

This is a new benefit and requires enrollment.

# Critical Illness



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## NEW FOR 2009

NCFlex is now offering Critical Illness Insurance. The insurance is administered by MetLife and complements your existing medical coverage, but does not replace it. The coverage pays a lump-sum payment when a covered person experiences a covered condition. You may use the lump-sum payment as you see fit to help keep your finances on track if you experience a covered condition.

## COVERAGE

NCFlex Critical Illness Insurance covers the following conditions and groups them into three distinct categories (as defined by the group certificate):

- Category 1 incorporates certain **cancer**-related conditions
  - cancer
  - bone marrow transplant
- Category 2 incorporates certain **heart**-related conditions
  - heart attack
  - stroke+ (see page 22)
  - Coronary artery bypass graft\* (see page 22)
  - heart transplant
- Category 3 incorporates certain **other** conditions
  - major organ transplant (other than bone marrow and heart)
  - kidney failure

You have the choice of enrolling you, your spouse and child(ren) for a category benefit amount of \$15,000 in coverage.

The following are your coverage options:

- Employee Only
- Employee + Spouse
- Employee + Child(ren)
- Employee + Family

## ELIGIBLE DEPENDENT

**You must enroll to receive coverage for your dependents. Eligible dependents include your spouse or unmarried dependent child(ren) up to age 19, or if enrolled as a full-time student, up to age 26. Verification of full-time student status will be required once a year. If you and your spouse are both eligible to elect this coverage as state agency, university, or select community college employees, you both may elect to participate as employees, but only one may enroll for employee and family coverage. An employee may NOT be covered as both an employee and a dependent. For more information on dependent eligibility refer to the "2009 Dependent Eligibility" section.**

## MONTHLY COST AND COVERAGE

Employee and Spouse Age as of 1/1/09	Monthly Rates for \$15,000 of Coverage
<25	\$1.65
25 – 29	\$1.95
30 – 34	\$3.30
35 – 39	\$5.70
40 – 44	\$10.05
45 – 49	\$17.85
50 – 54	\$28.65
55 – 59	\$44.85
60 – 64	\$68.10
65 – 69	\$103.50
70 – 74	\$149.85
75 – 79	\$212.25
80 – 84	\$266.40
85+	\$286.20

Dependent Child(ren) (All Ages)	Monthly Rates for \$15,000 of Coverage
Employee pays one flat rate no matter how many dependent child(ren)  Each child is covered for \$15,000 of coverage	\$1.04

## CALCULATING YOUR COST

**Calculate your and your spouse's ages as of 01/01/2009. For example: If you elect family coverage and you are 43 years old, monthly premium would be \$10.05, your spouse's age is 39 years old, monthly premium would be \$5.70 and you have 3 children with varying ages, premium would be \$1.04. Your total monthly premium would be \$16.79.**

**Rates are based on five-year age bands and will increase when a covered person reaches a new age band. Be sure to visit [www.ncflex.org](http://www.ncflex.org) to read the Disclosure Statement for details.**

## SUMMARY OF BENEFITS

Category 1: Cancer-Related	Category 2: Heart-Related	Category 3: Other Conditions
Full Benefit Cancer	Heart Attack	Major Organ Transplant (other than bone marrow and heart)
Partial Benefit Cancer*	Stroke+	Kidney Failure
Bone Marrow Transplant	Coronary Artery Bypass Graft*	
	Heart Transplant	

## HOW BENEFITS ARE PAID

If you are diagnosed with a covered condition in any of the three categories (cancer, heart, or other) and meet the policy and certificate requirements, **you can receive a lump-sum benefit payment up to \$15,000.** The maximum you can receive in any one category is \$15,000. The maximum you can receive across all three categories is \$45,000.

To receive a 100% category benefit amount of \$15,000, you would need to be diagnosed with any of the following covered conditions:

- Full Benefit Cancer – Cancer that is invasive with metastasis (spread to other parts of the body) is usually determined to be Full Benefit Cancer\*
- Bone Marrow Transplant
- Stroke
- Major Organ Transplant
- Heart Attack
- Heart Transplant
- Kidney Failure

To receive a 25% category benefit amount of \$3,750, you would need to be diagnosed with any of the following covered conditions:

- Partial Benefit Cancer – Cancer that is localized (and has not spread to other parts of the body) is usually determined to be Partial Benefit Cancer\*
- Coronary Artery Bypass Graft\*

## BENEFITS PAYMENT EXAMPLE

The following is a payment example for anyone (employee, spouse or child(ren)) who elects the \$15,000 category benefit amount where all group policy and certificate requirements for coverage have been met:

Diagnosed Covered Condition	Category Impacted	Lump-sum Benefit Payment Received	Category 1: Cancer Remaining Benefit	Category 2: Heart Remaining Benefit	Category 3: Other Remaining Benefit
You are diagnosed as having lung cancer	Category 1: Cancer	<b>\$15,000</b>	\$0	\$15,000	\$15,000
Two years later, you have a coronary artery bypass graft	Category 2: Heart	<b>\$3,750</b>	\$0	\$11,250	\$15,000
The following year, you suffer a debilitating stroke	Category 2: Heart	<b>\$11,250</b>	\$0	\$0	\$15,000
Three years later, you have kidney failure	Category 3: Other	<b>\$15,000</b>	\$0	\$0	\$0
		<b>Total = \$45,000</b>			

The above example illustrates that during the life of the Critical Illness Insurance certificate with a category benefit amount of \$15,000, it is possible to receive a total of \$45,000. This is the maximum amount you could get under a certificate with a \$15,000 category benefit amount. Once you have exhausted 100% of the category benefit amount in each of the three categories, which equals \$45,000, the coverage is terminated and your payroll deduction will stop.

The lump-sum benefit payment works like this based on a \$15,000 category benefit amount:

- For all covered conditions except Coronary Artery Bypass Graft and Partial Benefit Cancer, you would receive 100% of the category benefit amount which is \$15,000. If you had already received a \$3,750 payment for Coronary Artery Bypass Graft or Partial benefit Cancer, you would only receive the remaining \$11,250\*\* if you experience another covered condition in the same category.
- After \$15,000 has been paid in any category, that category will close and you will not receive additional payments for any other covered conditions within that category for your lifetime.
- Once a \$15,000 category benefit amount has been paid in each of the three categories for a total of \$45,000, the coverage is terminated and your payroll deduction will stop.

*+In certain instances, the covered condition is severe stroke.*

*\*For some types of cancer and a coronary artery bypass graft, you will receive 25% of the category benefit amount. The remaining 75% is available within that category should the covered individual experience another one of the covered conditions in that category while the certificate is in force. For more information on the covered condition definitions, please go to [www.ncflex.org](http://www.ncflex.org) and review the Disclosure Document or your individual Certificate.*

*\*\*There is a 180-day benefit suspension period between diagnosed conditions in different Categories. The benefit suspension period starts when a covered condition occurs. The benefit suspension period does not apply within categories. MetLife will not pay a benefit for another covered condition that occurs during this period if it is in a different category. If a covered condition first occurs during the benefit suspension period, the next occurrence of the covered condition will be treated as a first occurrence.*

**DID YOU KNOW...**

**Market research indicates that 75% of the costs of experiencing cancer, a heart attack, or a stroke are non-medical related expenses.** Internal MetLife Marketing Research Study, December 2006

**EVIDENCE OF INSURABILITY (EOI)**

EOI is a way of providing proof of good health. It is an evaluation of your current health status, medical history and family medical history. As a new NCFlex Benefits plan, during the 2009 enrollment you **will not** need to answer any medical questions or provide EOI to receive this coverage.

**LIMITATIONS AND EXCLUSIONS**

*This is a partial listing of exclusions listed with the plan policy. Please refer to your Certificate of Insurance for a complete listing. If there are any discrepancies, the Certificate of Insurance shall govern.*

**Waiting Period**

The waiting period refers to the amount of time the covered person must be covered by the plan before benefits are eligible for payment.

On the date a covered person's insurance under the certificate becomes effective, a waiting period starts with respect to such insurance. Such insurance will be void if the covered person experiences a covered condition during the waiting period and all premiums paid will be refunded. The length of the waiting period is 30 days for all covered conditions.

**Pre-Existing Condition Exclusion**

A pre-existing condition is a sickness or injury for which, in the 12 months before a covered person becomes insured under a certificate, or before any benefit increase with respect to such covered person medical advice, treatment or care was sought by such covered person, or recommended by, prescribed by or received from a physician or other practitioner of the healing arts. We will not pay benefits for a covered condition that is caused by or results from a pre-existing condition if the covered condition occurs during the first 12 months that a covered person is insured under the certificate. With respect to a benefit increase, we will not pay benefits for such benefit increase for a covered condition that is caused by or results from a pre-existing condition if the covered condition occurs during the first 12 months after such increase in the total benefit amount.

For residents of states other than North Carolina, coverage may vary. Please visit [www.ncflex.org](http://www.ncflex.org) for more information.

**BENEFICIARY**

To designate a beneficiary, please visit [www.ncflex.org](http://www.ncflex.org) or call MetLife at 1 800 GET-MET 8 (1-800-438-6388) for the beneficiary designee form. If you were to become deceased and did not have a designated beneficiary, MetLife would pay out the claim based on the standard facility of payment clause.

**CLAIMS**

If you need to file a claim, please visit [www.ncflex.org](http://www.ncflex.org) or call MetLife at 1 800 GET-MET 8 (1-800-438-6388) for a claim form.

**DID YOU KNOW...**

**Market research indicates that 75% of the out of pocket costs of those individuals who experience a critical illness such as a heart attack, stroke, or cancer is over \$7,000.** Critical Illness Financial Impact Survey, conducted by GfK NOP for MetLife, September 2006

**TAX ISSUE**

Whenever a benefit claim is paid, a 1099 tax form will be sent to your home address in January of the following year. You should consult with your tax advisor regarding the possible effects of the purchase and/or receipt of benefits under MetLife Critical Illness Insurance on certain other coverage or benefits that you might have or that you might obtain.

**CERTIFICATE OF COVERAGE**

The Certificate of Coverage provides complete details about the benefit and the limits and exclusions. The certificate will be mailed to your home when you sign up for this new benefit or you can visit [www.ncflex.org](http://www.ncflex.org) for a copy of your certificate.

**CONTINUATION**

When your employment ends, you may elect to continue your coverage for yourself and your dependents at the current group rates. You need to apply for continuation of coverage within 45 days of your termination date. For the continuation of coverage forms, please visit [www.ncflex.org](http://www.ncflex.org) or contact MetLife at 1 800 GET-MET 8 (1-800-438-6388) for more information.

*The information in this booklet is in abbreviated form only and it is provided to give you a general understanding of your MetLife Critical Illness insurance (CII) coverage. If the information in this booklet differs from the information in the Certificate of Insurance, the Certificate of Insurance will govern. MetLife Critical Illness insurance is a limited 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. A more detailed description of the benefits, limitations and exclusions applicable to you may be found in the Disclosure Statement. Please contact MetLife for more information.*