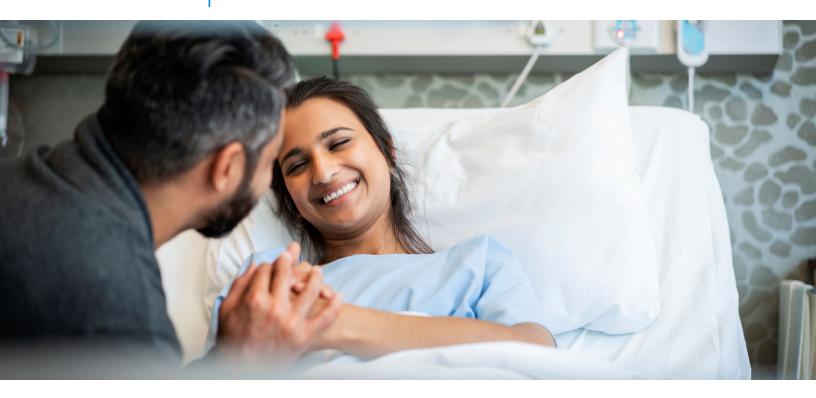


## Accident | Critical Illness





## Why supplemental insurance matters

**Effective January 1, 2022**, we are pleased to announce that your Accident and Critical Illness Insurance coverages will be upgraded under a new enhanced plans.

With **Accident and Critical Illness Insurance** from MetLife, you can help prepare for unexpected expenses. For example, consider medical costs that may not be covered in full by your existing plan, like co-pays, deductibles, and physical therapy, as well as costs you may not think of, like transportation to doctors' appointments or additional childcare expenses. These unexpected costs can cut into your budget and make managing everyday expenses a challenge.

#### How it works

Supplemental insurance is coverage that can help safeguard your finances by providing you with a lump-sum payment for a covered event. One convenient payment is made to you all at once when you or your family needs it most. The extra cash can help you focus on getting back on track — without worrying about finding the money to cover some of your expenses.

And best of all, the payment is made directly to you and is made regardless of any other insurance you may have. It's yours to spend however you like, including for you or your family's everyday living expenses.

While recovering, supplemental insurance is there to help make life a little easier.

Attached is a flyer with more information about these new Accident and Critical Illness Insurance plans. We will explain the differences between your new, enhanced coverage and your old coverage. In addition, you can access your new Certificate of Insurance on the MyBenefits website starting 1/1/22. The Certificate details the information regarding the change in coverage under the section titled "Special Rules for Covered Persons Previously Insured Under a Group Accident and Group Critical Illness Insurance Policy Issued To The Group Policyholder by MetLife.

# Why should I enroll now?

- Competitive group rates
- Coverage for you and your loved ones<sup>1</sup>
- No medical questions asked<sup>2</sup>
- Guaranteed acceptance<sup>2</sup>
- · Easy payroll deductions
- Portable coverage so you can take it with you if you change jobs or retire<sup>3</sup>

## What's New with Accident Insurance for 2022



| Covered Conditions                    | New Enhanced Plan |       | Current Plan |      |
|---------------------------------------|-------------------|-------|--------------|------|
| Plans                                 | Low               | Hight | Low          | High |
| Health Screening Benefit <sup>4</sup> | \$50              | \$75  | None         | None |
| Sports Rider <sup>5</sup>             | 25%               | 25%   | None         | None |

## What's New with Critical Illness Insurance for 2022

| Covered Conditions <sup>6</sup>   | New Enhanced Plan  | Current Plan  |  |
|---|--|---|--|
| Benefit Amount  | Spouse/Domestic Partner 100% of Employee benefit amount  Dependent Child(ren) will be offered 50% of Employee benefit amount         | Spouse and Dependent<br>Child(ren) offered 50% of<br>Employee benefit amount                                    |  |
| Total Benefit Amount  | 500%   | 300%  |  |
| Benign Brain Tumor  | 100%   | Not available   |  |
| Coronary Artery Bypass Graft <sup>7</sup>   | 50%  | 100%  |  |
| Loss of Sight, Hearing or Speech  | 100%   | Not available   |  |
| Coma  | 100%   | Not available   |  |
| Paralysis (of 2 or more limbs)  | 100%   | Not available   |  |
| ALS   | 100%   | 25%   |  |
| Multiple Sclerosis  | 100%   | 25%   |  |
| Muscular Dystrophy  | 100%   | 25%   |  |
| Parkinson's Disease (Advanced)  | 100%   | Not available   |  |
| Lupus   | 100%   | 25%   |  |
| Childhood Conditions:<br>Cleft Lip or Cleft Palate, Diabetes (type 1),<br>Down syndrome, Spina Bifida | 100%   | Not available   |  |
| Childhood Conditions:<br>Cerebral Palsy, Cystic Fibrosis, Sickle Cell<br>Anemia                       | 100%   | 25%   |  |
| Suspension Period for same condition8   | 90 days<br>(Also, 90 days treatment<br>free for Invasive Cancer,<br>Non-invasive Cancer and<br>Benign Brain Tumor)                   | 365 days<br>(180 days treatment free for<br>Invasive Cancer, Non-<br>invasive Cancer and Benign<br>Brain Tumor) |  |
| Recurrence Benefit <sup>8</sup>   | 100%: Heart Attack, Stroke,<br>Invasive Cancer, Coronary<br>Artery Bypass Graft,<br>Non-invasive Cancer, Coma,<br>Benign Brain Tumor | 100%: Heart Attack, Stroke,<br>Invasive Cancer, Coronary<br>Artery Bypass Graft,<br>Non-invasive Cancer         |  |



## Frequently Asked Questions

### Q. How do I pay?

**A.** Pay via easy automatic payroll deductions.

#### Q. When can I enroll?

**A.** You can enroll both yourself and eligible family members. All you need to do is enroll during your annual enrollment period and be actively at work.

#### Q. How much does it cost?

**A.** The average monthly premium costs less than a monthly gym membership (based on average costs at national retail chains).

#### Q. When does my coverage become effective?

A. Coverage is effective 1/1/2022.

#### Q. How do I file a claim?

#### A. It's easy to submit a claim:

- 1. Visit mybenefits.metlife.com to view your certificate of insurance and to initiate your claim\* or call 1 866 626-3705.
- 2. Answer some questions about your claim and upload your medical documentation to support your claim. The whole process takes just minutes!
- 3. Visit MyBenefits frequently to check claim status, letters and benefit payments.

\*For Critical Illness claims, a Physician Statement, which is available on MyBenefits, needs to be completed by your physician.

#### Q. What happens next?

**A.** A MetLife claims specialist will review your information, request any additional medical information (if necessary), and notify you in writing of a claim decision.

#### Q. How do I file a Health Screening Benefit claim?

#### A. It's easy to submit a claim:

- 1. Call 1 800 GET-MET8. (1 800-438-6388)
- 2. Provide a few details, including:
  - a. The healthcare provider's name, address, and phone number
  - b. The screening/test and the date it was completed
  - c. Address where the test/screening was performed
- 3. Receive your Health Screening Benefit payment. (Checks are typically issued within a few business days once your claim has been processed)

You can submit multiple claims for your spouse, domestic partner and/or dependent children, all on one call.

## Have other questions?

Please call MetLife directly at 1 800 GET-MET8 1 800 438-63881 and talk with a benefits consultant.

#### Recent studies have shown

of employees say medical/health expenses cause financial stress and anxiety.9

#### **Accident | Critical Illness**



- 1. Covered Family Member means all Covered Persons as defined in the Certificate
- 2. 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. Additional restrictions apply to dependents serving in the armed forces or living overseas.
- 3. Eligibility for portability through the Continuation of Insurance with Premium Payment provision may be subject to certain eligibility requirements and limitations. For more information, contact your MetLife representative.
- 4. The Health Screening Benefit is not available in all states. See your certificate for any applicable waiting periods. There is a separate mammogram benefit for MT residents and for cases sitused in CA and MT.
- 5. Covered services/treatments must be the result of a covered accident as defined in the group policy/certificate. See your Disclosure Statement or Outline of Coverage/Disclosure Document for more details.
- 6. Please review the Outline of Coverage/Disclosure Document for specific information about cancer benefits. Not all types of cancer are covered. Some cancers are covered at less than the nitial Benefit Amount. For NH sitused cases and NH residents, there is an Initial Benefit of \$100 for All Other Cancer.
- 7. In NJ sitused cases, the Covered Condition is Coronary Artery Disease.
- 8. We will not pay a Recurrence Benefit for a Covered Condition that Recurs during a Benefit Suspension Period. We will not pay a Recurrence Benefit for either a Full Benefit Cancer or a Partial Benefit Cancer unless the Covered Person has not had symptoms of or been treated for the Full Benefit Cancer or Partial Benefit Cancer for which we paid an Initial Benefit during the Benefit Suspension Period Gans E. How to Choose the Best Gym Membership Costs & Ways to Save. Money Crashers website. https://www.moneycrashers.com/choose-best-gym-membership-costs/. Accessed: April 19, 2021.
- 9. MetLife's 19th Annual U.S. Employee Benefits Trends Study 2021.

METLIFE'S ACCIDENT INSURANCE IS A LIMITED BENEFIT GROUP INSURANCE POLICY. The policy is not intended to be a substitute for medical coverage and certain states may require the insured to have medical coverage to enroll for the coverage. The policy or its provisions may vary or be unavailable in some states. There is a preexisting condition limitation for hospital sickness benefits, if applicable. MetLife's Accident Insurance may be subject to benefit reductions that begin at age 65. And, like most group accident and health insurance policies, policies offered by MetLife may contain certain exclusions, limitations and terms for keeping them in force. For complete details of coverage and availability, please refer to the group policy form GPNP12-AX or contact MetLife. Benefits are underwritten by Metropolitan Life Insurance Company, New York, New York. Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See MetLife's Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

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 may vary by state. In most plans, there is a preexisting condition exclusion. In most states, after a covered condition occurs, there is a benefit suspension period during which most plans do not pay recurrence benefits. MetLife offers CII on both an Attained Age and an Issue Age basis. Attained Age rates are based on 5-year age bands and will increase when a Covered Person reaches a new age band. MetLife's Issue Age CII is guaranteed renewable and may be subject to benefit reductions that begin at age 65. Premium rates for MetLife's Issue Age CII are based on age at the time of the initial coverage effective date and will not increase due to age; premium rates for increases in coverage, including the addition of dependents' coverage, if applicable, will be based on the covered person's age at the time of that increase's effective date. Rates are subject to change for MetLife's Issue Age CII on a class-wide basis. A more detailed description of the benefits, limitations, and exclusions applicable to both Attained Age and Issue Age CII 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 or GPNP14-CI, or contact MetLife for more information. Benefits are underwritten by Metropolitan Life Insurance Company, New York, New York, In New York, availability of MetLife's Issue Age CII product is pending regulatory approval.

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.

