MetLife | Critical Illness Insurance

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Why Critical Illness Insurance matters

Contrary to what many people believe, medical insurance may only cover a portion of the expenses associated with treating a serious illness. Plus, additional costs that often come with recovering, like childcare, transportation, and grocery delivery, may be left up to you. Critical Illness Insurance can provide you with a benefit that can help you pay for unexpected costs, such as those that your existing medical insurance may not cover.

Handling the emotions that come up when experiencing illnesses such as a cancer[1] diagnosis, heart attack,[2] or stroke[3] is difficult enough. Worrying about your financial stability on top of this can obviously be overwhelming. With Critical Illness Insurance, MetLife can help you and your family have the financial stability necessary to completely focus on healing during a difficult time.

When critical illness affects your family, you'll have the financial support when it matters most.

Help protect yourself, your family and your budget from the financial impact of a critical illness.

An example of how Critical Illness Insurance can help.

I never would have expected to suffer a heart attack. But one day while teaching English class, I felt an intense shortness of breath and pain in my jaw. Luckily, the school nurse called 911. The last thing I needed was to worry about was finances — I just had to focus on getting better. ***Critical Illness Insurance*** *helped me pay for things that medical insurance didn't cover, like specialist co-pays and extra help around the house, while I recovered.**

Enroll in Critical Illness Insurance during annual enrollment

Critical Illness Insurance

Get financial support when you or a loved one becomes seriously ill.

Help complete your healthcare coverage with Critical Illness Insurance.

Receive benefit payments directly and use the funds however you wish.

Financial support so you can focus on getting well.

Critical Illness Insurance is coverage that can help safeguard your finances by providing you with a lump-sum payment — one convenient payment all at once — when you or your family may need 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, Critical Illness Insurance is there to help make life a little easier.

When it comes to critical illnesses…

For less than the cost of your daily coffee,[4] you can get coverage for you and your family.

Your benefits in action

If you experience a critical illness, submitting a claim doesn't have to be difficult. Here's what to expect:

Call, visit **mybenefits.metlife.com** or download the MetLife Mobile App to view your certificate of insurance and initiate your claim.

Answer a few simple questions about what happened and upload your medical documentation to support your claim. Once we have everything, claims are typically processed within 10 business days. You only need one claim form per critical illness and every claim is reviewed by a claims professional.

Once your claim is approved, you'll receive a check made out to you to use however you like.

Enroll in Critical Illness Insurance during annual enrollment

Supplement your healthcare coverage with MetLife Critical Illness Insurance.

Benefit overview

Critical Illness Insurance is coverage that can help safeguard your finances by providing you with a lump-sum payment — one convenient payment all at once — when you or your family may need it most.

Why needed

Pay for whatever you need, such as expenses that may not be covered by your main medical plan(s). For example: co-pays, deductibles, childcare, mortgage, groceries and experimental treatments.

Who is covered

You can enroll both yourself and eligible family members.[5] All you need to do is enroll during your enrollment period and be actively at work.[6]

- Employee Only
- Employee & Eligible Family Members

Covered services

If you meet the group policy and certificate requirements, **Critical Illness Insurance provides you with a lump-sum payment upon a verified diagnosis of a covered condition, including**:

- Cancer[1]
- Heart attack[2]
- Stroke[3]

Your plan pays a Recurrence Benefit[7] for certain conditions. **Please see your Plan Summary for details and a list of covered conditions.**

Cost of coverage

- Competitive group rates
- Costs will be based on your coverage option and who you're covering under your plan.

Guaranteed coverage

You and your family members are guaranteed[6] coverage as long as you are actively at work. There are no medical exams to take and no health questions to answer.

Please see your Plan Summary for more information.

Frequently Asked Questions

Q. I have a medical plan at work, so why do I need Critical Illness Insurance?

A. Even the best medical and disability income plans can leave you with extra expenses like medical plan deductibles and co-pays or extra costs for out-of-network care. And if you're out of work because of a disability, it might be that only a portion of your pre-disability income is being paid to you. Many people aren't prepared to handle the extra costs that can come with a critical illness, so having this extra cash as a lump-sum payment may mean less worry for you and your family.

Q. Can I enroll for this insurance without having a medical exam?

A. Yes. Your critical illness coverage is guaranteed,[6] regardless of your health. You need to be actively at work to be covered. There are no medical exams to take and no health questions to answer, so the whole process might be easier than you think.

Enroll in Critical Illness Insurance during annual enrollment

Q. Are benefits paid directly to me or my healthcare provider?

A. Benefits will be paid directly to you, not to the doctors, to the hospitals, or to any other healthcare providers. There's no need to coordinate with any other insurance you may have. Benefits are paid no matter what your other insurance plans may cover or pay.

Q. When does my coverage begin?

A. Your coverage starts on the effective date. There are no waiting periods for it to begin.

Q. How do I pay for my coverage and how much will it cost?

A. You pay premiums through payroll deductions, so you don't have to worry about writing any checks or missing payments. **Critical Illness Insurance may be more affordable than you think.** It's designed to be a way to supplement your healthcare and disability plans. Exact rates can be found in the enrollment materials provided by your employer.

Q. If my employment status changes, can I take my coverage with me?

A. Yes. This coverage is portable, meaning you can take it wherever you go. Your coverage will only end if you stop paying your premium or if your employer offers you similar coverage with a different insurance carrier.[8]

* This is a hypothetical example for informational purposes only. Your costs and savings could vary based on your plan design, where you live and whether your plan requires a deductible or coinsurance. Please see your Plan Summary for details about your coverage.

1. Please review the certificate for specific information about cancer benefits. In most states, not all types of cancer are covered.
2. 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.
3. In certain states, the Covered Condition is Severe Stroke.
4. https://www.numbeo.com/cost-of-living/country_result.jsp?country=United+States. Updated July 2021.
5. Eligible Family Members means all persons eligible for coverage as defined in the Certificate.
6. 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.
7. Please 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.
8. 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 preexisting condition exclusion. There may be a Benefit Reduction Due to Age provision. 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.

MetLife

Metropolitan Life Insurance Company | 200 Park Avenue | New York, NY 10166

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Enroll in Critical Illness Insurance during annual enrollment

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

Critical Illness Insurance Benefits

Eligible Individual	Benefit Amount	Requirements
Coverage Options		
Employee	**$10,000, $20,000 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 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.

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

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
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

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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	100% of Initial Benefit
Functional Loss Category		
Heart Attack	100% of Benefit Amount	100% of Initial Benefit
Infectious Disease Category		
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
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

MetLife will not pay a benefit for a Covered Condition that is diagnosed prior to the coverage effective date.

In most states there is a preexisting condition limitation. The preexisting condition limitation may not apply to all covered conditions and may vary by state. Refer to the Disclosure Document/Outline of Coverage for details.

- 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.

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- 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.
    - Aortic Valve or Mitral Valve Repair or Replacement
    - Coma
    - Congenital Heart Disease (for which Surgery has been recommended for treatment)
    - Coronary Angioplasty
    - ICD
    - Loss of: Ability to Speak; Hearing; or Sight
    - Major Organ Transplant Donation
    - Pacemaker
    - Paralysis
    - Severe Burn

Health Screening Benefit

MetLife 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.

Example of How Benefits are Paid

The example below illustrates an employee who elected a Benefit Amount of $20,000.

Illness – Covered Condition	Payment
Heart Attack — first verified diagnosis	Initial Benefit payment of $20,000 or 100%
Kidney Failure – first verified diagnosis, two years later	Initial Benefit payment of $20,000 or 100%
Heart Attack — second verified diagnosis, four years later	Recurrence Benefit payment of $20,000 or 100%

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![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 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.[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.

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[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.

[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] 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.

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Discover your Health Screening Benefits

Health screenings are an important part of managing your health. That's why your Accident Insurance, Critical Illness Insurance, and Hospital Indemnity Insurance coverage from MetLife provides a $50 Health Screening Benefit[1] (HSB) for covered screenings and tests. Now, everyone who's enrolled — you, your spouse, and dependent children — can earn a benefit just for taking care of his or her health.

At least 68% of the annual colorectal cancer deaths in the U.S. could be prevented with recommended screenings.[2]

For women in their 40s and 50s, **annual mammogram screenings decrease breast cancer deaths** by 15 to 29%.[3]

Examples of covered screening and prevention tests may include **a blood test to determine total cholesterol, a blood test to determine triglycerides, an endoscopy, or a colonoscopy**. For a complete list of what's covered, please see a copy of your certificate.

Here's an example of how it works.

Susan's doctor conducts a blood test to determine total cholesterol, which is one of the many screenings or tests covered by MetLife.
Afterward, Susan contacts MetLife by calling 1-800-GET-MET8 to submit her HSB claim. All Susan needs to provide is her physician's name, phone number and address, plus the test and the date it was completed. A check for Susan's HSB benefit payment is on the way within a few business days once her claim is processed. It's that easy!

Claiming your Health Screening Benefit (HSB) is as simple as 1-2-3.

1. Visit MyBenefits at www.metlife.com/mybenefits or call 1-800-GET-MET8 (800-438-6388) 8am-8pm EST. Enter **CIS Trust** as the organization. You can also file a claim using the MetLife Mobile App!

2. Provide a few details, including:
- The name of the Insured, SSN or EEID, Group Name, Certificate Number
- What date did you have your test?
- 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 of coverage for details on the health screening benefit and which tests are applicable based on your coverage.

Add claiming your MetLife Health Screening Benefit to your annual good health to-do list.

For complete details, including covered screenings and tests, please see your insurance coverage certificate on the *MyBenefits* portal at www.metlife.com/mybenefits, or the MetLife Mobile App.

1. For Accident Insurance and Hospital Indemnity Insurance only -- The Health Screening Benefit is not available in all states. For Texas sitused policies and Texas residents covered under policies sitused in other states, when the Health Screening Benefit is included in an Accident-only plan, the covered screening measures are: physical exam, blood chemistry panel, complete blood count (CBC), chest x-rays, electrocardiogram (EKG), and electroencephalogram (EEG).The Health Screening Benefit is not available in all states. Covered screening measures vary by state. See your insurance certificate for details, including any applicable waiting periods. For Critical Illness Insurance only -- 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.
2. Center for Disease Control and Prevention. Cancer, Colorectal. https://www.cdc.gov/cancer/colorectal/ Source date: February 17, 2022.
3. Mayo Clinic. Test and Procedures: Mammogram. Sandhya Pruthi, M.D. June 25, 2021. http://www.mayoclinic.org/tests-procedures/mammogram/expert-answers/mammogram-guidelines/faq-20057759

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How To Register On MyBenefits

MyBenefits provides you with a personalized, integrated and secure view of your MetLife delivered benefits. You can take advantage of a number of self-service capabilities as well as easy to access information. As a first-time user, you will need to register on MyBenefits by following the steps outlined below:

Registration Process For MyBenefits:

STEP 1 – Provide A Group Name
Access MyBenefits at mybenefits.metlife.com. Enter **CIS Trust,** select it in the drop down and select 'Next'. Save this URL to access your MyBenefits account in the future.

STEP 2 – Register
Once you have selected **CIS Trust,** from the MyBenefits Home Page you will then select the 'Register' button.
Note – Current users will select 'Log In' and enter their username and password.

STEP 3 – Enter Authentication Information
The next screen will begin by entering your name, address, phone number, e-mail (required) and unique security identifiers to confirm your identity. You will then receive a security code, via email or text, that you will need to enter to continue the registration process.

STEP 4 – Establish Account Credentials
You will then be prompted to create a unique username and password for future access to MyBenefits, as well as choose and answer three identity verifications questions that will be used in the event you forget your password.

In addition to reading and agreeing to the Terms of Use, you will be asked to opt into electronic consent.

STEP 5 – Registration Is Complete
Once you have completed the process a 'congratulations' message window will display. You are now registered on MyBenefits! A registration confirmation email will be sent to the email address provided for your registration. You can immediately access your account information by selecting the 'Go To My Account' button within the congratulations window.

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MetLife Online Services capabilities may vary by product and may not be available to all customers. Please contact your MetLife representative for more information.