

2026 – 2027 Plan Summary Comparison

Benefit Type	Nevada System of Higher Education		State of Nevada	
	Low Plan MetLife Accident Insurance Pays YOU	High Plan MetLife Accident Insurance Pays YOU	Low Plan MetLife Accident Insurance Pays YOU	High Plan MetLife Accident Insurance Pays YOU
Injuries				
Fractures ¹	\$50 – \$3,000	\$100 – \$6,000	\$100 – \$8,000	\$200 – \$10,500
Dislocations ¹	\$50 – \$3,000	\$100 – \$6,000	\$150 – \$5,000	\$200 – \$7,000
Second- and Third-Degree Burns	\$50 – \$5,000	\$100 – \$10,000	\$200 – \$15,000	\$500 – \$20,000
Concussions	\$200	\$400	\$200	\$250
Cuts/Lacerations	\$25 – \$200	\$50 – \$400	\$75 – \$500	\$100 – \$800
Eye Injuries	\$200	\$300	\$200	\$300
Medical Services & Treatment²				
Ambulance	\$200 – \$750	\$300 – \$1,000	\$300 – \$800	\$600 – \$1,500
Emergency Care	\$25 – \$50	\$50 – \$100	\$150 – \$250	\$250 – \$350
Non-Emergency Care	\$25	\$50	\$50	\$70
Physician Follow-Up	\$50	\$75	\$75	\$100
Therapy Services (including physical therapy)	\$15	\$25	\$50	\$75
Medical Testing Benefit	\$100	\$200	X-rays: \$75 All other tests: \$200	X-rays: \$100 All other tests: \$300
Medical Appliances	\$50 – \$500	\$100 – \$1,000	\$150 – \$1,000	\$200 – \$1,250
Inpatient Surgery	\$100 – \$1,000	\$200 – \$2,000	\$200 – \$2,000	\$200 – \$3,000
Hospital³ Coverage (Accident)				
Admission ⁴	\$500 (non-Intensive Care Unit (ICU)) \$1,000 (ICU) per accident	\$1,000 (non-ICU) \$2,000 (ICU) per accident	\$1,000 (non-ICU – for the day of admission) \$750 (ICU – for the day of admission)	\$1,500 (non-ICU – for the day of admission) \$1,000 (ICU – for the day of admission)
Confinement ⁴	\$100 a day (non-ICU) — up to 31 days \$200 a day (ICU) — up to 31 days	\$200 a day (non-ICU) — up to 31 days \$400 a day (ICU) — up to 31 days	\$200 a day (non-ICU) — up to 365 days \$200 a day (ICU) — up to 15 days	\$400 a day (non-ICU) — up to 365 days \$400 a day (ICU) — up to 15 days
Inpatient Rehabilitation (paid per accident)	\$100 a day, up to 15 days	\$200 a day, up to 15 days	\$100 a day, up to 31 days	\$150 a day, up to 31 days
Accidental Death				
Accidental Death Benefit	Employee receives 100% of amount shown, spouse receives 50% and children receive 20% of amount shown.		Employee receives 100% of amount shown, spouse receives 50% and children receive 25% of amount shown.*	
	\$25,000 \$75,000 for common carrier ⁵	\$50,000 \$150,000 for common carrier ⁵	\$50,000 \$100,000 for common carrier ⁵	\$100,000 \$200,000 for common carrier ⁵

*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.

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Dismemberment, Loss & Paralysis				
Dismemberment, Loss & Paralysis	\$250 – \$10,000 per injury	\$500 - \$50,000 per injury	Dismemberment/ Functional Loss: \$1,000 - \$15,000 depending on the injury Paralysis: \$7,500 - \$25,000 depending on the number of limbs	Dismemberment/ Functional Loss: \$2,000 - \$30,000 depending on the injury Paralysis: \$15,000 - \$50,000 depending on the number of limbs
Other Benefits				
Lodging ⁶	Pays for lodging for companion — up to 30 nights per calendar year		For a companion of a covered person who is hospitalized — up to 90 nights per calendar year	
	\$100 per night — up to 30 nights	\$200 per night — up to 30 nights	\$175 per day	\$200 per day
Health Screening Benefit ⁷	N/A		\$50 paid one (1) time, per calendar year	
Organized Sports Activity Injury Benefit Rider	N/A		Pays an extra 25% of eligible benefits ⁸	

Insurance Rates

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

MetLife Accident Insurance	Nevada System of Higher Education		State of Nevada	
	Monthly Cost to You		Monthly Cost to You	
Coverage Options	Low Plan	High Plan	Low Plan	High Plan
Employee	\$7.16	\$13.59	\$9.28	\$14.09
Employee + Spouse	\$11.12	\$21.07	\$14.65	\$21.96
Employee + Child(ren)	\$12.97	\$24.55	\$16.24	\$24.71
Employee + Spouse and Child(ren)	\$17.12	\$32.12	\$21.73	\$32.99



Important Information: This is not a complete listing of benefits or covered services/treatments. Please review your Disclosure Statement or Outline of Coverage/Disclosure Document for more details.

1. Chip fractures may be paid at a reduced percentage of the Fracture Benefit and partial dislocations may be paid at a reduced percentage of the Dislocation Benefit.
2. Covered services/treatments must be the result of an accident or sickness as defined in the certificate.
3. "Hospital" does not include certain facilities such as nursing homes, convalescent care or extended care facilities. Please consult your certificate for details.
4. The Admission Benefit is not payable for Emergency Room treatment or outpatient treatment. The payment of the admission benefit requires a Confinement. Hospital Confinement requires the assignment to a bed as a resident inpatient in a Hospital (including an Intensive Care Unit of a Hospital) on the advice of a Physician or confinement in an observation area within a Hospital for a period of no less than 20 continuous hours on the advice of a Physician. Please consult your certificate for details.
5. Common Carrier refers to airplanes, trains, buses, trolleys, subways and boats. Certain conditions apply.
6. The lodging benefit is not available in all states. It provides a benefit for a companion accompanying a covered insured while hospitalized, provided that lodging is at least a certain number of miles from the insured's primary residence as defined in the certificate.
7. The Health Screening Benefit is not available in all states. In some states, the benefit is referred to as the Accident Prevention Screening Benefit.
8. The Organized Sports Activity Injury Benefit Certificate Rider may not be available in all states. Proof of registration in an Organized Sports Activity in which an Accident occurred is required at time of claim. See your certificate for details.

METLIFE'S ACCIDENT AND HOSPITAL INDEMNITY INSURANCE POLICIES ARE LIMITED BENEFIT GROUP INSURANCE POLICIES. The policies are 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 policies or their provisions may vary or be unavailable in some states. Prior hospital confinement may be required to receive certain benefits. There may be a preexisting condition limitation for hospital sickness benefits, if applicable. MetLife's Accident and Hospital Indemnity Insurance may be subject to benefit reductions that begin at age 65. And, like most group accident and health insurance policies, policies offered by MetLife may 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, GPNP13-HI, GPNP16-HI or GPNP12-AX-PASG, or contact MetLife. Benefits are underwritten by Metropolitan Life Insurance Company, New York, New York. In certain states, availability of MetLife's Group Hospital Indemnity Insurance is pending regulatory approval.