

# Benefits

## Overview

# City of Tallahassee

Here are the benefits in which you're eligible to participate.

- Life Insurance

**Take advantage of the valuable benefits available to you through your employer and enroll today.**

# Why life insurance makes sense

## What does term life insurance protect?

### Let's start with your finances.

- Life insurance can help cover your family's needs if you're not there, including food, bills and debt.
- It can help pay for your childrens' education.
- It can help ensure your family stays in their home.
- And help take care of those who depend on you.

In short, life insurance can help replace your paycheck if you aren't there to earn it.

### When life changes, so should your life insurance.

- New family members, a new job, a move or even a raise all mean that your life insurance needs have changed.
- Review your protection every year during your benefits enrollment.
- There's even a possibility your financial needs may decrease over time.

**Now that you know how life insurance can help you protect those who depend on you, take a moment and get the coverage you need.**

**Make sure you learn more and enroll today!**

### Life insurance costs less than you may think.

- With term life insurance, you can protect your family for a small fraction of your annual salary — about 1%, according to MetLife estimates.<sup>1</sup>
- Compare that to the fact you're insuring years of income.

### Life insurance is a smart financial move.

- Life insurance is a predictable financial option.
- Beneficiaries receive the proceeds of your policy income-tax free.<sup>2</sup>

### Get an idea of how much life insurance might be right for you.

- A rule of thumb is 60% of your annual income times years to retirement. Try our coverage estimator tool at [metlife.com/MyBenefits](https://metlife.com/MyBenefits).

1. Source: MetLife premium data. Your actual cost can vary based upon the amount of coverage and the rate. Rates for term insurance vary depending upon such things as gender, age, class, health and other underwriting factors.
2. Any discussion of taxes is for general informational purposes only and does not purport to be complete or cover every situation. MetLife, its agents and representatives may not give tax advice and this document should not be construed as such. Please seek advice based on your particular circumstances from a qualified tax advisor

Like most group life insurance policies, MetLife Group Life Insurance policies have certain exclusions, limitations, reductions of benefits and terms for keeping them in force. A MetLife representative can provide you with costs and complete details.

Metropolitan Life Insurance Company | 200 Park Avenue | New York, NY 10166

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## Life Insurance

Life insurance is a cost-effective way to protect your family and your finances. It helps ensure your short- and long-term financial obligations could be met if something unforeseen happens to you.

City of Tallahassee

Explore the coverage that makes it easy to give yourself and your loved ones more security today...and in the future.

### Supplemental Term Life Insurance Coverage Options

For You	For Your Spouse/Domestic Partner	For Your Dependent Children*
Option 1: \$30,000	Option 1: \$15,000	\$10,000
Option 2: \$50,000	Option 2: \$25,000	
Option 3: \$80,000	Option 3: \$40,000	
Option 4: \$100,000	Option 4: \$50,000	
Option 5: \$130,000	Option 5: \$65,000	
Option 6: \$150,000	Option 6: \$70,000	
Option 7: \$180,000	Option 7: \$95,000	
Option 8: \$200,000	Option 8: \$100,000	
Option 9: \$230,000		
Option 10: \$250,000		
Option 11: \$300,000		
Option 12: \$350,000		
Option 13: \$400,000		
Option 14: \$450,000		
Option 15: \$500,000		

\*Child(ren)'s Eligibility: Dependent children ages from birth to 26 years old, are eligible for coverage. Insurance will end on the last day of the calendar year. In TX, regardless of student status, child(ren) are covered until age 25.

### What's Not Covered?

Like most insurance plans, this plan has exclusions. Supplemental and Dependent Life Insurance does not provide payment of benefits for death caused by suicide within the first two years (one year for group policies issued in Missouri, North Dakota and Colorado) of the effective date of the certificate or an increase in coverage. This exclusionary period is one year for residents of Missouri and North Dakota. If the group policy was issued in Massachusetts, the suicide exclusion does not apply to dependent life coverage. The suicide exclusion does not apply to residents of Washington, or to individuals covered under a group policy issued in Washington.

Please note that a reduction schedule may apply. Please see your employer or certificate for specific details.

**Accidental Death & Dismemberment (AD&D) coverage complements your Supplemental Life insurance coverage and helps protect you 24 hours a day, 365 days a year.**

### Accidental Death & Dismemberment Coverage Options

This valuable coverage benefits beyond your disability or life insurance for losses due to covered accidents — including while commuting, traveling by public or private transportation and during business trips. MetLife's AD&D insurance pays you benefits if you suffer a covered accident that results in paralysis or the loss of a limb, speech, hearing or sight. If you suffer a covered fatal accident, benefits will be paid to your beneficiary.

#### Voluntary AD&D Coverage Amounts for You:

- You also have the option to enroll for Voluntary AD&D insurance.
  - For all employees:



## Life Insurance

- Your choice of increments of \$25,000
- The maximum amount of coverage you can receive is \$150,000

### Voluntary AD&D Coverage Amounts for Spouse/Domestic Partner and Child(ren):

- You can choose to cover your dependent spouse/domestic partner and child(ren) with AD&D coverage. Your dependents will be eligible for the following coverage:
- **Dependent Spouse and Child(ren):**
  - Spouse/Domestic Partner — 40% of your coverage amount
  - Child(ren) — 10% of your coverage amount
- **Dependent Spouse/Domestic Partner only:**
  - 50% of your coverage amount
- **Dependent Child(ren) only:**
  - 15% of your coverage amount

\*Child(ren)'s Eligibility: Dependent children ages from birth to 26 years old, are eligible for coverage. Insurance will end on the last day of the calendar year. In TX, regardless of student status, child(ren) are covered until age 25.

## Covered Losses

This AD&D insurance pays benefits for covered losses that are the result of an accidental injury or loss of life. The full amount of AD&D coverage you select is called the "Full Amount" and is equal to the benefit payable for the loss of life. Benefits for other losses are payable as a predetermined percentage of the Full Amount, and will be listed in your coverage in a table of Covered Losses. Such losses include loss of limbs, sight, speech and hearing. The maximum amount payable for all Covered Losses sustained in any one accident is capped at 100% of the Full Amount. **Standard Additional Benefits Include**

Some of the standard additional benefits included in your coverage that may increase the amounts payable to you and/or defray additional expenses that result from accidental injury or loss of life are:

- Seat Belt
- Child Education
- Hospitalization
- Child Care Center
- Spouse Education

## What Is Not Covered by AD&D?

AD&D insurance does not include payment for any loss which is caused by or contributed to by: physical or mental illness, diagnosis of or treatment of the illness; an infection, unless caused by an external wound accidentally sustained or from food poisoning; suicide or attempted suicide; injuring oneself on purpose; the voluntary intake or use by any means of any drug, medication or sedative, unless taken as prescribed by a doctor or an over-the-counter drug taken as directed; voluntary intake of alcohol in combination with any drug, medication or sedative; war, whether declared or undeclared, or act of war, insurrection, rebellion or active participation in a riot; committing or trying to commit a felony; any poison, fumes or gas, voluntarily taken, administered or absorbed; service in the armed forces of any country or international authority, except the United States National Guard; operating, learning to operate, or serving as a member of a crew of an aircraft; while in any aircraft for the purpose of descent from such aircraft while in flight (except for self-preservation); or operating a vehicle or device while intoxicated as defined by the laws of the jurisdiction in which the accident occurs.

## Additional Coverage Information

### How to Apply\*

- Complete your enrollment form and return it to your Human Resources Manager today! Be sure to indicate your Beneficiary.

**Note:** If you do not wish to make a change to your coverage, you do not need to do anything.

\*All applications are subject to review and approval by Metropolitan Life Insurance Company. Based on the plan design and the amount of coverage requested, a Statement of Health may need to be submitted to complete your application.

## For Employee Coverage

Enrollment in this Supplemental Term Life insurance plan is available without providing medical information as long as:

## Life Insurance

### For Annual Enrollment

- The enrollment takes place prior to the enrollment deadline, and
- You are continuing the coverage you had in the last year

### For New Hires

- The enrollment takes place within 30 days from the date you become eligible for benefits, and
- You are enrolling for coverage equal to/less than \$150,000

If you do not meet all of the conditions stated above, you will need to provide additional medical information by completing a Statement of Health form. A Statement of Health is included in this booklet.

### For Dependent Coverage†

You must be covered in order to obtain coverage for your spouse/domestic partner and child(ren).

Your spouse/domestic partner and dependent children do not need to provide medical information as long as s/he/they have not been hospitalized within 90 days preceding the enrollment date:

\*A domestic partner declaration may be required for those partners not registered with a government agency where such registration is available.

### For Annual Enrollment

- The enrollment takes place prior to the enrollment deadline, and
- You are continuing the coverage you had for your spouse/domestic partner and child(ren) in the last year

### For New Hires

- The enrollment takes place within 30 days from the date you become eligible for benefits.

If you do not meet all of the conditions stated above, you will need to provide additional medical information by completing a Statement of Health form. A Statement of Health is included in this booklet.

### About Your Coverage Effective Date

You must be Actively at Work on the date your coverage becomes effective. Your coverage must be in effect in order for your spouse/domestic partner's and eligible children's coverage to take effect. In addition, your spouse/domestic partner and eligible child(ren) must not be home or hospital confined or receiving or applying to receive disability benefits from any source when their coverage becomes effective.

If Actively at Work requirements are met, coverage will become effective on the first of the month following the receipt of your completed application for all requests that do not require additional medical information. A request for your amount that requires additional medical information and is not approved by the date listed above will not be effective until the later of the date that notice is received that MetLife has approved the coverage or increase if you meet Actively at Work requirements on that date, or the date that Actively at Work requirements are met after MetLife has approved the coverage or increase. The coverage for your spouse/domestic partner and eligible child(ren) will take effect on the date they are no longer confined, receiving or applying for disability benefits from any source or hospitalized.

### Who Can Be A Designated Beneficiary?

You can select any beneficiary(ies) other than your employer for your Supplemental coverages, and you may change your beneficiary(ies) at any time. You can also designate more than one beneficiary. You are the beneficiary for your Dependent coverage.

### Once Enrolled, You have Access to MetLife Advantages<sup>SM</sup> — Services to Help Navigate What Life May Bring

#### Grief Counseling<sup>1</sup>

#### To help you, your dependents, and your beneficiaries cope with loss

You, your dependents, and your beneficiaries have access to grief counseling<sup>1</sup> sessions and funeral related concierge services to help cope with a loss — at no extra cost. Grief counseling services provide confidential and professional support during a difficult time to



## Life Insurance

help address personal and funeral planning needs. At your time of need, you and your dependents have 24/7 access to a work/life counselor. You simply call a dedicated 24/7 toll-free number to speak with a licensed professional experienced in helping individuals who have suffered a loss. Sessions can either take place in-person or by phone. You can have up to five face-to-face grief counseling sessions per event to discuss any situation you perceive as a major loss, including but not limited to death, bankruptcy, divorce, terminal illness, or losing a pet.<sup>1</sup> In addition, you have access to funeral assistance for locating funeral homes and cemetery options, obtaining funeral cost estimates and comparisons, and more. You can access these services by calling 1-888-319-7819 or log on to [www.metlifegc.lifeworks.com](http://www.metlifegc.lifeworks.com) (Username: metlifeassist; Password: support).

Download this helpful Funeral Planning Guide at <https://www.metlife.com/funeralplanning/funeral-guide/>.

### Funeral Discounts and Planning Services<sup>2</sup>

#### Ensuring your final wishes are honored

As a MetLife group life policyholder, you and your family may have access to funeral discounts, planning and support to help honor a loved one's life — at no additional cost to you. Dignity Memorial provides you and your loved ones access to discounts of up to 10% off of funeral, cremation and cemetery services through the largest network of funeral homes and cemeteries in the United States.

When using a Dignity Memorial Network you have access to convenient planning services — either online at [www.finalwishesplanning.com](http://www.finalwishesplanning.com), by phone (1-866-853-0954), or by paper — to help make final wishes easier to manage. You also have access to assistance from compassionate funeral planning experts to help guide you.

### Beneficiary Claim Assistance<sup>3</sup> For support when beneficiaries need it most

This program is designed to help beneficiaries sort through the details and serious questions about claims and financial needs during a difficult time. MetLife has arranged for third party financial professionals to be available to help with filing life insurance claims, government benefits and help with financial questions.

### Life Settlement Account<sup>5</sup>

#### For immediate access to death proceeds

The Total Control Account<sup>®</sup> (TCA) settlement option provides your loved ones with a safe and convenient way to manage the proceeds of a life or accidental death and dismemberment claim payments of \$5,000 or more, backed by the financial strength and claims paying ability of Metropolitan Life Insurance Company. TCA death claim payments relieve beneficiaries of the need to make immediate decisions about what to do with a lump-sum check and enable them to have the flexibility to access funds as needed while earning a guaranteed minimum interest rate on the proceeds as they assess their financial situations. Call 1-800-638-7283 for more information about options available to you.

## Life Insurance

### Travel Assistance<sup>6</sup>

#### **A travel assistance benefit is available when you enroll in MetLife's AD&D coverage**

Travel assistance services, offered on your AD&D coverage, offers you and your family access to emergency services while you travel, plus the advantage of concierge assistance for personal and work-related travel and entertainment requests. This service provides you and your dependents with medical, legal, transportation and financial assistance 24 hours a day, 365 days a year when you are more than 100 miles away from home. You also have access to Mobile Assist Service to provide you information to help avoid expensive mobile telephone charges and help effectively use overseas options. Mobile Assist Service also offers a detailed guide that includes essential applications and resources and connects employees to their concierge services. Identity Theft Solutions is also available to help educate you on identity theft prevention and provide assistance in the event you are a victim of identity theft. Please visit the AXA website for more information.

<http://webcorp.axa-assistance.com>

Login: axa

Password: travelassist

### Will Preparation<sup>7</sup>

#### **To help ensure your decisions are carried out**

When you enroll for supplemental term life coverage, you will automatically receive access to Will Preparation Services at no extra cost to you. Both you and your spouse/domestic partner will have unlimited in-person or telephone access to one of MetLife Legal Plans, Inc nationwide network of 14,000+ participating attorneys for preparation of or updating a will, living will or power of attorney.\* When you use a participating plan attorney, there will be no charge for the services.\* Like life insurance, a carefully prepared will (simple or complex), living will and power of attorney are important.

- A will lets you define your most important decisions, such as who will care for your children or inherit your property.
- A living will ensures your wishes are carried out and protects your loved ones from having to make very difficult and personal medical decisions by themselves. Also called an "advanced directive," it is a document authorized by statutes in all states that allows you to provide written instructions regarding use of extraordinary life-support measures and to appoint someone as your proxy or representative to make decisions on maintaining extraordinary life-support if you should become incapacitated and unable to communicate your wishes.
- Powers of attorney allow you to plan ahead by designating someone you know and trust to act on your behalf in the event of unexpected occurrences or if you become incapacitated

Call 1-800-821-6400 and a Client Service Representative will assist you.

\* You also have the flexibility of using an attorney who is not participating in the MetLife Legal Plans, Inc. network and being reimbursed for covered services according to a set fee schedule. In that case you will be responsible for any attorney's fees that exceed the reimbursed amount.

### Estate Resolution Services<sup>SM7</sup> (ERS)

#### **Personal service and compassion assistance to help probate your and your spouse's/domestic partner's estates.**

MetLife Estate Resolution Services<sup>SM</sup> provides probate services in person or over the phone to the representative (executor or administrator) of the deceased employee's estate and the estate of the employee's spouse/domestic partner. Estate Resolution Services include preparation of documents and representation at court proceedings needed to transfer the probate assets from the estate to the heirs and completion of correspondence necessary to transfer non-probate assets. ERS covers participating plan attorneys' fees for telephone and face-to-face consultations or for the administrator or executor to discuss general questions about the probate process.

### WillsCenter.com<sup>8</sup>

#### **Self-service online legal document preparation**

Employees and spouses/domestic partners have access to WillsCenter.com, an online document service to prepare and update a will, living will, power of attorney, funeral directive, memorandum of wishes or HIPAA authorization form in a secure 24/7 environment at no additional cost. This service is available with all life coverages. Log on to [www.willscenter.com](http://www.willscenter.com) to register as a new user.





## Life Insurance

**Digital Storage**<sup>9</sup>MetLife Infinity is a resource that can help you create a digital legacy for your beneficiaries, estate administrators and others who play important roles in your major life events. It is available to anyone regardless of affiliation with MetLife. MetLife Infinity offers a unique way to capture and securely store your important documents, audio files, photos, and videos. Items you can store using MetLife Infinity include deeds, wills and executor instructions and financial and life stage planning documents. Once you've captured your digital legacy, MetLife Infinity allows you to designate individuals to receive your collection electronically in the event of your death or at another time you indicate. To access MetLife Infinity, visit <https://metlifeinfinity.com> to register and learn more.

### Portability

#### **So you can keep your coverage even if you leave your current employer**

Should you leave City of Tallahassee for any reason, and your Supplemental Term Life and Voluntary Accidental Death and Dismemberment insurance under this plan terminates, you will have an opportunity to continue group term coverage ("portability") under a different policy, subject to plan design and state availability. Rates will be based on the experience of the ported group and MetLife will bill you directly. Rates may be higher than your current rates. To take advantage of this feature, you must have coverage of at least \$10,000 up to a maximum of \$1,000,000.

Portability is also available on coverage you've selected for your spouse/domestic partner and dependent child(ren). The maximum amount of coverage for spouse/domestic partners is \$250,000; the maximum amount of dependent child coverage is \$25,000. Increases, decreases and maximums are subject to state availability.

Generally, there is no minimum time for you to be covered by the plan before you can take advantage of the portability feature. Please see your employer or certificate for specific details.

Please note that if you experience an event that makes you eligible for portable coverage, please call a MetLife representative at 1-888-252-3607 or contact your employer for more information.

### Additional Features

This insurance offering from your employer and MetLife comes with additional features that can provide assistance to you and your family

### Accelerate Benefits Option<sup>10</sup>

#### **For access to funds during a difficult time**

If you become terminally ill and are diagnosed with 12 months or less to live, you have the option to receive up to 80% of your life insurance proceeds. This can go a long way towards helping your family meet medical and other expenses at a difficult time. Amounts not accelerated will continue under your employer's plan for as long as you remain eligible per the certificate requirements and the group policy remains in effect.

The accelerated life insurance benefits offered under your certificate are intended to qualify for favorable tax treatment under Section 101(g) of the Internal Revenue Code (26 U.S.C. Sec 101(g)).<sup>10</sup>

Accelerated Benefits Option is not the same as long term care insurance (LTC). LTC provides nursing home care, home-health care, personal or adult day care for individuals above age 65 or with chronic or disabling conditions that require constant supervision.

The Accelerated Benefits Option is also available to spouses/domestic partners insured under Dependent Life insurance plans. This option is not available for dependent child coverage.

### Conversion

#### **For protection after your coverage terminates**

You can generally convert your group term life insurance benefits to an individual whole life insurance policy if your coverage terminates in whole or in part due to your retirement, termination of employment, or change in employee class. Conversion is available on all group life insurance coverages. Please note that conversion is **not** available on AD&D coverage. If you experience an event that makes you eligible to convert your coverage, please call 1-877-275-6387 to begin the conversion process. Please contact your employer for more information.

### Waiver of Premiums for Total Disability (Continued Protection)

#### **Offering continued coverage when you need it most**



## Life Insurance

If you become Totally Disabled, you may qualify to continue certain insurance. You may also be eligible for waiver of your supplemental term life insurance premium until you reach age 70, die, or recover from your disability, whichever is sooner.

Total Disability or Totally Disabled means you are unable to do your job and any other job for which you are fit by education, training or experience due to injury or sickness. The Total Disability must begin before age 60, and your waiver will begin after you have satisfied a 9-month waiting period of continuous disability. The waiver of premium will end when you turn age 70, die, or recover. Please note that this benefit is only available after you have participated in the supplemental/optional term life plan for 12 months and it is not available on dependent coverage. This 12 month requirement applies to new participants in the plan.

1-Grief Counseling services are provided through an agreement with LifeWorks US Inc. LifeWorks is not an affiliate of MetLife, and the services LifeWorks provides are separate and apart from the insurance provided by MetLife. LifeWorks has a nationwide network of over 30,000 counselors. Counselors have master's or doctoral degrees and are licensed professionals. The Grief Counseling program does not provide support for issues such as: domestic issues, parenting issues, or marital/relationship issues (other than a finalized divorce). For such issues, members should inquire with their human resources department about available company resources. This program is available to insureds, their dependents and beneficiaries who have received a serious medical diagnosis or suffered a loss. Events that may result in a loss are not covered under this program unless and until such loss has occurred. Services are not available in all jurisdictions and are subject to regulatory approval. Not available on all policy forms.

2-Services and discounts are provided through a member of the Dignity Memorial® Network, a brand name used to identify a network of licensed funeral, cremation and cemetery providers that are affiliates of Service Corporation International (together with its affiliates, "SCI"), 1929 Allen Parkway, Houston, Texas. The online planning site is provided by SCI Shared Resources, LLC. SCI is not affiliated with MetLife, and the services provided by Dignity Memorial members are separate and apart from the insurance provided by MetLife. SCI offers planning services, expert assistance, and bereavement travel services to anyone regardless of affiliation with MetLife. Discounts through Dignity Memorial's network of funeral providers have been pre-negotiated. Not available where prohibited by law. If the group policy is issued in an approved state, the discount is available for services held in any state except KY and NY, or where there is no Dignity Memorial presence (AK, MT, ND, SD, and WY). For MI and TN, the discount is available for "At Need" services only. Not approved in AK, FL, KY, MT, ND, NY and WA.

3-MetLife administers the Delivering the Promise program, but has arranged for specially-trained third party financial professionals to offer financial education and, upon request, provide personal guidance to employees and former employees of companies providing Delivering the Promise through MetLife.

5-The TCA is not insured by the Federal Deposit Insurance Corporation or any government agency. The assets backing TCAs are maintained in MetLife's general account and are subject to claims of MetLife's creditors. MetLife bears the investment risk of the assets backing TCAs, and expects to receive a profit. Regardless of the investment experience of such assets, the interest credited to TCAs will never fall below the guaranteed minimum rate. Guarantees are subject to the financial strength and claims paying ability of MetLife.

6-Travel Assistance and Identity Theft Solutions services are administered by AXA Assistance USA, Inc. Certain benefits provided under the Travel Assistance program are underwritten by Certain Underwriters at Lloyd's London (not incorporated) through Lloyd's Illinois, Inc. Neither AXA Assistance USA Inc. nor the Lloyd's entities are affiliated with MetLife, and the services and benefits they provide are separate and apart from the insurance provided by MetLife.

7- Will Preparation and MetLife Estate Resolution Services are offered by MetLife Legal Plans, Inc. Cleveland, Ohio. In certain states, legal services benefits are provided through insurance coverage underwritten by Metropolitan Property and Casualty Insurance Company and affiliates, Warwick, Rhode Island. For New York situated cases, the Will Preparation service is an expanded offering that includes office consultations and telephone advice for certain other legal matters beyond Will Preparation. Tax Planning and preparation of Living Trusts are not covered by the Will Preparation Service. Certain services are not covered by Estate Resolution Services, including matters in which there is a conflict of interest between the executor and any beneficiary or heir and the estate; any disputes with the group policyholder, MetLife and/or any of its affiliates; any disputes involving statutory benefits; will contests or litigation outside probate court; appeals; court costs, filing fees, recording fees, transcripts, witness fees, expenses to a third party, judgments or fines; and frivolous or unethical matters.

8-WillsCenter.com is a document service provided by SmartLegalForms, Inc., an affiliate of Epoq Group, Ltd. SmartLegalForms, Inc. is not affiliated with MetLife and the WillsCenter.com service is separate and apart from any insurance or service provided by MetLife. The WillsCenter.com service does not provide access to an attorney, does not provide legal advice, and may not be suitable for your specific needs. Please consult with your financial, legal, and tax advisors for advice with respect to such matters.

9-MetLife Infinity is offered by MetLife Corporate Services, Inc., an affiliate of Metropolitan Life Insurance Company.

10-The Accelerated Benefits Option is subject to state availability and regulation. The accelerated life insurance benefits offered under your certificate are intended to qualify for favorable federal tax treatment. If the accelerated benefits qualify for favorable tax treatment, the benefits will be excludable from your income and not subject to federal taxation.

This information was written as a supplement to the marketing of life insurance products. Tax laws relating to accelerated benefits are complex and limitations may apply. You are advised to consult with and rely on an independent tax advisor about your own particular circumstances.

Receipt of accelerated benefits may affect your eligibility, or that of your spouse or your family, for public assistance programs such as medical assistance (Medicaid), Temporary Assistance to Needy Families (TANF), Supplementary Social Security Income (SSI) and drug assistance programs. You are advised to consult with social service agencies concerning the effect that receipt of accelerated benefits will have on public assistance eligibility for you, your spouse or your family.

This summary provides an overview of your plan's benefits. These benefits are subject to the terms and conditions of the contract between MetLife and City of Tallahassee and are subject to each state's laws and availability. Specific details regarding these provisions can be found in the booklet certificate.

*Life and AD&D coverages are provided under a group insurance policy (Policy Form GPNP99) issued to your employer by MetLife. Life and AD&D coverages under your employer's plan terminates, when your employment ceases, when your Life and AD&D contributions cease, or upon termination of the group contract. Dependent Life coverage will terminate when a dependent no longer qualifies as a dependent. Should your life insurance coverage terminate for reasons other than non-payment of premium, you may convert it to a MetLife individual permanent policy without providing medical evidence of insurability.*

## Life Insurance

### Monthly Costs\* for Supplemental Term *Life Insurance*

You have the option to purchase Supplemental/Option Term Life Insurance. Listed below are your monthly rates (based on your age as of your last birthday) as well as those for your spouse/domestic partner (based on your age as of your last birthday ). Rates to cover your child(ren) are also shown.

Age	Monthly Cost Per \$1,000 of Employee Coverage	Monthly Cost Per \$1,000 of Spouse/Domestic Partner Coverage
Under 25	\$0.046	\$0.042
25 - 29	\$0.05□	\$0.049
30 – 34	\$0.069	\$0.070
35 – 39	\$0.092	\$0.084
40 – 44	\$0.□0□	\$0.098
45 – 49	\$0.1□□	\$0.140
50 – 54	\$0.2□□	\$0.264
55 – 59	\$0.49□	\$0.432
60 – 64	\$0.□□9	\$0.787
65 – 69	\$1.2□□	\$1.351
70 -- 74	\$1.9□2	\$2.208
75 -- 79	\$□□□□	\$3.573
80 -- 84	\$□□□□	\$5.787
85 +	\$□□□□	\$9.373
<b>Cost for your Child(ren)†</b>	\$0.550	

† Covers all eligible children

\*Note: rates are subject to the policy's right to change premium rates, and the employer's right to change employee contributions.

Use the table below to calculate your premium based on the amount of life insurance you will need.

**Example:** \$100,000 Supplemental/Optional Life Coverage

1. Enter the rate from the table (example age 36)	\$0.092	\$ _____
2. Enter the amount of insurance in thousands of dollars (Example: for \$100,000 of coverage enter \$100)	100	_____
3. Monthly premium (1) x (2)	\$9.20	\$ _____

Repeat the three easy steps above to determine the cost for each coverage selected.



## Life Insurance

### Monthly Cost for Voluntary Accidental Death & Dismemberment (VAD&D) Insurance

<ul style="list-style-type: none"><li>• <b>Voluntary Coverage</b></li></ul>	<ul style="list-style-type: none"><li>• <b>Monthly Cost Per \$1,000 of Coverage</b></li></ul>
<ul style="list-style-type: none"><li>• Employee</li></ul>	<ul style="list-style-type: none"><li>• \$0.031</li></ul>
<ul style="list-style-type: none"><li>• Employee &amp; Family</li></ul>	<ul style="list-style-type: none"><li>• \$0.049</li></ul>

# Required Regulatory Information

Like most insurance policies, insurance policies offered by MetLife and its affiliates contain certain exclusions, exceptions, waiting periods, reductions, limitations, and terms for keeping them in force. Please contact MetLife or your plan administrator for complete details.

Certain of the benefits mentioned in this communication may be sponsored by your employer as part of an employee benefit plan subject to the Employee Retirement Income Security Act of 1974, as amended ("ERISA"). Those policies/products which are not part of an employer-sponsored plan are offered by MetLife or an affiliate and are not subject to ERISA. With respect to employer-sponsored benefits, you should obtain additional information regarding terms and eligibility from your employer. The MetLife Auto & Home® Group Insurance Program is not part of your employer-sponsored plan and is not subject to ERISA.

The companies listed in this communication operate independently and are not responsible for each other's financial obligations.

# METLIFE U.S. CONSUMER PRIVACY NOTICE — GROUP BUSINESS & SPECIALIZED BENEFIT RESOURCES

<b>Facts:</b>	<b>What Do the MetLife Companies Do With Your Personal Information?</b>
<b>Plan Sponsors and Group Insurance Contract Holders</b>	This privacy notice is for individuals who apply for or obtain our products and services under an employee benefit plan, group insurance or annuity contract, or as an executive benefit. In this notice, “you” refers to these individuals.
<b>Why?</b>	Financial companies choose how they share your personal information. The law gives consumers the right to limit some but not all sharing. The law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
<b>What?</b>	The types of personal information we collect and share depend on the product or service you have with us. This information can include: <ul style="list-style-type: none"> <li>• Social Security number and employment information</li> <li>• income and assets</li> <li>• driving record</li> <li>• credit information and other consumer report information</li> <li>• medical information and insurance history</li> <li>• information about any business you have with us, our affiliates, or other companies</li> </ul>
<b>How Does MetLife Get Your Information?</b>	We collect personal information from you as well as through third parties. We also use outside sources to help ensure our records are correct and complete. Third parties include consumer reporting agencies, employers, other financial institutions and adult relatives. Information collected may be kept by the consumer reporting agency and later given to others as permitted by law. We don’t control the accuracy of information outside sources give us. If you want to make changes to information we receive about you, you must contact those sources. If we have asked for a consumer report about you, and you write or call us, we will give you the name, address, and phone number of the consumer reporting agency. The agency will give you a copy of the report, if you ask the agency and provide proper identification. Consumer reports may tell us about a lot of things, including: <ul style="list-style-type: none"> <li>• reputation</li> <li>• work history</li> <li>• driving record</li> <li>• finances</li> <li>• hobbies and dangerous activities</li> </ul> <p>In some limited circumstances, we may ask an agency for an investigative report about you. They will ask others about you. We will ask them to contact you as well.</p>
<b>How Does MetLife Use Your Information?</b>	We collect personal information to help decide if you’re eligible for our products or services. We may also use it to help deter fraud or money laundering. How we use this information depends on what products and services you have or want from us. We may also use it to: <ul style="list-style-type: none"> <li>• administer your products and services</li> <li>• market new products to you</li> <li>• confirm or correct your information</li> <li>• help us run our business</li> <li>• process claims and other transactions</li> <li>• comply with applicable laws</li> <li>• perform business research</li> </ul>
<b>How Does MetLife Protect Your Information?</b>	We take important steps to protect your personal information. We treat it as confidential. We tell our employees to take care in handling it. We limit access to those who need it to perform their jobs. Our service providers must also protect it, and use it only to meet our business needs. We take steps to protect our systems from unauthorized access. We comply with all laws that apply to us.
<b>Reasons MetLife Shares Your Information</b>	All financial companies need to share personal information to run their everyday business. We may share your personal information with others with your consent, by agreement, or as permitted or required by law. We may share your personal information without your consent if permitted or required by law. For example, we may share your information with our sales agents and businesses hired to carry out services for us. We may share your information with our regulators or with law enforcement. If you have MetLife products because of your relationship with an employer, association or other sponsoring organization, we may share information with it and its agents as permitted by law. In the section below, we list the reasons financial companies can share their customers’ personal information; the reasons MetLife chooses to share; and whether you can limit this sharing.

Reasons We Can Share Your Personal Information	Does MetLife share?*	Can you limit this sharing?
<b>For our everyday business purposes</b> – such as to process your transactions, learn if you qualify for coverage, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
<b>For our marketing purposes</b> – with service providers we use to offer our products and services to you	Yes	No
<b>For joint marketing with other financial companies</b>	No	Not Applicable
<b>For our affiliates' everyday business purposes</b> – Information about your transactions and experiences	No	Not Applicable
<b>For our affiliates' everyday business purposes</b> – Information about your creditworthiness	No	Not Applicable
<b>For our affiliates to market to you</b>	No	Not Applicable
<b>For non-affiliates to market to you</b>	No	Not Applicable
<b>How Does MetLife Handle Your Health Information?</b>	The Health Insurance Portability and Accountability Act (“HIPAA”) protects your information if you request or purchase dental, vision, long-term care and/or medical insurance from us. We will provide information about your rights under HIPAA with any dental, vision, long- term care or medical coverage issued to you. You can obtain a copy of our HIPAA Privacy Notice by visiting our website at <a href="http://www.MetLife.com">www.MetLife.com</a> . Select “Privacy Policy” at the bottom of the home page. For additional information about your rights under HIPAA or to have a HIPAA Privacy Notice mailed to you, contact us at <a href="mailto:HIPAAprivacyAmericasUS@metlife.com">HIPAAprivacyAmericasUS@metlife.com</a> , or call us at (212) 578-0299.	
<b>Definitions:</b>		
<b>Affiliates</b>	Companies related by common ownership or control. Affiliates can be financial or nonfinancial companies. Our affiliates include life, car, and home insurers. They also include a legal plans company and a securities broker-dealer. In the future, we may have affiliates in other businesses.	
<b>Non-affiliates</b>	Companies not related by common ownership or control. Non-affiliates can be financial or nonfinancial companies. MetLife does not share personal information with non-affiliates for their marketing purposes.	
<b>Joint Marketing</b>	A formal agreement between non-affiliated financial companies that together market financial products or services to you.	
<b>How Can I Access and Correct Information?</b>		
You may ask us for a copy of the personal information we have on you. Generally, we will provide it as long as it is reasonably retrievable and within our control. You must make your request in writing and provide the account or policy number associated with the information you wish to access. For legal reasons, we may not show you privileged information relating to a claim or lawsuit, unless required by law. If you tell us that what we know about you is incorrect, we will review it. If we agree, we will update our records. Otherwise, you may dispute our findings in writing. We will include your statement whenever we give your disputed information to anyone outside MetLife.		
<b>Who is Providing This Notice?</b>	Metropolitan Life Insurance Company Delaware American Life Insurance Company Safeguard Health Plans, Inc. MetLife Health Plans, Inc. General American Life Insurance Company SafeHealth Life Insurance Company Metropolitan Life Insurance Company as administrator for the Prudential Insurance Company of American; Business Men’s Assurance Company of America; Employer’s Reinsurance Corporation; and Teachers Insurance and Annuity Association of America	
<b>How Will I Know if This Notice is Changed?</b>	We may revise this privacy notice at any time. If we make material changes, we will notify you as required by law.	
<b>Questions?</b>	Send privacy questions or requests for more information to: MetLife Privacy Office, P.O. Box 489, Warwick, RI 02887-9954; Call (877) 638-7684 or go to <a href="http://www.metlife.com">www.metlife.com</a>	

\*Information we collect in connection with HIPAA-covered products will only be shared as allowed by HIPAA.

## REQUIRED DISCLOSURE STATEMENT FOR ACCELERATED BENEFITS

### Limitations Of The Accelerated Benefit Option:

The Accelerated Benefit Option is available to insureds under the group life insurance policy. The Accelerated Benefit Option may provide benefits to pay for long-term care services but it is NOT part of a long-term care or nursing home insurance policy and the amount this benefit pays may not be enough to cover medical, nursing home or other bills. You may use the money received from the Accelerated Benefit Option for any purpose. Unlike conventional life insurance proceeds, accelerated benefits payable under this policy **COULD BE TAXABLE IN SOME CIRCUMSTANCES**. We recommend contacting a tax advisor when making tax-related decisions about electing to receive and use benefits under the Accelerated Benefit Option.

### A. Consequences Of This Benefit:

Receipt of accelerated benefits **MAY AFFECT MEDICAID and SUPPLEMENTAL SECURITY INCOME (“SSI”) ELIGIBILITY**. The mere fact that you are insured under a group policy with an accelerated benefits feature may affect your eligibility for these government programs. In addition, exercising the Accelerated Benefit Option and receiving those benefits before you apply for these programs, or while you are receiving government benefits, may affect your initial or continued eligibility. Contact the Medicaid Unit of your local Division of Medical Assistance and the Social Security Administration for more information.

### B. Medical Condition Enabling Acceleration Of Life Benefits:

**Terminal Illness** is the only medical condition which qualifies for accelerated benefits under the group policy. “Terminal illness” is a condition that a physician certifies will reasonably be expected to result in a drastically limited life span as specified in the group policy.

### C. Payment Options:

The accelerated benefit is payable as a LUMP SUM. You or your legal representative may select another payment mode, such as 3 monthly installment payments.

### D. Premium For Accelerated Benefit:

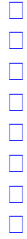
The cost of the Accelerated Benefit Option is included in your regular monthly premium.

### E. Administrative Expense Charge:

No additional administrative expense charges apply.







# **YOUR BENEFIT PLAN**

**City of Tallahassee**

**All Full-Time and Part-Time employees  
and Retirees**



**Supplemental Life Insurance**

**Dependent Life Insurance**

**Voluntary Accidental Death and Dismemberment Insurance**



**Certificate Date: January 1, 2012**



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MetLife Insurance Company of New York  
2000 Avenue of the Americas, New York, NY 10022

### CERTIFICATE OF INSURANCE

MetLife Insurance Company of New York is pleased to provide you with this Certificate of Insurance. This Certificate of Insurance is a contract between you and MetLife Insurance Company of New York. **PLEASE READ THIS CERTIFICATE CAREFULLY.**

This Certificate of Insurance provides coverage under the MetLife Group Policy Number 9000000000. The policy is issued to you as the Policyholder.

**Policyholder:** [Name]

**Group Policy Number:** 9000000000

**Type of Insurance:** Term Life Insurance and Accidental Death and Dismemberment Insurance

**MetLife Toll Free Number(s) For Claim Information:** 1-800-551-1111 or 1-800-551-1112

MetLife Insurance Company of New York  
2000 Avenue of the Americas  
New York, NY 10022

**THIS CERTIFICATE ONLY DESCRIBES TERM LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE.**

**THE GROUP INSURANCE POLICY PROVIDING COVERAGE UNDER THIS CERTIFICATE WAS ISSUED IN A JURISDICTION OTHER THAN MARYLAND AND MAY NOT PROVIDE ALL THE BENEFITS REQUIRED BY MARYLAND LAW.**

**For Residents of North Dakota:** This Certificate of Insurance is issued to you as the Policyholder. The policy is issued to you as the Policyholder. The policy is issued to you as the Policyholder.

**WE ARE REQUIRED BY STATE LAW TO INCLUDE THE NOTICE(S) WHICH APPEAR ON THIS PAGE AND IN THE NOTICE(S) SECTION WHICH FOLLOWS THIS PAGE. PLEASE READ THE(SE) NOTICE(S) CAREFULLY.**

**For Texas Residents:**

**IMPORTANT NOTICE**

El presente aviso es importante para los residentes de Texas.

Este aviso es importante para los residentes de Texas. Este aviso es importante para los residentes de Texas.

2020

Este aviso es importante para los residentes de Texas. Este aviso es importante para los residentes de Texas.

2020

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[www.gccert.com](#)

Este aviso es importante para los residentes de Texas. Este aviso es importante para los residentes de Texas.

**PREMIUM OR CLAIM DISPUTES:**

Este aviso es importante para los residentes de Texas. Este aviso es importante para los residentes de Texas.

**ATTACH THIS NOTICE TO YOUR CERTIFICATE:**

Este aviso es importante para los residentes de Texas. Este aviso es importante para los residentes de Texas.

**Para Residentes de Texas:**

**AVISO IMPORTANTE**

Este aviso es importante para los residentes de Texas.

Este aviso es importante para los residentes de Texas. Este aviso es importante para los residentes de Texas.

2020

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[www.gccert.com](#)

Este aviso es importante para los residentes de Texas. Este aviso es importante para los residentes de Texas.

**DISPUTAS SOBRE PRIMAS O RECLAMOS:**

Este aviso es importante para los residentes de Texas. Este aviso es importante para los residentes de Texas.

**UNA ESTE AVISO A SU CERTIFICADO:**

Este aviso es importante para los residentes de Texas. Este aviso es importante para los residentes de Texas.



# NOTICE FOR RESIDENTS OF LOUISIANA, MINNESOTA, MONTANA, NEW MEXICO, TEXAS, UTAH, AND WASHINGTON

The Definition Of Child Is Modified For The Coverages Listed Below:

## For Louisiana Residents (Accidental Death and Dismemberment Insurance):

Placeholder text for Louisiana residents.

## For Minnesota Residents (Accidental Death and Dismemberment Insurance):

Placeholder text for Minnesota residents.

## For Montana Residents (Accidental Death and Dismemberment Insurance):

Placeholder text for Montana residents.

## For New Mexico Residents (Accidental Death and Dismemberment Insurance):

Placeholder text for New Mexico residents.

- Placeholder text
- Placeholder text
- Placeholder text

## For Texas Residents (Life Insurance):

Placeholder text for Texas residents (Life Insurance).

## For Texas Residents (Accidental Death and Dismemberment Insurance):

Placeholder text for Texas residents (Accidental Death and Dismemberment Insurance).

## For Utah Residents (Accidental Death and Dismemberment Insurance):

Placeholder text for Utah residents.

**NOTICE FOR RESIDENTS OF LOUISIANA, MINNESOTA, MONTANA, NEW MEXICO,  
TEXAS, UTAH, AND WASHINGTON (Continued)**

**For Washington Residents (Accidental Death and Dismemberment Insurance):**

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**NOTICE FOR RESIDENTS OF ALL STATES**

**LIFE INSURANCE BENEFITS WILL BE REDUCED IF AN ACCELERATED BENEFIT IS PAID**

**DISCLOSURE** When you receive a death benefit from your life insurance policy, the amount you receive may be reduced if you have received an accelerated death benefit from your policy. This notice explains how the amount of your death benefit may be reduced. It also explains how you can avoid a reduction in your death benefit. This notice applies to all life insurance policies issued by the company on or after 9/1/00. It also applies to all life insurance policies issued by the company on or before 8/31/00 that have not yet been issued a death benefit. This notice does not apply to life insurance policies that are not subject to the accelerated death benefit provisions of the policy. This notice does not apply to life insurance policies that are not subject to the accelerated death benefit provisions of the policy. This notice does not apply to life insurance policies that are not subject to the accelerated death benefit provisions of the policy.

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## **NOTICE FOR RESIDENTS OF CALIFORNIA**

### **IMPORTANT NOTICE**

**TO OBTAIN ADDITIONAL INFORMATION, OR TO MAKE A COMPLAINT, CONTACT THE POLICYHOLDER OR THE METLIFE CLAIM OFFICE SHOWN ON THE EXPLANATION OF BENEFITS YOU RECEIVE AFTER FILING A CLAIM.**

**IF, AFTER CONTACTING THE POLICYHOLDER AND/OR METLIFE, YOU FEEL THAT A SATISFACTORY SOLUTION HAS NOT BEEN REACHED, YOU MAY FILE A COMPLAINT WITH THE CALIFORNIA INSURANCE DEPARTMENT AT:**

**DEPARTMENT OF INSURANCE  
300 SOUTH SPRING STREET  
LOS ANGELES, CA 90013  
1 (800) 927-4357**





# NOTICE FOR RESIDENTS OF GEORGIA



## IMPORTANT NOTICE



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# NOTICE FOR MASSACHUSETTS RESIDENTS

## CONTINUATION OF ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) INSURANCE

I am continuing my AD&D insurance with my current insurer. I have reviewed the policy and agree to the terms and conditions. I understand that my current insurer is not licensed in Massachusetts and that my insurance will be provided by a licensed reinsurer in Massachusetts. I understand that my insurance will be provided on a non-admitted basis and that my insurer is not subject to the same regulatory requirements as licensed insurers in Massachusetts.

2. I am continuing my AD&D insurance with my current insurer.

- I understand that my current insurer is not licensed in Massachusetts and that my insurance will be provided by a licensed reinsurer in Massachusetts.
- I understand that my insurance will be provided on a non-admitted basis and that my insurer is not subject to the same regulatory requirements as licensed insurers in Massachusetts.

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**Plant Closing** and **Covered Partial Closing** are covered under this policy. I understand that my current insurer is not licensed in Massachusetts and that my insurance will be provided by a licensed reinsurer in Massachusetts.

I understand that my current insurer is not licensed in Massachusetts and that my insurance will be provided by a licensed reinsurer in Massachusetts.





**NOTICE FOR RESIDENTS OF MISSOURI**

**ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE**

**EXCLUSIONS**

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**NOTICE FOR RESIDENTS OF NEW MEXICO**

When you receive a notice from the Department of Health, you should read the notice carefully and follow the instructions. If you have any questions, you should call the toll-free number on the notice.

If you receive a notice from the Department of Health, you should read the notice carefully and follow the instructions. If you have any questions, you should call the toll-free number on the notice.

2. If you receive a notice from the Department of Health, you should read the notice carefully and follow the instructions. If you have any questions, you should call the toll-free number on the notice.

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**NOTICE FOR RESIDENTS OF NORTH CAROLINA**

**Read your Certificate Carefully.**

**IMPORTANT CANCELLATION INFORMATION**

**Please Read The Provisions Entitled**

**DATE YOUR INSURANCE ENDS and DATE YOUR INSURANCE FOR  
YOUR DEPENDENTS ENDS**

**Found on Pages e/ee and e/dep**



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## NOTICE FOR RESIDENTS OF PENNSYLVANIA

The Department of Environmental Protection (DEP) is currently reviewing the proposed rulemaking for the implementation of the 2015 National Ambient Air Quality Standards (NAAQS) for fine particulate matter (PM<sub>2.5</sub>). The proposed rulemaking is being reviewed to ensure that it is consistent with the requirements of the Clean Air Act (CAA) and the National Ambient Air Quality Standards (NAAQS).

The Department of Environmental Protection (DEP) is currently reviewing the proposed rulemaking for the implementation of the 2015 National Ambient Air Quality Standards (NAAQS) for fine particulate matter (PM<sub>2.5</sub>).

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**NOTICE FOR RESIDENTS OF UTAH**

**Notice of Protection Provided by  
Utah Life and Health Insurance Guaranty Association**

Utah law requires that all life and health insurance policies issued in Utah be covered by the Utah Life and Health Insurance Guaranty Association. This notice describes the protection provided by the Association. The Association is a non-profit organization that is authorized to provide financial assistance to policyholders in the event of an insurable's death or disability. The Association's coverage is limited to the amount of the policy's face value, and it may not cover all types of policies or contracts. For more information, please contact your insurance agent or the Association.

- **Life Insurance Policies**  
The Association will pay the death benefit of a life insurance policy if the insured dies while the policy is in force. The benefit is limited to the face amount of the policy, and it may not cover all types of life insurance policies.
- **Accident and Sickness Insurance Policies**  
The Association will pay the benefit of an accident and sickness insurance policy if the insured becomes disabled due to an accident or sickness while the policy is in force. The benefit is limited to the face amount of the policy, and it may not cover all types of accident and sickness insurance policies.
- **Other Insurance Policies**  
The Association will pay the benefit of other insurance policies, such as disability income insurance, if the insured becomes disabled while the policy is in force. The benefit is limited to the face amount of the policy, and it may not cover all types of other insurance policies.

The Association's coverage is subject to the terms and conditions of the policy. It may not cover all types of policies or contracts. For more information, please contact your insurance agent or the Association.

**Note: Certain policies and contracts may not be covered or fully covered.** Some policies and contracts may not be covered or fully covered by the Association. This includes policies and contracts that are not issued in Utah, policies and contracts that are not in force at the time of the insured's death or disability, and policies and contracts that are not covered by the Association's rules and regulations. For more information, please contact your insurance agent or the Association.

**Insurance companies and agents are prohibited by Utah law to use the existence of the Association or its coverage to encourage you to purchase insurance. When selecting an insurance company, you should not rely on Association coverage. If there is any inconsistency between Utah law and this notice, Utah law will control.**

<p>Utah Life and Health Insurance Guaranty Association 1111 East 1000 South Salt Lake City, Utah 84143 Phone: (801) 462-9900 Fax: (801) 462-9901</p>	<p>Utah Life and Health Insurance Guaranty Association 1111 East 1000 South Salt Lake City, Utah 84143 Phone: (801) 462-9900 Fax: (801) 462-9901</p>
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For more information, please contact your insurance agent or the Association.

☐  
**NOTICE FOR RESIDENTS OF VIRGINIA**

☐  
**IMPORTANT INFORMATION REGARDING YOUR INSURANCE**

☐  
The information on this page is intended to help you understand your insurance policy and the options available to you. It is not intended to constitute an offer of insurance or any other financial product. The information is provided for informational purposes only and should not be relied upon as a basis for an investment decision. For more information, please contact your insurance agent or broker.

☐  
Mortgage  
2020  
Insurance  
Coverage  
Options  
and  
Costs

☐  
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☐  
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☐  
Mortgage  
Insurance  
Options  
and  
Costs  
2020  
9-9  
[Mortgage Insurance Options and Costs](#)  
[Mortgage Insurance Options and Costs](#)













# SCHEDULE OF BENEFITS (continued)

## ESTATE RESOLUTION SERVICES

Our ESTATE RESOLUTION SERVICES are designed to help you resolve estate matters in a timely and efficient manner. We provide a full range of services, including will preparation, probate, and estate planning. Our experienced attorneys and staff will work with you to understand your needs and provide the best possible solution. We are committed to providing exceptional service and ensuring that your estate is handled smoothly and efficiently.

## THE FOLLOWING APPLIES TO RESIDENTS OF ALL STATES OTHER THAN TEXAS

### Will Preparation Service

Our Will Preparation Service is designed to help you create a will that reflects your wishes and provides for the smooth transition of your assets. We will work with you to identify your assets, determine your beneficiaries, and draft a will that meets your needs. Our attorneys will ensure that your will is properly executed and that all legal requirements are met. We provide a comprehensive service, including consultation, drafting, and execution of your will.

### Probate Service

Our Probate Service is designed to help you navigate the probate process in a timely and efficient manner. We will represent you in all probate proceedings, including the filing of your will, the appointment of an executor, and the distribution of assets. Our attorneys will ensure that all legal requirements are met and that your estate is settled as quickly as possible. We provide a comprehensive service, including representation in court, negotiation with creditors, and distribution of assets.

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## THE FOLLOWING APPLIES TO RESIDENTS OF TEXAS ONLY

### Will Preparation Service

Our Will Preparation Service is designed to help you create a will that reflects your wishes and provides for the smooth transition of your assets. We will work with you to identify your assets, determine your beneficiaries, and draft a will that meets your needs. Our attorneys will ensure that your will is properly executed and that all legal requirements are met. We provide a comprehensive service, including consultation, drafting, and execution of your will.

Our Will Preparation Service is designed to help you create a will that reflects your wishes and provides for the smooth transition of your assets. We will work with you to identify your assets, determine your beneficiaries, and draft a will that meets your needs. Our attorneys will ensure that your will is properly executed and that all legal requirements are met. We provide a comprehensive service, including consultation, drafting, and execution of your will.

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**SCHEDULE OF BENEFITS (continued)**

**Loss of speech**  \_\_\_\_\_  
\_\_\_\_\_  \_\_\_\_\_

**Loss of hearing**  \_\_\_\_\_  
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**Paralysis**  \_\_\_\_\_  
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**Life Insurance For Your Dependents**

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## DEFINITIONS

□ **Beneficiary** means the person or persons designated in the policy as the beneficiary of the proceeds of the policy, or if no beneficiary is designated, the estate of the insured.

□ **Actively at Work or Active Work** means the insured is actively engaged in any occupation, profession, trade, business, or service, whether or not the insured is receiving any form of compensation therefor.

- the insured is actively engaged in any occupation, profession, trade, business, or service, whether or not the insured is receiving any form of compensation therefor;
- the insured is actively engaged in any occupation, profession, trade, business, or service, whether or not the insured is receiving any form of compensation therefor;
- the insured is actively engaged in any occupation, profession, trade, business, or service, whether or not the insured is receiving any form of compensation therefor.

□ **Basic Annual Earnings** means the insured's basic annual earnings from all sources, including but not limited to salary, wages, honoraria, and other forms of compensation, as determined by the insured's employer.

□ **Beneficiary** means the person or persons designated in the policy as the beneficiary of the proceeds of the policy, or if no beneficiary is designated, the estate of the insured.

□ **Child** means the insured's child, or the child of the insured's spouse, who is under the age of 18 at the time of the insured's death.

□ **for Life Insurance** means the insured's basic annual earnings from all sources, including but not limited to salary, wages, honoraria, and other forms of compensation, as determined by the insured's employer.

□ **Beneficiary** means the person or persons designated in the policy as the beneficiary of the proceeds of the policy, or if no beneficiary is designated, the estate of the insured.

□ **Child** means the insured's child, or the child of the insured's spouse, who is under the age of 18 at the time of the insured's death.

- the insured is actively engaged in any occupation, profession, trade, business, or service, whether or not the insured is receiving any form of compensation therefor;
- the insured is actively engaged in any occupation, profession, trade, business, or service, whether or not the insured is receiving any form of compensation therefor.

□ **for Voluntary Accidental Death and Dismemberment Insurance,** means the insured's basic annual earnings from all sources, including but not limited to salary, wages, honoraria, and other forms of compensation, as determined by the insured's employer.

□ **The term also includes** the insured's basic annual earnings from all sources, including but not limited to salary, wages, honoraria, and other forms of compensation, as determined by the insured's employer.

- the insured is actively engaged in any occupation, profession, trade, business, or service, whether or not the insured is receiving any form of compensation therefor;
- the insured is actively engaged in any occupation, profession, trade, business, or service, whether or not the insured is receiving any form of compensation therefor.

□ **Beneficiary** means the person or persons designated in the policy as the beneficiary of the proceeds of the policy, or if no beneficiary is designated, the estate of the insured.

- the insured is actively engaged in any occupation, profession, trade, business, or service, whether or not the insured is receiving any form of compensation therefor;
- the insured is actively engaged in any occupation, profession, trade, business, or service, whether or not the insured is receiving any form of compensation therefor.

## DEFINITIONS (continued)

**Common Carrier**  means a person or entity that provides transportation services to the public for hire or reward, including but not limited to airlines, railroads, motor carriers, and water carriers.

**The term does not include:**

•  common carriers that provide transportation services to the public for hire or reward.

•  common carriers that provide transportation services to the public for hire or reward.

•  common carriers that provide transportation services to the public for hire or reward.

**Contributory Insurance**  means insurance that is provided to an employee by the employer, including but not limited to health, dental, and vision insurance.

means insurance that is provided to an employee by the employer, including but not limited to health, dental, and vision insurance.

**D**  means the date on which the employee's insurance coverage begins.

**Dependent(s)**  means a person who is dependent on the employee for financial support.

**Domestic Partner**  means a person who is a domestic partner of the employee, as defined in the employee's domestic partnership agreement.

•  means a person who is a domestic partner of the employee, as defined in the employee's domestic partnership agreement.

•  means a person who is a domestic partner of the employee, as defined in the employee's domestic partnership agreement.

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means a person who is a domestic partner of the employee, as defined in the employee's domestic partnership agreement.

**Full-Time**  means an employee who works full-time for the employer, as defined in the employee's full-time agreement.

**Hospital**  means a facility that provides medical care to patients, including but not limited to hospitals, clinics, and ambulatory surgical centers.

•  means a facility that provides medical care to patients, including but not limited to hospitals, clinics, and ambulatory surgical centers.

•  means a facility that provides medical care to patients, including but not limited to hospitals, clinics, and ambulatory surgical centers.

**Hospitalized**  means an employee who is hospitalized, as defined in the employee's hospitalized agreement.

•  means an employee who is hospitalized, as defined in the employee's hospitalized agreement.

•  means an employee who is hospitalized, as defined in the employee's hospitalized agreement.

•  means an employee who is hospitalized, as defined in the employee's hospitalized agreement.

•  means an employee who is hospitalized, as defined in the employee's hospitalized agreement.

•  means an employee who is hospitalized, as defined in the employee's hospitalized agreement.

•  means an employee who is hospitalized, as defined in the employee's hospitalized agreement.

## DEFINITIONS (continued)

- **Contractor** means a person who is engaged to perform services under a contract.
- **Director** means a person who is authorized to exercise the powers of the corporation.
- **Employee** means a person who is employed by the corporation.

**Part-Time**  means a person who is employed by the corporation for less than 20 hours per week.

**Physician**  means a person who is licensed to practice medicine.

- **Professional** means a person who is licensed to practice a profession.
- **Service Provider** means a person who provides services to the corporation.

**The term does not include:**

- **Contractor**
- **Director**
- **Employee**
- **Independent Contractor**
- **Officer**
- **Partner**
- **Shareholder**
- **Spouse**
- **Wife**

**Proof**  means a document that is signed by the person who is responsible for the document.

- **Contractor**
- **Director**
- **Employee**
- **Independent Contractor**

**Spouse**  means a person who is married to the person.

**Signed**  means a document that is signed by the person who is responsible for the document.

**Spouse**  means a person who is married to the person.

**Written**  means a document that is written by the person who is responsible for the document.

**We, Us, and Our**  means the corporation.

**Written or Writing**  means a document that is written by the person who is responsible for the document.

**You and Your**  means the person who is responsible for the document.

**ELIGIBILITY PROVISIONS: INSURANCE FOR YOU**

**ELIGIBLE CLASS(ES)**

**All Full-Time and Part-Time employees and Retirees of the policyholder.**

**2020**

**2021**

**2022**

**2023**

**DATE YOU ARE ELIGIBLE FOR INSURANCE**

**2020**

**2021**

**2022**

**ENROLLMENT PROCESS**

**2020**

**2021**

- 2022**
- 2023**

**2024**

## ELIGIBILITY PROVISIONS: INSURANCE FOR YOU (continued)

### DATE YOUR INSURANCE THAT IS PART OF THE FLEXIBLE BENEFITS PLAN TAKES EFFECT

#### Enrollment When First Eligible

The following information applies to the enrollment period for the Flexible Benefits Plan when you first become eligible for the plan.

- If you are **not required** to enroll in the Flexible Benefits Plan when you first become eligible for the plan, you will have a 30-day enrollment period starting on the first day of the month following the month you first become eligible for the plan. If you do not enroll during this period, you will not be able to enroll in the Flexible Benefits Plan until the next annual enrollment period.

- If you are **required** to enroll in the Flexible Benefits Plan when you first become eligible for the plan, you will have a 30-day enrollment period starting on the first day of the month following the month you first become eligible for the plan. If you do not enroll during this period, you will not be able to enroll in the Flexible Benefits Plan until the next annual enrollment period.

The following information applies to the enrollment period for the Flexible Benefits Plan when you first become eligible for the plan. If you are required to enroll in the Flexible Benefits Plan when you first become eligible for the plan, you will have a 30-day enrollment period starting on the first day of the month following the month you first become eligible for the plan. If you do not enroll during this period, you will not be able to enroll in the Flexible Benefits Plan until the next annual enrollment period.

The following information applies to the enrollment period for the Flexible Benefits Plan when you first become eligible for the plan. If you are required to enroll in the Flexible Benefits Plan when you first become eligible for the plan, you will have a 30-day enrollment period starting on the first day of the month following the month you first become eligible for the plan. If you do not enroll during this period, you will not be able to enroll in the Flexible Benefits Plan until the next annual enrollment period.

#### Enrollment During An Annual Enrollment Period

During the annual enrollment period, you will have a 30-day enrollment period starting on the first day of the month following the month you first become eligible for the plan. If you do not enroll during this period, you will not be able to enroll in the Flexible Benefits Plan until the next annual enrollment period.

- If you are **not required** to enroll in the Flexible Benefits Plan during the annual enrollment period, you will have a 30-day enrollment period starting on the first day of the month following the month you first become eligible for the plan. If you do not enroll during this period, you will not be able to enroll in the Flexible Benefits Plan until the next annual enrollment period.

- If you are **required** to enroll in the Flexible Benefits Plan during the annual enrollment period, you will have a 30-day enrollment period starting on the first day of the month following the month you first become eligible for the plan. If you do not enroll during this period, you will not be able to enroll in the Flexible Benefits Plan until the next annual enrollment period.

The following information applies to the enrollment period for the Flexible Benefits Plan when you first become eligible for the plan. If you are required to enroll in the Flexible Benefits Plan when you first become eligible for the plan, you will have a 30-day enrollment period starting on the first day of the month following the month you first become eligible for the plan. If you do not enroll during this period, you will not be able to enroll in the Flexible Benefits Plan until the next annual enrollment period.





# ELIGIBILITY PROVISIONS: INSURANCE FOR YOUR DEPENDENTS

## ELIGIBLE CLASS(ES) FOR DEPENDENT INSURANCE

All Full-Time and Part-Time employees and Retirees of the policyholder.

## DATE YOU ARE ELIGIBLE FOR DEPENDENT INSURANCE

- I am a full-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a part-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a retiree and I am eligible for dependent insurance on the first day of my retirement.
- I am a full-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a part-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a retiree and I am eligible for dependent insurance on the first day of my retirement.

## ENROLLMENT PROCESS

- I am a full-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a part-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a retiree and I am eligible for dependent insurance on the first day of my retirement.
- I am a full-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a part-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a retiree and I am eligible for dependent insurance on the first day of my retirement.

- I am a full-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a part-time employee and I am eligible for dependent insurance on the first day of my employment.

## DATE INSURANCE THAT IS PART OF THE FLEXIBLE BENEFITS PLAN TAKES EFFECT FOR YOUR DEPENDENTS

### Enrollment When First Eligible

- I am a full-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a part-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a retiree and I am eligible for dependent insurance on the first day of my retirement.
- I am a full-time employee and I am eligible for dependent insurance on the first day of my employment.
- I am a part-time employee and I am eligible for dependent insurance on the first day of my employment.

## ELIGIBILITY PROVISIONS: INSURANCE FOR YOUR DEPENDENTS (continued)

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### Enrollment During An Annual Enrollment Period

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•  \_\_\_\_\_ **not required** \_\_\_\_\_

•  \_\_\_\_\_ **required** \_\_\_\_\_

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### Additional Requirement

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**ELIGIBILITY PROVISIONS: INSURANCE FOR YOUR DEPENDENTS (continued)**

**DATE YOUR INSURANCE FOR YOUR DEPENDENTS ENDS**

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- Mr D
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- Mr D
- Mr D
- Mr D
- Mr D
- Mr D
- 9  Mr D
- Mr D
- Mr D
- Mr D

**CONTINUATION OF INSURANCE WITH PREMIUM PAYMENT: For Mentally or Physically Handicapped Children**

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- R
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**CONTINUATION OF INSURANCE WITH PREMIUM PAYMENT (continued)**

**Premiums for the New Certificate**

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**Right to Convert Life Insurance Amounts Not Continued**

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**If You Die Within 31 Days of the Date Portability Eligible Insurance Ends**

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**If a Dependent Dies Within 31 Days of the Date Portability Eligible Dependent Insurance Ends**

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**If You are Totally Disabled on the Date Your Employment Ends**

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**AT YOUR OPTION: WHEN YOU CEASE ACTIVE WORK DUE TO TOTAL DISABILITY**

**If You cease Active Work because You are Totally Disabled** \_\_\_\_\_

**Total Disability  Totally Disabled**  \_\_\_\_\_

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## LIFE INSURANCE: FOR YOUR DEPENDENTS

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### PAYMENT OPTIONS

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# LIFE INSURANCE: ACCELERATED BENEFIT OPTION (ABO) FOR YOU (continued)

I am requesting that my accelerated benefit option be applied to my life insurance policy.

## Effect of Payment of an Accelerated Benefit

**On premium for Your Life Insurance.** If I elect to receive an accelerated benefit, I understand that my life insurance policy will be terminated and I will not be required to pay any further premiums.

**On Your Life Insurance at Your death.** I understand that if I elect to receive an accelerated benefit, my life insurance policy will be terminated and I will not be eligible for a death benefit.

I understand that if I elect to receive an accelerated benefit, my life insurance policy will be terminated and I will not be eligible for a death benefit.

I understand that if I elect to receive an accelerated benefit, my life insurance policy will be terminated and I will not be eligible for a death benefit.

**On Your Life Insurance at conversion.** I understand that if I elect to receive an accelerated benefit, my life insurance policy will be terminated and I will not be eligible for a death benefit.

I understand that if I elect to receive an accelerated benefit, my life insurance policy will be terminated and I will not be eligible for a death benefit.

I understand that if I elect to receive an accelerated benefit, my life insurance policy will be terminated and I will not be eligible for a death benefit.

**On Your Accidental Death and Dismemberment Insurance.** I understand that if I elect to receive an accelerated benefit, my accidental death and dismemberment insurance policy will be terminated and I will not be eligible for a death benefit.

## Date Your Option to Accelerate Benefits Ends

My option to accelerate benefits ends on the date of my death.

My option to accelerate benefits ends on the date of my conversion.

My option to accelerate benefits ends on the date of my death or the date of my conversion, whichever occurs first.

My option to accelerate benefits ends on the date of my death or the date of my conversion, whichever occurs first, or the date of my death if I am under 65 years of age.

# LIFE INSURANCE: ACCELERATED BENEFIT OPTION (ABO) FOR YOUR SPOUSE

When you elect the Accelerated Benefit Option (ABO) for your spouse, you agree to pay the cost of the accelerated benefit. The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness. The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness. The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness.

**Terminally Ill or Terminal Illness** means a condition that is expected to result in death within a period of 24 months.

## Requirements For Payment of an Accelerated Benefit

The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness. The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness. The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness.

- The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness.
- The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness.
- The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness.

## Proof of Your Spouse's Terminal Illness

The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness. The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness. The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness.

- The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness.
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## Accelerated Benefit Amount

The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness. The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness. The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness.

**Maximum Accelerated Benefit Amount.** The maximum accelerated benefit amount is the lesser of the face amount of the policy or the amount of the policy's cash value.

**Scheduled Reduction of Life Insurance for a Terminally Ill Spouse** means the reduction of the face amount of the policy when the accelerated benefit is paid to your spouse. The scheduled reduction of life insurance for a terminally ill spouse is the reduction of the face amount of the policy when the accelerated benefit is paid to your spouse. The scheduled reduction of life insurance for a terminally ill spouse is the reduction of the face amount of the policy when the accelerated benefit is paid to your spouse.

## Effect of Payment of an Accelerated Benefit

**On Premium for Life Insurance.** The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness. The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness. The accelerated benefit is paid to your spouse when he or she is terminally ill or has a terminal illness.



# LIFE INSURANCE: CONVERSION OPTION FOR YOU

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## When You Will Have the Option to Convert

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## Application Period

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## Option Conditions

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## Maximum Amount of the New Policy

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## LIFE INSURANCE: CONVERSION OPTION FOR YOU (continued)

If you are currently insured under a group-term life insurance policy and you are eligible to convert that policy to an individual policy, you may want to consider converting your policy. This option allows you to convert your group-term life insurance policy to an individual policy without having to provide evidence of insurability.

If you are currently insured under a group-term life insurance policy and you are eligible to convert that policy to an individual policy, you may want to consider converting your policy. This option allows you to convert your group-term life insurance policy to an individual policy without having to provide evidence of insurability.

If you are currently insured under a group-term life insurance policy and you are eligible to convert that policy to an individual policy, you may want to consider converting your policy. This option allows you to convert your group-term life insurance policy to an individual policy without having to provide evidence of insurability. You may want to consider converting your policy if you are currently insured under a group-term life insurance policy and you are eligible to convert that policy to an individual policy. This option allows you to convert your group-term life insurance policy to an individual policy without having to provide evidence of insurability.

If you are currently insured under a group-term life insurance policy and you are eligible to convert that policy to an individual policy, you may want to consider converting your policy. This option allows you to convert your group-term life insurance policy to an individual policy without having to provide evidence of insurability.

### If You Die Within 31 Days After Your Life Insurance Ends

If you die within 31 days after your life insurance ends, your estate may be able to receive a death benefit from your life insurance policy.

If you die within 31 days after your life insurance ends, your estate may be able to receive a death benefit from your life insurance policy.

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If you die within 31 days after your life insurance ends, your estate may be able to receive a death benefit from your life insurance policy.

### If You Become Eligible To Have Insurance Continued Due To Your Total Disability

If you become eligible to have your life insurance continued due to your total disability, you may want to consider continuing your life insurance policy.

If you become eligible to have your life insurance continued due to your total disability, you may want to consider continuing your life insurance policy.

If you become eligible to have your life insurance continued due to your total disability, you may want to consider continuing your life insurance policy.

If you become eligible to have your life insurance continued due to your total disability, you may want to consider continuing your life insurance policy.

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If you become eligible to have your life insurance continued due to your total disability, you may want to consider continuing your life insurance policy.



# LIFE INSURANCE: CONVERSION OPTION FOR YOUR DEPENDENTS

When you are a member of a group-term life insurance plan, you may have the option to convert your life insurance to an individual policy. This option allows you to continue your life insurance coverage without having to answer health questions. This option is available to you and your dependents if you are a member of a group-term life insurance plan that has a conversion option. This option is available to you and your dependents if you are a member of a group-term life insurance plan that has a conversion option.

## When You or a Dependent Will Have the Option to Convert

You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.

- You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.
  - You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.
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You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.

You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.

## Application Period

You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.

## Option Conditions

You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.

- You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.
- You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.

You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.

- You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.
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You or a dependent will have the option to convert if you or the dependent is a member of a group-term life insurance plan that has a conversion option.

## LIFE INSURANCE: CONVERSION OPTION FOR YOUR DEPENDENTS (continued)

### Maximum Amount of the New Policy

The maximum amount of the new policy is the lesser of the face amount of the policy or the amount of the policy that would be in effect if the policy had not been converted.

• The maximum amount of the new policy is the lesser of the face amount of the policy or the amount of the policy that would be in effect if the policy had not been converted.

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### If a Dependent Dies Within the 31 Days After Life Insurance for a Dependent Ends

The maximum amount of the new policy is the lesser of the face amount of the policy or the amount of the policy that would be in effect if the policy had not been converted.

The maximum amount of the new policy is the lesser of the face amount of the policy or the amount of the policy that would be in effect if the policy had not been converted.

### If You Become Eligible To Have Life Insurance For Dependents Continued Due To Your Total Disability

The maximum amount of the new policy is the lesser of the face amount of the policy or the amount of the policy that would be in effect if the policy had not been converted.

The maximum amount of the new policy is the lesser of the face amount of the policy or the amount of the policy that would be in effect if the policy had not been converted.

The maximum amount of the new policy is the lesser of the face amount of the policy or the amount of the policy that would be in effect if the policy had not been converted.

# ELIGIBILITY FOR CONTINUATION OF CERTAIN INSURANCE WHILE YOU ARE TOTALLY DISABLED

If you are a member of a group-term life insurance policy and you are totally disabled, you may be eligible for continuation of your group-term life insurance policy. This continuation is subject to certain conditions and requirements.

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## DEFINITIONS

Continuation of group-term life insurance means the continuation of the original policy for a period of up to 2 years.

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Continuation of group-term life insurance means the continuation of the original policy for a period of up to 2 years.

## TOTAL DISABILITY AND PROOF REQUIREMENTS

Total disability means the inability to perform any substantial gainful activity by reason of physical or mental impairment which has lasted or is expected to last for a continuous period of not less than 12 months.

Total disability means the inability to perform any substantial gainful activity by reason of physical or mental impairment which has lasted or is expected to last for a continuous period of not less than 12 months.

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Total disability means the inability to perform any substantial gainful activity by reason of physical or mental impairment which has lasted or is expected to last for a continuous period of not less than 12 months.

## IF YOU DIE DURING CONTINUATION

If you die during the continuation period, the death benefit will be paid to your beneficiary as if you had died under the original policy.

## ELIGIBILITY FOR CONTINUATION OF CERTAIN INSURANCE WHILE YOU ARE TOTALLY DISABLED (Continued)

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

### EFFECT OF PREVIOUS CONVERSION

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

### EFFECT OF PREVIOUS ELECTION TO PORT COVERAGE

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

### DATE CONTINUATION ENDS

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

### Option To Convert Your Continuation Eligible Life Insurance

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.

### Option To Port Your Continuation Eligible Insurance

I am a partner in a partnership that is a qualified partnership under Section 1361 and I am a partner in the partnership.



## ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE (continued)

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### Exclusion for Intoxication

**Intoxicated**

### COMMON DISASTER

### BENEFIT PAYMENT

### APPLICABILITY OF PROVISIONS









# ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE (continued)

## ADDITIONAL BENEFIT: SPOUSE EDUCATION

2. If the insured is currently attending an educational institution, please provide the following information:

- Name of the educational institution
- Address of the educational institution
- City and State of the educational institution
- Dates of attendance
- Estimated cost of attendance

## BENEFIT AMOUNT

3. The benefit amount is the amount payable to the beneficiary in the event of an accidental death or dismemberment. It is based on the face amount of the policy and the percentage of dismemberment.

- If the insured is totally disabled, the benefit amount is 100% of the face amount.
- If the insured is partially disabled, the benefit amount is a percentage of the face amount based on the degree of disability.

## BENEFIT PAYMENT

4. The benefit payment is the amount payable to the beneficiary in the event of an accidental death or dismemberment. It is based on the benefit amount and the terms of the policy.

- If the insured is totally disabled, the benefit payment is the full benefit amount.
- If the insured is partially disabled, the benefit payment is a percentage of the benefit amount based on the degree of disability.





## FILING A CLAIM

When a claimant files a claim for any other insurance benefits described in this certificate, the claimant must first file a claim with the primary insurer. If the primary insurer denies the claim, the claimant must then file a claim with the secondary insurer. The claimant must provide all necessary documentation to support the claim.

The claimant must file a claim with the primary insurer within the time limit specified in the policy. If the primary insurer denies the claim, the claimant must file a claim with the secondary insurer within the time limit specified in the policy.

## CLAIMS FOR OTHER INSURANCE BENEFITS

**When a claimant files a claim for any other insurance benefits described in this certificate**

the claimant must first file a claim with the primary insurer within 90 days of the date of the loss.

If the primary insurer denies the claim, the claimant must file a claim with the secondary insurer within 90 days of the date of the loss.

### Step 1

The claimant must file a claim with the primary insurer within 90 days of the date of the loss.

If the primary insurer denies the claim, the claimant must file a claim with the secondary insurer within 90 days of the date of the loss.

### Step 2

The claimant must file a claim with the primary insurer within 90 days of the date of the loss.

If the primary insurer denies the claim, the claimant must file a claim with the secondary insurer within 90 days of the date of the loss.

### Step 3

The claimant must file a claim with the primary insurer within 90 days of the date of the loss.

If the primary insurer denies the claim, the claimant must file a claim with the secondary insurer within 90 days of the date of the loss.

The claimant must file a claim with the primary insurer within 90 days of the date of the loss.

If the primary insurer denies the claim, the claimant must file a claim with the secondary insurer within 90 days of the date of the loss.

### Step 4

The claimant must file a claim with the primary insurer within 90 days of the date of the loss.

If the primary insurer denies the claim, the claimant must file a claim with the secondary insurer within 90 days of the date of the loss.

The claimant must file a claim with the primary insurer within 90 days of the date of the loss.

If the primary insurer denies the claim, the claimant must file a claim with the secondary insurer within 90 days of the date of the loss.

**Time Limit on Legal Actions.** The claimant must file a lawsuit within the time limit specified in the policy.

If the claimant does not file a lawsuit within the time limit, the claimant may be barred from recovering benefits.











**The following notice applies to residents of Texas only:**



**For information about the Will Preparation Service and Estate Resolution Service, you may contact the provider, Hyatt Legal Plans, Inc. by phone.**

**Phone: 1-800-821-6400**





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Metropolitan Life Insurance Company  
200 Park Avenue, New York, New York 10166

**CERTIFICATE RIDER**

**Group Policy No.:** 98014-1-G  
**Policyholder:** City of Tallahassee  
**Effective Date:** January 1, 2021

The certificate is changed as follows:

Applicable to Life Insurance for all Full-Time employees, Part-Time employees and Retirees

**“Supplemental Life Insurance**

For all employees and Retirees who were insured under the Policyholder’s Supplemental Life Insurance plan prior to August 1, 2006 and who have elected to retain such option on and after June 1, 2015:

For Active Employees and Retirees ..... See Certificate of Insurance,  
page 1 (GCERT2000 fp)  
  
Accelerated Benefit Option..... Up to 80% of Your Name of  
Coverage Life amount not to  
exceed \$400,000

**NOTE:** If You are insured under this option and request any change to the amount of Your Supplemental Life Insurance, You must elect a different Option shown below.

For all other Employees:

Option 1 ..... \$30,000  
Option 2 ..... \$50,000  
Option 3 ..... \$80,000  
Option 4 ..... \$100,000  
Option 5 ..... \$130,000  
Option 6 ..... \$150,000  
Option 7 ..... \$180,000

Option 8.....	\$200,000
Option 9.....	\$230,000
Option 10.....	\$250,000
Option 11.....	\$300,000
Option 12.....	\$350,000
Option 13.....	\$400,000
Option 14.....	\$450,000
Option 15.....	\$500,000
Maximum Supplemental Life Benefit.....	\$500,000
Non-Medical Issue Amount.....	\$150,000
Accelerated Benefit Option.....	Up to 80% of Your Supplemental Life amount not to exceed \$400,000
For Retirees.....	An amount equal to Your Supplemental Life Insurance in effect immediately before the date You retire.

**ESTATE RESOLUTION SERVICES**

The following Estate Resolution Services are provided at no additional cost to individuals insured for Group Supplemental Life Insurance coverage as described below. If You are eligible to receive these Estate Resolution Services and You or Your Spouse (for the Will Preparation Service) or You or Your Spouse or a Beneficiary (for the Probate Service) would like to speak with a representative from Hyatt Legal Plans or get the name of a Plan Attorney that you can speak with about these Services, please call (800) 821-6400.

**THE FOLLOWING APPLIES TO RESIDENTS OF ALL STATES OTHER THAN TEXAS**

**Will Preparation Service**

If You elect Group Supplemental Life Insurance coverage, a Will Preparation Service (the "Service") will be made available to You, through a MetLife affiliate (the "Affiliate"), while Your Group Supplemental Life Insurance coverage is in effect. This Service will be made available at no cost to You. It enables You to have a will prepared for You and Your Spouse free of charge by attorneys designated by the Affiliate. If You have a will prepared by an attorney not designated by the Affiliate, You must pay for the attorney's services directly. Upon Proof of such payment, You will be reimbursed for the attorney's services in an amount equal to the lesser of the amount You paid for the attorney's services and the amount customarily reimbursed for such services by the Affiliate.

## **Probate Service**

If You become insured for Group Supplemental Life Insurance coverage and You or Your Spouse die while such Group Supplemental Life Insurance coverage is in effect, a probate benefit (the "Benefit") will be made available to Your estate in the event of Your death or to Your Spouse's estate in the event of Your Spouse's death. Such benefit will be made available through a MetLife affiliate ("Affiliate").

The Benefit includes attorney representation and payment of legal fees for the executor or administrator of the estate of the deceased, including representation for the preparation of all documents and all of the court proceedings needed to transfer probate assets from the estate of the deceased to applicable heirs; and the completion of correspondence necessary to transfer non-probate assets such as proceeds from insurance policies, joint bank accounts, stock accounts or a house; and associated tax filings.

The Benefit provides for such probate services to be made available, free of charge by attorneys designated by the Affiliate. If probate services are provided by an attorney not designated by the Affiliate, the estate of the deceased must pay for those attorney's services directly. Upon Proof of such payment, the estate of the deceased will be reimbursed for the attorney's services in an amount equal to the lesser of the amount such estate paid for the attorney's services and the amount customarily reimbursed for such services by the Affiliate.

This Benefit will be provided at no cost to You and will end on the date Your Group Supplemental Life Insurance coverage ends.

## **THE FOLLOWING APPLIES TO RESIDENTS OF TEXAS ONLY**

### **Will Preparation Service**

If You elect Group Supplemental Life Insurance coverage, a Will Preparation Service (the "Service") will be made available to You through a MetLife affiliate (the "Affiliate"), as agreed to by the Policyholder and MetLife, while Your Group Supplemental Life Insurance coverage is in effect under this Policy.

Will Preparation Service means a service covering the preparation of wills and codicils for You and Your Spouse. The creation of any testamentary trust is covered. The Will Preparation Service does not include tax planning.

This Service will be made available at no cost to You. It enables You to have a will prepared for You and Your Spouse free of charge by attorneys designated by the Affiliate. If You have a will prepared by an attorney not designated by the Affiliate, You must pay for the attorney's services directly. Upon Proof of such payment, You will be reimbursed for the attorney's services in an amount equal to the lesser of the amount You paid for the attorney's services and the amount customarily reimbursed for such services by the Affiliate.

### **Probate Service**

If You become insured for Group Supplemental Life Insurance coverage and You or Your Spouse die while such Group Supplemental Life Insurance coverage is in effect, a probate benefit (the "Benefit") will be made available to Your estate in the event of Your death or to Your Spouse's estate in the event of Your Spouse's death. Such benefit will be made available through a MetLife affiliate ("Affiliate").

The Benefit includes attorney representation and payment of legal fees for the executor or administrator of the estate of the deceased including representation for the preparation of all documents and all of the court proceedings needed to transfer probate assets from the estate of the deceased to applicable heirs; and the completion of correspondence necessary to transfer non-probate assets such as proceeds from insurance policies, joint bank accounts, stock accounts or a house; and associated tax filings.

The Benefit provides for such services to be made available, free of charge by attorneys designated by the Affiliate. If probate services are provided by an attorney not designated by the Affiliate, the estate of the deceased must pay for those attorney's services directly. Upon Proof of such payment, the estate of the deceased will be reimbursed for the attorney's services in an amount equal to the lesser of the amount such estate paid for the attorney's services and the amount customarily reimbursed for such services by the Affiliate.

This Benefit will be provided at no cost to You and will end on the date Your Group Supplemental Life Insurance coverage ends.”

**This rider is to be attached to and made part of the certificate.**









Metropolitan Life Insurance Company  
200 Park Avenue, New York, New York 10166

**CERTIFICATE RIDER**

**Group Policy No.:** 98014-1-G  
**Policyholder:** City of Tallahassee  
**Effective Date:** January 1, 2021

The certificate is changed as follows:

Applicable to Life Insurance and Accidental Death and Dismemberment Insurance

In the **SCHEDULE OF BENEFITS**, replace "For each of Your Children" under **Life Insurance For Your Dependents** with the following:

"For each of Your Children..... \$10,000"

**This rider is to be attached to and made part of the certificate.**



MetLife Insurance Company of New York  
2000 Park Avenue, New York, NY 10021

**CERTIFICATE RIDER**

**Group Policy No.:** 98014-1-G

**Policyholder:** City of Tallahassee

**Effective Date:** January 1, 2012

**ELIGIBILITY PROVISIONS: INSURANCE FOR YOUR DEPENDENTS**  
**DATE YOUR INSURANCE FOR YOUR DEPENDENTS ENDS**

This rider is to be attached to and made part of the certificate.