Why is having hospital indemnity insurance important?

Hospital stays are costly and are often unexpected. Since most health care plans don’t cover all of your expenses, you need to take steps to help protect yourself and your savings.

With an average cost of $10,000 per hospital stay in the U.S.,¹ it’s easy to see why having hospital indemnity insurance may make good financial sense. Just think about the possibility of having a hospital stay due to an accident or illness:

- Your child gets hurt on the school playground
- You experience chest pains while exercising and are admitted to the hospital to be checked and monitored
- Your spouse² undergoes an emergency appendectomy

With an average cost of $10,000 per hospital stay in the U.S.,¹ it’s easy to see why having hospital indemnity insurance may make good financial sense.

Even the best medical plans may leave you with extra expenses to pay out of your own pocket.

A hospital stay can require a variety of treatments, tests, therapies and other care and services to assist in recovery. Each of these services may mean extra out-of-pocket costs for you to pay, beyond what your medical plan may cover, including medical plan deductibles and copayments, and extra expenses associated with out-of-network care and treatment.

Other household expenses may be harder to cover due to lost or reduced income, like your mortgage, car payment, child care or household upkeep while you recover.

Hospital indemnity insurance can help you be better prepared by providing you with a payment to use as you see fit if you experience a covered event and meet the policy and certificate requirements. Typically a flat amount is paid for hospital admission and a per-day amount is paid for each day of a covered hospital stay, from the very first day of your stay. This payment can help you focus more on getting back on track and less on the extra expenses an accident or illness may bring.
How can having MetLife Hospital Indemnity Insurance benefit you?

Access to benefits for hospitalization due to accidents and sicknesses:

- Admission to a hospital
- Hospital stays
- Admission to an Intensive Care Unit
- Intensive Care Unit stays
- Inpatient Rehab Unit stays (accidents only)

Actual plan design and plan benefits may vary. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details on the coverage types, amounts and premium options under your plan.


2. Coverage for domestic partners, civil union partners and reciprocal beneficiaries varies by state. Please contact MetLife for more information.

3. 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 in the Certificate. Some states require the insured to have medical coverage. Additional restrictions apply to dependents serving in the armed forces or living overseas.

4. There is a pre-existing exclusion for covered sicknesses. Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

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. There is a preexisting condition limitation for hospital sickness benefits. MetLife's Hospital Indemnity Insurance may be subject to benefit reductions that begin at age 65. And, 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 or GPNP13-HI 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.
Accident insurance: why is it important?

Accidents can happen when you least expect them. And while you can’t always prevent them, you can get help to make your recovery less expensive and stressful.

In the U.S. in 2013, there were more than 37 million trips to the emergency room due to injuries. In fact, ER bills average around $1,233 a visit, and even seemingly small injuries can come with unexpectedly high hospital bills.

You may be thinking—that’s why I have health insurance. But even the best medical plans may leave you with unexpected expenses like deductibles, copays, extra costs for out-of-network care, and non-covered services.

You can’t plan for accidents, but you can handle them better by being financially prepared.

How it works

Accident insurance provides a financial cushion for life’s unexpected events by helping you pay for costs that aren’t covered by your medical plan. It provides you with a lump-sum payment—one convenient payment all at once—when you or your family need it most. The extra cash can help you focus on getting back on track, without worrying about finding the money to help cover the costs of treatment.

And best of all, the payment is made directly to you, and is in addition to any other insurance you may have. It’s yours to spend however you like, including for your or your family’s everyday living expenses.

Whatever you need while recovering from an accident or injury, accident insurance is there to make life a little easier.

With MetLife Accident Insurance, you can take your coverage with you if you change jobs or retire.
Accident insurance helps you manage expenses—so you can focus on getting well.

Our accident insurance is designed to cover a wide array of events, medical services, and treatments.

This plan provides a lump-sum payment for over 150 different covered events, such as:

- Fractures
- Dislocations
- Second and third degree burns
- Skin grafts
- Torn knee cartilage
- Ruptured disc
- Concussions
- Cuts or lacerations
- Eye injuries
- Coma
- Broken teeth

You’ll receive a lump-sum payment when you have these covered medical services or treatments:

- Ambulance
- Emergency care
- Inpatient surgery
- Outpatient surgery
- Medical Testing Benefits (including X-rays, MRIs, CT scans)
- Physician follow-up visits
- Transportation
- Home modifications
- Therapy services (including physical and occupational therapy, speech therapy)

This plan provides protection 24 hours a day — while on or off the job. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details on your coverage.

3. 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.
4. 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 apply to dependents serving in the armed forces or living overseas.
5. Chip fractures are paid at 25% of Fracture Benefit and partial dislocations are paid at 25% of Dislocation Benefit.
6. Covered services/treatments must be the result of a covered accident as defined in the group policy/certificate. See your Disclosure Statement or Outline of Coverage/Disclosure Document for more details.

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 is a preexisting condition limitation for hospital sickness benefits, if applicable. MetLife’s Accident Insurance may be subject to benefit reductions that begin at age 65. And, 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 or contact MetLife. Benefits are underwritten by Metropolitan Life Insurance Company, New York, New York.
Why is having critical illness insurance so important?

Your family's expenses will continue if and when a critical illness occurs.

Studies show that some families spend as much as $14,444 or more during a time of critical illness and recovery. And while financial experts recommend having 3–9 months of living expenses set aside to help in an emergency situation like undergoing a serious illness, with today's economy, most families don't have that kind of money in reserve.

Quality health and disability income insurance plans aren't always enough. There may still be coverage gaps. Disability income plans cover a portion of your income while health insurance may leave you with some expenses to pay including:

- Health plan deductibles
- Prescription copays
- Out-of-network treatments
- Alternative treatments

Critical illnesses can happen at any age and more often than you may think.

The odds of you or a family member suffering a critical illness are actually quite surprising. Studies have shown:

- The average age for onset of a critical illness is 43.³
- Every year about 735,000 Americans have a heart attack.⁴
- 1 out of every 2 men will be diagnosed with cancer at some point in their lives.⁵
- 1 out of every 3 women will be diagnosed with cancer at some point in their lives.⁵

Critical illness insurance can help safeguard your finances by providing you with a lump-sum payment when your family needs it most. The payment you receive is yours to spend as you see fit and in addition to any other insurance you may have.

How can having MetLife Critical Illness Insurance benefit you and your loved ones?

MetLife Critical Illness Insurance provides a lump-sum payment if you or a covered family member is diagnosed with one of the following medical conditions and meets the policy and certificate requirements:

Full Benefit Cancer,⁷ Partial Benefit Cancer,⁷ All Other Cancer,⁷ Heart Attack, Stroke,⁸ Coronary Artery Bypass Graft,⁹ Kidney Failure, Alzheimer's disease,¹⁰ Major Organ Transplant and the 22 Listed Conditions.¹¹ Your plan pays a Recurrence Benefit for the following Covered Conditions: Heart Attack, Stroke, Coronary Artery Bypass Graft, Full Benefit Cancer, Partial Benefit Cancer and All Other Cancer. A Recurrence Benefit is only available if an Initial Benefit has been paid for the Covered Condition. There is a Benefit Suspension Period between Recurrences.¹²

Payments will be made directly to you, not to the doctors, hospitals or other health care providers. You will receive a check mailed directly to your home. The payment you receive is yours to spend as you see fit and may be used to cover ongoing household bills like:

- Groceries
- Mortgage and car payments
- Child care
- Or any other way you want; the choice is yours

Help protect yourself, your family, and your budget from the financial impact of a critical illness.
6. Eligible Family Members may not all persons eligible for coverage as defined in the Certificate.
7. Please review the Disclosure Statement or Outline of Coverage for specific information about cancer benefits. Not all types of cancer are covered. Some cancers are covered at less than the Initial Benefit Amount. For NH insured groups and NH residents, there is an initial benefit of $100 for All Other Cancer.
8. In certain states, the Covered Condition is Severe Stroke.
9. In NJ insured cases, the Covered Condition is Coronary Artery Disease.
10. Please review the Outline of Coverage for specific information about Alzheimer's disease.
11. MetLife Critical Illness Insurance will pay 25% of the Initial Benefit Amount when a covered person is diagnosed with one of the 22 Listed Conditions. A Covered Person may only receive one benefit payment of a Listed Condition in his/her lifetime. The Listed Conditions are: Addison's disease (adrenal hypofunction); amyotrophic lateral sclerosis (Lou Gehrig's disease); cerebrospinal meningitis (bacterial); cerebral palsy, cystic fibrosis, diphtheria, encephalitis; Huntington's disease (Huntington's chorea); Legionnaire's disease; malnutrition; multiple sclerosis (definitive diagnosis); muscular dystrophy; myasthenia gravis; necrotizing fasciitis; osteomyelitis; poliomyelitis; rabies; sickle cell anemia (excluding sickle cell trait); systemic lupus erythematosus (SLE); systemic sclerosis (scleroderma); tetanus; and tuberculosis.
12. We will not pay a Recurrence Benefit for a Covered Condition that recurs during a Benefit Suspension Period.
13. We will not pay a Recurrence Benefit for either a Full Benefit Cancer or Partial Benefit Cancer unless the Covered Person has not had symptoms of or been treated for the Full Benefit Cancer or Partial Benefit Cancer for which we paid an Initial Benefit during the Benefit Suspension Period.
14. Coverage is guaranteed provided (1) the employee is actively at work and (2) any dependents to be covered are not under medical restrictions as described in the Certificate. Some states require the insured to have medical coverage. Additional restrictions apply to dependents serving in the Armed Forces or living overseas. For CA insured cases, coverage is guaranteed provided (1) the employee is performing all of the usual and customary duties of his or her position at the employer's place of business or at an alternate place approved by your employer (2) dependents are not subject to medical restrictions as set forth on the enrollment form and in the Certificate.
15. The plan is guaranteed renewable, and may not be canceled due to an increase in your age or a change in your health. Premium rates can only be raised as the result of a rate change made on a class-wide basis. Benefit reductions by 25% at age 65 and 50% at age 70. Coverage is guaranteed renewable provided: (1) premiums are paid as required under the Certificate; and (2) in a situation where the Group Policy ends, it is not replaced by a substantially similar critical illness policy as described in the Certificate.
16. 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'S 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 may vary by state. In most plans, there is a pre-existing condition exclusion. For individuals other than those covered under a New York certificate, after a covered condition occurs there is a benefit suspension period during which benefits will not be paid for a recurrence. MetLife's Issue Age CII is guaranteed renewable, and may be subject to benefit reductions that begin at age 65. Premium rates for MetLife's Issue Age CII are based on age at the time of the initial coverage effective date and will not increase due to age. Premium rates for in coverage, including the addition of dependents' coverage, if applicable, will be based on the covered person's age at the time of that increase's effective date. Rates are subject to change for MetLife's Issue Age CII on a class-wide basis. A more detailed description of the benefits, limitations, and exclusions 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 GPNP14-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.

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