# **Accident Insurance**

Benefits that may help cover costs such as those not covered by your medical plan.

## Samuel and Son Employer Plan

## **Accident Insurance Benefits**

With MetLife, you'll have a comprehensive plan that provides payments in addition to any other insurance payments you may receive 1. Here are just some of the covered events/services 2.

Accidental Injury Benefits	Plan Benefits
Fracture Benefit*	\$25 – \$1,500 depending on the fracture and type of repair
Dislocation Benefit*	\$25 – \$1,500 depending on the dislocation and type of repair
Concussion Benefit	\$100
Laceration Benefit	\$15 – \$100 depending on the length of the cut and type of repair
Broken Tooth Benefit	Crown \$50 Filling \$15 Extraction \$25
Eye Injury Benefit	\$50
Accident - Medical Services & Treatment Benefits	Plan Benefits
Ambulance Benefit	Ground: \$100 Air: \$500
Emergency Care Benefit	\$15 – \$25 depending on location of care
Non-Emergency Initial Care Benefit	\$75
Physician Follow-Up Visit Benefit	\$25
Therapy Services Benefit (including physical therapy)	\$10
Medical Testing Benefit	X-rays: \$75 All other tests: \$50
Medical Appliance Benefit	\$25 – \$250 depending on the appliance
Transportation Benefit	\$300
Pain Management Benefit (for epidural anesthesia)	\$25
(	One device: \$250
Prosthetic Device Benefit	More than one device: \$500
Blood/Plasma/Platelets Benefit	\$150
Surgical Repair Benefit	\$50-\$500 depending on the type of surgery
Exploratory Surgery Benefit	\$50



## **Accident Insurance**

Other Outpatient Surgery Benefit	\$100
General Anesthesia Benefit	\$25
Other Benefits	Plan Benefits
Health Screening Benefit* -	\$50

#### \* 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.
- Health Screening Benefit The Health Screening Benefit is not available in all states.

### **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.

## **Benefit Payment Example**

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 <sup>3</sup>	Benefit Amount
Ambulance (ground)	\$100
Emergency Care	\$25
Physician Follow-Up (\$25 x 2)	\$50
Medical Testing	\$50
Concussion	\$100
Broken Tooth (repaired by crown)	\$50
Benefits paid by MetLife Group Accident Insurance	\$375

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

#### **Questions & Answers**

- Q. Who is eligible to enroll for this accident coverage?
- **A.** You are eligible to enroll yourself and your eligible family members!<sup>4</sup> You need to enroll during your Enrollment Period and to be actively at work for your coverage to be effective.
- Q. How do I pay for my accident 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.<sup>5</sup> 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?



### **Accident Insurance**

A. Contact a MetLife Customer Service Representative at 1 800- GET-MET8 (1-800-438-6388), Monday through Friday from 8:00 a.m. to 8:00 p.m., EST. Or visit our website: mybenefits.metlife.com.

#### **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	Plan
Employee	\$1.69
Employee & Spouse or Children	\$3.77
Employee & Spouse/Child(ren)	\$4.59

<sup>&</sup>lt;sup>1</sup> 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.

<sup>3</sup> Benefits and amounts are based on sample MetLife plan design. Plan design and plan benefits may vary.

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.



<sup>&</sup>lt;sup>2</sup> Availability of benefits varies by state. See your Disclosure Statement or Outline of Coverage/Disclosure Document for state variations.

<sup>&</sup>lt;sup>4</sup> 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.

<sup>&</sup>lt;sup>5</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.

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

Samuel and Son Employer Paid

#### **Critical Illness Insurance Benefits**

Eligible Individual	Benefit Amount	Requirements
Coverage Options		
Employee	\$5,000	Coverage is guaranteed provided you are actively at work. <sup>1</sup>
Spouse/Domestic Partner <sup>2</sup>	50% of the Employee's Initial Benefit	Coverage is guaranteed provided the employee is actively at work and the spouse/domestic partner is not subject to a medical restriction as set forth on the enrollment form and in the Certificate. <sup>1</sup>
Dependent Child(ren) <sup>3</sup>	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

## **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**<sup>4</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.

#### **Plan Design - Covered Conditions**

**Initial Benefit** means the benefit that is payable for a covered condition the first time that it occurs while coverage is in effect. The Initial Benefit amount is expressed as a percentage of the elected Benefit Amount.

**Recurrence Benefit** means the benefit that is payable for another occurrence of the same covered condition for which MetLife has already paid a benefit. The Recurrence Benefit amount is expressed as a percentage of the Initial Benefit amount.

Covered Conditions	Initial Benefit	Recurrence Benefit
Benign Tumor Category		
Benign Brain Tumor	100% of Benefit Amount	100% of Initial Benefit
Cancer Category		
Invasive Cancer	100% of Benefit Amount	100% of Initial Benefit
Non-Invasive Cancer	25% of Benefit Amount	100% of Initial Benefit
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	50% of Benefit Amount	100% of Initial Benefit



Childhood Disease Categ	ory	
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 Catego	ry	
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 Catego	ory	
For a benefit to be payable, the covered person must have	been treated for the disease in a hospita	al 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	у	
Kidney Failure	100% of Benefit Amount	NONE
Major Organ Transplant Cat	egory	
Major Organ Transplant For bone marrow, heart, lung, pancreas, and liver	100% of Benefit Amount	NONE
Occupational Exposure Cate	egory	
Occupational HIV	100% of Benefit Amount	NONE
Progressive Disease Categ	gory	
ALS	100% of Benefit Amount	NONE
Alzheimer's Disease	100% 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
Systemic Lupus Erythematosus (SLE)	100% 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

MetLife will not pay a benefit for a Covered Condition that is diagnosed prior to the coverage effective date.

- 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.
  - Coma
  - Loss of: Ability to Speak; Hearing; or Sight
  - Paralysis
  - o Severe Burn

**Health Screening Benefit**MetLife will provide an annual benefit of \$50 per calendar year for taking one of the eligible screening/prevention measures. 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.

#### **Example of How Benefits are Paid**

The example below illustrates an employee who elected a Benefit Amount of \$5,000.

Illness – Covered Condition	Payment
Heart Attack — first verified diagnosis	Initial Benefit payment of \$5,000 or 100%
Kidney Failure – first verified diagnosis, two years later	Initial Benefit payment of \$5,000 or 100%
Heart Attack — second verified diagnosis, four years later	Recurrence Benefit payment of \$5,000 or 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.

#### **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! 5 You need to enroll during your Enrollment Period and to be actively at work for your coverage to be effective.
- 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. Contact a MetLife Customer Service Representative at 1 800- GET-MET8 (1-800-438-6388), Monday through Friday from 8:00 a.m. to 8:00 p.m., EST. Or visit our website: *mybenefits.metlife.com*.

#### 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

Employee Only	Employee + Spouse or Child(ren)	Employee + Spouse and Children
\$2.06	\$2.77	\$3.33

- <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> 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>5</sup> Eligible Family Members means all persons eligible for coverage as defined in the Certificate.
- <sup>6</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.

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 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 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, GPNP14-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

