**Parsons Corporation** 

Benefits you can use as you see fit, such as to help cover expenses that are not covered by your medical plan.

### **Critical Illness Insurance Benefits**

Eligible Individual	Benefit Amount	Requirements	
Coverage Options			
Employee	\$10,000, \$20,000, \$30,00, \$40,000 or \$50,000	Coverage is guaranteed provided you are actively at work. 1	
Spouse/Domestic Partner <sup>2</sup>	50% of the Employee's Initial Benefit	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. 1	
Dependent Child(ren) <sup>3</sup>	50% of the Employee's Initial Benefit	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 plan pays a lump-sum **Initial Benefit** upon the first verified diagnosis of a Covered Condition. Your plan also pays a lump-sum **Recurrence Benefit**<sup>4</sup> for a subsequent verified diagnosis of certain Covered Conditions as shown in the table below. A Recurrence Benefit is only available if an Initial Benefit has been paid for the same Covered Condition. There is a Benefit Suspension Period that applies to Recurrence Benefits.

The maximum amount that you can receive through your Critical Illness Insurance plan is called the **Total Benefit Amount** and is 5 times the amount of your Benefit Amount. This means that you can receive multiple benefit payments until you reach the maximum of \$50,000, \$100,000, \$150,000, \$200,000 or \$250,000.

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

Covered Conditions	Initial Benefit	Recurrence Benefit			
Benign Tumor Category	Benign Tumor Category				
Benign Brain Tumor	100% of Benefit Amount	100% of Initial Benefit			
Cancer Category					
Invasive Cancer	100% of Benefit Amount	100% of Initial Benefit			
Non-Invasive Cancer	100% of Benefit Amount	100% of Initial Benefit			
Skin Cancer	25% of Benefit Amount, but not less than \$250	NONE			
Cardiovascular Disease Category					
Coronary Artery Bypass Graft (CABG) - where surgery involving either a median sternotomy or minimally invasive procedure is performed	25% of Benefit Amount	100% of Initial Benefit			
Coronary Angioplasty (Percutaneous Coronary Intervention)	10% of Benefit Amount	100% of Initial Benefit			
Childhood Disease Category					



Celft Lip or Cleft Palate	Cerebral Palsy	100% of Benefit Amount	NONE
Cysilic Fibrosis         100% of Benefit Amount         NONE           Diabotes (Type 1)         100% of Benefit Amount         NONE           Down Syndrome         100% of Benefit Amount         NONE           Sckle Cell Anemia         100% of Benefit Amount         NONE           Spina Bifida         100% of Benefit Amount         NONE           Functional Loss Category           Coma         100% of Benefit Amount         NONE           Loss of: Ability to Speak; Hearing; or Sight         100% of Benefit Amount         NONE           Paralysis of 2 or more limbs         100% of Benefit Amount         NONE           Heart Attack Category         NONE         NONE           Heart Attack Category         100% of Benefit Amount         100% of Initial Benefit           Sudden Cardiac Arrest Payable upon death         100% of Benefit Amount         NONE           Infectious Disease Category         Infectious Disease Category         NONE           For a benefit to be payable, the covered person must have been treated for the disease in a hospital for 3 consecutive days.         Bacterial Cerebrospinal Meningitis         100% of Benefit Amount         NONE           COVID-19         25% of Benefit Amount         NONE         NONE           Bacterial Cerebrospinal Meningitis         100% of Benefit Amount		100% of Benefit Amount	NONE
Diabetes (Type 1)         100% of Benefit Amount         NONE           Down Syndrome         100% of Benefit Amount         NONE           Sickle Cell Anemia         100% of Benefit Amount         NONE           Spina Birlida         100% of Benefit Amount         NONE           Functional Loss Category           Coma         100% of Benefit Amount         100% of Initial Benefit           Loss of: Ability to Speak: Hearing; or Sight         100% of Benefit Amount         NONE           Paralysis of 2 or more limbs         100% of Benefit Amount         NONE           Heart Attack Category         NONE         NONE           Heart Attack Category         100% of Benefit Amount         100% of Initial Benefit           Sudden Cardiac Arrest Payabbe upon death         100% of Benefit Amount         NONE           Infectious Disease Category         For a benefit to be payable, the covered person must have been treated for the disease in a hospital for 3 consecutive days.           Bacterial Corebrospinal Meningitis         100% of Benefit Amount         NONE           COVID-19         25% of Benefit Amount         NONE           Diphtheria         100% of Benefit Amount         NONE           Legionnaire's Disease         100% of Benefit Amount         NONE           Necrotizing Fascilitis         100% of	<u> </u>	100% of Benefit Amount	NONE
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Heart Attack         100% of Benefit Amount         100% of Initial Benefit           Sudden Cardiac Arrest Payable upon death         100% of Benefit Amount         NONE           Infectious Disease Category           For a benefit to be payable, the covered person must have been treated for the disease in a hospital for 3 consecutive days.           Bacterial Cerebrospinal Meningitis         100% of Benefit Amount         NONE           COVID-19         25% of Benefit Amount         NONE           Diphtheria         100% of Benefit Amount         NONE           Encephalitis         100% of Benefit Amount         NONE           Legionnaire's Disease         100% of Benefit Amount         NONE           Malaria         100% of Benefit Amount         NONE           Necrotizing Fasciitis         100% of Benefit Amount         NONE           Steonyelitis         100% of Benefit Amount         NONE           Rabies         100% of Benefit Amount         NONE           Tetarus         100% of Benefit Amount         NONE           Tuberculosis         100% of Benefit Amount         NONE           Kidney Failure Category         Kidney Failure Category         NONE           Major Organ Transplant Category         100% of Benefit Amount         NONE           P	<u> </u>		
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Major Organ Transplant For bone marrow, heart, lung, pancreas, and liver  Progressive Disease Category  ALS 100% of Benefit Amount NONE  Alzheimer's Disease 100% of Benefit Amount NONE  Huntington's Disease 100% of Benefit Amount NONE  Multiple Sclerosis 100% of Benefit Amount NONE  Muscular Dystrophy 100% of Benefit Amount NONE  Myasthenia Gravis 100% of Benefit Amount NONE  Parkinson's Disease (Advanced) 100% of Benefit Amount NONE	Kidney Failure	100% of Benefit Amount	NONE
Progressive Disease Category  ALS 100% of Benefit Amount NONE  Alzheimer's Disease 100% of Benefit Amount NONE  Huntington's Disease 100% of Benefit Amount NONE  Multiple Sclerosis 100% of Benefit Amount NONE  Muscular Dystrophy 100% of Benefit Amount NONE  Myasthenia Gravis 100% of Benefit Amount NONE  Parkinson's Disease (Advanced) 100% of Benefit Amount NONE	Major Organ Transplant Category		
ALS 100% of Benefit Amount NONE  Alzheimer's Disease 100% of Benefit Amount NONE  Huntington's Disease 100% of Benefit Amount NONE  Multiple Sclerosis 100% of Benefit Amount NONE  Muscular Dystrophy 100% of Benefit Amount NONE  Myasthenia Gravis 100% of Benefit Amount NONE  Parkinson's Disease (Advanced) 100% of Benefit Amount NONE		100% of Benefit Amount	NONE
Alzheimer's Disease 100% of Benefit Amount NONE Huntington's Disease 100% of Benefit Amount NONE Multiple Sclerosis 100% of Benefit Amount NONE Muscular Dystrophy 100% of Benefit Amount NONE Myasthenia Gravis 100% of Benefit Amount NONE Parkinson's Disease (Advanced) 100% of Benefit Amount NONE	Progressive Disease Category		
Huntington's Disease 100% of Benefit Amount NONE  Multiple Sclerosis 100% of Benefit Amount NONE  Muscular Dystrophy 100% of Benefit Amount NONE  Myasthenia Gravis 100% of Benefit Amount NONE  Parkinson's Disease (Advanced) 100% of Benefit Amount NONE	ALS	100% of Benefit Amount	NONE
Multiple Sclerosis  100% of Benefit Amount  NONE  Muscular Dystrophy  100% of Benefit Amount  NONE  Myasthenia Gravis  100% of Benefit Amount  NONE  Parkinson's Disease (Advanced)  100% of Benefit Amount  NONE	Alzheimer's Disease	100% of Benefit Amount	NONE
Muscular Dystrophy100% of Benefit AmountNONEMyasthenia Gravis100% of Benefit AmountNONEParkinson's Disease (Advanced)100% of Benefit AmountNONE	Huntington's Disease	100% of Benefit Amount	NONE
Myasthenia Gravis  100% of Benefit Amount  NONE  Parkinson's Disease (Advanced)  100% of Benefit Amount  NONE	Multiple Sclerosis	100% of Benefit Amount	NONE
Parkinson's Disease (Advanced) 100% of Benefit Amount NONE	Muscular Dystrophy	100% of Benefit Amount	NONE
	Myasthenia Gravis	100% of Benefit Amount	NONE
Poliomyelitis 100% of Benefit Amount NONE	Parkinson's Disease (Advanced)	100% of Benefit Amount	NONE
	Poliomyelitis	100% of Benefit Amount	NONE



Systemic Lupus Erythematosus (SLE)	100% of Benefit Amount	NONE	
Systemic Sclerosis (Scleroderma)	100% of Benefit Amount	NONE	
Severe Burn Category			
Severe Burn	100% of Benefit Amount	100% of Initial Benefit	
Stroke Category			
Stroke	100% of Benefit Amount	100% of Initial Benefit	
Vascular Disease Category			
Abdominal Aortic or Thoracic Aortic Aneurysm	100% of Benefit Amount	100% of Initial Benefit	

#### \* Notes Regarding Covered Conditions

MetLife will not pay a benefit for a Covered Condition that is diagnosed prior to the coverage effective date.

- Alzheimer's Disease Please review the Outline of Coverage/Disclosure Document for specific information about Alzheimer's disease.
- Cancer Please review the certificate for specific information about cancer benefits. In most states, not all types of cancer are covered.
- Coronary Artery Bypass Graft In certain states, the Covered Condition is Coronary Artery Disease.
- Heart Attack The Heart Attack Covered Condition pays a benefit for the occurrence of a myocardial infarction, subject to the terms of the certificate. A myocardial infarction does not include sudden cardiac arrest.
- Infectious Disease Covered Condition Category For an Infectious Disease Category benefit to be payable, the covered person must have been treated for the disease in a hospital for a consecutive number of days as specified in the certificate.
- Major Organ Transplant In most states, we will not pay a Major Organ Transplant benefit if a covered person is placed on the organ transplant list prior to coverage taking effect and subsequently undergoes a transplant procedure for the same organ while coverage is in effect. Covered organs may vary by state; refer to the Certificate for details. In some states, the condition is Major Organ Failure.
- Stroke In certain states, the Covered Condition is Severe Stroke.
- The following benefits are not available in all states. Please review the Disclosure Statement or Outline of Coverage/Disclosure Document for details.
  - Coma
  - o Loss of: Ability to Speak; Hearing; or Sight
  - o Paralysis
  - Severe Burn

**Health Screening Benefit**MetLife will provide an annual benefit of \$75 per calendar year for taking one of the eligible screening/prevention measures. The Health Screening Benefit is not available in certain states. Please review your Disclosure Statement or Outline of Coverage/Disclosure Document for specific state variations and exclusions around this benefit.

### **Example of How Benefits are Paid**

The example below illustrates an employee who elected a Benefit Amount of \$10,000.

Illness – Covered Condition	Payment
Heart Attack — first verified diagnosis	Initial Benefit payment of \$10,000 or 100%
Kidney Failure – first verified diagnosis, two years later	Initial Benefit payment of \$10,000 or 100%
Heart Attack — second verified diagnosis, four years later	Recurrence Benefit payment of \$10,000 or 100%

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.



### **Questions & Answers**

- Q. Who is eligible to enroll for this critical illness coverage?
- A. You are eligible to enroll yourself and your eligible family members! 5 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 critical illness coverage?
- 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?
- Yes, you can take your coverage with you.<sup>6</sup> 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?
- 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.

### **Insurance Rates**

MetLife offers group rates and payment of premium through payroll deduction, so you don't have to worry about writing a check or missing a payment! Your employee rates are outlined below.

# Monthly Premium per \$1,000 of Coverage

#### **Uni-Tobacco**

Attained Age	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Spouse and Child(ren)
<25	\$0.38	\$0.67	\$0.38	\$0.67
25 - 29	\$0.42	\$0.73	\$0.42	\$0.73
30 - 34	\$0.52	\$0.86	\$0.52	\$0.86
35 - 39	\$0.66	\$1.09	\$0.66	\$1.09
40 - 44	\$0.90	\$1.48	\$0.90	\$1.48
45 - 49	\$1.24	\$1.96	\$1.24	\$1.96
50 - 54	\$1.70	\$2.57	\$1.70	\$2.57
55 - 59	\$2.40	\$3.36	\$2.40	\$3.36
60 - 64	\$3.23	\$4.64	\$3.23	\$4.64
65 - 69	\$4.21	\$6.22	\$4.21	\$6.22
70+	\$3.21	\$4.73	\$3.21	\$4.73

Rates will increase when a Covered Person reaches a new age band. Rates are subject to change.

<sup>&</sup>lt;sup>6</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.



<sup>&</sup>lt;sup>1</sup> 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.

<sup>&</sup>lt;sup>2</sup> Coverage for Domestic Partners, civil union partners and reciprocal beneficiaries varies by state. Please contact MetLife for more information.

<sup>&</sup>lt;sup>3</sup> Dependent Child coverage varies by state. Please contact MetLife for more information.

<sup>&</sup>lt;sup>4</sup> Review the Disclosure Document or Outline of Coverage/Disclosure Document for information on which Covered Condition may be eligible for a Recurrence Benefit. There may be a Benefit Suspension Period between recurrences of the same Covered Condition, as well as occurrences of different Covered Conditions. There may be a limitation on the number of Recurrence Benefits payable per Covered Condition. We will not pay a benefit for a Covered Condition that is subject to a Benefit Suspension Period. If a Recurrence Benefit is payable for a Cancer Covered Condition, we will not pay such benefit unless the Covered Person has not had symptoms of or been treated for the same cancer for which we paid a benefit during the Treatment Free Period.

<sup>&</sup>lt;sup>5</sup> Eligible Family Members means all persons eligible for coverage as defined in the Certificate.

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 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

