

It pays to be healthy (in more ways than one).



Group Critical Illness health assessment benefit

Healthcare professionals recommend regular health screenings — for good reason. Screenings make it possible to detect potential medical conditions early on so that you can take the necessary preventive measures to stay healthy.

Now you have another incentive as well: If you are enrolled in Lincoln Financial Group Critical Illness insurance, we'll pay you for keeping up with important screenings. As you'll see below, a wide range of screenings and tests are covered. You'll receive this benefit for one covered test per plan year — with no waiting period. Claims may be submitted by fax, mail, online through the employee self-service portal or email, and will be processed within 24 hours of receipt. Telephonic submissions are processed while the claimant is on the phone. The health assessment benefit is paid within 24 hours of receiving a completed claim form.

Download the health assessment claim form at LincolnFinancial.com.

Get money back for keeping up with your health screenings.

- Stress test
- Abdominal, aortic or carotid ultrasound
- Angiography
- CT angiography
- Electrocardiogram (EKG/ECG)
- Mammography
- Breast ultrasound
- Pap smear
- CA 15-3 (blood test for breast cancer)
- CA125 (blood test for ovarian cancer)
- PSA (blood test for prostrate cancer)
- CEA (blood test for colon cancer)
- Serum protein electrophoresis (blood test for myeloma)

- Bone marrow testing
- Colonoscopy
- Flexible sigmoidoscopy
- Hemoccult stool analysis
- Double contrast barium enema
- Helical CT scan
- Dental brush biopsy or other FDA approved screening for oral cancer
- Diabetes (A1C or fasting glucose)
- HIV screening
- Hepatitis screening
- Human papillomavirus screening
- Blood chemistry profile



Schedule your important screenings, stay healthy and get cash back.

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In California and New York, applicants must have major medical insurance to be eligible for Critical Illness coverage.

Health assessments are not available in Minnesota or Missouri.

Some benefits have limits on the number of services provided or limit the time frame in which the services must be rendered. See your certificate booklet or policy for more information.

This insurance product does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

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