



**METROPOLITAN LIFE INSURANCE COMPANY
NEW YORK, NEW YORK**

POLICYHOLDER: Your Employer
Group Policy Form No: GPNP09-CI
(Referred to herein as the "Group Policy")
Certificate Form No: GCERT10-CI
(Referred to herein as the "Certificate")

CRITICAL ILLNESS INSURANCE OUTLINE OF COVERAGE

Critical Illness Insurance coverage is provided under a Group Policy that has been issued to ABC Company. One certificate is issued to each employee who is covered under the Group Policy. The Group Policy is a **LIMITED POLICY**. An employee applying for coverage under the Group Policy is referred to herein as "you" or "your".

If you are under age 65, please read the following:

The certificate is a group certificate. The certificate provides specified disease coverage ONLY. The certificate does NOT provide basic hospital, basic medical or major medical insurance, as defined by the New York State Department of Financial Services.

If you are age 65 or older, please read the following:

The certificate is a group certificate. The certificate provides specified disease coverage ONLY. The certificate does NOT provide Medicare supplement insurance, long term care insurance, nursing home insurance only, home care insurance only or nursing home and home care insurance as defined by the New York State Department of Financial Services. You may also contact your local social security office or MetLife and obtain a copy of the Guide to Health Insurance for People with Medicare.

It is also important to note that the receipt of benefits under a certificate may affect eligibility for Medicaid or other governmental benefits and entitlements. Accordingly, persons who wish to maintain eligibility for such benefits should not purchase the coverage made available under the Group Policy without consulting a legal advisor.

- 1) READ YOUR CERTIFICATE CAREFULLY** – This disclosure document provides a very brief description of the important features of the group insurance coverage provided by the Group Policy and certificate. This is not the insurance contract and only the actual provisions of the Group Policy and certificate under which you have coverage will control. Each certificate sets forth in detail the rights and obligations of both you and MetLife under the certificate. It is, therefore, important that you **READ YOUR CERTIFICATE CAREFULLY!**
- 2) CRITICAL ILLNESS INSURANCE COVERAGE** – Policies of this category are designed to provide a lump sum payment if the covered person is diagnosed with certain specified diseases the first time after insurance takes effect under the Group Policy.
- 3) MEDICAL COVERAGE** – The Policy does NOT provide any type of medical coverage and is not a substitute for medical coverage or disability insurance. You must have medical insurance in place when you apply for coverage under the Group Policy.

4) BENEFITS OF YOUR CERTIFICATE

Please be aware that the certificate contains specific definitions, conditions, maximums, limitations, exclusions and proof requirements for the benefits described below.

The Benefit Amount that determines the benefits for Covered Conditions is shown on your enrollment form. The Total Benefit Amount, which is the maximum aggregate amount that we will pay for any and all Covered Conditions except Major Organ Transplant, combined, per covered person, per lifetime is equal to 5 times the Benefit Amount that you select. The Total Benefit Amount does not include the Health Screening Benefit or the Major Organ Transplant Benefit.

<u>Covered Condition</u>	<u>Initial Benefit</u>	<u>Recurrence Benefit</u>
Alzheimer's Disease	100% of Benefit Amount	NONE
Cancer		
Full Benefit Cancer	100% of Benefit Amount	100% of Benefit Amount
Partial Benefit Cancer	25% of Benefit Amount	25% of Benefit Amount
Skin Cancer	5% of Benefit Amount (but not less than \$250)	NONE
Coronary Artery Disease	100% of Benefit Amount	NONE
Heart Attack	100% of Benefit Amount	100% of Benefit Amount
Kidney Failure	100% of Benefit Amount	NONE
Major Organ Transplant	100% of Benefit Amount	100% of Benefit Amount
Stroke	100% of Benefit Amount	100% of Benefit Amount

Recurrence Benefit:

We will pay the Recurrence Benefit shown above for a Recurrence. "Recurrence" means:

- with respect to Cancer, a second occurrence of Cancer that occurs after an initial Benefit was paid for a first occurrence of that same Cancer;
- with respect to Major Organ Transplant, an occurrence of Major Organ Transplant after an initial benefit was paid for a first occurrence of Major Organ Transplant with respect to a different organ or combination of organs;
- with respect to any other Covered Condition, a second occurrence of that Covered Condition after we have already paid an initial benefit for the first occurrence of that Covered Condition.

Health Screening Benefit

If a covered person takes one of the screening/prevention measures while such covered person is insured under the certificate, we will pay a health screening benefit upon submission of proof that such measure was taken. When we receive such proof, we will review it, and if we approve the claim, we will pay a health screening benefit depending on the plan you select.

We will only pay one health screening benefit per covered person per calendar year.

Payment of this benefit will not reduce the Total Benefit Amount.

5) DEFINITIONS

Coronary Artery Disease means the blockage or narrowing of one or more coronary arteries due to atherosclerotic heart disease for which a physician has determined coronary artery bypass graft to be medically necessary.

Cancer means the presence of one or more malignant tumors characterized by the uncontrollable and abnormal growth and spread of malignant cells with invasion of normal tissue or the presence of one or more malignant tumors where there is metastasis.

Partial Benefit Cancer means one of the following conditions that meets the TNM Staging classification and other qualifications specified below:

- a carcinoma in situ wherein the malignant tumor cells still lie within the tissue of the site of origin without having invaded neighboring tissue; and
- tumors of the prostate classified as T1N0M0, including but not limited to T1aN0M0, T1bN0M0, or T1cN0M0 under TNM Staging.

Skin Cancer means any malignant growth that arises on the surface of the skin that is a:

- basal cell carcinoma;
- squamous cell carcinoma;
- melanoma classified as Clarks Level I (melanoma in situ); or
- melanoma classified as Clarks Level II.

Full Benefit Cancer means any form of Cancer that is not Partial Benefit Cancer or Skin Cancer.

Major Organ Transplant means:

- the irreversible failure of a covered person's heart, lung, pancreas or any combination thereof, for which a physician has determined that the complete replacement of such organ with an entire organ from a human donor is medically necessary ; or
- the irreversible failure of a covered person's liver for which a physician has determined that the complete or partial replacement of the liver with a liver or liver tissue from a human donor is medically necessary by a physician.

Major Organ Transplant does not include:

- failure of an organ caused by trauma;
- surgery performed outside the United States, Canada or Mexico;
- surgery involving stem cell generated transplants; or
- surgery involving islet cell transplants.

Stroke means a cerebrovascular incident producing measurable, functional and permanent neurological impairment caused by any of the following which result in an infarction of brain tissue:

- hemorrhage;
- thrombus; or
- embolus from an extra-cranial source.

Stroke does not include:

- cerebral symptoms due to migraine;
- cerebral injury resulting from trauma or hypoxia; or
- vascular disease affecting the eye or optic nerve or vestibular functions.

6) EXCLUSIONS

General Exclusions:

We will not pay benefits for any loss for a covered person caused or contributed to by the covered person:

- participating in a felony, riot or insurrection;
- intentionally causing a self-inflicted injury;
- committing or attempting to commit suicide;
- being intoxicated or under the influence of any narcotic, unless administered on the advice of a Physician; or
- serving in the armed forces or any auxiliary unit of the armed forces of any country.

We will not pay benefits for covered conditions arising from war or any act of war, even if war is not declared.

We will not pay benefits for any covered condition for which diagnosis is made outside the United States, Canada or Mexico, unless the diagnosis is confirmed in the United States, Canada or Mexico, in which case the covered condition will be deemed to occur on the date of the diagnosis made outside the United States, Canada or Mexico.

7) LIMITATIONS

Reduction of Benefits On Account of Prior Claims Paid

We will reduce what we pay for a claim so that the amount we pay, when combined with amounts for all claims we have previously paid for the same covered person, does not exceed the Total Benefit Amount that was in effect for that covered person on the date of the most recent Covered Condition. This provision does not apply to claim payments for the Health Screening Benefit or payment of Critical Illness Benefits for Major Organ Transplant. Prior claims paid for the Health Screening Benefit or Major Organ Transplant are disregarded when determining whether benefits for other Covered Conditions will be reduced under this provision.

8) WHEN INSURANCE ENDS

DATE YOUR INSURANCE ENDS:

Your insurance will end on the earliest of:

- the date the Group Policy ends;
- the date you die;
- the date insurance ends for your class;
- the date the Total Benefit Amount has been paid for you;
- the end of the period for which the last full premium has been paid for you;
- the date you cease to be in an eligible class; or
- the date your employment ends for any reason.

In certain cases, insurance provided under the certificate may be continued or portable. Please consult your employer for further details.

9) PREMIUMS

PREMIUM RATES CHANGE BASED ON AGE. Premium rates for you are also subject to change at other times as stated in the group policy.

10) DISCLOSURE

This disclosure statement is a very brief summary of the certificate.

The certificate itself sets forth the rights and obligations of both you and MetLife. It is therefore imperative that you **READ YOUR CERTIFICATE** carefully.

The expected benefit ratio for this certificate is 70%. This ratio is the portion of future premiums that the company expects to return as benefits, when averaged over all the people with this policy or certificate.