

Accident Insurance

Benefits that may help cover costs such as those 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.

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.

You are eligible to elect Accident Insurance coverage if you are Actively at Work, working at least 15 hours per week. Commissions Only worksite employees who do not draw a salary or hourly wage from employer are not eligible for Voluntary Benefits offered through MetLife.

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	
Coverage Options	Low Plan	High Plan
Employee	\$8.40	\$15.81
Employee & Spouse	\$12.60	\$23.75
Employee & Child(ren)	\$16.06	\$30.26
Employee & Spouse/Child(ren)	\$20.50	\$38.62

Covered Benefits

BENEFIT	BENEFIT LIMITS	LOW PLAN			HIGH PLAN		
		EMPLOYEE	SPOUSE	CHILD	EMPLOYEE	SPOUSE	CHILD
ACCIDENTAL DEATH BENEFITS CATEGORY							
Basic Accidental Death	N/A	\$25,000	\$12,500	\$5,000	\$50,000	\$25,000	\$10,000
Accidental Death Common Carrier		\$75,000	\$37,500	\$15,000	\$150,000	\$75,000	\$30,000
ACCIDENTAL DISMEMBERMENT/FUNCTIONAL LOSS/PARALYSIS BENEFITS CATEGORY							
Basic Dismemberment/Functional Loss Benefit							
Loss of one finger or one toe	N/A	\$250	\$250	\$250	\$500	\$500	\$500
Loss of one arm or one leg		\$2,500	\$2,500	\$2,500	\$10,000	\$10,000	\$10,000
Loss of one hand or one foot		\$2,500	\$2,500	\$2,500	\$10,000	\$10,000	\$10,000
Loss of two or more fingers or toes		\$500	\$500	\$500	\$1,000	\$1,000	\$1,000
Loss of sight in one eye		\$2,500	\$2,500	\$2,500	\$10,000	\$10,000	\$10,000
Loss of hearing in one ear		\$2,500	\$2,500	\$2,500	\$10,000	\$10,000	\$10,000

Catastrophic Dismemberment/Functional Loss Benefit							
Loss of both arms or both legs or one arm and one leg	N/A	\$10,000	\$10,000	\$10,000	\$50,000	\$50,000	\$50,000
Loss of both hands or both feet or one hand and one foot		\$10,000	\$10,000	\$10,000	\$50,000	\$50,000	\$50,000
Loss of sight in both eyes		\$10,000	\$10,000	\$10,000	\$50,000	\$50,000	\$50,000
Loss of hearing in both ears		\$10,000	\$10,000	\$10,000	\$50,000	\$50,000	\$50,000
Loss of ability to speak		\$10,000	\$10,000	\$10,000	\$50,000	\$50,000	\$50,000
Paralysis Benefit							
Two Limbs (paraplegia or hemiplegia)	N/A	\$5,000	\$5,000	\$5,000	\$25,000	\$25,000	\$25,000
Four Limbs (quadriplegia)		\$10,000	\$10,000	\$10,000	\$50,000	\$50,000	\$50,000

		LOW PLAN	HIGH PLAN
BENEFIT	BENEFIT LIMITS	ALL COVERED PERSONS	ALL COVERED PERSONS
ACCIDENTAL INJURY BENEFITS CATEGORY			
Fracture Benefit (Closed)			
Face or Nose (except mandible or maxilla)	If more than one bone is fractured, the amount we will pay for all fractures combined will be no more than 2 times the highest Fracture Benefit.	\$1,000	\$2,000
Skull Fracture - depressed (except bones of face or nose)		\$4,000	\$5,000
Skull Fracture - non depressed (except bones of face or nose)		\$2,000	\$2,500
Lower Jaw, Mandible (except alveolar process)		\$750	\$1,000
Upper Jaw, Maxilla (except alveolar process)		\$1,000	\$2,000
Upper Arm between Elbow and Shoulder (humerus)		\$1,000	\$2,000
Shoulder Blade (scapula), Collarbone (clavicle, sternum)		\$750	\$1,000
Forearm (radius and/or ulna), Hand, Wrist (except fingers)		\$750	\$1,000
Rib		\$750	\$1,000
Finger, Toe		\$100	\$200
Vertebrae, Body of (excluding vertebral processes)		\$1,500	\$2,000
Vertebral Process		\$500	\$750
Pelvis (includes ilium, ischium, pubis, acetabulum except coccyx)		\$1,500	\$2,000
Hip, Thigh (femur)		\$4,000	\$5,000
Coccyx		\$500	\$750
Leg (tibia and/or fibula)		\$1,500	\$2,000
Kneecap (patella)		\$500	\$750
Ankle	\$500	\$750	

Foot (except toes)		\$500	\$750
Chip Fracture		25%	25%
Fracture Benefit (Open)			
Face or Nose (except mandible or maxilla)	If more than one bone is fractured, the amount we will pay for all fractures combined will be no more than 2 times the highest Fracture Benefit.	\$2,000	\$4,000
Skull Fracture - depressed (except bones of face or nose)		\$8,000	\$10,000
Skull Fracture - non depressed (except bones of face or nose)		\$4,000	\$5,000
Lower Jaw, Mandible (except alveolar process)		\$1,500	\$2,000
Upper Jaw, Maxilla (except alveolar process)		\$2,000	\$4,000
Upper Arm between Elbow and Shoulder (humerus)		\$2,000	\$4,000
Shoulder Blade (scapula), Collarbone (clavicle, sternum)		\$1,500	\$2,000
Forearm (radius and/or ulna), Hand, Wrist (except fingers)		\$1,500	\$2,000
Rib		\$1,500	\$2,000
Finger, Toe		\$200	\$400
Vertebrae, Body of (excluding vertebral processes)		\$3,000	\$4,000
Vertebral Process		\$1,000	\$1,500
Pelvis (includes ilium, ischium, pubis, acetabulum except coccyx)		\$3,000	\$4,000
Hip, Thigh (femur)		\$8,000	\$10,000
Coccyx		\$1,000	\$1,500
Leg (tibia and/or fibula)		\$3,000	\$4,000
Kneecap (patella)		\$1,000	\$1,500
Ankle		\$1,000	\$1,500
Foot (except toes)		\$1,000	\$1,500
Chip Fracture	25%	25%	
Dislocation Benefit (Closed)			
Lower Jaw	If more than one joint is dislocated, the amount we will pay for all dislocations combined will be no more than 2 times the highest Dislocation Benefit.	\$750	\$1,000
Collarbone (sternoclavicular)		\$1,000	\$1,500
Collarbone (acromioclavicular and separation)		\$750	\$1,000
Shoulder (glenohumeral)		\$750	\$1,000
Rib		\$750	\$1,000
Elbow		\$750	\$1,000
Wrist		\$750	\$1,000
Bone or Bones of the Hand (other than fingers)		\$750	\$1,000
Hip		\$4,000	\$5,000
Knee (except patella)		\$2,000	\$2,500

Ankle - Bone or bones of the Foot (other than toes)		\$750	\$1,000
One Toe or Finger		\$100	\$200
Partial Dislocation		25%	25%
Dislocation Benefit (Open)			
Lower Jaw	If more than one joint is dislocated, the amount we will pay for all dislocations combined will be no more than 2 times the highest Dislocation Benefit.	\$1,500	\$2,000
Collarbone (sternoclavicular)		\$2,000	\$3,000
Collarbone (acromioclavicular and separation)		\$1,500	\$2,000
Shoulder (glenohumeral)		\$1,500	\$2,000
Rib		\$1,500	\$2,000
Elbow		\$1,500	\$2,000
Wrist		\$1,500	\$2,000
Bone or Bones of the Hand (other than fingers)		\$1,500	\$2,000
Hip		\$8,000	\$10,000
Knee (except patella)		\$4,000	\$5,000
Ankle - Bone or bones of the Foot (other than toes)		\$1,500	\$2,000
One Toe or Finger		\$200	\$400
Partial Dislocation		25%	25%
Burn Benefit			
2nd Degree w/ less than 10% of surface skin burnt	1 time per accident; Unlimited time(s) per calendar year	\$75	\$100
2nd Degree 10-25% surface skin burnt		\$150	\$200
2nd Degree 25-35% surface skin burnt		\$500	\$750
2nd Degree 35% or more of surface skin burnt		\$1,000	\$1,500
3rd Degree w/ less than 10% of surface skin burnt		\$1,000	\$1,500
3rd Degree 10-25% surface skin burnt		\$1,500	\$2,000
3rd Degree 25-35% surface skin burnt		\$5,000	\$7,500
3rd Degree 35% or more of surface skin burnt		\$10,000	\$15,000
Concussion Benefit			
Concussion	1 time(s) per calendar year	\$250	\$400
Coma Benefit			
Coma	1 time(s) per accident; Unlimited time(s) per calendar year	\$7,500	\$10,000
Laceration Benefit			
Without repair by stitches	1 time per accident; 3 time(s) per calendar year	\$50	\$75
Repaired by stitches but less than 2 inches long		\$75	\$100
Repaired by stitches and 2-6 inches long		\$200	\$350
Repaired by stitches and over 6 inches long		\$400	\$700
Broken Tooth Benefit			

Crown	1 time(s) per accident; Unlimited time(s) per calendar year (applies to all procedures)	\$200	\$300
Extraction	1 time(s) per accident; Unlimited time(s) per calendar year (applies to all procedures)	\$100	\$150
Filling	1 time(s) per accident; Unlimited time(s) per calendar year (applies to all procedures)	\$25	\$50
Eye Injury Benefit			
Eye Injury	1 time(s) per accident; Unlimited time(s) per calendar year	\$300	\$400

		LOW PLAN	HIGH PLAN
BENEFIT	BENEFIT LIMITS	ALL COVERED PERSONS	ALL COVERED PERSONS
MEDICAL TREATMENT AND SERVICES BENEFITS CATEGORY			
Ground Ambulance Benefit			
Ground Ambulance	1 time(s) per accident; Unlimited time(s) per calendar year	\$250	\$400
Air Ambulance Benefit			
Air Ambulance	1 time(s) per accident; Unlimited time(s) per calendar year	\$1,000	\$1,250
Emergency Care Benefit			
Emergency Room	1 time per accident (combined with Non-Emergency Initial Care Benefit). Payable within 48 hours after the accident.	\$50	\$100
Physician's Office		\$50	\$75
Urgent Care		\$50	\$75
Non-Emergency Initial Care Benefit			
Non-Emergency Initial Care	1 time per accident (combined with Emergency Care Benefit)	\$100	\$250
Medical Testing Benefit			
Medical Testing (X-rays, MRI/MR, Ultrasound, NCV, CT/CAT, EEG)	2 time(s) per accident; Unlimited time(s) per calendar year	\$150	\$200
Physician Follow-Up Benefit			
Physician Follow-Up Visit	2 time(s) per accident; 6 time(s) per calendar year	\$75	\$100
Transportation Benefit			
Transportation		\$300	\$400

	1 time(s) per accident; 2 time(s) per calendar year		
Therapy Services Benefit			
Acupuncture	10 time(s) per accident; Unlimited time(s) per calendar year	\$25	\$50
Chiropractic Therapy		\$25	\$50
Cognitive Behavioral Therapy		\$25	\$50
Occupational Therapy		\$25	\$50
Physical Therapy		\$25	\$50
Respiratory therapy		\$25	\$50
Speech Therapy		\$25	\$50
Vocational Therapy		\$25	\$50
Pain Benefit			
Pain Management (for Epidural Anesthesia)	1 time(s) per accident; Unlimited time(s) per calendar year	\$75	\$100
Prosthetic Device Benefit			
One Device Only	1 time(s) per accident; Unlimited time(s) per calendar year	\$750	\$1,000
More than One Device		\$1,500	\$2,000
Medical Appliance Benefit			
Brace		\$75	\$150
Cane		\$75	\$150
Crutches		\$75	\$150
Walker - expected use < 1yr		\$150	\$250
Walker - expected use >=1 yr		\$300	\$500
Walking Boot		\$75	\$150
Wheel chair or motorized scooter - expected use < 1yr		\$200	\$300
Wheel chair or motorized scooter - expected use >=1yr		\$750	\$1,000
Other medical device used for Mobility		\$75	\$150
Medical Appliance Benefit Limit (for all appliances combined per accident)		\$750	\$1,000
Modification Benefit			
Modification	1 time(s) per accident; Unlimited time(s) per calendar year	\$1,000	\$1,500
Blood/ Plasma/ Platelets Benefit			
Blood/Plasma/Platelets	1 time(s) per accident; Unlimited time(s) per calendar year	\$400	\$500
Surgery Benefits			
Surgical Repair – Cranial		\$1,500	\$2,000

Surgical Repair – Hernia	1 time(s) per accident; Unlimited time(s) per calendar year	\$150	\$200
Surgical Repair – Ruptured Disc		\$750	\$1,500
Surgical Repair – Skin Graft (% of Burn Benefit)		50%	50%
Surgical Repair – Torn Cartilage in Knee		\$750	\$1,500
Surgical Repair – Torn tendon/ligament/rotator cuff - one		\$750	\$1,000
Surgical Repair – Torn tendon/ligament/rotator cuff - two or more		\$1,500	\$2,000
Surgical Repair – Thoracic Cavity or Abdominal Pelvic Cavity		\$1,500	\$2,000
Exploratory Surgery (for any Surgery Benefit procedure)		\$150	\$400
Other Outpatient Surgery Benefit			
Other Outpatient Surgery Benefit	1 time(s) per accident; Unlimited time(s) per calendar year	\$300	\$400

		LOW PLAN	HIGH PLAN
BENEFIT	BENEFIT LIMITS	ALL COVERED PERSONS	ALL COVERED PERSONS
ACCIDENT – HOSPITAL BENEFITS CATEGORY			
Hospital Admission Benefit			
Admission	1 time per accident; Unlimited times per calendar year	\$1,000	\$1,500
ICU Supplemental Admission (paid in addition to Admission)		\$1,000	\$1,500
Hospital Confinement Benefit			
Confinement	365 days per accident. Payable after the first day of admission. ICU Supplemental Confinement will pay an additional benefit for 30 of those days.	\$200	\$300
ICU Supplemental Confinement (paid in addition to Confinement)		\$200	\$300
Inpatient Rehabilitation Benefit			
Inpatient Rehabilitation	15 days per accident; 30 days per calendar year	\$100	\$200

		LOW PLAN	HIGH PLAN
BENEFIT	BENEFIT LIMITS	ALL COVERED PERSONS	ALL COVERED PERSONS
OTHER BENEFITS CATEGORY			
Lodging Benefit	30 day(s) per calendar year	\$100	\$200

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.

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.

* 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 Benefits Category – 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.
- Accidental 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.

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

MetLife AdvantagesSM

WillsCenter.com³

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 VisionAccess⁴

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 varies by state.

Benefit Payment Example for Low and High Plans

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 ⁵	Low Benefit Amount	High Benefit Amount
Ambulance (ground)	\$250	\$400
Emergency Care	\$50	\$100
Physician Follow-Up (\$100 x 2)	\$150	\$200
Medical Testing	\$150	\$200
Concussion	\$250	\$400
Broken Tooth (repaired by crown)	\$200	\$300
Benefits paid by MetLife Group Accident Insurance	\$1050	\$1,600



Questions & Answers

Q. Who is eligible to elect Accident Insurance coverage?

A. You are eligible to elect Accident Insurance for yourself and your eligible family members!⁶ You need to elect coverage during your Enrollment Period and to be actively at work for your coverage to be effective. Commissions Only worksite employees who do not draw a salary or hourly wage from employer are not eligible for Voluntary Benefits offered through MetLife.

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 Accident Insurance 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.⁷ 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) and talk with a benefits consultant. Or visit our website: www.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.

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.

² Availability of benefits varies by state. See your Disclosure Statement or Outline of Coverage/Disclosure Document for state variations.

³ WillsCenter.com is a document service provided by SmartLegalForms, Inc., an affiliate of Epoq Group, Ltd. SmartLegalForms, Inc. and is not affiliated with MetLife. 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.

⁴ MetLife VisionAccess 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 to anyone regardless of affiliation with MetLife.

⁵ Benefits and amounts are based on sample MetLife plan design. Plan design and plan benefits may vary.

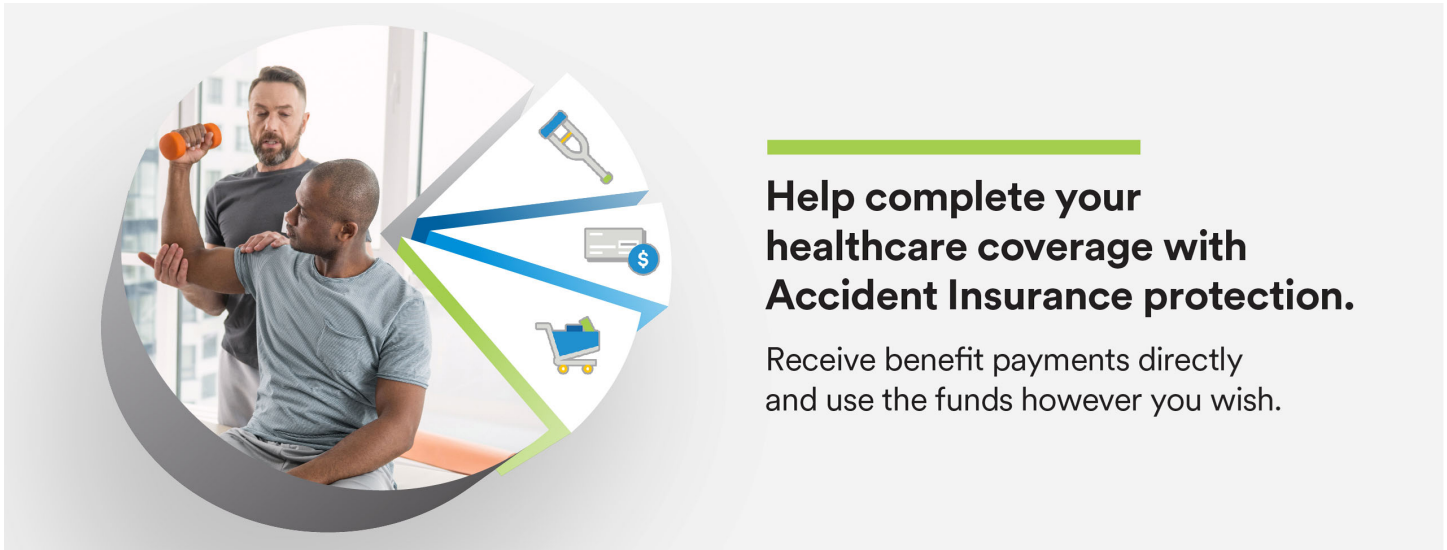
⁶ Coverage is guaranteed provided (1) the employee is actively at work and (2) dependents to be covered are not subject to medical restrictions as set forth on the enrollment form and in the Certificate. Some states require the insured to have medical coverage. Children may be covered to age 26. There are benefit reductions that may begin at age 65.

⁷ 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'S ACCIDENT INSURANCE IS A LIMITED BENEFIT GROUP INSURANCE POLICY. The policy is not intended to be a substitute for medical coverage and certain states may require the insured to have medical coverage to enroll for the coverage. The policy or its provisions may vary or be unavailable in some states. There is a preexisting condition limitation for hospital sickness benefits, if applicable. MetLife's Accident Insurance may be subject to benefit reductions that begin at age 65. And, like most group accident and health insurance policies, policies offered by MetLife may contain certain exclusions, limitations and terms for keeping them in force. For complete details of coverage and availability, please refer to the group policy form GPNP12-AX or contact MetLife. Benefits are underwritten by Metropolitan Life Insurance Company, New York, New York. Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See MetLife's Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

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





Help complete your healthcare coverage with Accident Insurance protection.

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 Accident Insurance?

Accident Insurance works to supplement your medical coverage — and pays regardless of what your medical plan may or may not cover¹. It's coverage that provides a financial security for life's unexpected events by providing you with a lump-sum payment (one convenient payment all at once) for a covered¹ event when your family may need it most. The payment you receive is yours to spend however you like. It pays if you have tests, or receive medical services, treatment or care for one of more than 150 covered¹ events as defined in your group certificate

Q. How does the payment work?

A. We make payments directly to you. The amount you receive is paid regardless of any other insurance you might have, and you can spend it however you like. You might use it to help pay for medical plan deductibles and copays, out of network care, or even for your family's everyday living expenses. Whatever you need while recovering from an accident or injury, Accident Insurance is there to help make life a little easier.

Q. Am I eligible to elect Accident Insurance coverage?

A. Worksite Employees who meet eligibility requirements as defined in the certificate may elect during the enrollment period as long as they are actively at work² working at least 15 hours per week. If you are a Commission Only employee and do not draw a salary or hourly wage from employer, you are not eligible for Voluntary Benefits offered through MetLife.

Q. Can I elect coverage my spouse/domestic partner and children³?

A. Yes, if you elect coverage for yourself, you may also choose to elect coverage for your spouse/domestic partner and child(ren).³ When enrolling your spouse/partner and/or children you must provide their name, their dates of birth, and their social security numbers during enrollment. Please review these details during enrollment to ensure they are accurate to ensure no coverage issues.

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

A. Accidents can happen anytime and can happen anywhere and usually when you least expect them. What's more, accidents can be costly. Even the best medical plans can have you with extra expenses to pay, or with costs for services that just aren't covered such as plan deductibles, co-pays, extra costs for out-of-network care, or extra costs for non-covered services.

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

A. Yes. Your Accident Insurance coverage is guaranteed², 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 first thought.

Q. How much will Accident Insurance cost?

A. Accident Insurance may cost less than you think. It is designed to be an economical way to supplement your healthcare plan. Exact rates can be found in the enrollment materials provided by your employer.

Q. How do I pay for my coverage?

A. You pay premiums through payroll deductions, so you don't have to worry about writing a check or missing payments.

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

A. Payments will be paid directly to you, not to the doctors, to the hospitals or to any other health care providers. And to make things even easier, the check is made payable to you. There's no need to work it around any other insurance you may have. Benefits are paid no matter what any 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.⁴

Q. Can I use the benefit payment on anything I need?

A. Yes, you can use your payment as you see fit. For example, you may use it to help cover your medical insurance deductibles, your co-pays, or your household bills.

Q. Is the claims process simple?

A. Yes. Once we receive all the information, claims are generally processed within 10 business days with a clean claim. You only need one claim form per accident and every claim is reviewed by a claim's professional⁵. A clean claim is a claim submitted with all the required information necessary to process the claim and is not missing any information that requires additional follow-up.

Q. Do I need to designate a beneficiary?

A. Yes, once the coverage is effective you may designate your Accident Insurance beneficiary online through MetLife's MyBenefits website:

- Go to the MetLife MyBenefits website at www.metlife.com/mybenefits 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 Accident 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. We recommend that you review your coverage each year during annual enrollment to ensure it still fits your needs.

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.

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

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 Coverage for Domestic Partners, civil union partners and reciprocal beneficiaries varies by state. Please contact MetLife for more information. Children may be covered to age 26.

⁴ 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.

⁵ Applies only to "clean" claims. A clean claim is a claim submitted with all the required information necessary to process the claim — no missing information requiring additional follow up with the subscriber. It generally takes 10 business days to process "clean" claims.

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

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

