

Hospital Indemnity Insurance

Effective June 1, 2024 – May 31, 2025

IMPORTANT: This is a fixed indemnity policy, NOT health insurance

This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.

- The payment you get isn't based on the size of your medical bill
- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

- **Visit [HealthCare.gov](https://www.healthcare.gov)** or call **1-800-318-2596** (TTY: 1-855-889-4325) to find health coverage options.
- To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

- For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website ([naic.org](https://www.naic.org)) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.

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

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.

Hospital Indemnity Insurance Benefits

With MetLife, you'll have a choice of two plans (called the "Low Plan" and the "High Plan") which provide lump sum cash payments for covered events regardless of any other payments you may receive from your medical plan. Here are just some of the covered benefits/services¹, when an accident or illness puts you in the hospital.²

You are eligible to elect Hospital Indemnity Insurance coverage as long as you are Actively at Work, 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.

Insurance Rates

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

| Hospital Indemnity Insurance | Monthly Cost to You | |
|------------------------------|---------------------|-----------|
| Coverage Options | Low Plan | High Plan |
| Employee | \$10.49 | \$20.87 |
| Employee & Spouse | \$16.03 | \$32.17 |
| Employee & Child(ren) | \$19.95 | \$40.06 |
| Employee & Spouse/Child(ren) | \$25.25 | \$50.71 |

Covered Benefits

| Subcategory | Benefit Limits (applies to subcategory) | Benefit | Low Plan | High Plan |
|----------------------------------|---|--|----------|-----------|
| Hospital Benefits | | | | |
| Admission Benefit ³ | 5 times per calendar year ⁴ | Admission ⁴ | \$500 | \$1,000 |
| | | Intensive Care Unit (ICU) Supplemental Admission (Benefits paid concurrently with Admission Benefit when a Covered Person is admitted to ICU) | \$500 | \$1,000 |
| Confinement Benefit ³ | 365 days per calendar year ICU Supplemental Confinement will pay an additional | Confinement ⁵ | \$100 | \$200 |
| | | Intensive Care Unit (ICU) Supplemental Confinement (Benefit paid concurrently with the Confinement Benefit when a Covered Person is admitted to ICU) | \$100 | \$200 |



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| Subcategory | Benefit Limits (applies to subcategory) | Benefit | Low Plan | High Plan |
|---|---|---|----------|-----------|
| | benefit for 365 of those days | | | |
| Confinement Benefit for Newborn Nursery Care ⁶ | 2 day(s) per Confinement | Confinement Benefit for Newborn Nursery Care | \$100 | \$200 |
| Inpatient Rehabilitation Benefit ⁷ | 30 days per calendar year | Inpatient Rehabilitation (For Injury or Sickness) | \$100 | \$200 |
| Other Benefits | | | | |
| Health Screening Benefit ⁸ | 1 time per calendar year per covered person | Health Screening | \$50 | \$100 |
| Lodging ^{*,9} | 30 days per calendar year | Lodging | \$100 | \$200 |

*Any benefit(s) marked with an asterisk requires a prior Hospital Admission or Confinement.

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

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.

Additional Resources

WillsCenter.com¹⁰

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

MetLife VisionAccess¹¹

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.



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Benefit Payment Example for Low and High Plans

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

| Covered Benefit ¹ | Low Benefit Amount | High Benefit Amount |
|--|-----------------------|------------------------|
| Regular Hospital Admission (1x) | \$500 | \$1,000 |
| ICU Supplemental Admission (1x) | \$500 | \$1,000 |
| ICU Supplemental Confinement (1 day) | \$100 | \$200 |
| Regular Hospital Confinement (3 total days) | \$300 | \$600 |
| Benefits paid by MetLife Group Hospital Indemnity Insurance | \$1,400 | \$2,800 |

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

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.

Q. Who is eligible to elect Hospital Indemnity coverage?

A. You are eligible to elect coverage for yourself and your eligible family members.¹² You need to elect coverage during your Enrollment Period and be actively at work for your coverage to be effective. Dependents to be enrolled may not be subject to a medical restriction as set forth in the Certificate. Some states require the insured to have medical coverage.

Q. How do I 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 Partner¹³ and child(ren). Please review these details during enrollment to ensure they are accurate.



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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.

- 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 Hospital does not include certain facilities, such as nursing homes, convalescent care or extended care facilities. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.
- ³ The Admission Benefit is not payable for Emergency Room treatment or outpatient treatment. The payment of the admission benefit requires a Confinement. Hospital Confinement requires the assignment to a bed as a resident inpatient in a Hospital (including an Intensive Care Unit of a Hospital) on the advice of a Physician or confinement in an observation area within a Hospital for a period of no less than 20 continuous hours on the advice of a Physician. Please consult your Certificate for details.
- ⁴ If a covered person is readmitted within 90 days for the same or related sickness/injury for which we paid an Admission Benefit, an additional Admission Benefit is not payable.
- ⁵ When plan includes an Admission Benefit, the Confinement Benefit begins on Day 2.
- ⁶ Payable for the period of newborn confinement for a newborn child who is not sick or injured. The Newborn Confinement Period Begins Immediately following the child's birth.
- ⁷ Inpatient Rehabilitation Unit Benefit is standardly applied for covered Accidents only. It is available as an add-on for Sickness.
- ⁸ The Health Screening Benefit is not available in all states. There is a separate mammogram benefit for MT residents and for cases situated in CA and MT.
- ⁹ 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.
- ¹⁰ WillsCenter.com is a document service provided by SmartLegalForms, Inc., an affiliate of Epoq Group, Ltd. SmartLegalForms, Inc. and 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.
- ¹¹ 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.
- ¹² Coverage is guaranteed provided (1) the employee is actively at work and (2) dependents to be covered are not subject to medical restrictions as set forth on the enrollment form and in the Certificate. Some states require the insured to have medical coverage. Additional restrictions may apply to dependents serving in the armed forces or living overseas.
- ¹³ Coverage for Domestic Partners, civil union partners and reciprocal beneficiaries varies by state. Please contact MetLife for more information.

METLIFE'S HOSPITAL INDEMNITY INSURANCE IS A LIMITED BENEFIT GROUP INSURANCE POLICY. The policy is not intended to be a substitute for medical coverage and certain states may require the insured to have medical coverage to enroll for the coverage. The policy or its provisions may vary or be unavailable in some states. Prior hospital confinement may be required to receive certain benefits. There may be a preexisting condition limitation for hospital sickness benefits. MetLife's Hospital Indemnity Insurance may be subject to benefit reductions that begin at age 65. Like most group accident and health insurance policies, policies offered by MetLife may contain certain exclusions, limitations and terms for keeping



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them in force. For complete details of coverage and availability, please refer to the group policy form GPNP12-AX, GPNP13-HI, GPNP16-HI or GPNP12-AX-PASG, or contact MetLife. Benefits are underwritten by Metropolitan Life Insurance Company, New York, New York. In certain states, availability of MetLife's Group Hospital Indemnity Insurance is pending regulatory approval.

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 Hospital Indemnity Insurance.

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

* Photos do not represent actual MetLife Customers

Why do I need hospitalization coverage?

Unplanned hospital¹ stays can be expensive. Hospital Indemnity Insurance from MetLife can help improve your financial security by supplementing your medical plan coverage. You'll receive a lump-sum payment² for a covered event that you can use to pay for things that your medical plan may not cover, such as deductibles, co-pays, out-of-network care, even everyday living expenses. It also can provide a benefit payment for specialized care; for example, if you need to be in an intensive care unit (ICU).³

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, Hospital Indemnity Insurance is there to help make life a little easier.

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

A. Hospital stays can be pricey and are often unexpected. Even the best medical plans can leave you with extra expenses to pay or with extra expenses 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 Hospital Indemnity Insurance coverage is guaranteed⁴, 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 Hospital Indemnity Insurance cost?

A. Hospital Indemnity Insurance may be more affordable than you think. It is designed to be an economical way to supplement your healthcare plan, regardless of any other insurance that you may have. 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.⁵

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.

Q. Is the claims process simple?

A. Yes. Once we've received all the required information, claims are generally processed within 10 business days.⁶ You only need one claim form per admission or hospital stay and every claim is reviewed by a claims professional.

Q. Do I need to designate a beneficiary?

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

- Go to the MetLife MyBenefits website at 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 Hospital Indemnity 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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¹ Hospital does not include certain facilities, such as nursing homes, convalescent care or extended care facilities. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

² 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.

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⁴ Coverage is guaranteed provided (1) the employee is actively at work and (2) dependents to be covered are not subject to medical restrictions as set forth on the enrollment form and in the Certificate. Some states require the insured to have medical coverage. Additional restrictions apply to dependents serving in the armed forces or living overseas.

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.

⁶ 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.

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