

Benefits that may help cover costs such as those not covered by your medical plan.

To learn more, please contact a benefit counselor at the following dedicated toll-free number for City of Cleveland employees:

(877) 262-1936

Accident Insurance Benefits

With MetLife, you'll have a plan that provides payments in addition to any other insurance payments you may receive¹. Here are just some of the covered events/services².

Benefit Type	Plan Benefits
Accidental Injury Benefits	
Fracture Benefit*	\$200 – \$10,000 depending on the fracture and type of repair
Dislocation Benefit*	\$200 – \$10,000 depending on the dislocation and type of repair
Second or Third Degree Burn Benefit	\$100 – \$15,000 depending on the degree of the burn and the percentage of burnt skin
Concussion Benefit	\$200
Coma Benefit	\$10,000
Laceration Benefit	\$50 – \$400 depending on the length of the cut and type of repair
Puncture Wound Benefit	\$250
Broken Tooth Benefit	Crown: \$300 Filling: \$50 Extraction: \$75
Eye Injury Benefit	\$400
Occupational Exposure to Hepatitis or HIV Benefit	Preliminary Benefit: \$250
	Confirmed Diagnosis Benefit: \$5,000
Accident - Medical Services & Treatment Benefits	
Ambulance Benefit	Ground: \$200 Air: \$1,000
Emergency Care Benefit	\$100 – \$200 depending on location of care
Non-Emergency Initial Care Benefit	\$100
Physician Follow-Up Visit Benefit	\$50
Therapy Services Benefit	\$35
(including physical therapy)	φου
Medical Testing Benefit	X-rays: \$40 All other tests: \$200
Medical Appliance Benefit	\$150 – \$500 depending on the appliance
Transportation Benefit	\$500
Pain Management Benefit	¢100
(for epidural anesthesia)	\$100
Prosthetic Device Benefit	One device: \$500
	More than one device: \$1,000
Modification Benefit	\$2,500



Blood/Plasma/Platelets Benefit	\$300	
Surgical Repair Benefit	\$200 – \$4,000 depending on the type of surgery	
Exploratory Surgery Benefit	\$200	
Other Outpatient Surgery Benefit	\$400	
Hospital Benefits		
Admission Benefit	\$1,000 for the day of admission	
ICU Supplemental Admission Benefit	\$1,000 for the day of admission	
Confinement Benefit (paid for up to 365 days per accident)	\$250 per day	
ICU Supplemental Confinement Benefit (paid for up to 15 days per accident)	\$250 per day	
Inpatient Rehabilitation Benefit		
(paid for up to 15 days per accident)	\$100 per day	
Accidental Death Benefit		
Accidental Death Benefit*	\$5,000 – \$25,000 \$5,000 – \$25,000 for accidental death on common carrier	
Accidental Dismemberment, Functional Loss & Paralysis Benefits		
Dismemberment/Functional Loss	\$1,000 – \$30,000 depending on the injury	
Paralysis	\$15,000 – \$30,000 depending on the number of limbs	
Other Benefits		
Health Screening Benefit* -	\$100	
benefit provided for certain screening/prevention tests	Paid 1 time per calendar year	
Lodging Benefit* - for a companion of a covered person who is hospitalized	\$125 per day	
Waiver of Premium Benefit – if you become disabled, premiums will be waived if requirements for waiver are met	Not Included	

Organized Sports Activity Injury Benefit Rider

This coverage includes an Organized Sports Activity Benefit Rider. The rider increases the amount payable under the Certificate for certain benefits by 25% for injuries resulting from an accident that occurred while participating as a player in an organized sports activity. The rider sets forth terms, conditions, and limitations, including the covered persons to whom the rider applies.

* Notes Regarding Certain Benefits

- Fracture and Dislocation benefits Chip fractures are paid at 25% of the applicable fracture benefit and partial dislocations are paid at 25% of the applicable dislocation benefit.
- Accidental Death Benefit The benefit amount will be reduced by the amount of any accidental dismemberment/functional loss/paralysis benefits and modification benefit paid for injuries sustained by the covered person in the same accident for which the accidental death benefit is being paid.
- Accidental Death Benefit Common carrier refers to airplanes, trains, buses, trolleys, subways and boats.
- Health Screening Benefit The Health Screening Benefit is not available in all states. In some states, the list of eligible screening/prevention
 measures may be limited, and the benefit may be referred to as the Accident Prevention Screening Benefit.
- Lodging Benefit The lodging must be at least 50 miles from the insured's primary residence.



Benefit Payment Example

Kathy's daughter, Molly, was riding her bike to school. On her way there she fell to the ground, was knocked unconscious, and was taken to the local emergency room (ER) by ambulance for treatment. The ER doctor diagnosed a concussion and a broken tooth. He ordered a CT scan to check for facial fractures too, since Molly's face was very swollen. Molly was released to her primary care physician for follow-up treatment, and her dentist repaired her broken tooth with a crown. Depending on her health insurance, Kathy's out-of-pocket costs could run into hundreds of dollars to cover expenses like insurance co-payments and deductibles. MetLife Group Accident Insurance payments can be used to help cover these unexpected costs.

Covered Event ³	Benefit Amount
Ambulance (ground)	\$200
Emergency Care	\$200
Physician Follow-Up (\$50 x 2)	\$100
Medical Testing	\$200
Concussion	\$200
Broken Tooth (repaired by crown)	\$300
Benefits paid by MetLife Group Accident Insurance	\$1,200

Benefit amount is based on a sample MetLife plan design. Actual plan design and benefits may vary.

Rates

Туре	Semi-Monthly (24)
Employee Only	\$8.00
Employee + Spouse	\$12.56
Employee + Children	\$19.94
Employee + Spouse and Children	\$24.5 1

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.

Questions & Answers

- Q. Who is eligible to enroll for this accident coverage?
- A. You are eligible to enroll yourself and your eligible family members!⁴ You need to enroll during your Enrollment Period and to be actively at work for your coverage to be effective.
- Q. How do I pay for my accident coverage?
- A. Premiums will be paid through payroll deduction, so you don't have to worry about writing a check or missing a payment.
- Q. What happens if my employment status changes? Can I take my coverage with me?
- A. Yes, you can take your coverage with you.⁵ You will need to continue to pay your premiums to keep your coverage in force. Your coverage will only end if you stop paying your premium or if your employer offers you similar coverage with a different insurance carrier.
- 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. Or visit our website: mybenefits.metlife.com.
- Q. How can I enroll for coverage?
- A. To learn more, please contact a benefit counselor at the following dedicated toll-free number for City of Cleveland employees: (877) 262-1936.



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. Like most group accident and health insurance policies, policies offered by MetLife may include waiting periods and 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, NY. Hospital does not include certain facilities such as nursing homes, convalescent care, or extended care facilities. See MetLife's Disclosure Statement or Outline of Coverage/Disclosure Document for full details.



¹ Covered services/treatments must be the result of a covered accident or sickness as defined in the group policy/certificate. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

Availability of benefits varies by state. See your Disclosure Statement or Outline of Coverage/Disclosure Document for state variations.
 Benefits and amounts are based on sample MetLife plan design. Plan design and plan benefits may vary.
 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. Children may be covered to age 26. There are benefit reductions that may begin at

⁵ 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.