Welcome to the worldwide plan with a personal touch

The support you need when you’re a world away
Your new plan, built just for you

Working abroad is exciting and inspiring. But it can also be stressful. Acclimating to a new culture, language and work environment is tough without the right support. For more than 60 years, globally mobile employees and their families have relied on MetLife for our knowledge and expertise while they are on assignment. We understand your unique needs and we’ve built a personalized and local network to help meet them. As one of the most recognized and trusted brands in the world, we’ll give you the confidence to navigate the complex global health landscape.

A personal approach

With MetLife, you have an insurance carrier that works wherever you are. Our Regional Service Centers (RSC) are the local face of our global healthcare network. Each MetLife RSC is staffed by local experts well-versed in the nuances of your region’s healthcare system, and they’re ready to guide you through it all. By delivering services locally, through in-market resources steeped in the regional culture and healthcare system, we can anticipate your needs to better support you. This structure makes it easier for you to obtain quality medical care, receive expert advice and guidance and get your claims reimbursed more efficiently — regardless of time zone or geography.

How we help you:

Contact us at any time by using the phone number or email address on your ID card:

• Phone
• Email
• Mobile App
• Website

1. Some Regional Service Centers are operated by MetLife affiliates and some by third parties contracted by MetLife.
Getting started

We’ve made it easy and convenient for you to access healthcare, wherever and whenever you need it. We’ll walk you through the process over the next few pages.

Be sure to register for eBenefits

The first thing you should do is register for eBenefits — our secure, self-service web portal, available 24/7 at MetLifeWorldwide.com. All your policy documents, like this guide, are available on eBenefits for quick, convenient access. You can also find a direct pay provider, download your ID card, access travel, wellness, and education tools and much more.

Registration is easy. Here’s how:

1. Go to MetLifeWorldwide.com, select “Member” from the dropdown box and click “Login.”
2. Click the “New User Registration” link.
3. Enter your policy number, certificate number/member number, date of birth, and a valid email address. (Your policy number and certificate/member number are printed on your ID card.) Click “Submit.”
4. Check your inbox for a validation email and click the link in the email. The link is time-sensitive, so please access within 48 hours.
5. Re-enter your policy number, certificate/member number, and date of birth and click “Submit.”
6. Personalize your user profile and access eBenefits’ many tools and resources.

If you cannot complete registration within 48 hours or need additional assistance, please contact us using the contact information on your ID card.

Get access to your ID cards

Now that you’ve registered for eBenefits, there are three ways you can access your ID card:

- Through eBenefits at MetLifeWorldwide.com
- Through our mobile app
- Hard copy in the mail

Your ID card is your passport to accessing healthcare around the world. You and your covered dependents will each receive personalized ID cards and will share the same policy and certificate numbers.

Your ID card contains the following information:

- The logo and contact information for your Regional Service Center
- Policy holder name
- Policy and certificate/member numbers

Please carry your ID card at all times and present it when accessing care to help minimize out-of-pocket expenses.

Insider tip

There are lots of tools available for you on eBenefits — see page 8 for a list of all the eBenefits tools that are available to you.
Your ID card is double-sided for your convenience. This means that in most situations, you will only need to carry one ID card regardless of where you are in the world. The gray side of your ID card is for accessing care outside the US, and the white side of your ID card is for accessing care inside the US.

If you are planning to visit the US to receive care and the back of your ID card does not look like this, please contact MetLifeWorldwide@metlife.com so that we can make sure you are set up with access to care in the US.

**Insider tip**
If you are re-assigned to a new country that is serviced by a different Regional Service Center, you and your family will be issued new ID cards.
Now that you’re all set up, we’ll walk you through how to access care when you need it. We want to make sure that you not only have access to great doctors, but that you don’t have to pay out-of-pocket.

Search for a direct pay doctors or hospitals

MetLife has arrangements with doctors and hospitals all over the world that we call our direct pay network. Seeking care at one of these doctors or hospitals ensures you won’t have to file a claim later on to be reimbursed — a convenience that many members enjoy. We encourage you to use a direct pay provider for the best member experience while on assignment. Our network spans the globe and includes more than 1.1 million direct pay providers — 185,000 of which are outside the US.

Insider tip

If your preferred provider isn’t in our direct pay network, you can nominate them. We’ll review their credentials and if they meet our selection standards, we will establish a direct pay arrangement with them if they’re interested. Find the Provider Nomination form on eBenefits at MetLifeWorldwide.com.

What to take to the doctor

When visiting your chosen healthcare professional, please bring:

- Your ID card. When checking in, point out the Regional Service Center logo, if you have one.
- A form of identification. You can use a valid national ID or passport.
- Guarantee of Payment, if applicable.

Healthcare providers anywhere in the world should call the phone number on your ID card to verify your eligibility or benefits. Providers should use the contact information that corresponds to their location: e.g., a provider outside the US should use the contact information listed on the gray side of your ID card; a US provider should use the contact information listed on the white side.

When you show your ID card to a direct pay provider, here’s what should happen:

- Front desk personnel should call MetLife to verify your eligibility.
- Your provider will bill MetLife for your visit instead of you.
- You’ll be billed at the negotiated rates established by MetLife.

When checking in, be sure to point out the local network logo that appears on your ID card.

2. Please note, you will still be responsible for any copays or deductibles you may owe based on your plan design.
Two easy ways to find a direct pay provider

1. **Search the Online Directory** on eBenefits at MetLifeWorldwide.com. Once logged in, click the “Find Providers” tab.
2. **Contact us** using the contact information on your ID card for a provider recommendation.

**Insider tip**
While choosing a direct pay provider may make for a more convenient experience for you, you are free to seek care from any licensed doctor or hospital worldwide.

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**To find providers outside of the US:**

- **Select** your **country** from the Country dropdown box and then **select** your **city** from the City dropdown box.
- **Click** “Search” and your results will appear.
  Direct pay providers are noted with the wording “Provider may settle bills directly.” To see only direct pay providers, **check** the “Provider may settle bills directly” checkbox under Payment options.

**To find providers within the US:**

- **Click** the “Or, Find US Providers” link.
- **Click** the “Continue to US Providers” button.
  This will take you to the appropriate website where you can search your US network for in-network providers.
Request a Guarantee of Payment (GOP) if your provider is not a direct pay

If your provider of choice is not direct pay, that’s not a problem. We can issue you a Guarantee of Payment (GOP), which is a letter to your healthcare professional that confirms your eligibility as a covered MetLife member. If your provider accepts the GOP, they will bill MetLife directly instead of billing you — helping minimize your out-of-pocket costs so you will only need to pay your applicable coinsurance or deductible.

Contact us using the contact information on your ID card in advance of your appointment to set up a GOP. You’ll need the following Information:

• Your policy and certificate numbers
• The patient’s name
• The expected medical service
• The facility
• Contact phone number for the facility

You will receive a copy of the GOP and so will your provider. Bring it with you when you go for your visit.

When to submit a claim

If you pay out-of-pocket, file a claim for reimbursement. You will be reimbursed for all covered expenses other than your patient responsibilities, like your deductible or coinsurance.

We accept claims in four convenient ways:

• Online via website or mobile app, the simplest way to submit
• Email
• Fax
• Courier mail

If you submit your claim online, it will automatically be routed to your Regional Service Center. If you fill out a Claim form, submit it to your Regional Service Center using the contact information on your ID card.

If you incur the claim within the US, send the claim to your US Regional Service Center, using the address on the US side of your ID card.

Claims that are submitted with all of the necessary information are typically processed in 10 business days or less. Once your claim is processed, your Regional Service Center will issue a reimbursement. Check with your Regional Service Center to see what reimbursement options are available.
Claim submission hints

• The best way to avoid submitting a claim is to use a direct pay provider who will bill MetLife instead of you for the cost of your services.
• If you have to pay out-of-pocket, use MetLife’s online claim submission for the quickest response.
• Include your itemized bills and payment receipts. An itemized bill should clearly identify individual dates of service. For each date of service, ensure a description of the service and the cost per service are available.
• You have a limited time to submit claims — check your medical certificate, found on eBenefits, for details. Claims submitted after this deadline may be denied.

If you fill out a Claim Form rather than submitting online:

• Fill it out completely and be specific about your diagnosis or reason for treatment.
• Remember to include your Policy Number (found on your ID card).
• Clearly state how you would like to be reimbursed.
• Submit the form as directed on your ID card.
• Sign and date the form.
• Keep a copy of your forms and your original receipts for your records. Please do not send us your original receipts.

Insider tip
You do not have to select a doctor as your primary care physician, and you do not need a referral to see a specialist.

03/Other tools and resources for navigating your healthcare

You and your family have access to our resources at any time, thanks to our website, mobile application, and 24/7 Customer Service. We’ve created these tools and resources to help guide and support you as you adjust to your new life abroad or go through health changes.

Learn more about the tools available on eBenefits

Once logged in, you can:

• Search for full-service hospitals, medical centers, clinics and doctors virtually anywhere in the world
• Submit a claim online and view your claim history
• Print a copy of your ID card or your dependents’ ID cards and request hard copies of your ID cards
• Download a Certificate of Coverage
• Review travel information, such as warnings, country guides, passport and visa requirements
• Access wellness tools such as health-risk assessments and personal health trackers
• Set language preferences to read in English, Spanish, French, Arabic, Chinese, Korean or Hindi
• Download forms and policy information
• View coverage details for you and your dependents
• Update your mailing address or employment status
Learn more about additional services that may be included in your plan

Some benefits plans include emergency medical services\(^3\), telemedicine\(^4\), International Employee Assistance Program\(^5\) (IEAP) and remote second medical opinion\(^6\) services. Your schedule of benefits will inform you if these services are included in your plan.

Emergency medical evacuation provides protection if you find yourself in an emergency situation where local care is not sufficient to safely address your critical care needs. Our Regional Service Centers are trained to coordinate all facets of an emergency evacuation to ensure you are quickly and safely getting the care you need. If you are ever in an evacuation situation, our evacuation partner, AXA Assistance, will work with your Regional Service Center to support you and provide enhanced care.

With our telemedicine network, you and your covered family members have 24/7 virtual access to U.S. licensed medical providers. You can call, text or arrange video chats to receive medical advice, treatment options, prescription refill support, and more.

Living far from home can be difficult. Our IEAP service offers you and your dependents telephonic and face-to-face access to a worldwide network of more than 80,000 counselors, coaches, and specialized professionals — many of whom have been expats themselves — in 170 countries. To access EAP information, click the “IEAP” tab on eBenefits at MetLifeWorldwide.com.

Our remote second medical opinion service offers remote peace of mind if you or your dependents are diagnosed with complex medical problems or issues. World-renowned specialists will review your medical records to confirm your diagnosis and offer treatment plans. Contact us using the information on your ID card for more information on this service if you’d like to utilize it.

Insider tip
To add dependents or report another type of life event, contact your company’s HR department. You cannot make these changes on eBenefits.

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3. Emergency medical and travel assistance services are provided through vendor not affiliated with MetLife.
4. Telemedicine services are provided through vendor not affiliated with MetLife.
5. IEAP provided through vendor not affiliated with MetLife.
6. Second Opinion services provided through vendor not affiliated with MetLife.
Key travel tips to remember

Now that you’re all set up and understand how to access care, here are the top things you need to remember about your new plan:

• Register for eBenefits at MetLifeWorldwide.com to access the most important tools and resources. Watch our pre-departure webinar on eBenefits for tips on preparing for your assignment.

• Contact us using the phone number or email address on your ID card with any questions about how to use your plan, find a doctor, documentation requirements, or help during an emergency.

• Remember to bring your ID card and a form of identification when you go to the doctor.

• Know your benefits by reviewing your Schedule of Benefits, available on eBenefits. Contact us if you have questions.

• Find a direct pay provider on eBenefits to avoid paying out-of-pocket when you go to the doctor. If your desired provider isn’t direct pay, request a GOP from us.

• Check with your doctor before traveling regarding your maintenance medications. You may be able to receive up to a 12-month supply if prescribed by your US physician.

Go to MetLifeWorldwide.com for access to tools and resources.

You can also download MetLife’s mobile application for access to tools and resources on the go.

Download the app for your iPhone or Android device from the app store.

Insider tip
If you have an emergency, seek care immediately and then contact us at your earliest convenience.
04/Commonly used terminology

Terms you need to know to help you understand what’s going on with your plan.

**Coinsurance** — the amount of eligible expenses you are responsible for paying after any applicable deductibles are met. For example, a 90% plan means the insurer pays 90% of the covered expenses and you pay the remaining 10% after any applicable deductibles are satisfied. These are identified in your Schedule of Benefits.

**Co-payment** — flat amount you must pay at the time of service (such as $10 per office visit), after any applicable deductible is met. These are identified in your Schedule of Benefits.

**Deductible** — a flat amount you must pay before the insurer will make any benefit payments. These are identified in your Schedule of Benefits.

**Individual deductible** — the amount of eligible expenses each member must pay for before the plan pays any benefit.

**Family deductible** — the aggregate amount of eligible expenses a family must pay before the plan begins paying benefits for all covered family members.

**Direct pay** — when your provider agrees to bill your insurer instead of you. This eliminates the need for you to file a claim for reimbursement. You are still responsible for paying any applicable deductible and/or coinsurance at the time of service.

**Guarantee of Payment (GOP)** — a request sent by the insurer to your doctor confirming your benefits and eligibility — and guaranteeing that MetLife will pay for your services.

**Life event** — a change in your circumstances or situation that would affect your benefits, such as getting married or having a baby.

**In-network (in US only)** — doctors, hospitals, physicians and other healthcare providers in the US who are contracted with the insurer and typically include discount arrangements. Utilizing in-network healthcare will reduce the amount of money you may pay up-front.

**Out-of-network (in US only)** — hospitals, doctors, physicians and other healthcare providers in the US that are not contracted with MetLife and do not offer discount arrangements. These healthcare providers may require that you pay up-front at the point of service.

**Out-of-pocket maximum** — the maximum amount MetLife will require you to pay out-of-pocket towards the cost of your care before the plan pays 100%.

- **Individual out-of-pocket maximum** — the amount of eligible expenses each member must pay at the coinsurance rate before benefits are paid at 100%.
- **Family out-of-pocket maximum** — the aggregate amount of eligible expenses a family must pay at the coinsurance rate before benefits for all covered family members are paid at 100%.

**Regional Service Center (RSC)** — the center that provides local customer service, access to a local network, and processes claims based on your work location. These partners and their networks may have a logo that appears on your ID card.
Protecting the privacy and security of the personal information you provide is of the utmost importance to us. Consequently, we take appropriate technical and organizational measures to protect your personal information.

By submitting claims, questions, or requests to your dedicated Regional Service Center, including the Global Regional Service Center in Wilmington, DE, USA, you expressly authorize us, our affiliates, and agents to share among them and process any personal information, including sensitive information such as health information, included in such claims or questions/requests. Such information will be used for the following purposes: enrollment; processing, administering, evaluating and adjudicating claims; utilization review; financial audit; servicing and providing your insurance benefits; and answering your questions/requests.

This authorization includes any transfer of personal information for the purposes described above from outside the US, including the European Economic Area and other jurisdictions with similar data privacy regimes, into the US or other jurisdictions that may not be considered to have an adequate level of data protection by the countries from where the data is sent. If applicable, you may access, rectify or delete your personal information by sending a written communication to MetlifeWorldwide@metlife.com.

This authorization shall remain valid and effective until revoked by sending a written communication to MetlifeWorldwide@metlife.com.

The description herein is a summary only. It does not include all terms, conditions and exclusions of the coverage described. Please refer to the actual policy for complete details of coverage and exclusions.

MetLife’s worldwide benefits products are underwritten by Delaware American Life Insurance Company, a MetLife affiliate domiciled at 600 North King Street, Wilmington, DE 19801, and other affiliates.