





## Help supplement your healthcare coverage with Critical Illness Insurance.

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

You asked. We answered. What do I need to know about the new Critical Illness plan? Find out with some FAQs

#### What is covered under this plan?

- A. MetLife Critical Illness Insurance provides you with a lump-sum benefit in the event you or a Covered Family Member is diagnosed with one of the following medical conditions (as they are defined by the group certificate):
  - Cancer<sup>1</sup>
  - Heart Attack<sup>2</sup>
  - Stroke<sup>3</sup>
  - Coma<sup>4</sup>
  - Major Organ Transplant<sup>5</sup>
- Coronary Artery Bypass Graft<sup>6</sup>
- · Kidney Failure
- 7 Childhood Diseases
- · 10 Infectious Diseases
- 11 Progressive Diseases
- And more. To see all covered conditions, review your Plan Summary.

#### Am I eligible to enroll for this coverage?

A. Full-time, certain part-time employees and family members are eligible to enroll. You may enroll as a new hire, during Annual Enrollment, or if you have a qualified life event (e.g., marriage, divorce, loss of dependent status). You must be actively at work for coverage to be effective; otherwise, your coverage will not take effect until you return. If a Dependent is subject to any medical restrictions as defined on the enrollment form in the Certificate, coverage will take effect on the date the Dependent is no longer under a Medical Restriction.

#### What happens if I get sick again (have a recurrence)?

A. Your plan pays an additional benefit (Recurrence Benefit) if a medical condition reoccurs for certain conditions such as: heart attack, stroke, or 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<sup>8</sup>. And there is a benefit suspension period (or waiting period) between recurrences<sup>9</sup>. Also, a treatment-free period applies to Cancer and Benign Brain Tumor.

### 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 cancer, a heart attack, or a stroke 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 like medical plan deductibles and copays or extra costs for out-of-network care. And if you're out of work because of a disability, it might be that only a portion of your pre-disability income is being paid to you. 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.



### How do I pay for my coverage and how much will it cost?

A. Critical Illness Insurance may be more affordable than you think. You pay premiums through payroll deductions, so you don't have to worry about writing any checks or missing payments. To view your plan documents, visit <a href="www.myrrdbenefits.com">www.myrrdbenefits.com</a> or contact MetLife

# Are benefits paid directly to me or my healthcare provider?

A. Benefits will be paid directly to you, not to the doctors, to the hospitals, or to any other healthcare providers. 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 or pay.

## 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<sup>9</sup>.

To enroll, visit the **RRD Benefits Center** at <a href="https://rrd.bswift.com">https://rrd.bswift.com</a> or call 1-877-773-4236.

Have Other Questions?
Call MetLife Directly at 1-800-GET-MET8
1-800-438-6388) and talk with a benefits
consultant Monday—Friday 8:00 am to 8:00 pm ET

- 1. Please review the certificate for specific information about cancer benefits. In most states, not all types of cancer are covered.
- 2. 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.
- 3. In certain states, the Covered Condition is Severe Stroke.
- 4. Coma, Loss of: Ability to Speak; Hearing; or Sight, Paralysis are not available in all states. Please review the Disclosure Statement or Outline of Coverage/Disclosure Document for details.
- 5. 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. Refer to the Certificate for which organs are covered. In some states, the condition is Major Organ Failure.
- 6. In certain states, the Covered Condition is Coronary Artery Disease.
- 7. Eligible Family Members means all persons eligible for coverage as defined in the Certificate.
- 8. Please 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.
- 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.

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 Reduction Due to Age provision. 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, GPNP10-CI, GPNP14-CI, GPNP19-CI or contact MetLife for more information. Please 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.

