

**Cancer Insurance**

**Ennis ISD**

**COVERAGE OPTIONS**

**Cancer Insurance**

Eligible Individual	Initial Benefit	Requirements
Employee	<b>\$10,000 to \$60,000 (\$10,000 increments)</b>	Coverage is guaranteed provided you are actively at work. <sup>1</sup>
Spouse/Domestic Partner <sup>2</sup>	<b>50% of the Employee’s Initial Benefit</b>	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>	<b>50% of the Employee’s Initial Benefit</b>	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. <sup>1</sup>

**BENEFIT PAYMENT**

Your **Initial Benefit** provides a lump-sum benefit if you or a covered family member has a verified diagnosis of a covered cancer<sup>4</sup> or a recurrence of cancer,<sup>5</sup> providing those covered meet the policy and certificate requirements. 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. Initial Benefits and Recurrence Benefits will be paid until the Total Benefit Amount has been reached.

This Cancer Insurance coverage provides a lump sum benefit for:

- ✓ Full Benefit Cancer—All forms of advanced cancers are covered and may qualify for full benefits (as defined by the group policy or certificate).
- ✓ Partial Benefit Cancer—Most forms of early stage cancers are covered and may qualify for partial benefits (as defined by the group policy or certificate).
- ✓ Additional Benefits—A health screening benefit is also available as a part of the MetLife Cancer plan.<sup>6</sup>

The maximum amount that you can receive through your Cancer Insurance plan is called the Total Benefit and is 2 times the amount of your Initial Benefit. This means that you can receive multiple Initial Benefit and Recurrence Benefit payments until you reach the maximum of 200% or \$30,000 or \$60,000.



## Cancer Insurance

Please refer to the table below for the percentage benefit amount for each Covered Condition.

Covered Cancers	Initial Benefit	Recurrence Benefit
Full Benefit Cancer	100% of Initial Benefit	50% of Initial Benefit
Partial Benefit Cancer	25% of Initial Benefit	12.5% of Initial Benefit

### Example of Initial & Recurrence Benefit Payments

The example below illustrates an employee who elected an Initial Benefit of \$15,000 and has a Total Benefit of 2 times the Initial Benefit Amount or \$30,000.

Illnesses - Covered Condition	Payment	Total Benefit Remaining
Full Benefit Cancer (leukemia) – first verified diagnosis	Initial Benefit payment of \$15,000 or 100%.	\$15,000
Full Benefit Cancer (leukemia) – second verified diagnosis, three years later	Recurrence Benefit payment of \$15,000 or 50%	\$0

This example is for illustrative purposes only. The MetLife Critical Illness Insurance 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.

In most states there is a pre-existing condition limitation. If advice, treatment or care was sought, recommended, prescribed or received during the twelve months prior to the effective date of coverage, we will not pay benefits if the covered condition occurs during the first twelve months of coverage.

### Health Screening Benefit<sup>6</sup>

MetLife will provide an annual benefit of \$50 per calendar year for taking one of the eligible screening/prevention measures. MetLife will pay only one health screening benefit per covered person per calendar year.

## QUESTIONS & ANSWERS

### Q. How do I enroll?

A. Enroll for coverage at mybenefits website / <https://www.ennis.k12.tx.us/Page/4067>

### Q. Who is eligible to enroll?

A. Regular active full-time employees who are actively at work along with their spouse/domestic partner and dependent children can enroll for MetLife Critical Illness Insurance coverage.<sup>1</sup>

### Q. How do I pay for coverage?

A. Coverage is paid through payroll deduction.

### Q. Will my rates increase?

A. Your premium is based on your Issue Age, meaning your initial rate is based on your age at the time your coverage becomes effective and your rates will not increase due to age.<sup>7</sup>

### Q. What is the coverage effective date?

A. The coverage effective date is 06/01/2019.

### Q. If I Leave the Company, Can I Keep My Coverage?<sup>8</sup>

A. Under certain circumstances, you can take your coverage with you if you leave. You must make a request in writing within a specified period after you leave your employer. You must also continue to pay premiums to keep the coverage in force.

### 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.

## Cancer Insurance

### CANCER INSURANCE RATES

#### Premium Structure

Monthly Premium for \$1,000 of Coverage (Non-Tobacco)

Issue Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse / Children
<25	\$0.41	\$0.64	\$0.63	\$0.86
25–29	\$0.41	\$0.65	\$0.63	\$0.87
30–34	\$0.48	\$0.75	\$0.70	\$0.97
35–39	\$0.53	\$0.84	\$0.75	\$1.06
40–44	\$0.66	\$1.07	\$0.88	\$1.28
45–49	\$0.87	\$1.42	\$1.09	\$1.64
50–54	\$1.10	\$1.84	\$1.32	\$2.05
55–59	\$1.35	\$2.28	\$1.57	\$2.49
60–64	\$1.57	\$2.69	\$1.79	\$2.90
65–69	\$1.75	\$3.06	\$1.97	\$3.28
70+	\$2.05	\$3.56	\$2.27	\$3.78

*\*Multiply the per \$1,000 rates shown above by the benefit amount divided by \$1,000 (e.g., 15 for \$15,000 of coverage) and round to two decimals to calculate rates for the quoted benefit amounts. Note that the per \$1,000 rates are only applicable to the benefit amounts shown in this C&B. Final implemented rates may vary slightly due to rounding.*

## Cancer Insurance

### Monthly Premium for \$1,000 of Coverage (Tobacco)

Issue Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse / Children
<25	\$0.69	\$1.03	\$0.91	\$1.25
25–29	\$0.69	\$1.05	\$0.91	\$1.27
30–34	\$0.84	\$1.25	\$1.06	\$1.47
35–39	\$0.93	\$1.42	\$1.15	\$1.64
40–44	\$1.18	\$1.86	\$1.40	\$2.08
45–49	\$1.59	\$2.56	\$1.81	\$2.77
50–54	\$2.05	\$3.37	\$2.27	\$3.59
55–59	\$2.54	\$4.25	\$2.76	\$4.47
60–64	\$2.99	\$5.08	\$3.21	\$5.30
65–69	\$3.37	\$5.86	\$3.59	\$6.08
70+	\$3.97	\$6.85	\$4.19	\$7.07

Rates are based on 5-year age bands and will increase when a Covered Person reaches a new age band. Rates are subject to change. Please refer to the Disclosure Statement or Outline of Coverage/Disclosure Document for more information including the exclusions and limitations which apply to coverage.

<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. Additional restrictions apply to dependents serving in the armed forces or living overseas. MetLife will not pay a benefit for a covered cancer that is diagnosed prior to the coverage effective date.

<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> Please review the Disclosure Statement or Outline of Coverage/Disclosure Document 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-sitused groups and NH residents, there is an initial benefit of \$100 for All Other Cancer.

<sup>5</sup> There is a Benefit Suspension Period between Recurrences. We will not pay a Recurrence Benefit for a Covered Condition that Recurs during a Benefit Suspension Period. We will not pay a Recurrence Benefit for a Full Benefit Cancer, a Partial Benefit Cancer or an All Other Cancer unless the Covered Person has not had symptoms of or been treated for the Full Benefit Cancer, Partial Benefit Cancer or All Other Cancer (applicable to NH-sitused groups and NH residents) for which we paid an Initial Benefit during the Treatment Free Period.

<sup>6</sup> The Health Screening Benefit is not available in certain states. In some states, there is a separate mammogram benefit. Please review your Disclosure Statement or Outline of Coverage/Disclosure Document for specific state variations and exclusions around this benefit.

<sup>7</sup> The plan is guaranteed renewable, coverage 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. The plan may include a Benefit Reduction Due to Age provision. 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.

<sup>8</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.

**The MetLife Cancer Insurance plan is based on the MetLife Critical Illness Insurance (CII) policy. MetLife Cancer Insurance includes only the Covered Conditions of Full Benefit Cancer and Partial Benefit Cancer.**

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, GPNP09-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.

