

Proposal Assumptions	
Situs State	IA <u>Residents of most states will be covered by the situs state plan. Residents of certain states will be covered by a state specific certificate of insurance due to these states having extraterritorial laws. For specific state variations on Program Design, Benefits, Limitations and Exclusions, please contact MetLife.</u>
Standard Industry Code (SIC)	8222
Number of Eligible Employees	318
Employee Eligibility	<ul style="list-style-type: none"> • Employees will be subject to an active at work requirement. • Must be a resident of the United States. • An employee must be enrolled for coverage for their Spouse / Domestic Partner and / or Dependent Child(ren) to be eligible for coverage. • Child(ren) are eligible for coverage from birth to age 26. Spouses / domestic partners and dependent child(ren) must not be subject to any medical restrictions as set forth on the enrollment form and in the Certificate. Coverage for Domestic Partners varies by state. The definitions of Domestic Partner and Children may vary by state. • Retirees are not eligible to enroll. • In the proposed situs state, access to Hospital Indemnity Insurance may not be restricted to only those employees enrolled in another insurance plan, such as a high deductible health plan. Please contact MetLife for more information. • The demographics and details of potential covered insureds living and working outside the United States should be discussed with your MetLife representative.
Takeover	No
Contributions	100% Employee Paid
Commissions	Level 20% first year and subsequent years.
Enrollment Method	On Ballot
Implementation Timeline	The minimum lead time required to implement your plan will be 6 weeks from the date of the initial implementation meeting.

Plan Design³	
Coverage Type	Hospitalization Reason – Accident: 24 Hour coverage Hospitalization Reason – Sickness: 24 Hour Coverage
Benefit Amount	Employees will select a single plan of coverage on a Guaranteed Issue basis.
Underwriting Offer	Guaranteed Issue ⁴ Benefits are paid directly to the employee based on flat schedule (not reimbursement) and there is no coordination with other insurance coverage.
Waiting Period for Sickness - Hospital Admission and Confinement Benefits	None
Pre-Existing Condition Limitation	Not Included.
Complications of Pregnancy	Complications of pregnancy and emergency Cesarean section are covered.
Routine Childbirth	Routine, vaginal delivery of a child or children or delivery of a child or children by non-emergency Cesarean section are covered.
Elimination Period for Routine Childbirth	Not Included.
Mental Illness	Treatment for mental illness in a hospital or in an inpatient rehabilitation facility without prior hospitalization is covered.
Drugs & Alcohol	Treatment for alcoholism and drug addiction in a hospital or in an inpatient rehabilitation facility without prior hospitalization is covered. Injury or illness resulting from drug and alcohol misuse is covered, except driving under the influence.
Benefit Reduction Due to Age	Not Included.
Portability (continuation of insurance with premium payment)⁷	“Portability” is available through our Continuation of Insurance provision. Employees who are no longer eligible for coverage under the plan (e.g. if their employment ends or if they retire or due to their movement to a non-eligible class or, unless they become eligible for similar coverage, if the group policy ends) may continue their coverage on a MetLife direct-billed basis.
International Claims	MetLife will accept claim submissions for covered events that occur outside the United States, Canada and Mexico.

³ Ask your MetLife representative for information on other plan designs and benefits that may be available based on MetLife’s guidelines, group size, underwriting and state requirements.

⁴ 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.

⁷ Eligibility for portability through the Continued Insurance with Premium Payment provision may be subject to certain eligibility requirements and limitations. For more information, contact your MetLife representative.

Covered Benefits

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

Subcategory	Benefit Limits (Applies to Subcategory)	Benefit	Benefit Amounts
Hospital Benefits			
		Admission	\$1,000
Admission Benefit	4 time(s) per calendar year ¹	ICU Supplemental Admission (Benefit paid concurrently with the Admission benefit when a Covered Person is admitted to ICU)	\$1,000
		Confinement ⁴	\$100
Confinement Benefit	31 days per confinement ³ ICU Supplemental Confinement will pay an additional benefit for 31 of those days	ICU Supplemental Confinement (Benefit paid concurrently with the Confinement benefit when a Covered Person is admitted to ICU)	\$100
Confinement Benefit for Newborn Nursery Care	3 day(s) per confinement	Confinement Benefit for Newborn Nursery Care ⁵	\$200
Inpatient Rehabilitation Benefit	15 days per calendar year	Inpatient Rehabilitation (For Injury or Sickness)	\$200
Other Benefits			
Health Screening Benefit ⁷	1 time(s) per calendar year per covered person	Health Screening	\$50

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

¹ 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.

³ If a covered person is confined again within 90 days for the same or related sickness/injury, we will treat the subsequent confinement as a continuation of the previous confinement.

⁴ If the Admission Benefit is payable for a Confinement, the Confinement Benefit will begin to be payable the day after Admission.

⁵ Payable for the period of newborn confinement for a newborn child who is not sick or injured.

⁷ In certain states, the Health Screening Benefit is provided by MetLife Consumer Services as a separate service and is not part of the insurance coverage. This does not impact the Health Screening Benefit's availability, cost, or the way in which the service is accessed. The covered health screenings are: Routine health check-up exam (annual physical exam), biopsies for cancer, blood chemistry panel, blood test to determine total cholesterol, blood test to determine triglycerides, bone marrow testing, breast MRI, breast ultrasound, breast sonogram, cancer antigen 15-3 blood test for breast cancer (CA 15-3), cancer antigen 125 blood test for ovarian cancer (CA 125), carcinoembryonic antigen blood test for colon cancer (CEA), carotid doppler, complete blood count (CBC), chest x-rays, clinical testicular exam, colonoscopy, coronavirus testing, dental exam, digital rectal exam (DRE), Doppler screening for cancer, Doppler screening for peripheral vascular disease, Echocardiogram, electrocardiogram (EKG), electroencephalogram (EEG), endoscopy, eye exam, fasting blood glucose test, fasting plasma glucose test, flexible sigmoidoscopy, hearing test, hemocult stool specimen, hemoglobin A1C, human papillomavirus (HPV) vaccination, immunization, lipid panel, mammogram, oral cancer screening, pap smears or thin prep pap test, prostate-specific antigen (PSA) test, serum cholesterol test to determine LDL and HDL levels, serum protein electrophoresis, skin cancer biopsy, skin cancer screening, skin exam, stress test on bicycle or treadmill, successful completion of smoking cessation program, tests for sexually transmitted infections (STIs), thermography, two hour post-load plasma glucose test, ultrasounds for cancer detection, ultrasound screening of the abdominal aorta for abdominal aortic aneurysms and virtual colonoscopy.

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

Other Benefits	
Health Screening Benefit	<p>Paid one time per calendar year.</p> <p>The screening/prevention measures for which a Health Screening Benefit may be paid are: routine health check-up exam; biopsies for cancer; blood chemistry panel; blood test to determine total cholesterol; blood test to determine triglycerides; bone marrow testing; breast MRI; breast ultrasound; breast sonogram; cancer antigen 15-3 blood test for breast cancer (CA 15-3); cancer antigen 125 blood test for ovarian cancer (CA 125); carcinoembryonic antigen blood test for colon cancer (CEA); carotid doppler; chest x-rays; clinical testicular exam; colonoscopy; complete blood count (CBC); coronavirus testing; dental exam; digital rectal exam (DRE); Doppler screening for cancer; Doppler screening for peripheral vascular disease; echocardiogram; electrocardiogram (EKG); electroencephalogram (EEG); endoscopy; eye exam; fasting blood glucose test; fasting plasma glucose test; flexible sigmoidoscopy; hearing test; hemocult stool specimen; hemoglobin A1C; human papillomavirus (HPV) vaccination; immunization; lipid panel; mammogram; oral cancer screening; pap smears or thin prep pap test; prostate-specific antigen (PSA) test; serum cholesterol test to determine LDL and HDL levels; serum protein electrophoresis; skin cancer biopsy; skin cancer screening; skin exam; stress test on bicycle or treadmill; successful completion of smoking cessation program; tests for sexually transmitted infections (STIs); thermography; two hour post-load plasma glucose test; ultrasounds for cancer detection; ultrasound screening of the abdominal aorta for abdominal aortic aneurysms; or virtual colonoscopy.</p> <p>If a Health Screening Benefit is offered under your plan, please note that in certain states, it is provided by MetLife Consumer Services as a separate service and is not part of the group insurance policy. This does not impact the Health Screening Benefit's availability to your employees, total cost to you or your employees, or the way in which employees access the service. Your total cost reflects the fee for the service and there is no administrative or contractual impact to you.</p>

Connected Benefits	
MetLife Disability	<p>MetLife will proactively notify employees and may auto-adjudicate certain medical conditions when benefits may be available under MetLife Accident & Health Insurance coverages – which includes Hospital Indemnity, as well as Accident, Cancer or Critical Illness insurance if an employee also has those coverages – after filing a MetLife Group Disability claim if the employee has MetLife Group Disability Insurance. Added at no additional cost to you or your employees.</p>

MetLife AdvantagesSM	
MetLife AdvantagesSM – Services or Discounts added at no additional cost to you or your employees	<p>Digital Estate Planning¹</p> <p>As an added benefit your employees will have access to online will preparation services provided by MetLife Legal Plans to create a will, living will or a power of attorney.</p> <p>MetLife VisionAccess²</p> <p>As an added benefit your employees will have access to the MetLife VisionAccess</p>

	<p>discount program. The program provides a discount on eye exams, glasses and frames, and laser vision correction when visiting a participating private practice.</p> <p>Funeral Discount and Planning Services³</p> <p>As an added benefit your employees will have access to funeral discounts and planning services. Through Dignity Memorial, employees and family members will have access to compassionate counselors as well as discounts on funeral services through the largest network of funeral homes and cemetery providers in North America.</p>
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MetLife AdvantagesSM Disclaimers

MetLife AdvantagesSM availability may vary by state.

¹Digital Estate Planning without online notary is available to all individuals regardless of any MetLife relationship or product. It is not available for customers situated in or individuals residing in GU, PR and VI. Domestic partnerships are not currently supported. Group legal plans are provided by MetLife Legal Plans, Inc., Cleveland, OH. In certain states, group legal plans are provided through insurance coverage underwritten by Metropolitan General Insurance Company, Warwick, RI.

²MetLife Vision Access 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.

³Funeral Discount and Planning Services - Services and discounts are provided through a member of the Dignity Memorial® Network, a brand name used to identify a network of licensed funeral, cremation and cemetery providers that are affiliates of Service Corporation International (together with its affiliates, "SCI"), 1929 Allen Parkway, Houston, Texas. The online planning site is provided by SCI Shared Resources, LLC. SCI is not affiliated with MetLife, and the services provided by Dignity Memorial members are separate and apart from the insurance provided by MetLife. SCI offers planning services, expert assistance, and bereavement travel services to anyone regardless of affiliation with MetLife. Discounts through Dignity Memorial's network of funeral providers have been pre-negotiated. Not available where prohibited by law. If the group policy is issued in an approved state, the discount is available for funeral services held in any state except KY and NY, or where there is no Dignity Memorial presence (AK, MT, ND, SD, and WY). For TN, the funeral services discount is available for "At Need" services only. Not approved in FL, MD, MO, ND, NH, NJ, NY, TX, or WA.

GROUP HOSPITAL INDEMNITY INSURANCE EXCLUSIONS AND LIMITATIONS

PLEASE NOTE:

Exclusions and limitations in any policy and certificate issued will be based on the policyholder's situs state, plan design and states where employees reside. If the policyholder has employees residing in the following states, that state's Exclusions and Limitations will apply: Alaska, Arkansas, Connecticut, Louisiana, Minnesota, Mississippi, Montana, New Mexico, North Carolina, Ohio, Oklahoma, Oregon, South Carolina, Texas, Utah, Vermont, Washington, West Virginia, and Wisconsin.

How to read this section:

Exclusions appear in **bold font**. Applicable state variations are noted in *italics*.

We will not pay benefits for any loss due to an Accident or Sickness for a covered person caused or contributed to by any of the following:

IL: deleted the words "or contributed to"

- *NY: the following bullet is added: "the covered person being intoxicated"*

WA: the following sentence is added preceding the bullets below: "We will not pay benefits for any loss for a covered person caused or contributed to by:"

- **war, whether declared or undeclared; or act of war**

NC: added "(the term "war" does not include terrorist acts)"

OK: bullet revised to add the following at the end: "- this exclusion only applies to a covered person while serving in the military or an auxiliary unit attached to the military or working in an area of war whether voluntarily or as required by an employer;"

NY: bullet revised to read "war, or act of war (whether declared or undeclared)"

- **the covered person's active participation in an insurrection, rebellion, riot, or terrorist act**

CA, OR: "or terrorist act" deleted

MD: bullet deleted

MI: bullet revised to read "the covered person's active participation in an insurrection, rebellion, riot, or terrorist act if such participation constitutes the commission of a felony or other willful criminal activity;"

UT: "voluntary" added after "person's" and before "active"

NY: bullet revised to read "the covered person's participation in a felony, riot or insurrection"

- **the covered person's engagement in any activity that constitutes a felony under the laws of the jurisdiction in which the activity occurred**

CA, MD: bullet deleted

MI: bullet revised to read "the covered person's commission or attempt to commit a felony or to which a contributing cause was being engaged in an illegal occupation or other willful criminal activity"

NJ: bullet revised to read "the covered person's commission of or attempt to commit a felony or to which a contributing cause was the covered person's engagement in an illegal occupation"

UT: "engagement" deleted and replaced with "active participation"

IL: bullet revised to read "the covered person's engagement in any occupation that constitutes a felony under applicable law"

NY: bullet revised to read "the covered person's engagement in an illegal occupation"

- **dental procedures or surgery except as the result of an Accident causing Injury to a sound natural tooth**

CO: "or to reconstruct a part of the body which was disfigured or removed as a result of a Congenital Anomaly of a Dependent Child" added after "sound natural tooth"

SD: "sound natural" deleted

NY: bullet revised to read "dental procedures or surgery except as the result of an accident causing Injury to a sound natural tooth"

- **cosmetic surgery, except when such surgery is performed to:**

NY: bullet and all 3 sub-bullets deleted and replaced with “cosmetic surgery, except when such surgery is performed to reconstruct a part of the body which was disfigured or removed as a result of an injury or sickness”

- **treat an Injury or Sickness;**
CO: New sub-bullet added after treat an Injury or Sickness;”. “Reconstruct a part of the body which was disfigured or removed as a result of a Congenital Anomaly of a Dependent Child;”
NC: “or congenital anomaly” added after “Sickness”
- **correct a disorder of normal bodily function or structure that was caused by an Injury or Sickness for which coverage is not otherwise excluded under the certificate; or**
NC: “or congenital anomaly” added after “Sickness”
- **reconstruct a part of the body which was disfigured or removed as a result of an Injury or Sickness for which coverage is not otherwise excluded under the certificate**
ID: “a trauma, infection or other disease that results from” added after “result of” and before “an Injury”.
The following is added as a bulleted item when children are eligible for coverage “reconstruct a part of the body which was disfigured or removed as a result of congenital disease or congenital anomaly of a dependent child”
NC: “or congenital anomaly” added after “Sickness”
- **activities required by the covered person’s service in the armed forces or any auxiliary unit of the armed forces of any country or international authority**
FL: bullet revised to read “activities required by the covered person to carry out the duties and responsibilities of their service in the armed forces or any auxiliary unit of the armed forces of any country or international authority”
NY: bullet revised to read “the covered person’s service in the armed forces or any auxiliary unit of the armed forces”

In addition, We will not pay benefits for:

MD: the following bullet is added: “any claim for health care services that the appropriate regulatory board determines were provided as a result of a prohibited referral under § 1-302 of the Health Occupations Article

- **a covered person while incarcerated in any type of penal or detention facility**

ID, LA, MO, NH, NY: bullet deleted

CA: the following two exclusions are added:

INTOXICANTS AND CONTROLLED SUBSTANCES

We shall not be liable for any loss sustained or contracted in consequence of the Covered Person’s being intoxicated or under the influence of any controlled substance unless administered on the advice of a Physician.

ILLEGAL OCCUPATION OR COMMISSION OF A FELONY

We shall not be liable for any loss to which a contributing cause was the commission of or attempt to commit a felony by the Covered Person whose injury or sickness is the basis of claim, or to which a contributing cause was such Covered Person’s being engaged in an illegal occupation.

The following additional exclusions apply to payment of benefits for any loss due to an Accident:

We will not pay benefits for any loss due to an Accident for a covered person caused or contributed to by any of the following:

IL: deleted the words “or contributed to”

- **the covered person’s operation, while intoxicated, of a motor vehicle involved in the incident. For purposes of this exclusion:**
CA, MD, SD, WA: bullet and two sub-bullets deleted
NV: added before the word “operation” in the above bullet: “commission of or attempt to commit a felony at the time of the accident, which involves the”
NY: bullet and two sub-bullets deleted

- **intoxicated means that the covered person's blood alcohol level met or exceeded .08%; and**
IL: bullet revised to read "intoxicated means that which is defined and determined by the laws of the jurisdiction where the loss or cause of the loss was incurred and the covered person's blood alcohol level meets or exceeds .08%"
- **motor vehicle means any vehicle that is powered by a motor, including, but not limited to: an automobile; a boat; a motorcycle; a truck; an all-terrain vehicle; or a snow mobile**
KY: "including, but not limited to: an automobile; a boat, a motorcycle; a truck; an all terrain vehicle; or a snow mobile" deleted
NH: sub-bullet deleted
- **the covered person's travel or flight in any aircraft except as a fare-paying passenger on a regularly scheduled charter or commercial flight**
NY: bullet revised to read "we will not pay benefits for any loss due to an accident for a covered person caused or contributed to by aviation, other than as a fare-paying passenger on a scheduled or chartered flight operated by a scheduled airline"
- **the covered person parachuting or otherwise exiting from a motorized or non-motorized aircraft while such aircraft is in flight, except for self-preservation**
ID: "if acting in a professional capacity" added at the beginning of this bulleted item
NH, NY: bullet deleted
- **the covered person riding in or driving any motor-driven vehicle in a race, stunt show or speed test**
CT, MN: "in a professional capacity" added after "driving" and before "any"
NE: bullet revised to read "the covered person riding in or driving any motor-driven vehicle in an organized race, stunt show or speed test"
NH: "in a professional capacity" added after "speed test"
NY: bullet deleted
OR: bullet deleted
- **the covered person participating in any semi-professional or professional competitive athletic activity for which any type of compensation or remuneration is received**
NH: "semi-professional or" deleted
NY, SD: bullet deleted
- **the covered person bungee jumping, base jumping, hang gliding, para-kiting, sail-gliding, scuba diving deeper than 130 feet; spelunking; or mountaineering including rock climbing using ropes and any other climbing equipment for the purposes of this exclusion the term mountaineering does not include backpacking, mountain biking, hiking or trail running**
NH, NY, OR: bullet deleted

General Disclaimer:

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 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.

Some services in connection with the coverage may be performed by our affiliate, MetLife Services and Solutions, LLC or by Transaction Applications Group, Inc. a wholly owned subsidiary of NTT Data Services, LLC. These service arrangements in no way alter Metropolitan Life Insurance Company's obligations. Coverage will continue to be administered in accordance with Metropolitan Life Insurance Company's policies and procedures.

Metropolitan Life Insurance Company

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