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

You can elect voluntary benefits by logging in to ADP TotalSource®.

When there, select **Myself > Benefits > Enrollments**. Feel free to contact **ADP TotalSource** at **(844) 448-0325** with any questions you may have about how to elect voluntary coverages.

If you have questions about the benefits plans, contact MetLife directly at **(877) ADPTS01** or **(877) 237-8701** between the hours of 8 a.m. – 8 p.m. ET.

Critical Illness Insurance Benefits

Eligible Individual	Benefit Amount	Requirements
Coverage Options		
Employee	\$10,000, \$20,000, \$30,000, \$40,000 or \$50,000	Coverage is guaranteed provided you are actively at work. ¹
Spouse/Domestic Partner ²	Coverage is guaranteed provided the employee is actively at work ar spouse/domestic partner is not sub medical restriction as set forth on the 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

Note: Commissions Only worksite employees who do not draw a salary or hourly wage employer are not eligible for voluntary benefits offered through MetLife.

Insurance Rates

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

Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse + Children
<25	\$0.26	\$0.39	\$0.48	\$0.56
25–29	\$0.26	\$0.43	\$0.48	\$0.61
30–34	\$0.35	\$0.56	\$0.52	\$0.78
35–39	\$0.52	\$0.78	\$0.74	\$1.04
40–44	\$0.82	\$1.26	\$1.04	\$1.43
45–49	\$1.26	\$1.86	\$1.43	\$2.12
50-54	\$1.82	\$2.77	\$2.08	\$3.03
55–59	\$2.60	\$3.90	\$2.82	\$4.16
60–64	\$3.81	\$5.72	\$4.07	\$5.94
65–69	\$5.89	\$8.67	\$6.11	\$8.93
70+	\$8.93	\$13.17	\$9.14	\$13.39



Rates will increase when a Covered Person 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. 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 500% of the benefit amount elected. This is the maximum aggregate amount that MetLife will pay per covered person per lifetime for the covered 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
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	100% 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 must have been treated for the disease in a hospital for 5 consecutive days.		
Bacterial Cerebrospinal Meningitis	25% of Benefit Amount	None
COVID-19	25% of Benefit Amount	None



Diphtheria	25% of Benefit Amount	None
Encephalitis	25% of Benefit Amount	None
Legionnaire's Disease	25% of Benefit Amount	None
Malaria	25% of Benefit Amount	None
Necrotizing Fasciitis	25% of Benefit Amount	None
Osteomyelitis	25% of Benefit Amount	None
Rabies	25% of Benefit Amount	None
Tetanus	25% of Benefit Amount	None
Tuberculosis	25% of Benefit Amount	None
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		
Adrenal Hypofunction (Addison's Disease)	25% of Benefit Amount	None
Amyotrophic Lateral Sclerosis	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
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 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
- Loss of: Ability to Speak; Hearing; or Sight
- ICD
- Major Organ Transplant Donation
- **Paralysis**
- Pacemaker
- Severe Burn



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 100%
Kidney Failure – first verified diagnosis, two years later	Initial Benefit payment of 100%
Heart Attack — second verified diagnosis, four years later	Recurrence Benefit payment of 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.

Health Screening Benefit

MetLife will provide an annual benefit of \$50 or \$100 per calendar year for taking one of the eligible screening/prevention measures. A full listing of Health Screening Benefits are located within your Certificate of Insurance.

If the	Health
Employee	Screening
elects	Benefit Amount
\$10,000	\$50
\$20,000	\$50
\$30,000	\$100
\$40,000	\$100
\$50,000	\$100

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.

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. You can also reach out to a dedicated MetLife Health Pro at 1-855-769-4380 or via email at MetLifeHealthPro@alight.com.⁵

MetLife AdvantagesSM

WillsCenter.com⁶

As an added benefit you will have access to MetLife's online will preparation services provided by SmartLegalForms to create a binding will, living will or assign a power of attorney.

MetLife VisionAccess⁷

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

MetLife AdvantagesSM availability may vary by state.



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!⁸ You need to elect coverage during your Enrollment Period and to be actively at work for your coverage to be effective.
- 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, last name and date of birth for your spouse/partner and child(ren). Please review these details during enrollment to ensure they are accurate to ensure no coverage issues.
- 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. 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. Please call MetLife directly at 1-877-ADPTS01 (1-877-237-8701), Monday through Friday from 8:00 a.m. to 11 p.m., EST and talk with a benefits consultant. Or visit our website: mybenefits.metlife.com/ADPTotalSource.

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.

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 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 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, GPNP19-CI or 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.



¹ For all groups except CA situs 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.
⁴Review 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 Alight's Business Hours are 8:00 a.m. to 8:00 p.m. Central Time on business days.

⁶ WillsCenter.com is a document service provided by SmartLegalForms, Inc., an affiliate of Epoq Group, Ltd. SmartLegalForms, Inc. is not affiliated with MetLife and the WillsCenter.com service is separate and apart from any insurance or service provided by MetLife. The WillsCenter.com service does not provide access to an attorney, does not provide legal advice, and may not be suitable for your specific needs. Please consult with your financial, legal, and tax advisors for advice with respect to such matters. WillsCenter.com is available to anyone regardless of affiliation with MetLife.

MetLife Vision Access is a discount program and not an insured benefit. It is provided through Vision Service Plan (VSP), Rancho Cordova, CA. VSP is not affiliated with MetLife or its affiliates. MetLife Vision Access is available at no charge and is not contingent upon the purchase of dental insurance.

⁸ Eligible Family Members means all persons eligible for coverage as defined in the Certificate.

⁹ 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.



Critical Illness



Help complete your healthcare coverage with Critical Illness Insurance.

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

You can elect voluntary benefits by logging in to ADP TotalSource®.

When there, select **Myself > Benefits > Enrollments**. Feel free to contact **ADP TotalSource** at **(844) 448-0325** with any questions you may have about how to elect voluntary coverages.

If you have questions about the benefits plans, contact MetLife directly at (877) ADPTS01 or (877) 237-8701 between the hours of 8 a.m. - 8 p.m. ET.

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 regardless of what your medical plan may or may not cover.

Q. How does it work?

A. Upon verified diagnosis of one of the covered conditions, it 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. Am I eligible to elect Critical Illness Insurance coverage?

A. Worksite Employees who meet eligibility requirements as defined in the certificate may enroll during the enrollment period if they are actively at work¹. If you are a Commission Only employee and do not draw a salary or hourly wage from your employer, you are not eligible for Voluntary Benefits offered through MetLife.

Q. Can I elect coverage for spouse/domestic partner² or child(ren)³?

A. Yes, if you elect coverage for yourself, you may also choose to elect coverage for your spouse/domestic partner and child(ren) and they will receive 50% of the employee benefit amount. When enrolling your spouse/domestic partner and/or children you must provide their name, date of birth, and social security number during enrollment. Please review these details during enrollment to ensure they are accurate and avoid coverage issues.

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. We recommend that you review your coverage each year during annual enrollment to ensure it still fits your needs.





Critical Illness

Q. What's covered under this insurance?

A. If you meet the group policy and certificate requirements, Critical Illness Insurance provides you with a lump-sum benefit payment upon verified diagnosis of these conditions:

- Invasive Cancer⁴
- Non-Invasive Cancer⁴
- Skin Cancer⁴
- Benign Brain Tumor
- Coronary Artery Bypass Graft⁵
- Coma⁶

- Paralysis⁶
- Severe Burn⁶
- Heart Attack⁷
- Kidney Failure
- Loss of: Ability to Speak; Hearing; or Sight⁶
- Major Organ Transplant⁸

- Sudden Cardiac Arrest
- Stroke⁹
- 7 Childhood Diseases¹⁰
- 11 Infectious Diseases¹¹
- 10 Progressive Diseases¹²

Q. What happens if I have a recurrence?

A. Your plan pays an additional benefit (Recurrence Benefit) if a medical condition reoccurs for: 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. 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 Cancer⁴, Heart Attack⁷, or Stroke⁹ 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 to pay for such as medical plan deductibles, co-pays, or extra costs for out-of-network care. And, if you're out of work because of a disability, it could be that only some of your pre-disability income is replaced by disability income. 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 coverage is guaranteed, 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. How do I pay for my coverage? 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 health care and disability plans. Exact rates can be found in the enrollment materials provided by your employer.

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

A. Benefits will be paid directly to you, not to the doctors, hospitals or to any other health care providers. Benefits are paid no matter what your other insurance plans may cover. 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.

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.¹⁴

Q. Is there a Wellness Benefit included in this Critical Illness Insurance plan?

A. Yes. This benefit provides a \$50 or \$100 annual benefit per calendar year (amount will depend on the plan option you selected during enrollment) when you see your physician for eligible health screenings¹⁵ or prevention measures.

Q. How do I designate a beneficiary?

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

- 1. Go to the MetLife MyBenefits website at www.metlife.com/mybenefits and enter "ADP TotalSource" as the Company Name
- 2. Log in to 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).
- 3. One you are logged in, under Critical Illness, click on "I want to", and when a drop-down menu appears, select "Update Beneficiary".



Critical Illness

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.

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.

⁵ In certain states, the Covered Condition is Coronary Artery Disease.

⁹ In certain states, the Covered Condition is Severe Stroke.

10Seven childhood diseases are: Cerebral Palsy, Cleft Lip or Cleft Palate, Cystic Fibrosis, Diabetes (Type 1), Down Syndrome, Sickle Cell Anemia and Spina Bifida.

¹¹Eleven infectious diseases are: Bacterial Cerebrospinal Meningitis, COVID-19, Diphtheria, Encephalitis, Legionnaire's Disease, Malaria, Necrotizing Fasciitis, Osteomyelitis, Rabies, Tetanus and Tuberculosis. For an Infectious Disease Category benefit to be payable, the covered person must have been treated for the disease in a hospital for [5] consecutive days.

¹² Ten progressive diseases are: ALS, Alzheimer's Disease, Huntington's Disease, Multiple Sclerosis, Muscular Dystrophy, Parkinson's Disease (Advanced), Systemic Lupus Erythematosus (SLE) and Systemic Sclerosis (Sclerosis) (Sclerosis).

¹⁴Eligibility 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.

15 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.

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¹ 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. For CA-sitused cases, 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. Additional restrictions may apply to dependents serving in the armed forces or living overseas.

⁴ 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. For NH residents, there is an initial benefit of \$100 for All Other Cancer.

⁶ Severe Burn, Coma, Loss of: Ability to Speak; Hearing; or Sight; and Paralysis are not available in all states. Please review the Disclosure Statement or Outline of Coverage/Disclosure Document for details.

⁷ 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.

⁸ 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.

¹³ Pléase review the Disclosuré 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.