

## Critical Illness Insurance

Benefits you can use as you see fit, such as to help cover expenses that are not covered by your medical plan.



Enrollment Period: October 1 – October 31

### Critical Illness Insurance Benefits

Eligible Individual	Benefit Amount	Requirements
<b>Coverage Options</b>		
<b>Employee</b>	<b>\$10,000 or \$20,000</b>	Coverage is guaranteed provided you are actively at work. <sup>1</sup>
<b>Spouse/Domestic Partner<sup>2</sup></b>	<b>50% of the Employee's Initial Benefit</b>	Coverage is guaranteed provided the employee is actively at work and the spouse/domestic partner is not subject to a medical restriction as set forth on the enrollment form and in the Certificate. <sup>1</sup>
<b>Dependent Child(ren)<sup>3</sup></b>	<b>50% of the Employee's Initial Benefit</b>	Coverage is guaranteed provided the employee is actively at work and the dependent is not subject to a medical restriction as set forth on the enrollment form and in the Certificate. <sup>1</sup>

### Benefit Payment

Your plan pays a lump-sum **Initial Benefit** upon the first verified diagnosis of a Covered Condition. Your plan also pays a lump-sum **Recurrence Benefit<sup>4</sup>** for a subsequent verified diagnosis of certain Covered Conditions as shown in the table below. A Recurrence Benefit is only available if an Initial Benefit has been paid for the same Covered Condition. There is a Benefit Suspension Period that applies to Recurrence Benefits.

The maximum amount that you can receive through your Critical Illness Insurance plan is called the **Total Benefit Amount** and is 5 times the amount of your Benefit Amount. This means that you can receive multiple benefit payments until you reach the maximum of \$50,000 or \$100,000.

Please refer to the table below for the percentage benefit payable for each Covered Condition.

### Plan Design – Covered Conditions<sup>5</sup>

Covered Conditions	Initial Benefit	Recurrence Benefit
<b>Cancer Category</b>		
Invasive Cancer	100% of Benefit Amount	50% of Initial Benefit
Non-Invasive Cancer	25% of Benefit Amount	100% of Initial Benefit
Skin Cancer	5% of Benefit Amount, but not less than \$250	NONE
<b>Coronary Artery Disease Category</b>		
Coronary Artery Bypass Graft (CABG) - where surgery involving either a median sternotomy or minimally invasive procedure is performed	100% of Benefit Amount	100% of Initial Benefit
<b>Childhood Disease Category</b>		
Cerebral Palsy	25% of Benefit Amount	NONE
Cystic Fibrosis	25% of Benefit Amount	NONE



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Sickle Cell Anemia	25% of Benefit Amount	NONE
<b>Heart Attack Category</b>		
Heart Attack	100% of Benefit Amount	50% of Initial Benefit
<b>Infectious Disease Category</b>		
<i>For a benefit to be payable, the covered person must have been treated for the disease in a hospital for 5 consecutive days.</i>		
Bacterial Cerebrospinal Meningitis	25% of Benefit Amount	NONE
COVID-19	25% of Benefit Amount	NONE
Diphtheria	25% of Benefit Amount	NONE
Encephalitis	25% of Benefit Amount	NONE
Legionnaire's Disease	25% of Benefit Amount	NONE
Malaria	25% of Benefit Amount	NONE
Necrotizing Fasciitis	25% of Benefit Amount	NONE
Osteomyelitis	25% of Benefit Amount	NONE
Rabies	25% of Benefit Amount	NONE
Tetanus	25% of Benefit Amount	NONE
Tuberculosis	25% of Benefit Amount	NONE
<b>Kidney Failure Category</b>		
Kidney Failure	100% of Benefit Amount	NONE
<b>Major Organ Transplant Category</b>		
Major Organ Transplant <i>For heart, lung, pancreas, and liver</i>	100% of Benefit Amount	50% of Initial Benefit
<b>Occupational Exposure Category</b>		
Occupational Hepatitis or Occupational HIV	100% of Benefit Amount	NONE
<b>Progressive Disease Category</b>		
Adrenal Hypofunction (Addison's Disease)	25% of Benefit Amount	NONE
ALS	100% of Benefit Amount	NONE
Alzheimer's Disease	100% of Benefit Amount	NONE
Huntington's Disease	25% of Benefit Amount	NONE
Multiple Sclerosis	25% of Benefit Amount	NONE
Muscular Dystrophy	25% of Benefit Amount	NONE
Myasthenia Gravis	25% of Benefit Amount	NONE
Parkinson's Disease (Advanced)	25% of Benefit Amount	NONE
Poliomyelitis	25% of Benefit Amount	NONE
Systemic Lupus Erythematosus (SLE)	25% of Benefit Amount	NONE
Systemic Sclerosis (Scleroderma)	25% of Benefit Amount	NONE
<b>Stroke Category</b>		
Stroke	100% of Benefit Amount	50% of Initial Benefit

## Questions & Answers

### Q. Who do I call for assistance?

- A. Contact a MetLife Customer Service Representative at 1 800- GET-MET8 (1-800-438-6388), Monday through Friday from 8:00 a.m. to 8:00 p.m., EST.



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<sup>1</sup> [Coverage is guaranteed provided (1) the employee is actively at work and (2) dependents to be covered are not subject to medical restrictions as set forth on the enrollment form and in the Certificate. Some states require the insured to have medical coverage. MetLife will not pay a benefit for a Covered Condition that is diagnosed prior to the coverage effective date.]

<sup>1</sup> [Coverage is guaranteed provided (1) the employee is performing all of the usual and customary duties of your job at the employer's place of business or at an alternate place approved by your employer and (2) dependents to be covered are not subject to medical restrictions as set forth on the enrollment form and in the Certificate. Some states require the insured to have medical coverage. MetLife will not pay a benefit for a Covered Condition that is diagnosed prior to the coverage effective date.]

<sup>2</sup> Coverage for Domestic Partners, civil union partners and reciprocal beneficiaries varies by state. Please contact MetLife for more information.

<sup>3</sup> Dependent Child coverage varies by state. Please contact MetLife for more information.

<sup>4</sup> Review the Disclosure Document or Outline of Coverage/Disclosure Document for information on which Covered Condition may be eligible for a Recurrence Benefit. There may be a Benefit Suspension Period between recurrences of the same Covered Condition, as well as occurrences of different Covered Conditions. There may be a limitation on the number of Recurrence Benefits payable per Covered Condition. We will not pay a benefit for a Covered Condition that is subject to a Benefit Suspension Period. If a Recurrence Benefit is payable for a Cancer Covered Condition, we will not pay such benefit unless the Covered Person has not had symptoms of or been treated for the same cancer for which we paid a benefit during the Treatment Free Period.

<sup>5</sup> Eligible Family Members means all persons eligible for coverage as defined in the Certificate.

METLIFE CRITICAL ILLNESS INSURANCE (CII) IS A LIMITED BENEFIT GROUP INSURANCE POLICY. Like most group accident and health insurance policies, MetLife's CII policies contain certain exclusions, limitations and terms for keeping them in force. Product features and availability vary by state. There may be a Benefit Suspension Period between recurrences of the same Covered Condition or occurrences of different Covered Conditions. MetLife offers CII on both an Attained Age basis, where rates will increase when a Covered Person reaches a new age band, and an Issue Age basis, where rates will not increase due to age. Rates are subject to change. MetLife reserves the right to raise premium rates for Issue Age CII on a class-wide basis. A more detailed description of the benefits, limitations, and exclusions applicable to MetLife's CII product can be found in the applicable Disclosure Statement or Outline of Coverage/Disclosure Document available at time of enrollment. For complete details of coverage and availability, please refer to the group policy form GPNP07-CI, GPNP09-CI, GPNP10-CI, GPNP14-CI, GPNP19-CI or contact MetLife for more information. Please contact MetLife for more information. Benefits are underwritten by Metropolitan Life Insurance Company, New York, New York.

MetLife's Critical Illness Insurance is not intended to be a substitute for Medical Coverage providing benefits for medical treatment, including hospital, surgical and medical expenses. MetLife's Critical Illness Insurance does not provide reimbursement for such expenses