

Accident Insurance**Effective June 1, 2025 – May 31, 2026**

Help supplement your healthcare coverage with Accident Insurance.

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

What is Accident Insurance?

Accident Insurance works to supplement your medical coverage — and pays regardless of what your medical plan may or may not cover. It's coverage that provides a financial security for life's unexpected events by providing you with a lump-sum benefit payment (one convenient payment all at once) for a covered event¹ when your family may need it most. The benefit 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 covered events¹ as defined in your certificate.

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 Accident Insurance coverage?

A. You are eligible to elect Accident Insurance for yourself and your eligible family members.² You need to elect coverage during your Enrollment Period and to be actively at work for your coverage to be effective.

Q. Can I elect coverage for my Dependents?

A. Yes, if you elect coverage for yourself, you may also choose to elect coverage for your Spouse/Domestic Partner³ and child(ren)⁴. 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 does the payment work?

A. We make benefit 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. I have a medical plan at work, so why do I need Accident Insurance?

A. Accidents can happen anytime, anywhere, and usually when you least expect them. What's more, they can be costly. Even the best medical plans can leave you with extra expenses to pay or services that just aren't covered. Things like plan deductibles, copays, extra costs for out-of-network care, or non-covered services. Many people aren't prepared to handle these extra costs, so having this extra financial support when the time comes may mean less worry for you and your family.

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

A. Yes. Your Accident Insurance coverage is guaranteed⁵, 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.

Accident Insurance**Effective June 1, 2025 – May 31, 2026****Q. How much will Accident Insurance cost?**

A. Accident Insurance may be more cost-effective 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 paid through payroll deductions or direct bill with MetLife.

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.⁶

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 receive all the required information, claims are generally processed within 10 business days.⁷ You only need one claim form per accident and every claim is reviewed by a claim professional.

Q. Do I need to designate a beneficiary?

A: Yes, please designate beneficiaries at <https://workforcenow.adp.com> or call (844) 448-0325 to speak with a MyLife Advisor if you need further assistance.

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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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 as defined in the group policy/certificate.

² Eligible Family Members means all persons eligible for coverage as defined in the Certificate.

³ Coverage for Domestic Partners, civil union partners and reciprocal beneficiaries varies by state. Please contact MetLife for more information.

⁴ Dependent Child coverage varies by state. Please contact MetLife for more information.

⁵ 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.

⁶ 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.

⁷ 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 are benefit reductions that begin at age 65, if applicable. Like most group accident and health insurance policies, policies offered by MetLife may include waiting periods and 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, NY. 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.