

## Critical Illness Insurance

Effective June 1, 2024 – May 31, 2025

You can elect voluntary benefits by logging in to **ADP TotalSource<sup>®</sup>**.

When there, select **Myself > Benefits Resource Center > Voluntary Benefits Program**.

If you have questions about the benefits plans, contact MetLife directly at **(877) ADPTS01 or (877) 237-8701**, Monday through Friday from 8 a.m. – 11 p.m. ET.

### Critical Illness Insurance Benefits

You are eligible to elect Critical Illness Insurance coverage from MetLife if you are Actively at Work<sup>1</sup>, working at least 15 hours per week, excluding temporary or seasonal employees. Commission Only worksite employees who do not draw a salary or hourly wage from employer are not eligible for Voluntary Benefits offered through MetLife.

Eligible Individual	Benefit Amount
<b>Coverage Options</b>	
Employee	\$10,000, \$20,000, \$30,000, \$40,000 or \$50,000
Spouse/Domestic Partner <sup>2</sup>	50% of the Employee's Initial Benefit
Dependent Child(ren) <sup>3</sup>	50% of the Employee's Initial Benefit

Please refer to the Disclosure Statement or Outline of Coverage/Disclosure Document for more information including the exclusions and limitations which apply to coverage.

### 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.

#### Monthly Premium per \$1,000 of Coverage

Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse + Children
<25	\$0.22	\$0.33	\$0.41	\$0.48
25–29	\$0.22	\$0.37	\$0.41	\$0.52
30–34	\$0.30	\$0.48	\$0.44	\$0.66
35–39	\$0.44	\$0.66	\$0.63	\$0.88
40–44	\$0.70	\$1.07	\$0.88	\$1.22
45–49	\$1.07	\$1.58	\$1.22	\$1.80
50–54	\$1.55	\$2.35	\$1.77	\$2.58
55–59	\$2.21	\$3.32	\$2.40	\$3.54
60–64	\$3.24	\$4.86	\$3.46	\$5.05
65–69	\$5.01	\$7.37	\$5.19	\$7.59
70+	\$7.59	\$11.19	\$7.77	\$11.38



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Rates are based on age bands and will increase when a participant reaches a new age band. Rates are subject to change. Please refer to the Disclosure Statement or Outline of Coverage/Disclosure Document for more information including the exclusions and limitations which apply to coverage.

### Benefit Payment

Your plan pays a lump-sum **Initial Benefit** upon the first verified diagnosis of a Covered Condition<sup>4</sup>. Your plan also pays a lump-sum **Recurrence Benefit**<sup>5</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. 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
<b>Autism Spectrum Disorder Category</b>		
Autism Spectrum Disorder <i>payable for a dependent child for a diagnosis of any severity</i>	25% of Benefit Amount	None
<b>Benign Tumor Category</b>		
Benign Brain Tumor	100% of Benefit Amount	100% of Initial Benefit Amount
<b>Cancer Category</b>		
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	100% of Initial Benefit, but not less than \$250
<b>Cardiovascular Disease Category</b>		
Coronary Artery Bypass Graft (CABG) - <i>where surgery involving either a median sternotomy or minimally invasive procedure is performed</i>	100% of Benefit Amount	100% of Initial Benefit Amount
<b>Childhood Disease Category</b>		
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
<b>Functional Loss Category</b>		
Coma	100% of Benefit Amount	100% of Initial Benefit
Loss of: Ability to Speak; Hearing; or Sight	100% of Benefit Amount	None

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Paralysis of 2 or More Limbs	100% of Benefit Amount	None
<b>Heart Attack Category</b>		
Heart Attack	100% of Benefit Amount	100% of Initial Benefit
Sudden Cardiac Arrest	100% of Benefit Amount	None
<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 3 consecutive days.</i>		
Bacterial Cerebrospinal Meningitis	25% of Benefit Amount	None
COVID-19 <sup>6</sup>	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 bone marrow, heart, lung, pancreas, and liver</i>	100% of Benefit Amount	None
<b>Occupational Post-Traumatic Stress Disorder Category</b>		
Occupational Post-Traumatic Stress Disorder	25% of Benefit Amount	None
<b>Progressive Disease Category</b>		
Adrenal Hypofunction (Addison's Disease)	25% of Benefit Amount	None
Amyotrophic Lateral Sclerosis (ALS)	100% of Benefit Amount	None
Alzheimer's Disease	100% of Benefit Amount	None
Huntington's Disease	25% 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
Poliomyelitis	25% of Benefit Amount	None
Systemic Lupus Erythematosus (SLE)	100% of Benefit Amount	None
Systemic Sclerosis (Scleroderma)	25% of Benefit Amount	None
<b>Severe Burn Category</b>		
Severe Burn	100% of Benefit Amount	100% of Initial Benefit
<b>Stroke Category</b>		
Stroke	100% of Benefit Amount	100% of Initial Benefit

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OTHER BENEFITS CATEGORY		
BENEFIT	BENEFIT LIMIT	
Health Screening Benefit <sup>7</sup>	1 time(s) per calendar year	\$100
Mammogram Benefit* <i>Payable when an eligible covered person undergoes a mammogram</i>	1 time(s) per calendar year	\$200
Lodging Benefit <i>Payable if a covered person stays in a lodging while receiving treatment for a covered condition</i>	20 day(s) per calendar year	\$100
Transportation Benefit <i>Payable for a covered person's travel to and from a treatment center for treatment of a covered condition</i>	\$5,000 per calendar year	\$0.50 per mile up to \$1,500 per round trip
Companion Lodging and Transportation Benefit <i>Payable if a covered person is confined in a hospital or receiving treatment at a treatment center for a covered condition, and an adult companion travels and stays in a lodging</i>	20 day(s) per calendar year for the companion's lodging.  \$5,000 per calendar year for the companion's transportation.	\$100  \$0.50 per mile up to \$1,500 per round trip
Second Opinion Benefit <i>Payable if a covered person receives a second opinion at an evaluation center for a covered condition</i>	Up to 5 second opinions per covered person.	\$500 per evaluation and an additional \$250 if the evaluation center is more than 50 miles from the covered person's primary residence

### Healthcare Navigation Services

As an added benefit you will have access to education and support from personal consultants with healthcare expertise, including the following: decision support related to health care services and benefits; assistance with understanding health benefits; concierge services to coordinate care, assess costs of care, find doctors and facilitate appointments; and medical claim/bill review and correction. The services also include access to self-service decision support tools via a web portal that can be used to assess costs of care and find doctors.

Access and manage your MetLife Healthcare Navigation Services account at [member.alight.com](https://member.alight.com). You can also reach out to a dedicated MetLife Health Pro at **1-855-769-4380** or via email at [MetLifeHealthPro@alight.com](mailto:MetLifeHealthPro@alight.com).



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### Additional Resources

#### Digital Estate Planning<sup>8</sup>

You may use online will preparation services provided by MetLife Legal Plans to create a will, living will, or a power of attorney by visiting [www.willscenter.com](http://www.willscenter.com).

#### MetLife VisionAccess<sup>9</sup>

You will have access to the MetLife VisionAccess discount program<sup>13</sup>. The program provides a discount on eye exams, glasses and frames, and laser vision correction<sup>14</sup> when visiting a participating private practice.

#### Funeral Discount and Planning Services<sup>10</sup>

Funeral discounts and planning services are available to covered individuals through Dignity Memorial. You and your family will have access to compassionate counselors as well as discounts on funeral services through the largest network of funeral homes and cemetery providers in North America.

#### \*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.
  - 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

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### 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 Critical Illness Insurance 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.

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### Questions & Answers

#### Q. When does my coverage begin?

A. Your coverage starts on the effective date of your coverage. There are no waiting periods for it to begin<sup>11</sup>.

#### Q. Who is eligible to enroll for this Critical Illness coverage?

A. You are eligible to enroll yourself and your eligible family members.<sup>12</sup> All you need to do is enroll during the enrollment period and be actively at work.

#### Q. How do I elect coverage for my Dependents?

A. When electing coverage we require a few key details about your dependents. Please provide first name, last name and date of birth for your Spouse/Domestic Partner<sup>2</sup> and child(ren)<sup>3</sup>. Please review these details during enrollment to ensure they are accurate.

**ADP TotalSource** does not endorse this program or make any warranties or representations as to its quality or suitability. **ADP TotalSource** does not contribute to any policy or service offered under the program. **ADP TotalSource's** responsibilities are limited to those permitted by applicable law and regulations governing voluntary benefit programs such as coordinating payroll deductions for premium payments. You are not obligated to purchase any of the voluntary policies or services offered and you may explore other options including purchase of policies or services directly from an insurance company or provider. You should discuss your options with your financial advisor, attorney, accountant, or other professionals.

<sup>1</sup> 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.

<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> Not all Covered Conditions are available in all states. Please review the Disclosure Statement or Outline of Coverage/Disclosure Document for details.

<sup>5</sup> 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.

<sup>6</sup> COVID-19 is covered under the Infectious Disease Category. For an Infectious Disease Category benefit to be payable, the covered person must have been treated for the disease in a hospital for the consecutive number of days specified in the Certificate.

<sup>7</sup> 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.

<sup>8</sup> Digital Estate Planning without online notary is available to all individuals residing in GU, PR, or VI. Domestic partnerships are currently not supported by MetLife Legal Plans, Inc., Cleveland, OH. In certain states, group legal plans are provided through insurance coverage underwritten by Metropolitan General Insurance Company, Warwick, RI.

<sup>9</sup> Vision Insurance is provided by Metropolitan Life Insurance Company (MetLife), New York, NY. Certain claim and network administration services are provided through Vision Service Plan (VSP), Rancho Cordova, CA. VSP is not affiliated with MetLife or its affiliates. Like most group benefit programs, benefit programs offered by MetLife and its affiliates contain certain exclusions, exceptions, reductions, limitations, waiting periods and terms for keeping them in force. Please contact MetLife or your plan administrator for costs and complete detail



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<sup>10</sup> Services and discounts are provided through a member of the Dignity Memorial® Network, a brand name used to identify a network of licensed funeral, cremation and cemetery providers that are affiliates of Service Corporation International (together with its affiliates, "SCI"), 1929 Allen Parkway, Houston, Texas. The online planning site is provided by SCI Shared Resources, LLC. SCI is not affiliated with MetLife, and the services provided by Dignity Memorial members are separate and apart from the insurance provided by MetLife. Not available in some states. Planning services, expert assistance, and bereavement travel services are available to anyone regardless of affiliation with MetLife. Discounts through Dignity Memorial's network of funeral providers are pre-negotiated. Not available where prohibited by law. The discount is available for services offered in any state except KY and NY, or where there is no Dignity Memorial presence (AK, MT, ND, SD, and WY). For MI and TN, the discount is available for "At Need" services only. For coverage issued under a multiple-employer trust, services are not available for WA residents.

<sup>11</sup> Children may be covered to age 26. The plan may include a Benefit Reduction Due to Age provision.

<sup>12</sup> Eligible Family Members means all persons eligible for coverage as defined in the Certificate.

<sup>13</sup> Discount off retail. Not all providers participate in vision program discounts, including the member out-of-pocket features. Call your provider prior to scheduling an appointment to confirm if the discount and member out-of-pocket features are offered at that location. Discounts and member out-of-pocket are not insurance and subject to change without notice.

<sup>14</sup> The VSP Choice network allows you to access discounted laser correction services. May not be available in all states or regions. Custom LASIK coverage only available using wavefront technology with the microkeratome surgical device. Other LASIK procedures may be performed at an additional cost to the member. Additional savings on laser vision care is only available at participating locations. Not everyone will qualify for LASIK surgery. Results will vary. Please discuss outcomes with your eyecare provider.

Coverage may not be canceled due to an increase in your age or a change in your health. Premium rates can only be raised as the result of a rate change made on a class-wide basis. The plan may include a Benefit Reduction Due to Age provision. Coverage is guaranteed renewable provided: (1) premiums are paid as required under the Certificate; and (2) in a situation where the Group Policy ends, it is not replaced by a substantially similar critical illness policy as described 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 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. Attained Age rates will increase when a Covered Person reaches a new age band. Rates are subject to change. 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.

Nothing in these materials is intended to be advice for a particular situation or individual. Please consult with your own advisors for such advice.



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Help supplement your healthcare coverage with Critical Illness Insurance.

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

\* Photos do not represent actual MetLife Customers.

### What is Critical Illness Insurance?

It is coverage that helps provide financial support when you or a loved one becomes seriously ill. It works to supplement your medical coverage – and pays in addition to what your medical plan may or may not cover.

### Q. How does the payment work?

A. Upon verified diagnosis of one of the covered conditions<sup>1</sup>, the Critical Illness Insurance provides you with a lump-sum benefit payment of \$10,000, \$20,000, \$30,000, \$40,000 or \$50,000 (amount will depend on the plan option you selected during open enrollment) in initial benefits.

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

A. One of the hardest parts of managing illnesses like cancer<sup>2</sup>, a heart attack<sup>3</sup>, or a stroke<sup>4</sup> is providing the support and comfort your family needs beyond the cost of care. Even the best medical and disability income plans can leave you with extra expenses like medical plan deductibles, copays, 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 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 lump-sum payment may mean less worry for you and your family.

### Q. Can I elect this coverage without having a medical exam?

A. Yes. Your Critical Illness Insurance coverage is guaranteed<sup>5</sup>, regardless of your health. You just 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.

### Q. What happens if I have a recurrence?

A. Your plan pays an additional benefit (Recurrence Benefit<sup>6</sup>) if a medical condition reoccurs for certain conditions such as: heart attack, stroke, and many others. Please see your Plan Summary for details. A recurrence benefit is only available if the initial benefit has already been paid for the covered condition. And there is a benefit suspension period (or waiting period) between recurrences. Also, a 90 day treatment-free period applies to cancer and benign tumor conditions.

### Q. How much will Critical Illness Insurance cost?

A. Critical Illness Insurance may be more affordable than you think. It is designed to be an economical way to supplement your healthcare plan. Insurance rates are available in the Plan Summary.

### Q. How do I pay for my coverage?

A. Premiums are conveniently deducted through payroll deductions. If you are a Non Paid Owner, you will be billed directly.



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### 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. 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.<sup>7</sup>

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

A. You may reach MetLife directly at **877-ADPTS01** or **(877-237-8701)** and talk with a benefits consultant. Or visit our website: [mybenefits.metlife.com/ADPTotalSource](https://mybenefits.metlife.com/ADPTotalSource).

### Q. Do I need to designate a beneficiary?

A. Once coverage is effective, you may designate your Critical Illness Insurance beneficiary online through MetLife's MyBenefits website:

- Go to the MetLife MyBenefits website at [mybenefits.metlife.com/ADPTotalSource](https://mybenefits.metlife.com/ADPTotalSource) and enter "ADP TotalSource" as the Company Name.
- Log into your account by entering your username and password.
- First time users will need to click "Register Now" to choose a username and password and to establish security questions.
- Under Critical Illness Insurance, click on "I want to" and when a drop-down menu appears, select "Update Beneficiary".

### Q. What happens if I do not make any changes during annual enrollment?

A. If you do not make changes during annual enrollment your coverage will default to your current coverage choices from the previous plan year. You may wish to review your coverage each year during annual enrollment to ensure it still fits your needs.

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**ADP TotalSource** does not endorse this program or make any warranties or representations as to its quality or suitability. **ADP TotalSource** does not contribute to any policy or service offered under the program. **ADP TotalSource's** responsibilities are limited to those permitted by applicable law and regulations governing voluntary benefit programs such as coordinating payroll deductions for premium payments. You are not obligated to purchase any of the voluntary policies or services offered and you may explore other options including purchase of policies or services directly from an insurance company or provider. You should discuss your options with your financial advisor, attorney, accountant or other professionals.

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<sup>2</sup> Please review the certificate for specific information about cancer benefits. In most states, not all types of cancer are covered.

<sup>3</sup> 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.

<sup>4</sup> In certain states, the Covered Condition is Severe Stroke.

<sup>5</sup> 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.

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<sup>7</sup> 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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