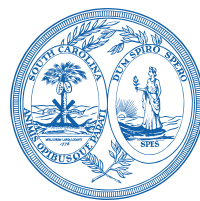


2022

Insurance Benefits Guide



PEBASM
SC Retirement Systems
and State Health Plan

Life insurance

PEBA's life insurance program is underwritten by Metropolitan Life Insurance Company (MetLife). The insurance offered is term life insurance, which means coverage is provided for a specific period of time. The policy has no cash value.

The contract for the life insurance program consists of the policy, which is issued to PEBA, PEBA's application and your enrollment application. The policy is held by PEBA. The insurance contract may be changed at any time as long as MetLife and PEBA agree on the change. No one else has the authority to change the contract. All changes must be in writing, made a part of the policy and signed by an official of MetLife and of PEBA.

Eligibility

Generally, to enroll in the life insurance program, you must be a full-time employee who receives compensation from a department, agency, board, commission or institution of the state; public school district; county government, including county council members; participating optional employer; or another eligible employer that is approved by state law and is participating in the state insurance program. Members of the South Carolina General Assembly, clerical and administrative employees of the General Assembly, and judges in the state courts are also eligible for life insurance coverage.

For insurance purposes, an employee is classified as full-time if they work at least 30 hours per week. If you work at least 20 hours per week, you may also be eligible in cases where your covered employer has defined full-time to mean an employee who works at least 20 hours per week. PEBA must also approve this decision. In addition, eligibility requires that employees are citizens or legal residents of the United States, its territories and its protectorates. Temporary, leased or

seasonal employees are ineligible.

Actively at Work requirement

To become insured or to receive an increase in the amount of your life insurance coverage, you must be "Actively at Work." This means you are fully performing your customary duties for your regularly scheduled number of hours at the employer's normal place of business, or at other places the employer's business requires you to travel.

If you are not working due to illness or injury, you do not meet the Actively at Work requirements. If you are receiving sick pay, short-term disability benefits or long-term disability benefits, you also do not meet the requirements.

If you are not Actively at Work on the date coverage would otherwise begin, or on the date an increase in your amount of life insurance would otherwise be effective, you will not be eligible for the coverage or the increase until you return to active work. If the absence is on a non-work day, coverage will not be delayed provided you were Actively at Work on the work day immediately preceding the non-work day. Except as otherwise provided for in the life insurance certificate, you are eligible to continue to be insured only while you remain Actively at Work.

Any selection for life insurance coverage or increase in coverage made while you are not Actively at Work will not be eligible for claims. You will receive a refund of premium for any life insurance coverage you paid for which you were not eligible.

Applications

The *Notice of Election* form and an electronic *Statement of Health* that you complete to be covered by this plan are considered your application for life insurance coverage. MetLife

may use misstatements or omissions in your application to contest the validity of insurance or to deny a claim.

After the insured's insurance coverage has been in force during his lifetime for two years from the effective date of his coverage, MetLife cannot contest the insured's coverage except for fraud or the non-payment of premiums. However, if there has been an increase in the amount of insurance for which the insured was required to apply or for which MetLife required medical evidence, then, to the extent of the increase, any loss that occurs within two years of the effective date of the increase will be contestable.

Any statements that the insured makes in his application will, in the absence of fraud, be considered representations (true at the time) and not warranties (true at the time and will remain true in the future). Also, any statement an insured makes will not be used to void his insurance, nor defend against a claim, unless the statement is contained in the application.

What's the minimum amount of life insurance you should have? To help you get an idea of how much to consider, try MetLife's calculator at www.metlife.com/scpeba.

Basic Life insurance

Automatic enrollment into the Basic Life insurance benefit, including Accidental Death and Dismemberment coverage, is provided to eligible employees enrolled in the State Health Plan or the TRICARE Supplement Plan. There are no specific forms to complete to participate, and you receive this benefit at no cost. Basic Life insurance coverage provides:

- \$3,000 in term life insurance to eligible employees age 69 and younger; and
- \$1,500 to eligible employees age 70 or older.

The Accidental Death and Dismemberment coverage amounts are the same as the Basic Life insurance.

Your coverage begins on the first day of the month you are Actively at Work as a full-time employee. If you become eligible on a day other than the first calendar day or first working day of the month, your coverage starts on the first day of the next month. All effective dates of coverage are subject to the Actively at Work requirement (see Page 108).

Optional Life insurance

For many people, purchasing additional life insurance over and above employer-provided coverage, can help lend greater financial security. The Optional Life insurance benefit, with Accidental Death and Dismemberment coverage, is a voluntary benefit in which you pay the entire premium with no contributions from PEBA or your employer.

Initial enrollment - active employees

If you are an eligible employee, you can enroll in Optional Life insurance within 31 days of the date you are hired. You will need to complete the required forms. You can elect coverage, in \$10,000 increments, up to three times your basic annual earnings (rounded down to the nearest \$10,000), or up to \$500,000, whichever is less, without providing medical evidence.

You can apply for a higher benefit level, in increments of \$10,000, up to a maximum of \$500,000, by completing an electronic *Statement of Health* to provide medical evidence. You will receive an email from MetLife to complete a *Statement of Health*.

Your coverage begins on the first day of the month you are Actively at Work as a full-time employee. If you become eligible on a day other than the first calendar day or first working day of the month,

your coverage starts on the first day of the next month. If you enroll in an amount of coverage that requires medical evidence, your coverage effective date for the amount requiring medical evidence will be the first of the month after approval.

All effective dates of coverage are subject to the Actively at Work provision (see Page 108).

Late entry

With the Pretax Group Insurance Premium feature

If you participate in the MoneyPlus Pretax Group Insurance Premium feature and do not enroll in Optional Life coverage within 31 days of the date you begin employment, you can enroll only within 31 days of a special eligibility situation (see Page 21) or during the annual open enrollment period each October. In certain special eligibility situations, you may purchase Optional Life coverage, in \$10,000 increments, up to a maximum of \$50,000 without providing medical evidence. Coverage elected as a result of a special eligibility situation will be effective the first of the month after you complete and file a *Notice of Election* form. Otherwise, you will need to complete a *Notice of Election* form and an electronic *Statement of Health* during the open enrollment period. If approved, your coverage will be effective on the first day of January after the enrollment period or, if approved after January 1, coverage will be effective the first of the month after approval. All effective dates of coverage are subject to the Actively at Work provision (see Page 108).

Without the Pretax Group Insurance Premium feature

If you do not participate in the MoneyPlus Pretax Group Insurance Premium feature and do not enroll in Optional Life coverage within 31 days of the date you begin employment, you can enroll throughout the year as long as you provide

medical evidence, and it is approved by MetLife. To enroll, you will need to complete a *Notice of Election* form and an electronic *Statement of Health*. Your coverage will be effective on the first of the month following approval. In certain special eligibility situations, you may purchase Optional Life coverage, in \$10,000 increments, up to a maximum of \$50,000 without providing medical evidence. Coverage will be effective the first of the month after you complete and file the *Notice of Election* form.

All effective dates of Optional Life coverage are subject to the Actively at Work requirement (see Page 108).

Premiums

Optional Life premiums are determined by your age as of the preceding December 31 and the amount of coverage you select. Active employees can pay premiums for up to \$50,000 of coverage before taxes through MoneyPlus (see Page 136). Retired employees are not eligible to pay premiums through MoneyPlus.

What if my age category changes?

Rates are based on your age and will increase when your age category changes. If your age category changes, your premium will increase on January 1 of the next calendar year. Your coverage will be reduced at age 70, 75 and 80. Reduced coverage takes place January 1 of the next calendar year.

Changing your coverage amount

With Pretax Group Insurance Premium feature

If you participate in the MoneyPlus Pretax Group Insurance Premium feature, you can increase, decrease or drop your Optional Life coverage only during the annual open enrollment period in October or within 31 days of a special eligibility situation (see Page 21).

To increase your coverage during open enrollment, you will need to provide medical evidence and be approved by MetLife. If approved, coverage will be effective on January 1 following the enrollment period. All effective dates of Optional Life coverage are subject to the Actively at Work requirement (see Page 108). If you are increasing your Optional Life coverage due to a special eligibility situation, you can increase, in increments of \$10,000 up to \$50,000 (\$500,000 serves as the maximum coverage amount) without providing medical evidence.

Without the Pretax Group Insurance Premium feature

If you do not participate in the MoneyPlus Pretax Group Insurance Premium feature, you can apply to increase your amount of Optional Life coverage at any time during the year by providing medical evidence and being approved by MetLife. Your coverage at the new level will be effective on the first day of the month following the date of approval. In certain special eligibility situations, you may purchase Optional Life coverage, in \$10,000 increments, up to a maximum of \$50,000 without providing medical evidence. Coverage will be effective the first of the month after you complete and file the *Notice of Election* form.

All effective dates of Optional Life coverage are subject to the Actively at Work requirement (see Page 108). You can decrease or cancel your coverage at any time. However, if you want to re-enroll or increase coverage at a later date, you must provide medical evidence and be approved by MetLife.

Dependent Life insurance

Eligible dependents

If you are eligible for life insurance coverage, you may enroll your eligible dependents in Dependent

Life insurance even if you have not enrolled in the Optional Life program or state health insurance coverage.

Eligible dependents include:

- Lawful spouse:
 - May not be eligible for coverage as an employee of a participating employer.
- Children:
 - Includes natural children, legally adopted children, children placed for adoption (from the date of placement with the adopting parents until the legal adoption), stepchildren or children for whom you have legal guardianship.
 - From live birth to age 19, or a child who is at least 19 years old but younger than age 25 who attends school on a full-time basis (as defined by the institution) as his principal activity and is primarily dependent on you for financial support.

Insurance eligibility changes made by the Patient Protection and Affordable Care Act, as amended by the Health Care and Education Reconciliation Act of 2010, do not apply to Dependent Life-Child insurance.

Children of any age are eligible if they are physically or mentally incapable of self-support, are incapable of self-support before age 25 and are financially dependent on you for more than one-half of their support and maintenance.

For more information about covering an incapacitated child, see Page 16.

A person who is eligible as an employee or retiree under the policy, or insured under continuation, is not eligible as a dependent. Only one person can insure an eligible dependent child.

PEBA may conduct an audit of the eligibility of an

insured dependent. If the dependent is found to be ineligible, no benefits will be paid.

If both husband and wife work for a participating employer, only one can carry dependent coverage for eligible dependent children, and the spouses cannot cover each other.

To file a claim under Dependent Life-Child for a child age 19 through 24, you will be required to show the child was a full-time student at the time of enrollment and at the time of the claim. You will need a statement on letterhead from the educational institution that verifies the child was a full-time student and provides the child's dates of enrollment. The statement should be given to your benefits administrator, who will send it to MetLife with the *Life Insurance Claim Form*.

To file a claim for an incapacitated child over the age of 25, you must give certification of incapacitation to your benefits administrator, who will send it to MetLife with the *Life Insurance Claim Form*.

Excluded dependents

- Any dependent who is eligible as an employee for life insurance coverage, or who is in full-time military service, will not be considered a dependent.
- A former spouse and former stepchildren cannot be covered under Dependent Life insurance through PEBA, even with a court order.
- A foster child is not eligible for Dependent Life coverage.

Dependent Life-Spouse coverage

If you are enrolled in the Optional Life program, you may cover your spouse in increments of \$10,000 for up to 50 percent of your Optional Life coverage or \$100,000, whichever is less.

However, if you are not enrolled in Optional Life coverage, you can enroll your spouse for only \$10,000 or \$20,000.

Medical evidence is required for all coverage amounts greater than \$20,000, coverage amount increases of more than \$20,000 and for coverage not elected when your spouse first became eligible or due to a special eligibility situation.

Your spouse's coverage will be reduced at ages 70, 75 and 80 based on his age.

Spouses enrolled in Dependent Life coverage are also covered for Accidental Death and Dismemberment benefits. They are eligible for the Seat Belt Benefit, Air Bag Benefit, Child Care benefit and Child Education Benefit (see Pages 116-117).

Dependent Life-Child coverage

The Dependent Life-Child benefit is \$15,000 per child, and coverage is guaranteed. Children are eligible from live birth to ages 19 or 25 if a full-time student. A child can be covered by only one parent under this Plan.

Enrollment

Within 31 days of the date you are hired, you can enroll in Dependent Life-Spouse insurance up to \$20,000 without providing medical evidence. Enrollment in Optional Life is required to enroll in Dependent Life-Spouse coverage for more than \$20,000. You may not cover an ex-spouse.

Eligible children may be added at initial enrollment and throughout the year without providing medical evidence.

To enroll in Dependent Life insurance, you must complete a *Notice of Election* form and return it to your benefits administrator. Each dependent you wish to cover must be listed on the *Notice of Election* form.

Your dependent's coverage begins on the first day of the month if you are Actively at Work on that day as a full-time employee. If you become eligible on the first working day of the month (the first day that is not a Saturday, Sunday or observed holiday), and it is not the first calendar day, you may choose to have coverage start on the first day of that month or the first day of the next month. If you become eligible on a day other than the first calendar day or first working day of the month, coverage starts on the first day of the next month.

At any time during the year, you can enroll in or add additional Dependent Life-Spouse coverage by completing an electronic *Statement of Health* to provide medical evidence. The additional coverage is effective the first of the month after approval of medical evidence.

All effective dates are subject to the Actively at Work requirement (see Page 108) and the dependent non-confinement provision, found later in this section.

Adding a new spouse

If you wish to add a spouse because you marry, you can enroll in Dependent Life-Spouse coverage of \$10,000 or \$20,000 without providing medical evidence. To do this, complete a *Notice of Election* form within 31 days of the date of your marriage. Coverage becomes effective the first of the month after you complete and file the *Notice of Election* form. You cannot cover your spouse as a dependent if your spouse is or becomes an employee of an employer that participates in the plan.

If you divorce, you must drop your spouse from your Dependent Life coverage. You will need to complete a *Notice of Election* form within 31 days of the date of your divorce. Coverage ends the date of the divorce.

Spouse's loss of employment

If your spouse's employment with a participating employer ends, you can enroll your spouse in Dependent Life coverage for up to \$20,000 within 31 days of his termination without providing medical evidence. If your spouse loses life insurance through an employer that does not participate in PEBA insurance, he can enroll throughout the year by completing an electronic *Statement of Health* to provide medical evidence.

Late entry

If you do not enroll within 31 days of the date you begin employment or are married, you can enroll your spouse throughout the year as long as you provide medical evidence and it is approved by MetLife. To do so, complete a *Notice of Election* form and an electronic *Statement of Health*. Coverage will be effective on the first day of the month after approval. All effective dates of coverage are subject to the Actively at Work requirement and the dependent non-confinement provision.

Adding children

Eligible children may be added throughout the year without providing medical evidence by completing a *Notice of Election* form and returning it to your benefits administrator. Coverage will be effective the first of the month after you complete and file the form.

Your eligible child is automatically covered for 30 days from the child's live birth. To continue your child's coverage, you will need to list each child on your *Notice of Election* form within 31 days of birth; otherwise the child's coverage will terminate at the end of the 30-day period.

You must list each child on your *Notice of Election* form within 31 days of birth, even if you have Dependent Life Insurance coverage when you have a new eligible child.

All effective dates of coverage are subject to the dependent non-confinement provision as described below.

If a dependent is hospitalized or confined because of illness or disease on the date his insurance would otherwise become effective, his effective date shall be delayed until he is released from such hospitalization or confinement. This does not apply to a newborn child. However, in no event will insurance on a dependent be effective before your life insurance is effective.

Premiums

Dependent Life-Spouse coverage and Dependent Life-Child coverage are separate benefits for which you pay separate premiums. Premiums are paid entirely by you, with no contribution from your employer, and may be paid through payroll deduction.

Premiums for Dependent Life-Spouse are determined by the spouse's age.

The premium for Dependent Life-Child coverage is \$1.26, regardless of the number of children covered.

Beneficiaries

A beneficiary is the person or people who will receive insurance payments if you die. You can change your beneficiaries at any time, unless you have given up this right. If you have no eligible beneficiaries named, death benefits will be paid to:

1. Your estate;
2. Your lawful spouse, if living; otherwise:
3. Your natural or legally adopted child or children, in equal shares, if living; otherwise:
4. Your parents, in equal shares, if living; otherwise:
5. Your siblings, in equal shares, if living.

Changing your beneficiaries

You can change your beneficiaries online through [MyBenefits.sc.gov](https://www.mylife.com/MyBenefits.sc.gov), or by notifying your benefits administrator and completing a *Notice of Election* form. The change will be effective on the date the request is signed. Please note that MetLife will allow beneficiary changes by power of attorney only if the documents specifically state an attorney-in-fact has the power to change beneficiary designations.

Assignment

You may transfer ownership rights for your insurance to a third party, which is known as assigning your life insurance. MetLife will not be bound by an assignment of the certificate or of any interest in it unless it is made as a written statement, you file the original instrument or a certified copy with MetLife's home office, and MetLife sends you an acknowledged copy.

MetLife is not responsible for the validity of any assignment. You will need to ensure that the assignment is legal in your state and that it accomplishes your intended goals. If a claim is based on an assignment, MetLife may require proof of interest of the claimant. A valid assignment will take precedence over any claim of a beneficiary.

Accidental Death and Dismemberment

This section does not apply to retirees or dependent children.

Schedule of accidental losses and benefits

In addition to any life insurance benefit, MetLife will pay Accidental Death and Dismemberment benefits equal to the amount of Basic and Optional Life insurance for which the employee is insured and an amount equal to the amount of Dependent Life-Spouse insurance for which the spouse is insured, according to the schedule below, if:

1. You suffer accidental bodily injury while your insurance is in force;
2. A loss results directly from such injury, independent of all other causes, and is unintended, unexpected and unforeseen; and
3. Such a loss occurs within 365 days after the date of the accident causing the injury.

Loss of a hand or foot refers to actual and permanent severance from the body at or above the wrist or ankle joint. Loss of sight, speech or hearing means entire and irrecoverable loss. Loss of both a thumb and index finger of same hand, means actual and permanent severance from the body at or above the metacarpophalangeal joints.

The amount of the benefit shall be a percentage of the amount of Basic, Optional and Dependent Life-Spouse insurance. The percentage is determined by the type of loss, as shown in the table to the right.

Description of loss	Percent of life insurance amount
Life	100%
Both hands, both feet or sight of both eyes	100%
One hand and one foot	100%
Speech and hearing in both ears	100%
Either hand or foot, and sight of one eye	100%
Movement of both upper and lower limbs (quadriplegia)	100%
Movement of both lower limbs (paraplegia)	75%
Movement of both legs and one arm, or both arms and one leg	75%
Movement of the upper and lower limbs of one side of body (hemiplegia)	50%
Either hand or foot	50%
Sight of one eye	50%
Speech or hearing in both ears	50%
Movement of one limb (uniplegia)	25%
Thumb and index finger of same hand	25%

What is not covered?

MetLife will not pay Accidental Death and Dismemberment benefits under this section for any loss caused or contributed to by:

- Intentionally self-inflicted injury.
- Suicide or attempted suicide.
- Committing or attempting to commit a felony.
- Bodily or mental infirmity, illness or disease.
- Alcohol in combination with any drug, medication or sedative.
- The voluntary use of prescription drugs,

nonprescription drugs, illegal drugs, medications, poisons, gases, fumes or other substances taken, absorbed, inhaled, ingested or injected unless it is taken upon the advice of a licensed physician in the verifiable prescribed manner and dosage.

- Motor vehicle collision or accident where you are the operator of the motor vehicle and your blood alcohol level meets or exceeds the level at which intoxication is defined in the state where the collision or accident occurred, regardless of any legal proceedings thereto.
- Infection, other than infection occurring simultaneously with, and as a direct and independent result of, the accidental injury.
- Medical or surgical treatment, diagnostic procedures or any resulting complications, including complications from medical misadventure.
- War or any act of war, whether declared or undeclared.
- Service in the military of any nation, except the U.S. National Guard.

Accidental Death and Dismemberment benefits

Seat Belt and Air Bag Benefit (Basic, Optional and Dependent-Life Spouse Accidental Death and Dismemberment only)

The Seat Belt Benefit is an additional 10 percent of your accidental death benefit. However, the amount MetLife will pay for this benefit will not be less than \$1,000 or more than \$25,000. For example, if your amount of Optional Life insurance is \$20,000 and you die in an accident, an additional \$20,000 accidental death benefit will be payable. The Seat Belt Benefit increases this accidental death benefit by 10 percent, or \$2,000. The total accidental death benefit will then be \$22,000,

which means the entire death benefit will be \$42,000.

The Air Bag Benefit is an additional 5 percent. However, the amount paid for this benefit will not be less than \$1,000 or more than \$10,000 of your accidental death benefit. For example, if your amount of life insurance is \$20,000 and you die in an accident, an additional \$20,000 accidental death benefit will be payable. The Seat Belt Benefit increases the accidental death benefit by \$2,000, and the Air Bag Benefit increases the accidental death benefit by \$1,000 (5 percent of \$20,000), which means the entire death benefit will be \$43,000.

To be eligible for these benefits, the following must apply:

1. The seat in which the insured was seated was equipped with a properly installed air bag at the time of the accident.
2. The private passenger car is equipped with seat belts.
3. The seat belt was in proper use by the insured at the time of the accident as certified in the official accident report or by the investigating officer.
4. At the time of the accident, the driver of the private passenger car was a licensed driver and was not intoxicated, impaired or under the influence of alcohol or drugs.

Child Care Benefit (Optional and Dependent-Life Spouse Accidental Death and Dismemberment only)

A Child Care Benefit will be paid to each dependent who is younger than age 7 (at the time of the insured's death) and who is enrolled in a day care program. The benefit for each child per year will be the lesser of:

1. Twelve percent of your amount of Accidental

Death and Dismemberment insurance; or

2. \$5,000; or
3. Actual incurred child care expenses.

It will be paid for each dependent who qualifies for no more than two years. If this benefit is in effect on the date that the employee or the spouse dies and there is no dependent child who could qualify for this benefit, MetLife will pay \$1,000 to the beneficiary.

Dependent Child Education Benefit (Optional and Dependent-Life Spouse Accidental Death and Dismemberment only)

An Education Benefit is paid for each dependent who qualifies as a student. A qualified dependent must be either a post-high school student who attends a school for higher learning on a full-time basis at the time of the insured's death or in the 12th grade and will become a full-time post-high school student in a school for higher learning within 365 days after the insured's death. The benefit is a maximum of \$10,000 per academic year with a maximum overall benefit of 25 percent of the coverage amount. The benefit will be payable at the beginning of each school year for a maximum of four consecutive years, but not beyond the date the child turns age 25.

If this benefit is in effect on the date you die or your spouse dies and you do not have a child who could qualify for it, MetLife will pay \$1,000 to your beneficiary.

Felonious Assault Benefit (Optional Accidental Death and Dismemberment, Employee only)

A Felonious Assault Benefit is paid if you are injured in a felonious assault and the injury results in a loss for which benefits are payable under the Accidental Death and Dismemberment benefit. The benefit is the lesser of one time your annual earnings, \$25,000 or your amount of Optional Accidental Death and Dismemberment insurance

coverage.

A felonious assault is a physical assault by another person resulting in bodily harm to you. The assault must involve the use of force or violence with intent to cause harm and must be a felony under the laws of the jurisdiction in which the act was committed.

Repatriation Benefit (Basic Life, Optional Life and Dependent Life- Spouse Accidental Death and Dismemberment)

A Repatriation Benefit will be paid if you or your spouse with Dependent Life-Spouse coverage die in a way that would be covered under the Accidental Death and Dismemberment benefit and if the death occurs more than 100 miles from your principal residence.

The Repatriation Benefit will be the lesser of:

- The actual expenses incurred for:
 - Preparation of the body for burial or cremation, and
 - Transportation of the body to the place of burial or cremation;
- or
- \$5,000, the maximum amount for this benefit.

Public Transportation (Common Carrier) Benefit (Basic, Optional Accidental Death and Dismemberment, Employee only)

If you die as a result of a covered accident that occurs while you are a fare-paying passenger on a public transportation vehicle, MetLife will pay an additional benefit equal to your full amount of Accidental Death and Dismemberment insurance.

Public transportation vehicle means any air, land or water vehicle operated under a license for the transportation of fare-paying passengers.

MetLife AdvantagesSM

Your Optional Life insurance benefits include access to MetLife AdvantagesSM—a comprehensive suite of valuable services for support, planning and protection when you need it most at no cost to you.

Will Preparation

Offers you and your spouse unlimited face-to-face or telephone meetings with an attorney, from the MetLife Legal Plans' network of more than 18,000 participating attorneys, to prepare or update a will, living will and power of attorney.

For more information, call MetLife Legal Plans at 800.821.6400, 8 a.m. to 7 p.m., Monday-Friday. Advise the Client Service Representative that you are with PEBA (group number 200879) and provide the last four digits of your Social Security number.

Estate Resolution Services

Estate representatives and beneficiaries may receive unlimited face-to-face legal assistance with probating your and your spouse's estates. Beneficiaries can also consult an attorney, from the MetLife Legal Plans' network of more than 18,000 participating attorneys, for general questions about the probate process.

For more information, call MetLife Legal Plans at 800.821.6400, 8 a.m. to 7 p.m., Monday-Friday. Advise the Client Service Representative that you are with PEBA (group number 200879) and provide the last four digits of your Social Security number.

WillsCenter.com

Helps you or your spouse prepare a will, living will, power of attorney and HIPAA authorization form on your own, at your own pace, 24 hours a day, seven days a week.

Visit www.willscenter.com and register as a new

user. Follow the simple instructions to create your online document. This benefit is also available to you even if you only have Basic Life insurance.

Funeral Planning Assistance

Services designed to simplify the funeral planning process for your loved ones and beneficiaries to assist them with organizing an event that will honor a loved one's life from a self-paced funeral planning guide to services, such as locating funeral homes, florists and local support groups.

Call Dignity Memorial 24 hours a day at 866.853.0954 or visit finalwishesplanning.com.

You can also use this phone number to locate funeral homes and other important service providers.

Grief Counseling

Provides you and your dependents up to five in-person private counseling sessions per event with a professional grief counselor to help cope with a loss, no matter the circumstances, whether it's a death, an illness or divorce. Sessions also may be held over the phone.

Call LifeWorks US, Inc. 24 hours a day, 7 days a week at 888.319.7819.

Live Settlement Account

The Total Control Account (TCA)[®] is a settlement option that provides your loved ones with a safe and convenient way to manage life insurance proceeds. They'll have the convenience of immediate access to any or all of their proceeds through an interest-bearing account with unlimited check-writing privileges. The Total Control Account also allows beneficiaries time to decide what to do with their proceeds.

Call MetLife at 800.638.7283, 8 a.m. to 6 p.m., Monday-Friday.

Transition Solutions

Focuses on guidance and services around insurance and other financial products to help you and your family better prepare for your future in response to benefit-changing events.

Call MetLife to be connected with Barnum Financial Group financial professionals at 877.275.6387, 9 a.m. to 6 p.m., Monday-Friday.

Delivering the Promise®

Helps beneficiaries sort through the details and serious questions about claims and financial needs during a difficult time. MetLife has arranged for Barnum Financial Group financial professionals to be available for assistance in person or by telephone to help with filing life insurance claims, government benefits and help with financial questions.

To be referred to a Delivering the Promise specialist who will contact you directly, call 877.275.6387, prompt 2.

Claims

To pay benefits, MetLife must be given a written proof of loss. This means a claim must be filed as described below.

Your accelerated benefit

If you or your covered dependent is diagnosed by a physician as having a terminal illness, you may request that MetLife pay up to 80 percent of your life insurance prior to your death. Any remaining benefits will be paid to your beneficiary upon your death. A terminal illness means that you have a life expectancy of 12 months or less.

To file a claim, notify your employer. Then you, your employer and the attending physician will each complete a section of MetLife's *Accelerated Benefit Option* form.

How to file a claim

When you or your dependent dies, your employer should be notified. This should be done as soon as reasonably possible. The benefits administrator will complete and submit MetLife's *Life Insurance Claim* form. MetLife will send the beneficiary a beneficiary statement and a condolence letter, which requests an original certified death certificate.

When MetLife receives acceptable proof of your covered dependent's death, it will pay the life insurance benefit to you. If you are no longer living, it will be paid to your beneficiary.

When a retiree dies, the beneficiary, or the employer on his behalf, should notify MetLife of the death by calling 800.638.6420.

Suicide provision

No Optional Life, Dependent Life-Spouse or Dependent Life-Child benefit will be payable if death results from suicide, whether the covered person is sane or insane, within two years of the effective date. If suicide occurs within two years of a coverage increase, the death benefit payable is limited to the amount of coverage in force prior to the increase.

How Accidental Death and Dismemberment claims are paid

In the case of accidental death, your employer should be notified. The benefits administrator will complete and submit MetLife's *Life Insurance Claim* form. MetLife will pay the accidental death benefit to your beneficiaries.

If you sustained other losses covered under Accidental Death and Dismemberment, you, your employer and your physician must complete the *Accidental Death and Dismemberment Claim* form and submit it to MetLife. The benefit for other

losses you sustained will be paid to you, if you are living. Otherwise, it will be paid to your beneficiary.

A dependent's Accidental Death and Dismemberment benefit will be paid to you, if you are living. Otherwise, it will be paid to your beneficiary.

Examinations and autopsies

MetLife retains the right to have you medically examined at its expense when and so often as it may reasonably require whenever a claim is pending and, where not forbidden by law, MetLife reserves the right to have an autopsy performed in case of death.

When your coverage ends

Termination of coverage

Your insurance will end at midnight on the earliest of:

- The last day of the month you terminate your employment;
- The last day of the month you go on unapproved leave of absence;
- The last day of the month you enter a class of employees not eligible for coverage (for example, a change from full-time to part-time status);
- The date PEBA's policy ends; or
- The last day of the month you do not pay the required premium for that month.

Retiree coverage will end the January 1 after:

- You reach age 70, if you continued coverage and retired before January 1, 1999; or
- You reach age 75, if you continued coverage and retired January 1, 1999, and later.

Claims incurred before the date insurance coverage ends will not be affected by coverage

termination.

Termination of Dependent Life insurance coverage

Your dependent's coverage will terminate at midnight on the earliest of:

- The day PEBA's policy ends;
- The day you, the employee, die;
- The last day of the month in which the dependent no longer meets the definition of a dependent; or
- The day any premiums for Dependent Life insurance coverage are due and unpaid for a period of 30 days.

Claims incurred before the date insurance coverage ends will not be affected by coverage termination.

Extension of benefits

An extension of benefits is provided according to the requirements below. MetLife is not required by contract to provide these benefits unless you meet these requirements.

Leave of absence

If you are on an employer-approved leave of absence and you remain eligible for active benefits, you can continue your Optional Life insurance for up to 12 months from the first of the month after the last day worked, as long as you pay the required premiums. MetLife may require written proof of your leave of absence approval before any claims are paid.

Military leave of absence

If you enter active military service and are granted a military leave of absence in writing, your life insurance coverage (including Dependent Life coverage) may be continued for up to 12 months from the first of the month after the

last day worked, as long as you pay the required premiums. If the leave ends before the agreed-upon date, this continuation will end immediately. If you return from active military duty after being discharged and you qualify to return to work under applicable federal or state law, you may be eligible for the life insurance coverage you had before the leave of absence began, provided you are rehired by the same employer and request reinstatement within 31 days of returning to work.

Disability

If you become disabled, your life insurance coverage can be continued for up to 12 months from your last day worked as long as you remain eligible for active benefits and:

- You continue to pay the premiums; and
- The Optional Life insurance policy does not end.

When you lose eligibility for active benefits due to disability

- If you are eligible for retiree insurance, you can convert your coverage to an individual whole life policy or continue your Optional Life insurance until age 75. Learn more about your options for life insurance on Page 164.
- If you are not eligible for retiree insurance, you can convert your coverage to an individual whole life policy. You must submit an application for conversion within 31 days of termination of your active employee coverage.
- If you are later approved for disability retirement benefits, and therefore are eligible for retiree insurance, you may enroll in up to the same amount of Optional Life coverage you had when your eligibility for active benefits ended. To do so, contact MetLife within 31 days of your disability retirement

approval date. Coverage would begin the first of the month after your approval for disability retirement.

For more information about retiree insurance eligibility, see Page 158.

Continuing or converting your life insurance

Please note that Accidental Death and Dismemberment coverage may not be continued or converted.

Continuation

If you are eligible for retiree insurance, you may be able to continue your insurance coverage and pay premiums directly to MetLife. MetLife will mail you a conversion/continuation packet. Packets are sent via U.S. mail three to five business days after MetLife receives the eligibility file from PEBA. To continue your coverage, complete the form that will be included in your packet from MetLife. Coverage is lost due to approved retirement or approved disability retirement.

If you have questions about your options for continuing your insurance coverage or would like to request continuation forms, contact MetLife at 888.507.3767, 8 a.m. to 11 p.m., Monday through Friday. A complete application must be received within 31 days of your benefit termination.

If you continue your coverage, you will receive a bill from MetLife for your premiums. You will pay your premiums directly to MetLife. Contact MetLife at 888.507.3767 if you wish to make changes to your coverage.

Conversion

If your Basic, Optional or Dependent Life insurance ends because your employment or eligibility for coverage ends, you may apply to convert your coverage to an individual whole life insurance policy, a permanent form of life insurance, without

providing medical evidence. MetLife will mail you a conversion packet. Packets are sent via U.S. mail three to five business days after MetLife receives the eligibility file from PEBA. To convert your coverage, follow the instructions included in your packet from MetLife. The policy will be issued without medical evidence if you apply for and pay the premium within 31 days.

When applying for coverage, remember these rules:

1. You may not apply for more than the amount of life insurance you had under your terminated group life insurance.
2. Your new premium for the conversion policy will be set at MetLife's standard rate for the amount of coverage that you wish to convert and your age.

You must contact MetLife within 31 days of the date your insurance coverage ends.

Group policy is terminated

If your group life insurance ends because of termination by the state of the policy or termination as a class, you may be eligible for a conversion policy. For more information, see the MetLife certificate under the Conversion Option section.

Death benefit during conversion period

If you die within 31 days of the date your group insurance was terminated and meet the conversion eligibility requirements, MetLife will pay a death benefit regardless of whether an application for coverage under an individual policy has been submitted. The death benefit will be the amount of insurance you would have been eligible to convert under the terms of the Conversion Right section.