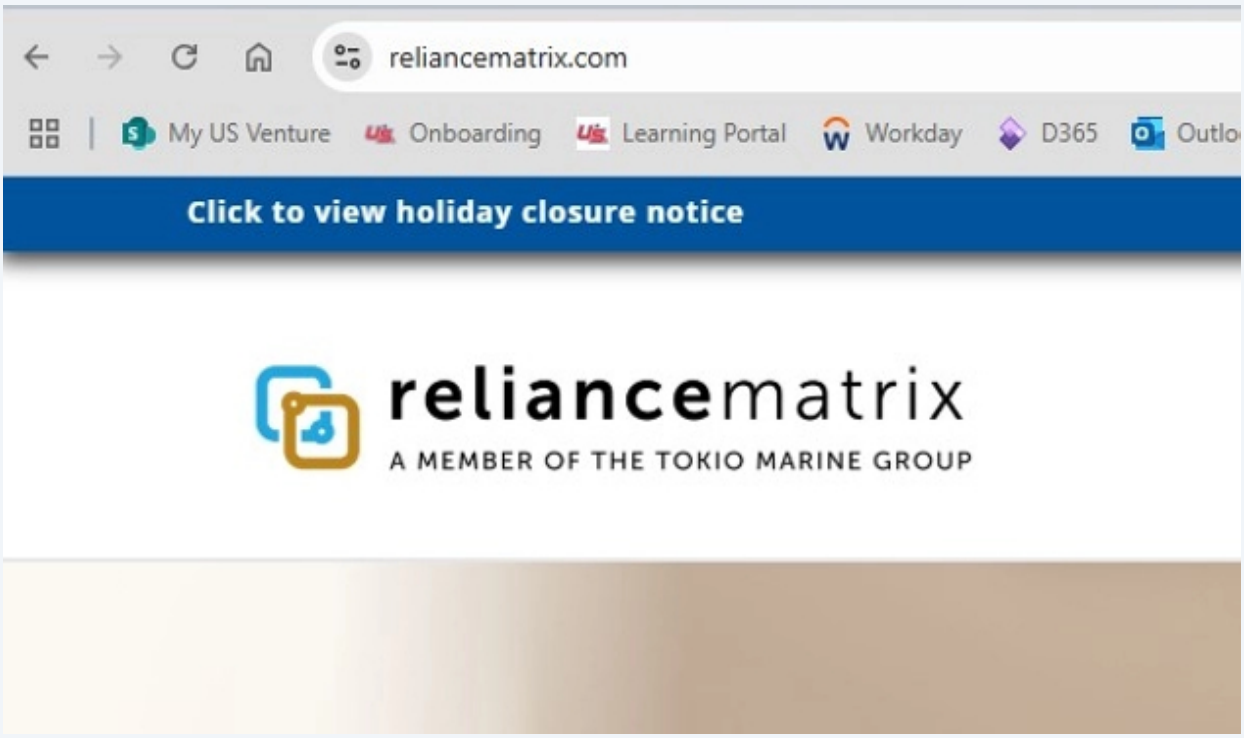


Filing a Wellness Benefit Claim - Hospital Indemnity

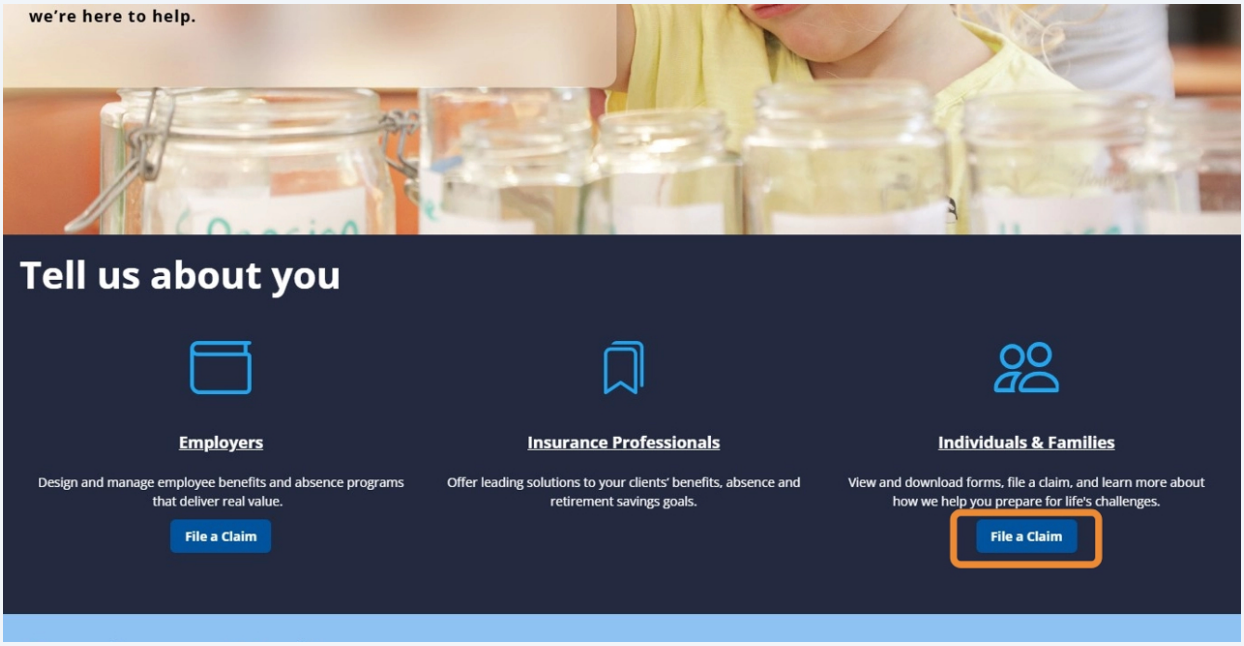
If you are enrolled in the voluntary Hospital Indemnity plan, you are eligible to receive a $100 Wellness Benefit for a covered health screening test performed per year, for you and your covered dependents.

Covered wellness screenings include annual physicals, bloodwork, cancer screenings, preventive exams, and dental and vision exams. A full list can be found at reliancematrix.com.

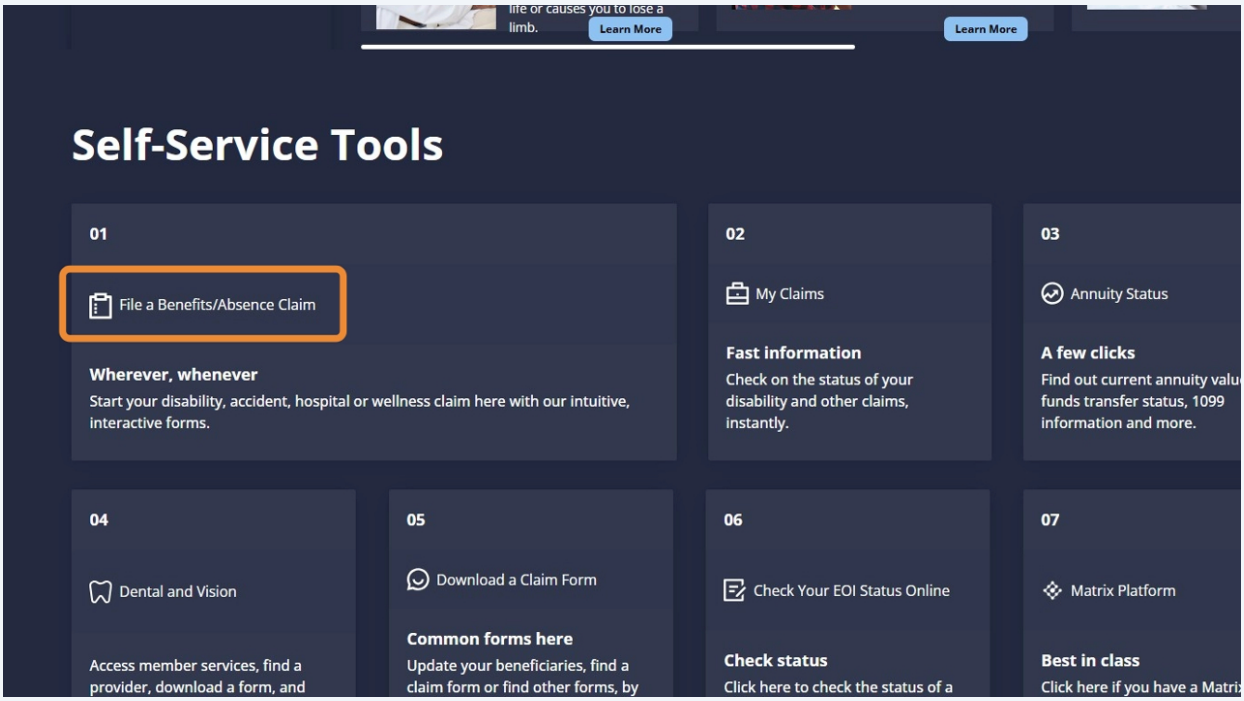
1 Navigate to https://www.reliancematrix.com/



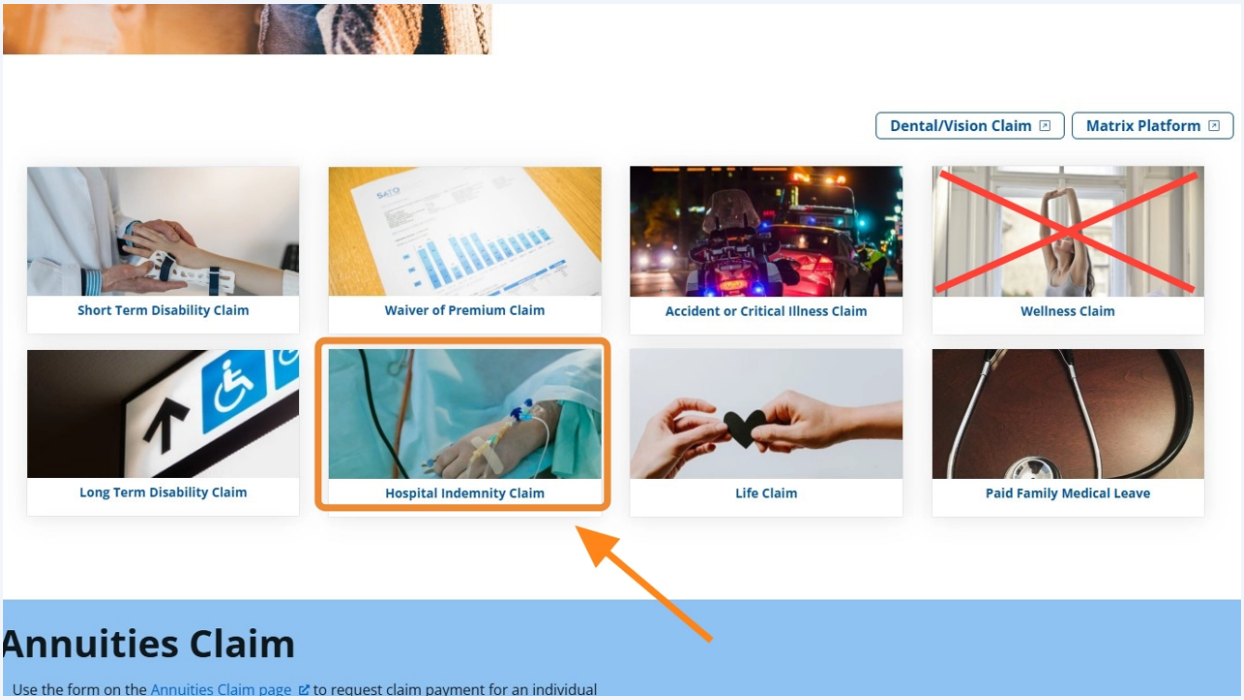
2 Under "Individuals & Families" Click "File a Claim"



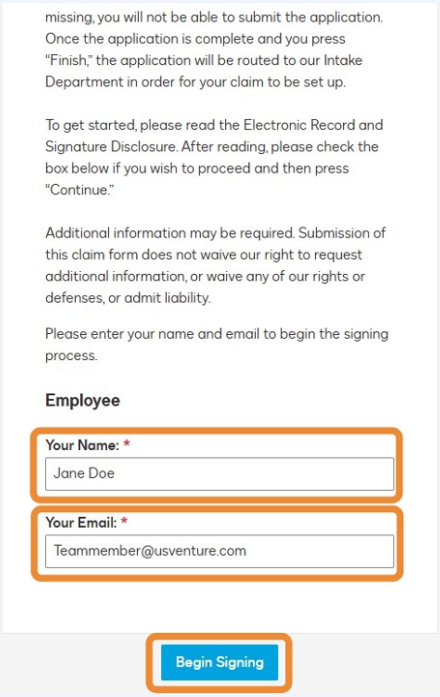
3 Click "File a Benefits/Absence Claim"



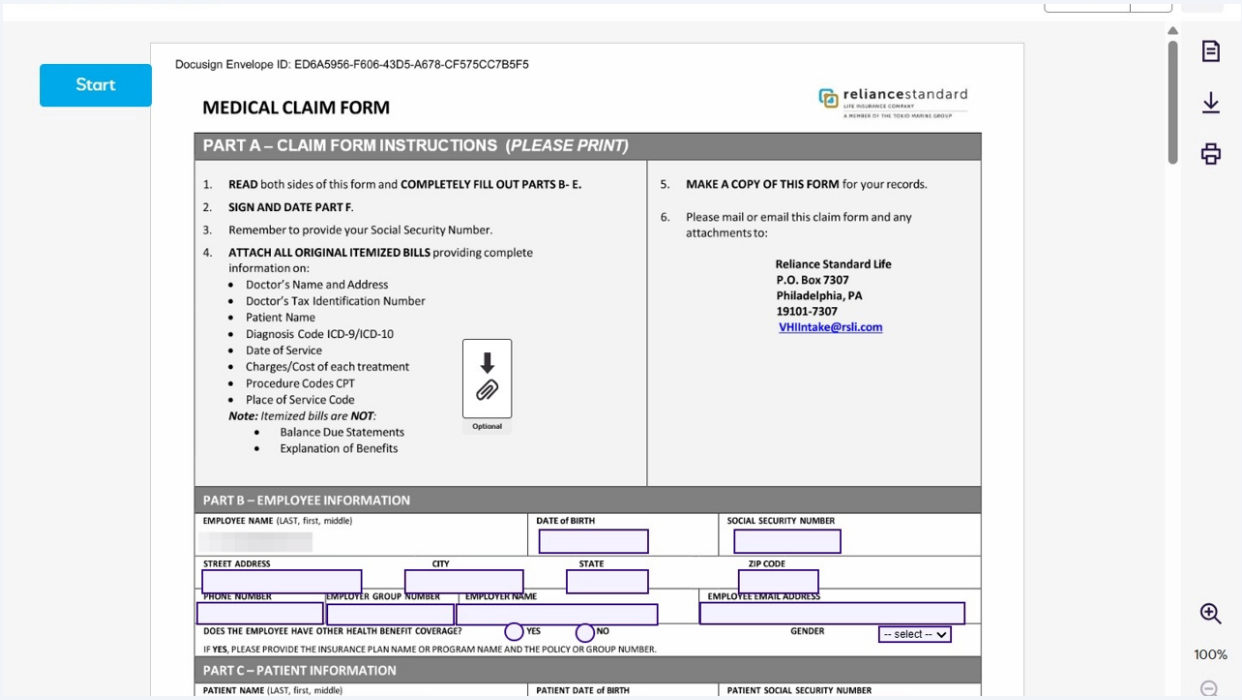
4 To file a Hospital Indemnity Wellness Benefit Claim, click "Hospital Indemnity Claim"



5 This will open up a separate Docusign tab. Enter your name and email, then click "Begin Signing"

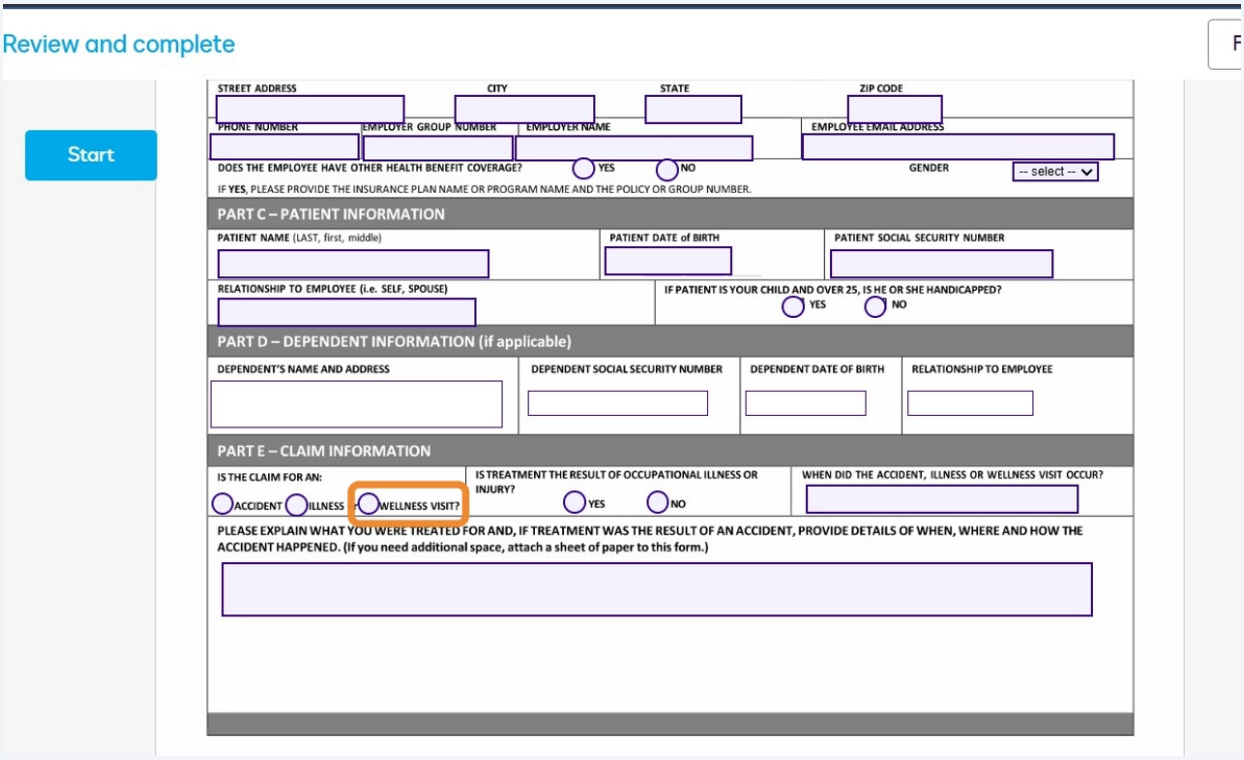


6 Complete all required information on the claim form.

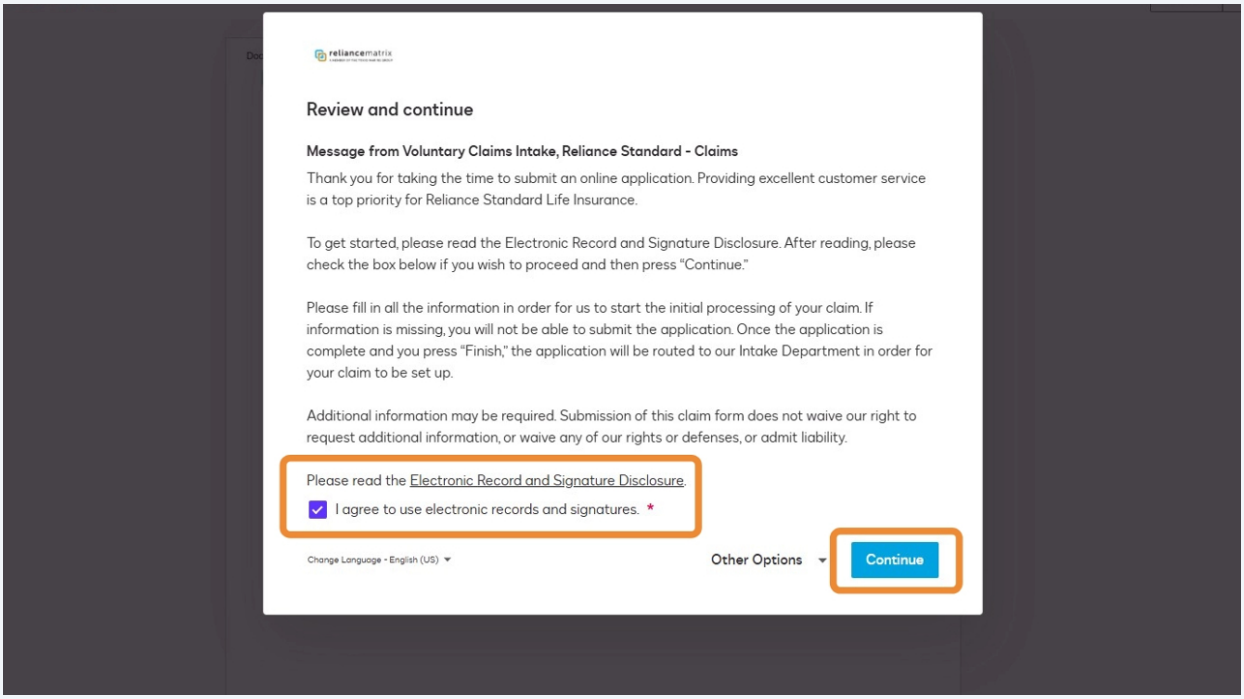


Hospital Indemnity Policy #2000017715

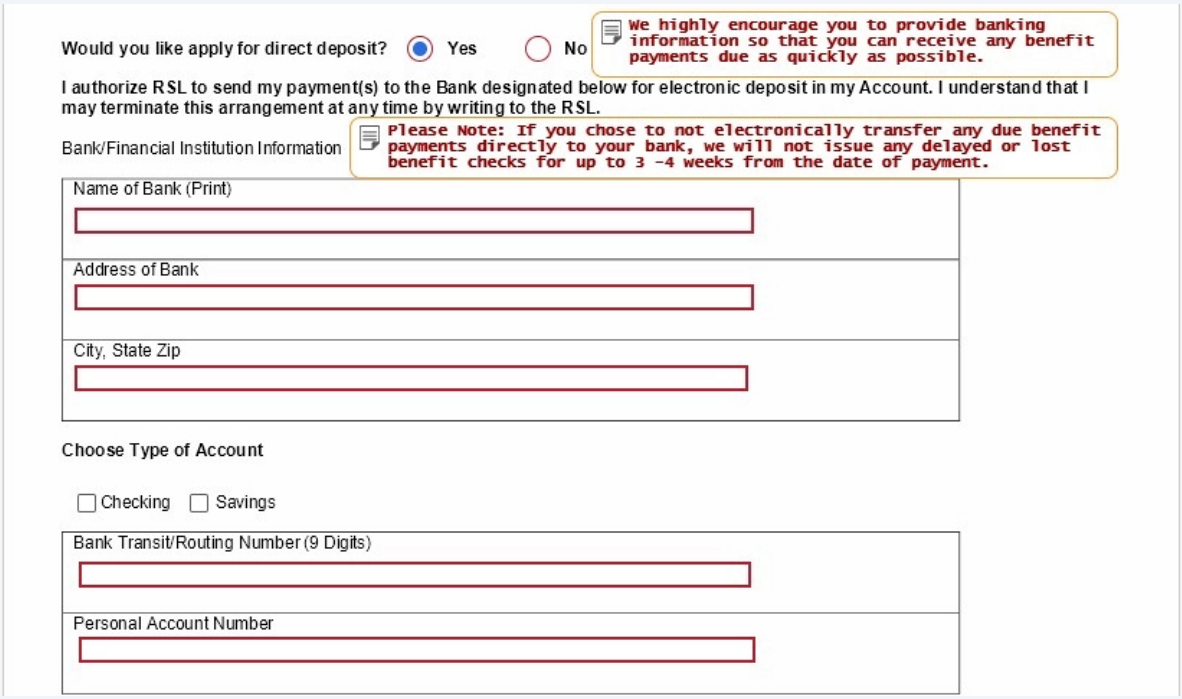
7 For a Wellness Benefit claim, check "Wellness Visit"



8 Review and click "Continue"



9 If you wish to recieve your money via direct deposit, your bank information is required. Otherwise, you will be sent a check in the mail.



10 Once you have completed the form, click finish and the process is complete. Please reach out to Total Rewards if you have any questions.

