



**METROPOLITAN LIFE INSURANCE COMPANY
200 PARK AVENUE, NEW YORK, NEW YORK 10166-0188**

**IMPORTANT INFORMATION ABOUT THE
COVERAGE YOU ARE BEING OFFERED**

Save this statement! It may be important to you in the future. The Washington State Insurance Commissioner requires that we give you the following information about fixed payment benefits.

This coverage is not comprehensive health care insurance and will not cover the cost of most hospital and other medical services.

This disclosure provides a very brief description of the important features of the coverage being considered. It is not an insurance contract and only the actual policy provisions will control. The policy itself will include in detail the rights and obligations of both the master policyholder and Metropolitan Life Insurance Company ("MetLife").

This coverage is designed to pay you a fixed dollar amount regardless of the amount that the provider charges. Payments are not based on a percentage of the provider's charge and are paid in addition to any other health plan coverage you may have.

CAUTION: If you are also covered under a High Deductible Health Plan (HDHP) and are contributing to a Health Savings Account (HSA), you should check with your tax advisor or benefit advisor prior to purchasing this coverage to be sure that you will continue to be eligible to contribute to the HSA if this coverage is purchased.

The benefits under this policy are summarized below:

- **Type of Coverage: Critical Illness Insurance Coverage.** Policies of this category are designed to provide a fixed payment if you are diagnosed with certain specified diseases or have certain surgeries performed for the first time after the coverage effective date. Bone Marrow Transplant, Heart Attack, Heart Transplant, Kidney Failure, Major Organ Transplant, Stroke, Full Benefit Cancer, Partial Benefit Cancer, and Coronary Artery Bypass Graft (the "covered conditions") are the only diseases or surgeries for which you may receive benefits under the certificate.
- **Benefit Amount:**
Covered conditions are grouped into three categories, as shown in the table below.

Category 1	Category 2	Category 3
Full Benefit Cancer Partial Benefit Cancer Bone Marrow Transplant	Heart Attack Stroke Coronary Artery Bypass Graft Heart Transplant	Kidney Failure Major Organ Transplant

100% of the Category Benefit Amount is payable for:

- Bone Marrow Transplant
- Heart Attack
- Heart Transplant
- Kidney Failure
- Major Organ Transplant
- Stroke
- Full Benefit Cancer

25% of the Category Benefit Amount is payable for:

- Partial Benefit Cancer
- Coronary Artery Bypass Graft

The Category Benefit Amount will be \$1,000.

The Total Benefit Amount will be an amount equal to three times the Category Benefit Amount.

- **Benefit Trigger:**

If a covered condition First Occurs for you while you are insured under the certificate, proof of the covered condition must be sent to us. When we receive such proof, we will review the claim and, if we approve it, will pay the benefit described above for the covered condition, provided, however, that:

- a) we will never pay more to you than the Category Benefit Amount for all of the covered conditions listed in any one category; and
- b) we will never pay more to you than the Total Benefit Amount.

Either all or a portion of the Category Benefit Amount is payable, depending on the type of covered condition. If a portion of the Category Benefit Amount is paid to you under the policy, the amount payable for any future claims by you in that category will be reduced by the amount already paid.

We will reduce what we pay for a claim so that the amount we pay, when combined with amounts for all claims we have previously paid to you, does not exceed the Total Benefit Amount that was in effect for you on the date of the most recent covered condition.

Benefit Suspension Period: Each time a covered condition for which the policy pays a benefit occurs, a benefit suspension period lasting 180 days starts. During the benefit suspension period, we will not pay a benefit for any covered condition that occurs if it is in a different category of covered conditions from the covered condition that started the benefit suspension period. If no benefit is paid for a covered condition because it first occurs during a benefit suspension period, we will treat the next occurrence (if any) of that covered condition after the benefit suspension period ends, as the first occurrence of that covered condition.

- **Duration of Coverage**

Your insurance will end on the earliest of:

- the date the group policy ends;
- the date you die;
- the date insurance ends for your class;
- the date the Total Benefit Amount has been paid for you;
- the end of the period for which the last full premium has been paid for you;
- the date you cease to be in an eligible class; or
- the date your membership in the National Association for the Self-Employed ends for any reason.

- **Renewability:**

The group policy will continue in force until it is canceled by either the group policyholder or MetLife.

Policy provisions that exclude, eliminate, restrict, limit, delay, or in any other manner operate to qualify payment of the benefits described above include the following:

1. DEFINITIONS

Benefit Increase means a simultaneous increase in both the Category Benefit Amount and Total Benefit Amount.

Benefit Suspension Period means the 180 day period following the date a covered condition, for which the certificate pays a benefit, occurs.

Bone Marrow Transplant means the irreversible failure of your bone marrow for which a physician has determined that the replacement of your bone marrow with bone marrow from you, or another human donor is medically necessary.

Category Benefit Amount means the maximum aggregate amount, as shown in the certificate, that we will pay for all covered conditions combined in any category of covered conditions in your lifetime, as provided under the certificate. There are three categories of covered conditions and they are shown in the Benefit Amount section of this Standard Disclosure Document. There is only one Category Benefit Amount in effect at any time under the certificate.

Coronary Artery Bypass Graft means the undergoing of open heart surgery performed by a physician who is a board certified cardiothoracic surgeon to bypass a narrowing or blockage of one or more coronary arteries using venous or arterial grafts. The procedure must be deemed medically necessary by a physician and be supported by pre-operative angiographic evidence. Coronary Artery Bypass Graft does not include:

- angioplasty (percutaneous transluminal coronary angioplasty);
- laser relief;
- stent insertion;
- coronary angiography; or
- any other intra-catheter technique

First Occurs or First Occurrence means, with respect to each covered condition, the first time after you initially become insured under the group policy that such covered condition occurs.

Full Benefit Cancer means the presence of one or more malignant tumors characterized by the uncontrollable and abnormal growth and spread of malignant cells with invasion of normal tissue provided that a medical practitioner has determined that:

- surgery, radiotherapy, or chemotherapy is medically necessary;
- there is metastasis; or
- the patient has terminal cancer, is expected to die within 24 months or less from the date of diagnosis and will not benefit from, or has exhausted, curative therapy.

Heart Attack (myocardial infarction) means the death of a portion of the heart muscle as a result of obstruction of one or more coronary arteries due to arteriosclerosis, spasm, thrombus or emboli.

Heart Transplant means the irreversible failure of your heart for which a physician has determined that the complete replacement of such organ with another heart is medically necessary.

Kidney Failure means the total, end stage, irreversible failure of both kidneys to function, provided that a physician has determined that such failure requires either:

- Immediate and regular kidney dialysis (no less often than weekly) that is expected by such physician to continue for at least six months; or
- a kidney transplant.

Major Organ Transplant means:

- the irreversible failure of your lung, pancreas, entire kidney or any combination thereof, for which a physician has determined that the complete replacement of such organ with another entire organ is medically necessary; or
- the irreversible failure of your liver for which a physician has determined that the complete or partial replacement of the liver with another liver or liver tissue is medically necessary.

Partial Benefit Cancer means one of the following conditions that meets the TNM staging classification and other qualifications specified below:

- carcinoma in situ classified as TisN0M0, provided that surgery, radiotherapy or chemotherapy has been determined to be medically necessary by a medical practitioner;
- malignant tumors classified as T1N0M0 or greater which are treated by endoscopic procedures alone;
- malignant melanomas classified as T1N0M0, for which a pathology report shows maximum thickness less than or equal to 0.75 millimeters using the Breslow method of determining tumor thickness; and
- tumors of the prostate classified as T1bN0M0, or T1cN0M0, provided that they are treated with a radical prostatectomy or external beam radiotherapy.

Stroke means a cerebrovascular accident or incident producing measurable, functional and permanent neurological impairment (not including transient ischemic attacks (TIA), or prolonged reversible ischemic attacks) caused by any of the following which results in an infarction of brain tissue:

- hemorrhage;
- thrombus; or
- embolus from an extracranial source.

Total Benefit Amount means the maximum aggregate amount, as specified in the certificate, that we will pay for any and all covered conditions combined, as provided under the certificate or any certificate it replaces.

2) EXCLUSIONS

Exclusions Related to Covered Conditions:

We will not pay benefits for a Heart Transplant:

- performed outside the United States, unless you were placed on the Transplant List prior to the Heart Transplant being performed; or
- involving stem cell generated transplants.

We will not pay benefits for a Major Organ Transplant:

- performed outside the United States;
- involving stem cell generated transplants;
- involving islet cell transplants; or
- involving a heart being transplanted in combination with any other organ.

We will not pay benefits for a diagnosis of Stroke for:

- cerebral symptoms due to migraine;
- cerebral injury resulting from trauma or hypoxia; or
- vascular disease affecting the eye or optic nerve or vestibular functions.

We will not pay benefits for a diagnosis of Full Benefit Cancer for:

- any benign tumor, dysplasia, intraepithelial neoplasia or pre-malignant growth;
- any papillary tumor of the bladder classified as Ta under TNM Staging;
- any tumor of the prostate classified as T1N0M0 under TNM Staging;
- any papillary tumor of the thyroid that is classified as T1N0M0 or less under TNM Staging and is one centimeter or less in diameter unless there is metastasis;
- any tumor in the presence of human immuno-deficiency virus;
- any non-melanoma skin cancer unless there is metastasis;
- any malignant tumor classified as less than T1N0M0 under TNM Staging; or
- any condition that is Partial Benefit Cancer.

We will not pay benefits for a diagnosis of Partial Benefit Cancer for:

- any benign tumor, dysplasia, intraepithelial neoplasia or pre-malignant growth;
- any papillary tumor of the bladder classified as Ta under TNM Staging;
- any tumor of the prostate classified as T1aN0M0 under TNM Staging;
- any papillary tumor of the thyroid that is classified as T1N0M0 or less under TNM Staging and is one centimeter or less in diameter;
- any tumor in the presence of human immuno-deficiency virus;
- any non-melanoma skin cancer; or
- any melanoma in situ classified as TisN0M0 under TNM Staging.

We will not pay benefits for Coronary Artery Bypass Graft:

- performed outside the United States; or
- that does not involve median sternotomy (a surgical incision in which the sternum, also known as the breastbone, is divided down the middle from top to bottom).

General Exclusions:

We will not pay benefits for covered conditions caused or contributed to by, or resulting from you:

- participating in a felony, riot or insurrection;
- intentionally causing a self-inflicted injury;
- committing or attempting to commit suicide while sane or insane;
- engaging in an illegal occupation;
- serving in the armed forces or any auxiliary unit of the armed forces of any country.

We will not pay benefits for covered conditions arising from war or any act of war, even if war is not declared.

We will not pay benefits for any covered condition for which diagnosis is made outside the United States, unless the diagnosis is confirmed in the United States, in which case the covered condition will be deemed to occur on the date the diagnosis is made outside the United States.

We will not pay benefits for any covered condition that does not First Occur for a covered person while the covered person is insured under the certificate.