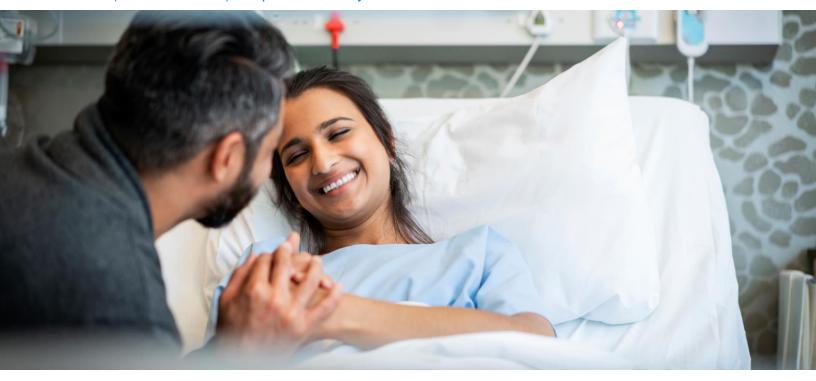


JOANN

Accident | Critical Illness | Hospital Indemnity



Why supplemental insurance matters

We may all know someone who's been affected by a health issue. From a broken arm at soccer practice to a heart attack — an accident, critical illness or a hospital stay can happen at any time.

With Accident, Critical Illness and Hospital Indemnity 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 benefit 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 money 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 your or your family's everyday living expenses.

While recovering, supplemental insurance is there to help make things a little easier. See the chart on the following page to determine which coverage or coverages may best suit your needs.

Why should I enroll now?

- Competitive group rates
- Coverage for you and your loved ones¹
- No medical questions asked²
- Guaranteed acceptance²
- · Easy payroll deductions
- Portable coverage so you can take it with you if you change jobs or retire³



Help supplement your healthcare coverage with Accident, Critical Illness and/or Hospital Indemnity Insurance.

	Accident Insurance	Hospital Indemnity Insurance	Critical Illness Insurance
Product overview	Accident Insurance pays out a lump sum benefit if you incur an injury as a result of an accident. ⁴	Hospital Indemnity Insurance pays you benefits when you are confined ⁵ to a hospital, ⁶ whether for planned or unplanned reasons. ⁷	Critical Illness Insurance pays you a lump sum benefit payment when you have a verified diagnosis of the specific illnesses on a predetermined list as part of the policy.
Why needed			nce and disability if a covered incident causes or — or causes you to lose income due to being
Coverage choices*	Low Plan High Plan	Low Plan High Plan	• \$15,000 • \$30,000
Who is covered	TM Only TM & Spouse TM & Child(ren) TM & Family	TM OnlyTM & SpouseTM & Child(ren)TM & Family	TM Only (100% of coverage amount) TM & Spouse TM & Child(ren) TM & Family (Spouse & child(ren) covered at 50% of coverage amount)
Covered services*	Over 150 covered events and services, such as fractures, dislocations, and & 3rd degree burns, and medical treatments or tests resulting from an accident.	A flat amount is paid for the day that you are admitted 10 to a hospital and a per-day amount is paid for each day of a covered hospital stay, from the very first day of your stay. Some covered conditions include: • Routine Childbirth • Newborn Confinement 11 • Inpatient and Outpatient Surgery • Mental Illness treatment 12	Over 40 covered conditions including Cancer, ¹³ Heart Attack ¹⁴ and Stroke. ¹⁵ Additionally, plan pays at initial occurrence and at recurrences for the following Covered Conditions: Heart Attack, Stroke and Cancer. A Recurrence Benefit is only available if an Initial Benefit has been paid for the Covered Condition. ¹⁶
Additional value-add services		Health Screening Benefits ¹⁷ MetLife will provide an annual benefit when enrolled in Hospital or Critical Illness Insurance of \$50 per calendar year for taking one of the over 40 eligible screening/prevention measures, including: • Blood test to determine total cholesterol • Blood test to determine triglycerides • Colonoscopy • Endoscopy MetLife will pay only one health screening benefit per covered person per calendar year.	

^{*} For a complete list of all coverage options and covered services, visit My Benefits in Ally

Enroll in more than one kind of supplemental insurance, and a single event could be covered by more than one plan.

For example, if you suffer an injury from an accident that leads to a lengthy hospital stay, having more than one plan could work in your favor as you may be eligible to receive multiple payments for these occurrences.



Frequently Asked Questions

- Q. How do I pay?
- **A.** Pay via easy automatic payroll deductions.
- Q. When can I enroll?
- **A.** Enroll from 12/1/2022 to 12/15/2022.
- Q. How can I enroll?
- **A.** Enroll by visiting **Ally**.
- Q. How much does it cost?
- A. Monthly premiums vary by plan and coverage options. To see your rates, visit Ally.
- Q. When does my coverage become effective?
- **A.** Coverage is effective 2/1/23.
- 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.

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. You can file a claim online through MyBenefits at www.metlife.com/mybenefits or by calling MetLife at 1 800 MET-8 (1 800-438-6388). You can also file a claim using the MetLife Mobile App!
- 2. Provide a few details, including:
 - a. The name of the Insured, SSN or EEID, Group Name, Certificate Number
 - b. What date did you have your test?
 - c. What was the test you had completed?
- 3. Receive your HSB payment. (If submitting via MyBenefits, payment can be made via EFT. Checks are typically issued within a few business days once your claim has been processed.

You can submit claims for your spouse and/or dependent children. No hard copy proof is ever required! Please refer to your certificate for details on the health screening benefit and which tests are applicable based on your coverage.

Have other questions?

Please call MetLife directly at 1 800 GET-MET8 (1 800 438-6388) and talk with a benefits consultant.

Recent studies have shown

of employees say medical/health expenses cause financial stress and anxiety. 18

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

Accident | Critical Illness | Hospital Indemnity



- 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. 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
- 5. Hospital Confinement requires the assignment to a bed as a resident inpatient in a Hospital (including an Intensive Care Unit of a Hospital) on the advice of a Physician or confinement in an observation area within a Hospital for a period of no less than 20 continuous hours on the advice of a Physician. Please consult your certificate for details.
- 6. Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details
- 7. There is a pre-existing exclusion for covered sicknesses. Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.
- 8. Dependent Child coverage varies by state. Please contact MetLife for more information.
- 9. Chip fractures are paid at 25% of Fracture Benefit and partial dislocations are paid at 25% of Dislocation Benefit.
- 10. The Admission Benefit is not payable for Emergency Room treatment or outpatient treatment. The payment of the admission benefit requires a Confinement. Hospital Confinement requires the assignment to a bed as a resident inpatient in a Hospital (including an Intensive Care Unit of a Hospital) on the advice of a Physician or confinement in an observation area within a Hospital for a period of no less than 20 continuous hours on the advice of a Physician. Please consult your certificate for details. When plan includes an Admission Benefit, the Confinement Benefit begins on Day 2.
- 11. Payable for the period of newborn confinement for a newborn child who is not sick or injured.
- 12. Treatment for mental illness in a hospital or in an inpatient rehabilitation facility without prior hospitalization is covered.
- 13. Please review the Disclosure Statement or 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 Initial Benefit Amount. Individuals covered under a NY certificate receive a Skin Cancer benefit. For NH residents, there is an initial benefit of \$100 for All Other Cancer.
- 14. The Heart Attack Covered Condition pays a benefit for the occurrence of a myocardial infarction, subject to the terms of the certificate. A myocardial infarction does not include sudden cardiac arrest.
- 15. In certain states, the Covered Condition is Severe Stroke.
- 16. In some states, we will not pay a Recurrence Benefit more than once per Covered Condition. In some states, we will not pay a Covered Condition that Recurs during a Benefit Suspension Period. In some states, we will not pay a Recurrence Benefit for Cancer unless the Covered Person has not had symptoms of or been treated for the Cancer for which we paid an Initial Benefit during the Treatment Free Period.
- 17. The Health Screening Benefit is not available in certain states. In some states, there is a separate mammogram benefit. Please review your Disclosure Statement or Outline of Coverage/Disclosure Document for specific state variations and exclusions around this benefit. There is a separate mammogram benefit for MT residents and for cases sitused in CA and MT.
- 18. MetLife's 19th Annual U.S. Employee Benefits Trends Study 2021

METLIFE'S ACCIDENT (AX), HOSPITAL INDEMNITY (HI) AND CRITICAL ILLNESS (CII) INSURANCE POLICIES ARE LIMITED BENEFIT GROUP INSURANCE POLICIES. The policies are not intended to be a substitute for medical coverage providing benefits for medical treatment, including hospital, surgical, and medical expenses, and do not provide reimbursement for such expenses. Certain states may require the insured to have medical coverage to enroll in these policies. Like most group accident and health insurance policies, MetLife's AX, HI and CII policies contain certain exclusions, limitations and terms for keeping them in force. Product features and availability may vary by state. The policies may be subject to a Benefit Reduction Due to Age provision. For HI and AX, prior hospital confinement may be required to receive certain benefits, and there may be a pre-existing condition exclusion for hospital sickness benefits, if applicable. Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. For CII, there may be a pre-existing condition exclusion, and 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 AX, HI and CII products can be found in the applicable Disclosure Statements or Outlines of Coverage/Disclosure Documents available at time of enrollment. For complete details of coverage and availability: for AX and HI, please refer to the group policy form GPNP12-AX, GPNP13-HI, GPNP16-HI or GPNP12-AX-PASG; and for CII, please refer to the group policy form GPNP10-CI, GPNP10-CI, GPNP10-CI, GPNP14-CI, GPNP



Metropolitan Life Insurance Company | 200 Park Avenue | New York, NY 10166 L0222019804[exp0223][All States][DC,GU,MP,PR,VI] © 2022 MetLife Services and Solutions, LLC

Accident Insurance

Benefits that may help cover costs such as those not covered by your medical plan.

Accident Insurance Benefits

With MetLife, you'll have a choice of two plans (called the "Low Plan" and the "High Plan") that provide payments in addition to any other insurance payments you may receive¹. Here are just some of the covered events/services².

Benefit Type	Low Plan Benefits	High Plan Benefits
Accidental Injury Benefits		
Fracture* (depending on the fracture and type of repair)	\$50 - \$3,000	\$100 – \$6,000
Dislocation* (depending on the dislocation and type of repair)	\$50 – \$3,000	\$100 – \$6,000
Second- or Third- Degree Burn (depending on degree of burn and percentage of burnt skin)	\$50 – \$5,000	\$100 – \$10,000
Concussion	\$200	\$400
Coma	\$5,000	\$10,000
Laceration (depending on the length of the cut and type of repair)	\$25 – \$200	\$50 – \$400
Broken Tooth	Crown: \$100 / Filling: \$25 / Extraction: \$50	Crown: \$200 / Filling: \$50 / Extraction: \$100
Eye Injury	\$200	\$300
Accident - Medical Services & Treatment Benefits		
Ambulance	Ground: \$200 / Air: \$750	Ground: \$300 / Air: \$1,000
Emergency Care (depending on location of care)	\$25 – \$50	\$50 – \$100
Non-Emergency Initial Care	\$25	\$50
Physician Follow-Up	\$50	\$75
Therapy Services (including physical therapy)	\$15	\$25
Medical Testing	\$150	\$200
Medical Appliances (depending on the appliance)	\$75 – \$750	\$150 – \$1,000
Transportation	\$200	\$400
Benefit Type	Low Plan Benefits	High Plan Benefits
Pain Management (for epidural anesthesia)	\$50	\$100
Prosthetic Device	One device: \$500 More than one device: \$1,000	One device: \$750 More than one device: \$1,500
Blood/Plasma/Platelets	\$300	\$400



Accident Insurance

Surgical Repair (depending on the type of surgery)	\$100-\$1,000	\$200-\$2,000	
Exploratory Surgery	\$100	\$200	
Other Outpatient Surgery	\$200	\$500	
Hospital Benefits*			
Admission	\$500 for the day of admission	\$1,000 for the day of admission	
Intensive Care Unit (ICU) Supplemental Admission	\$500 for the day of admission	\$1,000 for the day of admission	
Confinement (paid for up to 15 days per accident)	\$100 per day	\$200 per day	
ICU Supplemental Confinement (paid for up to 15 days per accident)	\$100 per day	\$200 per day	
Inpatient Rehabilitation (paid for up to 15 days per accident)	\$100 per day	\$200 per day	
Other Benefits			
Lodging Benefit* - for a companion of a covered person who is hospitalized	\$100 per day	\$200 per day	

Organized Sports Activity Injury Benefit Rider

This coverage includes an Organized Sports Activity Benefit Rider. The rider increases the amount payable under the Certificate for certain benefits by 25% for injuries resulting from an accident that occurred while participating as a player in an organized sports activity. The rider sets forth terms, conditions and limitations, including the covered persons to whom the rider applies.

- * Notes Regarding Certain Benefits Fracture and Dislocation benefits Chip fractures are paid at 25% of the applicable fracture benefit and partial dislocations are paid at 25% of the applicable dislocation benefit.
- Hospital Benefits 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.
- Accidental Death Benefit The benefit amount will be reduced by the amount of any accidental dismemberment/functional loss/paralysis benefits and modification benefit paid for injuries sustained by the covered person in the same accident for which the accidental death benefit is being paid.
- Common Carrier Benefit Common Carrier refers to airplanes, trains, buses, trolleys, subways and boats. Certain conditions apply. See your Disclosure Statement or Outline of Coverage/Disclosure Document for specific details. Be sure to review other information contained in this booklet for more details about plan benefits, monthly rates and other terms and conditions.
- Lodging Benefit The lodging benefit is not available in all states. It provides a benefit for a companion accompanying a covered insured while hospitalized, provided that lodging is at least 50 miles from the insured's primary residence.
- Organized Sports Activity Injury Benefit Rider The rider is not available in all states. Proof of registration in an Organized Sports Activity in which an Accident occurred is required at time of claim. See your certificate for details.

Benefit Payment Example

Kathy's daughter, Molly, was riding her bike to school. On her way there she fell to the ground, was knocked unconscious, and was taken to the local emergency room (ER) by ambulance for treatment. The ER doctor diagnosed a concussion and a broken tooth. He ordered a CT scan to check for facial fractures too, since Molly's face was very swollen. Molly was released to her primary care physician for follow-up treatment, and her dentist repaired her broken tooth with a crown. Depending on her health insurance, Kathy's out-of-pocket costs could run into hundreds of dollars to cover expenses like insurance co-payments and deductibles. MetLife Group Accident Insurance payments can be used to help cover these unexpected costs.

Covered Event ³	Benefit Amount
Ambulance (ground)	\$300
Emergency Care	\$100
Physician Follow-Up (\$50 x 2)	\$100
Medical Testing	\$200
Concussion	\$400
Broken Tooth (repaired by crown)	\$200



Accident Insurance

Benefits paid by MetLife Group Accident Insurance	\$1,300
------------------------------------------------------	---------

Benefit amount is based on a sample MetLife plan design. Actual plan design and benefits may vary.

Questions & Answers

- Q. Who is eligible to enroll for this accident coverage?
- A. You are eligible to enroll yourself and your eligible family members!⁴ You need to enroll during your Enrollment Period and to be actively at work for your coverage to be effective.
- Q. How do I pay for my accident coverage?
- A. Premiums will be paid through payroll deduction, so you don't have to worry about writing a check or missing a payment.
- Q. What happens if my employment status changes? Can I take my coverage with me?
- A. Yes, you can take your coverage with you. 5 You will need to continue to pay your premiums to keep your coverage in force. Your coverage will only end if you stop paying your premium or if your employer offers you similar coverage with a different insurance carrier.
- 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. Or visit our website: *mybenefits.metlife.com*.

Insurance Rates

MetLife offers group rates and payroll deduction, so you don't have to worry about writing a check or missing a payment! Your employee rates are outlined below.

Accident Insurance	Monthly Cost to You	Monthly Cost to You		
Coverage Options	Low Plan	High Plan		
Employee	\$3.11	\$5.66		
Employee & Spouse	\$6.44	\$11.74		
Employee & Child(ren)	\$6.76	\$12.28		
Employee & Spouse/Child(ren)	\$8.31	\$15.24		

¹ Covered services/treatments must be the result of a covered accident or sickness as defined in the group policy/certificate. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

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. Like most group accident and health insurance policies, policies offered by MetLife may include waiting periods and 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, NY. 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.



² Availability of benefits varies by state. See your Disclosure Statement or Outline of Coverage/Disclosure Document for state variations. ³ Benefits and amounts are based on sample MetLife plan design. Plan design and plan benefits may vary.

⁴ 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. Children may be covered to age 26. There are benefit reductions that may begin at age 65.

^[5] 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.]

Benefits that may help cover expenses that are not covered by your medical plan.

Critical Illness Insurance Benefits

Eligible Individual	Benefit Amount	Requirements	
Coverage Options			
Employee	\$15,000 or \$30,000	Coverage is guaranteed provided you are actively at work. ¹	
Spouse/Domestic Partner ²	50% of the Employee's Initial Benefit	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. 1	
Dependent Child(ren) ³	50% of the Employee's Initial Benefit	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. 1	

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**⁴ 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. In addition, there is a Benefit Suspension Period that applies to Initial Benefits for different conditions.

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.

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

Plan Design – Covered Conditions"

Covered Conditions*	Initial Benefit	Recurrence Benefit	
Benign Tumor Category			
Benign Brain Tumor	100% of Benefit Amount	100% of Initial Benefit Amount	
Cancer Category			
Invasive Cancer	100% of Benefit Amount	100% of Initial Benefit Amount	
Non-Invasive Cancer	25% of Benefit Amount	100% of Initial Benefit Amount	
Skin Cancer	5% of Benefit Amount, but not less than \$250	None	
Cardiovascular Disease Category			
Coronary Artery Bypass Graft (CABG) - where surgery involving either a median sternotomy or minimally invasive procedure is performed	50% of Benefit Amount	100% of Initial Benefit Amount	
Childhood Disease Category			
Cerebral Palsy	100% of Benefit Amount	None	



Cleft Lip or Cleft Palate	100% of Benefit Amount	None
Cystic Fibrosis	100% of Benefit Amount	None
Diabetes (Type 1)	100% of Benefit Amount	None
Down Syndrome	100% of Benefit Amount	None
Sickle Cell Anemia	100% of Benefit Amount	None
Spina Bifida	100% of Benefit Amount	None
Functional Loss Category		
Coma	100% of Benefit Amount	100% of Initial Benefit
Loss of: Ability to Speak; Hearing; or Sight	100% of Benefit Amount	None
Paralysis of 2 or More Limbs	100% of Benefit Amount	None
Heart Attack Category		
Heart Attack	100% of Benefit Amount	100% of Initial Benefit
Sudden Cardiac Arrest	100% of Benefit Amount	None
Infectious Disease Category		
For a benefit to be payable, the covered person mus	st have been treated for the disease in a ho	ospital for [5] consecutive days.
Bacterial Cerebrospinal Meningitis	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
Kidney Failure Category		
Kidney Failure	100% of Benefit Amount	None
Major Organ Transplant Category		
Major Organ Transplant For bone marrow, heart, lung, pancreas, and liver	100% of Benefit Amount	None
Progressive Disease Category		
ALS	100% of Benefit Amount	None
Alzheimer's Disease	100% of Benefit Amount	None
Multiple Sclerosis	100% of Benefit Amount	None
Muscular Dystrophy	100% of Benefit Amount	None
Parkinson's Disease (Advanced)	100% of Benefit Amount	None
Systemic Lupus Erythematosus (SLE)	100% of Benefit Amount	None
Severe Burn Category		
Severe Burn	100% of Benefit Amount	100% of Initial Benefit
Stroke Category		
Stroke	100% of Benefit Amount	100% of Initial Benefit

^{*} Notes Regarding Covered Conditions



- Alzheimer's Disease Please review the Outline of Coverage/Disclosure Document for specific information about Alzheimer's disease.
- Cancer Please review the certificate for specific information about cancer benefits. In most states, not all types of cancer are covered.
- Coronary Artery Bypass Graft In certain states, the Covered Condition is Coronary Artery Disease.
- Heart Attack The Heart Attack Covered Condition pays a benefit for the occurrence of a myocardial infarction, subject to the terms of the certificate. A myocardial infarction does not include sudden cardiac arrest.
- Infectious Disease Covered Condition Category For an Infectious Disease Category benefit to be payable, the covered person must have been
 treated for the disease in a hospital for a consecutive number of days as specified in the certificate.
- Major Organ Transplant In most states, we will not pay a Major Organ Transplant benefit if a covered person is placed on the organ transplant list
 prior to coverage taking effect and subsequently undergoes a transplant procedure for the same organ while coverage is in effect. Covered organs
 may vary by state; refer to the Certificate for details. In some states, the condition is Major Organ Failure.
- Stroke In certain states, the Covered Condition is Severe Stroke.
- The following benefits are not available in all states. Please review the Disclosure Statement or Outline of Coverage/Disclosure Document for details
 - o Aortic Valve or Mitral Valve Repair or Replacement
 - Coma
 - o Congenital Heart Disease (for which Surgery has been recommended for treatment)
 - Coronary Angioplasty
 - o ICD
 - o Loss of: Ability to Speak; Hearing; or Sight
 - Major Organ Transplant Donation
 - Pacemaker
 - Paralysis
 - Severe Burn

GUAM, NEW MEXICO AND WASHINGTON RESIDENTS: Please refer to the Disclosure Document/Outline of Coverage for the terms of your coverage which may differ materially from what is shown in this plan summary.

Health Screening BenefitMetLife will provide an annual benefit of \$50 per calendar year for taking one of the eligible screening/prevention measures. The Health Screening Benefit is not available in certain states. Please review your Disclosure Statement or Outline of Coverage/Disclosure Document for specific state variations and exclusions around this benefit.

Example of How Benefits are Paid

The example below illustrates an employee who elected a Benefit Amount of \$15,000.

Illness - Covered Condition	Payment
Heart Attack — first verified diagnosis	Initial Benefit payment of \$15,000 or 100%
Kidney Failure – first verified diagnosis, two years later	Initial Benefit payment of \$15,000 or 100%
Heart Attack — second verified diagnosis, four years later	Recurrence Benefit payment of \$7,500 or 50%

This example is for illustrative purposes only. The MetLife Group Policy and Certificate are the governing documents with respect to all matters of insurance, including coverage for specific illnesses. The specific facts of each claim must be evaluated in conjunction with the provisions of the applicable Policy and Certificate to determine coverage in each individual case.

Questions & Answers

- Q. Who is eligible to enroll for this critical illness coverage?
- A. You are eligible to enroll yourself and your eligible family members! 5 You need to enroll during your Enrollment Period and to be actively at work for your coverage to be effective.
- Q. How do I pay for my critical illness coverage?
- A. Premiums will be paid through payroll deduction, so you don't have to worry about writing a check or missing a payment.
- Q. What happens if my employment status changes? Can I take my coverage with me?
- **A.** Yes, you can take your coverage with you.⁶ You will need to continue to pay your premiums to keep your coverage in force. Your coverage will only end if you stop paying your premium or if your employer offers you similar coverage with a different insurance carrier.



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. Or visit our website: mybenefits.metlife.com.

Insurance Rates

Attained

Age

<25

25 - 29

30 - 34

35 - 39

40 - 44

45 - 49

50 - 54

55 - 59

60 - 64

65 - 69

70+

\$1.30

\$1.85

\$2.75

\$4.32

MetLife offers group rates and payment of premium through payroll deduction, so you don't have to worry about writing a check or missing a payment! Your employee rates are outlined below.

Monthly Premium per \$1,000 of Coverage

Non - Tobacco
Premium per \$1,000 of Coverage

\$2.40

\$3.47

\$5.14

\$7.77

Employee + Employee Employee Employee Spouse Only + Spouse and Child(ren) Child(ren) \$0.17 \$0.29 \$0.32 \$0.44 \$0.18 \$0.32 \$0.33 \$0.47 \$0.24 \$0.42 \$0.39 \$0.57 \$0.33 \$0.58 \$0.48 \$0.73 \$0.99 \$0.48 \$0.84 \$0.63 \$0.70 \$1.23 \$0.85 \$1.38 \$0.97 \$1.73 \$1.12 \$1.88

\$1.46

\$2.00

\$2.90

\$4.47

Tobacco
Premium per \$1,000 of Coverage

Attained Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Spouse and Child(ren)
<25	\$0.22	\$0.36	\$0.37	\$0.52
25 - 29	\$0.24	\$0.41	\$0.39	\$0.56
30 - 34	\$0.35	\$0.59	\$0.50	\$0.74
35 - 39	\$0.50	\$0.86	\$0.65	\$1.01
40 - 44	\$0.77	\$1.33	\$0.92	\$1.48
45 - 49	\$1.17	\$2.02	\$1.32	\$2.17
50 - 54	\$1.64	\$2.91	\$1.79	\$3.06
55 - 59	\$2.24	\$4.10	\$2.39	\$4.25
60 - 64	\$3.21	\$6.01	\$3.36	\$6.16
65 - 69	\$4.81	\$9.00	\$4.96	\$9.15
70+	\$7.63	\$13.70	\$7.78	\$13.85

Rates will increase when a Covered Person reaches a new age band. Rates are subject to change.

\$2.55

\$3.62

\$5.29

\$7.92

- ¹ Coverage is guaranteed provided (1) the employee is actively at work and (2) dependents 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.
- ¹ 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 (2) dependents 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.
- ² Coverage for Domestic Partners, civil union partners and reciprocal beneficiaries varies by state. Please contact MetLife for more information.
- ³ Dependent Child coverage varies by state. Please contact MetLife for more information.
- ⁴ 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.
- ⁵ Eligible Family Members means all persons eligible for coverage as defined in the Certificate.
- ⁶ 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.

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, 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



Hospital Indemnity Insurance

Coverage to help with unexpected expenses, such as hospitalization expenses that may not be covered under your medical plan.

Hospital Indemnity Insurance Benefits

With MetLife, you'll have a choice of two comprehensive plans (called the "Low Plan" and the "High Plan") which provide lump sum cash payments for covered events regardless of any other payments you may receive from your medical plan. Here are just some of the covered benefits/services^B, when an accident or illness puts you in the hospital.^A

Covered Benefits

Please contact MetLife for detailed definitions and state variations of covered benefits.

Subcategory	Benefit Limits (applies to subcategory)	Benefit	Low Plan	High Plan		
Hospital Benefits	Hospital Benefits					
		Admission ¹	\$500	\$1,000		
Admission Benefit	[1] time(s) per calendar year	Intensive Care Unit (ICU) Supplemental Admission (Benefits paid concurrently with Admission Benefit when Covered Person is admitted to ICU)	\$500	\$1,000		
		Confinement ²	\$100	\$200		
Confinement Benefit	[30] days per year Confinement [ICU Benefit will pay an additional benefit for 15 of those days	ICU Supplemental Confinement (Benefits paid concurrently with Confinement Benefit when Covered Person is confined in ICU)	\$100	\$200		
Newborn Confinement Benefit	2 day(s) per Routine Delivery 4 day(s) per Caesarean Delivery	Newborn Confinement ³	\$25	\$25		
Inpatient Rehabilitation Unit Benefit ⁴	[15] days per calendar year	Inpatient Rehabilitation (For Injury or Sickness)	\$100	\$200		
Surgery Benefits						
Inpatient Surgery Benefit ⁴	1 time per calendar year and requires administration of general anesthesia	Inpatient Surgery	\$500	\$500		
Outpatient Surgery Benefit	1 time per calendar year	Outpatient Surgery ⁴ (For Injury or Sickness)	\$500	\$500		
Anesthesia Benefit Payable for Inpatient Surgery	2 time(s) per calendar year payable as inpatient	General Anesthesia	\$200	\$200		



Hospital Indemnity Insurance

	or outpatient	Spinal or Epidural Anesthesia	\$200	\$200
Other Benefits				
Health Screening Benefit ⁶	1 time per calendar year per covered person	Health Screening	\$50	\$50
Maternity Follow-Up	3 times per childbirth	Maternity Follow-Up	\$25	\$25

¹The Admission Benefit for residents of CT and ID will be increased to \$825/\$1,650 for plan design(s) Low/High and \$850/\$1,725 for plan design(s) Low/High, respectively, because some benefits in this plan design are not available. See the Schedule of benefits in the CT and ID certificate. The Admission Benefit is not payable for Emergency Room treatment or outpatient treatment. The payment of the admission benefit requires a Confinement. Hospital Confinement requires the assignment to a bed as a resident inpatient in a Hospital (including an Intensive Care Unit of a Hospital) on the advice of a Physician or confinement in an observation area within a Hospital for a period of no less than 20 continuous hours on the advice of a Physician. Please consult your certificate for details.

Benefit Payment Example for High Plan

The example below assumes Susan sought treatment at a group policyholder-designated facility and is therefore eligible for additional payment under the Benefit Supplement Rider.

Susan has chest pains at home, and after contacting her doctor, she is instructed to head to her local hospital. Upon arrival, the doctor examines Susan and advises that she requires immediate admission to the Intensive Care Unit for further evaluation and treatment. After two days in the Intensive Care Unit, Susan moves to a standard room and spends two additional days recovering in the hospital. Susan was released to her primary care physician for follow-up treatment and observation. Her primary doctor is now keeping a close watch over Susan's overall health. Depending on her health insurance, Susan's out-of-pocket costs could run into hundreds of dollars to cover expenses like insurance co-payments and deductibles. MetLife Group Hospital Indemnity Insurance payments can help cover these unexpected costs or in any other way Susan sees fit.

Covered Benefit	High Benefit Amount
Regular Hospital Admission (1x)	\$1,000
ICU Supplemental Admission (1x)	\$1,000
Regular Hospital Confinement (3 total days)	\$600
ICU Supplemental Confinement (1 day)	\$200
Benefits paid by MetLife Group Hospital Indemnity Insurance	\$2,800

Benefit amount is based on a sample MetLife plan design. Plan design and plan benefits may vary.

Questions & Answers

- Q. Who is eligible to enroll for this Hospital Indemnity coverage?
- **A.** You are eligible to enroll yourself and your eligible family members. ^c You need to enroll during your Enrollment Period and be actively at work for your coverage to be effective. Dependents to be enrolled may not be subject to a medical restriction as set forth in the Certificate. Some states require the insured to have medical coverage.
- Q. How do I pay for my Hospital Indemnity coverage?
- A. Premiums will be paid through payroll deduction, so you don't have to worry about writing a check or missing a payment.
- Q. What happens if my employment status changes? Can I take my coverage with me?
- A. Yes, you can take your coverage with you. You will need to continue to pay your premiums to keep your coverage in force. Your coverage will only end if you stop paying your premium or if your employer cancels the group policy and offers you similar coverage with a different insurance carrier. D



²When plan includes an Admission Benefit, the Confinement Benefit begins on Day 2.

³ The Newborn Confinement Period Begins Immediately following the child's birth.

⁴ Benefit(s) that requires prior Admission or Confinement.Inpatient Rehabilitation Unit Benefit is standardly applied for covered Accidents only. It is available as an add-on for Sickness.

⁵ Diagnostic Procedure is payable at an Outpatient Surgery Facility.

⁶ The Health Screening Benefit is not available in all states. There is a separate mammogram benefit for MT residents and for cases sitused in CA and MT.

⁷ The lodging benefit is not available in all states. It provides a benefit for a companion accompanying a covered insured while hospitalized, provided that lodging is at least 50 miles from the insured's primary residence.

Hospital Indemnity Insurance

- Q. What is the coverage effective date?
- A. The coverage effective date is 02/01/2022.
- Q. Who do I call for assistance?
- A. Please call MetLife directly at 1-800-GET-MET8 (1-800-438-6388) and talk with a benefits consultant. Or visit our website: www.mybenefits.metlife.com

Insurance Rates

MetLife offers group rates and payroll deductions, so you don't have to worry about writing a check or missing a payment! Your employee rates are outlined below.

Hospital Indemnity Insurance

Coverage Options	Low Plan	High Plan		
Monthly Cost to You				
Employee	\$22.75	\$32.72		
Employee & Spouse	\$43.85	\$62.93		
Employee & Child(ren)	\$34.08	\$49.61		
Employee & Spouse/Child(ren)	\$55.18	\$79.82		

A Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

METLIFE'S HOSPITAL INDEMNITY 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. Prior hospital confinement may be required to receive certain benefits. There may be a preexisting condition limitation for hospital sickness benefits. MetLife's Hospital Indemnity Insurance may be subject to benefit reductions that begin at age 65. 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, GPNP13-HI, GPNP16-HI or GPNP12-AX-PASG, or contact MetLife. Benefits are underwritten by Metropolitan Life Insurance Company, New York, New York. In certain states, availability of MetLife's Group Hospital Indemnity Insurance is pending regulatory approval.



^B Covered services/treatments must be the result of an accident or sickness as defined in the group policy/certificate. There is a pre-existing exclusion for covered sicknesses. See your Disclosure Statement or Outline of Coverage/Disclosure Document for more details.

^c 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 may apply to dependents serving in the armed forces or living overseas."

^D 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.