



Supplemental Term Life

Group Life

Abel - Supplemental Life Plan Benefits

Original Plan Effective Date: January 1, 2019

Build Your Benefit. With MetLife's Supplemental Term Life insurance, your employer gives you the opportunity to buy valuable life insurance coverage for yourself, your spouse and your dependent children – all at affordable group rates.

| | Employee | Spouse and Child | | | |
|---|------------------------|------------------------------|-----------------------------------|--|--|
| | Employee | Spouse ¹ | Child | | |
| Life Coverage: provides a benefit in the event of death. Schedules: | Increments of \$10,000 | Increments of \$5,000 | Flat Amount: \$500 or \$10,000 | | |
| Non-Medical Maximum | \$150,000 | \$150,000 \$25,000 | | | |
| Overall Benefit Maximum | \$500,000 | \$500,000 \$100,000 \$10,000 | | | |
| Employee Contribution | 100% | 100% | 100% | | |

Any purchase or increase in benefits, which does not take place within 31 days of employee's or dependent's eligibility effective date is subject to evidence of insurability. Coverage is subject to approval by MetLife.

To request coverage:

- 1. Choose the amount of employee coverage that you want to buy.
- 2. Look up the premium costs for your age group for the coverage amount you are selecting on the chart below.
- 3. Choose the amount of coverage you want to buy for your spouse. Again, find the premium costs on the chart below. Note: Premiums are based on your age, not your spouse's.
- Choose the amount of coverage you want to buy for your dependent children. The premium costs for each coverage option are shown below.
- 5. Fill in the enrollment form with the amounts of coverage you are selecting. (To request coverage over the non-medical maximum please see your Human Resources representative for a medical questionnaire that you will need to complete.) Remember, you must purchase coverage for yourself in order to purchase coverage for your spouse or children.



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Metropolitan Life Insurance Company, 200 Park Ave., New York, NY 10166 GCert2000ESL+DEP





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| Employee & Spouse Coverage | Employee Age - Monthly Premium For | | | | | | | | | | | |
|----------------------------------|------------------------------------|---------|---------|---------|----------|----------|----------|----------|----------|------------|------------|------------|
| | Under 25 | 25 - 29 | 30 -34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65 - 69 | 70-74 | 75+ |
| \$10,000 | \$0.80 | \$0.80 | \$0.90 | \$1.40 | \$2.20 | \$3.60 | \$6.20 | \$10.00 | \$13.30 | \$21.30 | \$37.60 | \$37.60 |
| \$20,000 | \$1.60 | \$1.60 | \$1.80 | \$2.80 | \$4.40 | \$7.20 | \$12.40 | \$20.00 | \$26.60 | \$42.60 | \$75.20 | \$75.20 |
| \$30,000 | \$2.40 | \$2.40 | \$2.70 | \$4.20 | \$6.60 | \$10.80 | \$18.60 | \$30.00 | \$39.90 | \$63.90 | \$112.80 | \$112.80 |
| \$40,000 | \$3.20 | \$3.20 | \$3.60 | \$5.60 | \$8.80 | \$14.40 | \$24.80 | \$40.00 | \$53.20 | \$85.20 | \$150.40 | \$150.40 |
| \$50,000 | \$4.00 | \$4.00 | \$4.50 | \$7.00 | \$11.00 | \$18.00 | \$31.00 | \$50.00 | \$66.50 | \$106.50 | \$188.00 | \$188.00 |
| \$100,000 | \$8.00 | \$8.00 | \$9.00 | \$14.00 | \$22.00 | \$36.00 | \$62.00 | \$100.00 | \$133.00 | \$213.00 | \$376.00 | \$376.00 |
| \$200,000 | \$16.00 | \$16.00 | \$18.00 | \$28.00 | \$44.00 | \$72.00 | \$124.00 | \$200.00 | \$266.00 | \$426.00 | \$752.00 | \$752.00 |
| \$300,000 | \$24.00 | \$24.00 | \$27.00 | \$42.00 | \$66.00 | \$108.00 | \$186.00 | \$300.00 | \$399.00 | \$639.00 | \$1,128.00 | \$1,128.00 |
| \$500,000 | \$40.00 | \$40.00 | \$45.00 | \$70.00 | \$110.00 | \$180.00 | \$310.00 | \$500.00 | \$665.00 | \$1,065.00 | \$1,880.00 | \$1,880.00 |

| Dependent Child Coverage³ - Monthly Premium For: | | | |
|---|--|--|--|
| \$10,000 | | | |
| \$0.88 | | | |

Due to rounding, your actual payroll deduction amount may vary slightly

Features available with Supplemental Life

Portability4: If your present employment ends, you can choose to continue your current life benefits.

What Is 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 in North Dakota) of the effective date of the certificate, or payment of increased benefits for death caused by suicide within two years (one year in North Dakota or Colorado) of an increase in coverage. Please note that a reduction schedule may apply. Please see your benefits administrator or certificate for specific details.

Life coverages are provided under a group insurance policy (Policy Form GPNP99 or G2130-S) issued to your employer by MetLife. Life coverages under your employer's plan terminates when your employment ceases, when your Life contributions cease, or upon termination of the group insurance policy. 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.

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 your employer and are subject to each state's laws and availability. Specific details regarding these provisions can be found in the certificate

If you have additional questions regarding the Life Insurance program underwritten by MetLife, please contact your benefits administrator or MetLife. Like most group life insurance policies, MetLife group policies contain exclusions, limitations, terms and conditions for keeping them in force. Please see your certificate for complete details.

- ¹ Spouse amount cannot exceed 50% of the employee's Supplemental Life benefit.
- ² Child benefits for children under 6 months old are limited.
- ⁴ Subject to state availability. To take advantage of this benefit, coverage of at least \$20,000 must be elected.



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