MIT

Your MIT Group Life Insurance Benefit

Benefits in effect as of January 1, 2016
MIT Group Life Insurance

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

Term Life Insurance Coverage Options

Basic Term Life Insurance Coverage

Your employer provides you with Basic Term Life insurance in the amount of $50,000 and Accidental Death and Dismemberment insurance coverage in the amount of $100,000 (2 times your basic life insurance coverage) at no cost to you. These coverage amounts are subject to scheduled reductions after age 65.*

Supplemental Term Life Insurance Coverage

For You

Coverage levels from 1 to 7 times your base annual earnings****, to a maximum coverage amount of $2,000,000. Coverage level is subject to scheduled reductions after age 65.**

For Your Spouse/ Domestic Partner

Option 1 - $50,000
Option 2 - $100,000; maximum issue amount.

For Your Dependent Children****

15 days to 6 months - $100 per child
Over 6 months - $10,000 per child

*View the Basic Term Life Insurance scheduled age-reduction chart on the MIT Benefits website at http://hrweb.mit.edu/benefits/basic-life-insurance

**View the Supplemental Term Life scheduled age-reduction chart on the MIT Benefits website at http://hrweb.mit.edu/benefits/supplemental-life-insurance

***Supplemental Life Insurance for Faculty members and other academics with MAP appointments is based on 11/9ths of base annual earnings.
Supplemental Life Insurance for Faculty members and other academics with 9-Month Standard appointments is based on 12/9ths of base annual earnings.

****Child(ren)'s Eligibility: Dependent children from 15 days to 26 years old are eligible for coverage.

Monthly Costs for Supplemental Term Life Insurance

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

<table>
<thead>
<tr>
<th>Your Age</th>
<th>Your Monthly Cost Per $1,000 of Coverage (based on your age on 1/1)</th>
<th>Spouse/Domestic Partner Monthly Cost Per $1,000 of Coverage (based on your age on 7/1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 25</td>
<td>$0.030</td>
<td>$0.034</td>
</tr>
<tr>
<td>25 - 29</td>
<td>$0.030</td>
<td>$0.043</td>
</tr>
<tr>
<td>30 – 34</td>
<td>$0.039</td>
<td>$0.060</td>
</tr>
<tr>
<td>35 – 39</td>
<td>$0.039</td>
<td>$0.069</td>
</tr>
<tr>
<td>40 – 44</td>
<td>$0.049</td>
<td>$0.086</td>
</tr>
<tr>
<td>45 – 49</td>
<td>$0.097</td>
<td>$0.121</td>
</tr>
<tr>
<td>50 – 54</td>
<td>$0.146</td>
<td>$0.198</td>
</tr>
<tr>
<td>55 – 59</td>
<td>$0.233</td>
<td>$0.344</td>
</tr>
<tr>
<td>60 – 64</td>
<td>$0.323</td>
<td>$0.568</td>
</tr>
<tr>
<td>65 – 69</td>
<td>$0.565</td>
<td>$1.025</td>
</tr>
<tr>
<td>70 – 74</td>
<td>$0.900</td>
<td>$1.654</td>
</tr>
<tr>
<td>75 – 79</td>
<td>$1.365</td>
<td>$1.654</td>
</tr>
<tr>
<td>80 +</td>
<td>$2.060</td>
<td>$1.654</td>
</tr>
</tbody>
</table>

† Covers all eligible children

†† Covered by Child(ren)
Use the table below to calculate your premium based on the amount of life insurance you will need.

**Example 1:** $150,000 Supplemental Life Insurance Coverage for employee age: 33 on 1/1

<table>
<thead>
<tr>
<th>Monthly</th>
<th>Weekly*</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0.039</td>
<td>$0.009</td>
</tr>
</tbody>
</table>

1. Enter the rate from the table (example age 33)
2. Enter the amount of insurance in thousands of dollars (Example: for $150,000 of coverage enter $150)

| 150 | 150 |

3. Monthly/weekly premium (1) x (2)

| $5.85 | $1.35 |

Repeat the three easy steps above to determine the cost for each coverage amount selected.
*Weekly rate based on 52 week year: age 33 example, monthly rate $0.039 x 12 ÷ 52 = $0.009. Actual weekly payroll premium may be different due to rounding.

**Example 2:** $100,000 Spouse Life Insurance Coverage, employee age 46 on 7/1

<table>
<thead>
<tr>
<th>Monthly</th>
<th>Weekly**</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0.121</td>
<td>$0.0279</td>
</tr>
</tbody>
</table>

1. Enter the rate from the table (example age 46)
2. Enter the amount of insurance in thousands of dollars (Example: for $100,000 of coverage enter $100)

| 100 | 100 |

3. Monthly/weekly premium (1) x (2)

| $12.10 | $2.79 |

Repeat the three easy steps above to determine the cost for each coverage amount selected.
**Weekly rate based on 52 week year: age 46 example, monthly rate $0.121 x 12 ÷ 52 = $0.0279. Actual weekly payroll premium may be different due to rounding.
Eligibility, Enrollment, Coverage and Effective Date Information

Who is Eligible?

If you are paid by MIT, are appointed to work at MIT for at least three months, and work at least 50% of the normal full-time work schedule, you automatically receive several forms of coverage. View more detailed eligibility requirements on the MIT Benefits website at http://hrweb.mit.edu/benefits/life-other-insurance

How and When to Enroll

Are you a newly benefit eligible employee? Complete your enrollment forms for Supplemental Life and Dependent Life and your Beneficiary forms today! Either contact the MIT Benefits Office or access the enrollment forms online at http://hrweb.mit.edu/benefits/life-other-insurance. Completed forms should be returned to the Plan Administrator.

Enrollment in the Supplemental Term Life insurance plan may be available to you without providing a Statement of Health form depending upon your current benefit eligibility status and your requested coverage amount.

If you are not newly benefit eligible, you may enroll in Supplemental Life at any time or Dependent Life during the annual open enrollment period. A Statement of Health form is required. New Dependent Life enrollments are permitted after a corresponding qualifying life event (i.e. marriage or a new child).

A Statement of Health form is never required to enroll your unmarried biological or adopted child or stepchild age 15 days to age 26 years (whether or not the child is a student) in the Dependent Child Life insurance plan.

However, you cannot purchase life insurance for a child who is already covered by MIT Dependent Life Insurance purchased by your spouse or domestic partner.

Statement of Health

Applications for Supplemental and Spouse/Domestic Partner life insurance coverage are subject to review and approval by Metropolitan Life Insurance Company based upon its underwriting rules. You may be asked to submit a Statement of Health to complete your application for coverage except when:

- **For New Hires**
  - **Active Employee Coverage:** Your enrollment takes place within 31 days from the date you become eligible for benefits, and you are enrolling for coverage equal to the lesser of 3 times your basic annual earnings or $500,000.
  - **Spouse or Domestic Partner Coverage:** Your enrollment takes place within 31 days from the date you become eligible for benefits, and you are enrolling for coverage equal to $50,000.

- **For Anytime Enrollment**
  - **Active Employee Coverage:** You are not increasing the coverage you had in the last 12 months.
  - **For Annual Enrollment**
    - **Active Employee Coverage or Spouse or Domestic Partner Coverage:** You are not increasing the coverage you had in the last 12 months.

- **For Qualifying Event**
  - **Spouse or Domestic Partner Coverage:** You have a Qualifying Event of marriage or complete an Affidavit of Domestic Partnership and you make the request within 31 days from the date of that event. Statement of Health form is not required for the newly eligible spouse/domestic partner $50,000 coverage amount.
If you do not meet the conditions stated above for your enrollment or coverage change, you will need to provide additional medical information by completing a Statement of Health form available from your Plan Administrator.

**Designate A Beneficiary**

You can select any beneficiary(ies) other than your employer, and you may change your beneficiary(ies) at any time. You can also designate more than one beneficiary. It is important to officially designate - and update, as needed - the person you want to receive the benefits from your life insurance plan in the event of your death. Make sure your beneficiary knows about your MIT Life Insurance coverage.

Submit your completed and signed Life Insurance Beneficiary Designation Form to the MIT Benefits Office or Plan Administrator no more than 30 days from the date you made the designation.

**About Your Coverage Effective Date**

You must be Actively at Work for coverage to become effective. In addition, you, your enrolled 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 coverage becomes effective.

If Actively at Work requirements are met, Basic Term Life insurance coverage is effective on the date you become a newly benefit eligible MIT employee.

Enrollment requests for Supplemental Term Life insurance (for you, your spouse or your dependent children) that do not require additional medical information will become effective on the first of the month following the later of the date you become a newly benefit eligible employee and the date the MIT Benefits Office receives your enrollment form, provided the Actively at Work requirements are met on that effective date.

Enrollment and change requests for Supplemental Term Life insurance that do require additional medical information and are approved will be effective on the later of the date described above or the date that MetLife has approved the coverage or increase. Enrollment requests that do require additional medical information and are approved before the first of the month date described above will not be effective before the first of the month date described above. You must be Actively at Work for coverage to become effective.

If you are not Actively at Work on the date coverage would otherwise take effect, coverage will take effect on the day you resume active work. 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.

**Coverage after Approval for the Institute’s Basic Long Term Disability Plan**

If you are approved for the Institute’s Basic Long Term Disability Plan before age 70, your Basic Life Insurance and, in most cases, your enrolled MIT Supplemental Life Insurance only may continue at the level that was in effect on your last day of active employment, then decrease when you reach age 65. If you remain on the Institute’s Basic Long Term Disability Plan after you turn age 70, all eligible life insurance will end on the June 30th after you turn at age 70. Supplemental Life not eligible to continue may be converted.

Eligibility for continuation of coverage while on Long Term Disability is described on page 7 under Waiver of Premiums for Total Disability (Continued Protection).

**Continuation of Coverage after Retirement**

If you retire before age 65 and were a benefit eligible employee at MIT for at least 10-years after your 45th birthday, your Basic Life Insurance and, if elected, your MIT Supplemental Life Insurance only may continue at the level that was in effect on your last day of active employment, then decrease when you reach age 65. Coverage will end on the June 30th after you turn age 70. More information on conversion and portability can be viewed on the MIT Benefits website at [http://hrweb.mit.edu/benefits/retirement/retirees/retiree-life-insurance](http://hrweb.mit.edu/benefits/retirement/retirees/retiree-life-insurance) or by contacting the Plan Administrator.
Accidental Death & Dismemberment (AD&D) coverage complements your Basic Life insurance coverage and helps protect you 24 hours a day, 365 days a year.

Accidental Death & Dismemberment Coverage Options
This coverage is available to you as an active at-work benefit eligible employee enrolled in Basic Life Insurance even if you already have accident insurance. It provides benefits beyond your Basic Life Insurance for losses due to covered accidents — 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, or brain damage or coma or third degree burns. If you suffer a covered fatal accident, benefits will be paid to your beneficiary. Accidental Death & Dismemberment maximum coverage is two times your active at-work benefit eligible employee enrolled Basic Life Insurance.

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 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, various forms of paralysis, brain damage and coma or third degree burns. The maximum amount payable for all Covered Losses sustained in any one accident is capped at 100% of the Full Amount.

For death occurring as the direct result of an “in the line of duty” job-related injury, an additional Accidental Death Benefit may be paid to MIT Campus Police officers only. Eligibility for and payment of benefits under the job-related injury coverage are subject to review and approval by Metropolitan Life Insurance Company based upon its underwriting rules.

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:

- Air Bag Benefit
- Seat Belt Benefit
- Common Carrier Benefit
- Child Care Center Benefit
- Child Education Benefit
- Spouse Education Benefit
- Hospitalization Benefit

What Is Not Covered under AD&D?
Accidental Death & Dismemberment 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; 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 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.
This insurance offering from your employer and MetLife comes with a variety of added features that can provide assistance to you and your family members today and during a difficult time.

Other Plan Features

Accelerated Benefits Option

For access to funds during a difficult time

You can receive up to 80% of your Term Life insurance proceeds to a maximum of $40,000 for Basic and $500,000 for Supplemental in the event that you become terminally ill and are diagnosed with less than 24 months to live. The Accelerated Benefit Option is also available to spouses insured under Dependent Life insurance plans. This option is not available for dependent child coverage.

Waiver of Premiums for Total Disability (Continued Protection)

Offering continued coverage when you need it most

If you become totally disabled* and are approved for benefits under the Institute’s Basic Long Term Disability Plan, you may be eligible for waiver of your Basic and Supplemental Term Life Insurance premium. This waiver provision allows coverage for you, as a disabled employee, to be continued under the group policy as long as you comply with the waiver of premium requirements and meet other requirements for employees who cease Active Work in an eligible class.

If your approved total disability began before age 60, you must submit the Waiver of Premium application to MetLife for your Basic and Supplemental Life Insurance coverage to continue. The waiver will only apply if you are deemed eligible by MetLife for Waiver of Premium and after you have satisfied a 6-month waiting period. The continuation of eligible insurance under the Waiver of Premium will end on the earliest of: date of death; date total disability ends and you are not eligible for retirement from MIT; date you fail to provide proof of total disability as required; date you refuse to be examined by a MetLife physician; or, the July 1st after you attain age 70. Please note that this benefit is only available to you and, if you are enrolled in Supplemental Life Insurance, is only available after you have participated in the Supplemental Term Life Insurance Plan for one year. If you were not enrolled in your Supplemental Term Life Insurance coverage for one year when your total disability began, your coverage may continue if you take advantage of the Conversion or Portability options.

* Total disability or totally disabled means, due to any injury or sickness: You are unable to perform the material duties of Your regular job; and You are unable to perform any other job for which you are fit by education, training or experience.

Premium Pay during Total Disability

Continued premium payments during a total disability

You continue to pay for your Supplemental Life Insurance coverage until your Waiver of Premium Application is approved. If you are over age 60 when your total disability begins, or, if your completed application is not approved, you will continue to pay for your Supplemental Life Insurance coverage. Note your eligibility for and your disability status under the Institute’s Basic Long Term Disability Plan is determined by the Long Term Disability Plan Administrator and is not affected by your approval or denial for Waiver of Premium.

Conversion

For protection after your eligibility for coverage terminates

Your Group Term Basic and Supplemental Life insurance coverage is protected for 31-days after your eligibility terminates in whole or in part due to your retirement, termination of employment, or, a change in your employee class. You can generally convert your Group Term Basic and Supplemental Life insurance benefits to an Individual Whole Life insurance policy during that time. If your conversion application is received within the 31-day continued protection period, you will not have to provide evidence of insurability. The new policy will take effect on the 32nd day after the date you are no longer eligible for coverage. If you
experience an event that makes you eligible to convert your coverage, please call a MetLife representative at 1-877-275-6387 or contact the MIT Benefits Office for more information. Please note that AD&D coverage ends on your coverage eligibility termination date and is **not** available for conversion.

**Portability**

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

Should you leave MIT for any reason, and your Supplemental Term Life 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. If your portability application is received within the 31-day continued protection period, you will not have to provide evidence of insurability. 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 $2,000,000.

Generally, there is no minimum time for you to be covered by the plan before you can take advantage of the portability feature. More information on portability can be viewed on the MIT Benefits website at [http://hrweb.mit.edu/benefits/life-other-insurance](http://hrweb.mit.edu/benefits/life-other-insurance) or by contacting the Plan Administrator.

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 the MIT Benefits Office for more information.

**What Is Not Covered under the Group Policy?**

*Note this plan has exclusions.*

The MetLife exclusions for **suicide** are as follows:

**For Supplemental Life**

If **You commit suicide** within 2 years* from the date Life Insurance for You takes effect, We will not pay such insurance and Our liability will be limited as follows:

- any premium paid by You will be returned to the Beneficiary; and
- any premium paid by the Policyholder will be returned to the Policyholder.

If **You commit suicide** within 2 years from the date an increase in Your Life Insurance takes effect, We will pay to the Beneficiary the amount of Insurance in effect on the day before the increase. Any premium You paid for the increase will be returned to the Beneficiary. Any premium paid by the Policyholder for the increase will be returned to the Policyholder.

**For Dependent Life**

If a Dependent **commits suicide** within 2 years* from the date Life Insurance for such Dependent takes effect, We will not pay such insurance and Our liability will be limited as follows:

- any premium paid by You will be returned to the Beneficiary; and
- any premium paid by the Policyholder will be returned to the Policyholder.

If a Dependent **commits suicide** within 2 years from the date an increase in Life Insurance for such Dependent takes effect, We will pay to the Beneficiary the amount of Insurance in effect on the day before the increase. Any premium You paid for the increase will be returned to the Beneficiary. Any premium paid by the Policyholder for the increase will be returned to the Policyholder.

*1 year for Missouri and North Dakota; suicide does not apply for Washington state.
**MetLife Services**

**Will Preparation Service**

*To help ensure your decisions are carried out*

Like life insurance, a carefully prepared Will along with a Power of Attorney is important. With a will, you can define your most important decisions such as who will care for your children or inherit your property.

**Living Will:**
- Ensures your wishes are carried out, and protects your loved ones from making these very difficult and personal medical decisions by themselves.
- Also called an “advanced directive,” it is a document authorized by statutes in all states. A person appoints someone as his/her proxy or representative to make decisions on maintaining extraordinary life-support if the person should become incapacitated so that he or she is unable to communicate his or her wishes.

**Powers of Attorney:**
- Allows 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. It is a written document that grants an individual the power to act on the grantor’s behalf.

By enrolling in Supplemental Term Life Insurance coverage, you will have access to Hyatt Legal Plans’ network of 12,000 participating attorneys. When you enroll in this plan, you may take advantage of face-to-face access to a participating plan attorney to prepare or update a will, living will or powers of attorney. When you use a participating plan attorney there will be no charge for the covered services.* To obtain the legal plan’s toll-free number and the Institute’s group access number please contact the MIT Benefits Office.

* You also have the flexibility of using an attorney who is not participating in the Hyatt Legal Plans’ 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.

**MetLife Grief Counseling Services**

*Resources for Comfort and Support*

Facing a loss is never easy, and how you cope and grieve is very personal. No matter the circumstances, whether it’s a death, an illness, a divorce, or even a child leaving home, there are resources that can help.

Your MetLife Group Term Life coverage through your employer comes with Grief Counseling provided by Harris, Rothenberg International (HRI), Inc. It is valuable, confidential support that can provide the comfort and guidance you need at the most difficult of times. You, your dependents and your beneficiaries can have up to five confidential counseling sessions per event at no extra cost.

Additional assistance from research specialists is also available at no cost. These specialists can refer services and providers as well as offer additional information that you may find helpful. They can help you:
- Find specific types of support groups, e.g., children who have lost parents; survivors of suicide; dealing with grief – divorce, chronic illness, medical diagnosis, losing a pet; etc.
- Locate local funeral homes and identify monument vendors
- Locate back-up care for children or older adults
- Find storage facilities, estate sale planners and charities that pick up donations
- By providing information on important tasks such as notifying the Social Security Administration, banks and utilities.

With Grief Counseling and related services provided by HRI, you, your dependents and your beneficiaries will have access to resources that help cope with the grief and practical challenges that accompany a loss. That’s just one of the valuable services that come with your MetLife group life coverage. To obtain the plan’s toll-free number and the Institute’s group access number please contact the MIT Benefits Office.
MetLife Estate Resolution Services℠—ERS

*Personal service and compassion to help your beneficiaries and others manage your estate during their time of need*

MetLife Estate Resolution Services—is a valuable service offered under the Supplemental Life Insurance Plan. When your estate representative uses a participating Hyatt Legal plan attorney there will be no charge for the services. A Hyatt Legal Plan attorney will consult face-to-face with your beneficiaries or by telephone regarding the probate process for your estate. The attorney will also handle the probate of your estate for your executor or administrator. This can help alleviate the financial and administrative burden upon your loved ones in their time of need.

**Delivering The Promise®**

*For support when beneficiaries need it most*

Delivering The Promise® is a service designed to provide beneficiaries with the support and assistance they need during an especially difficult time. Services include assistance filing life insurance claims and consultation to help with the financial details and questions that arise upon the loss of a loved one.

**MetLife’s Center for Special Needs Planning®**

*Comprehensive Planning Assistance for Dependents with Special Needs*

MetLife’s Center for Special Needs Planning is a service that works with families who have dependents with special needs. To help them prepare for the complex financial, social, emotional, and educational issues facing them, MetLife’s Center for Special Needs Planning helps families with financial planning strategies.

**Funeral Planning Guide**

Provides beneficiaries a resource that outlines your final wishes. It highlights details of pertinent information including: how to plan for funeral costs, the death claim process, personal funeral preferences and more.

**Total Control Account®**

*For immediate access to death proceeds*

The Total Control Account® settlement option provides your loved ones with a safe and convenient way to manage the proceeds of a life policy for claim payments of $5,000 or more, backed by the financial strength and claims paying ability of Metropolitan Life Insurance Company. They'll have the convenience of immediate access to any or all of their proceeds, through an interest bearing account with unlimited draft-writing privileges. The Total Control Account gives beneficiaries time to decide what to do with their proceeds, which can be very helpful to them during a difficult time.
ERISA

The following important notice is provided by your employer for your information only. The benefits described in this document are provided under a group policy by the insurance company and are subject to the terms and conditions of that policy. A copy of the group policy is available for your review on the MIT Benefits website or during normal business hours in the MIT Benefits Office.

Plan Name: MIT Group Life Insurance Plan
Plan Number: 501
Plan Year End: June 30th
Employer/Plan Sponsor: Massachusetts Institute of Technology
77 Massachusetts Avenue
Cambridge, MA 02139
Employer Identification Number: 04-2103594
Type of Plan: Welfare Benefit plan providing Basic and Supplemental Life Insurance and Accidental Death & Dismemberment Benefits.

Plan Administrator: Massachusetts Institute of Technology
77 Massachusetts Avenue, NE49-5000
Cambridge, MA 02139
Plan Coordinator: Maureen Ratigan, Director of Benefits
Massachusetts Institute of Technology
77 Massachusetts Avenue, NE49-5000
Cambridge, MA 02139

Agent for Service of Legal Process: Office of the General Council
Massachusetts Institute of Technology
77 Massachusetts Avenue, Room 7-206
Cambridge, MA 02139
For the Insurance Company: Metropolitan Life Insurance Company
501 US Highway 22
P.O. Box 6891
Bridgewater, NJ 08807

In addition to the above, Service of Legal Process may be made on a plan trustee or the plan administrator.

Type of Plan: Welfare Benefit plan providing Basic and Supplemental Life Insurance and Accidental Death & Dismemberment Benefits

Statement of ERISA Rights

Receive Information about Your Plan and Benefits
As a participant in the Plan you are entitled to certain rights and protections under ERISA. ERISA provides that all Plan participants shall be entitled to:

- Examine, without charge, at the Plan Administrator’s office and at other specified locations, such as worksites and union halls, all documents governing the Plan, including insurance contracts and collective bargaining agreements, and a copy of the latest annual report (Form 5500 Series) filed by the Plan with the U.S. Department of Labor and available at the Public Disclosure Room of the
Employee Benefits Security Administration. Many of these documents are also available on the MIT Benefits website and on the Department of Labor Form 5500 website.

- Obtain, upon written request to the Plan Administrator, copies of documents governing the operation of the Plan, including insurance contracts and collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and updated Summary Plan Description. The Plan Administrator may make a reasonable charge for the copies.

- Receive a summary of the Plan’s annual financial report. The Plan Administrator is required by law to furnish each participant with a copy of this Summary Annual Report. MIT posts the Summary Annual Report on the MIT Benefits website Forms and Publications page.

Prudent Actions by Plan Fiduciaries

In addition to creating rights for Plan participants, ERISA imposes duties upon the people who are responsible for the operation of the employee benefit plan. The people who operate your Plan, called “fiduciaries” of the Plan, have a duty to do so prudently and in the interest of you and other Plan participants and beneficiaries. No one, including your employer, your union, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a Plan benefit or exercising your rights under ERISA.

Enforce Your Rights

If your claim for a Plan benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules.

Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of Plan documents or the latest annual report from the Plan and do not receive them within 30 days, you may file suit in a Federal court. In such a case, the court may require the Plan Administrator to provide the materials and pay you up to $110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the Administrator.

If you have a claim for benefits which is denied or ignored, in whole or in part, and if you have exhausted the claims procedures available to you under the Plan, you may file suit in a state or Federal court. If it should happen that Plan fiduciaries misuse the Plan’s money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a Federal court. The court will decide who should pay court costs and legal fees. If you are successful, the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees, for example, if it finds your claim is frivolous.

Assistance with Your Questions

If you have any questions about your Plan, you should contact the Plan Administrator. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the Plan Administrator, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, D.C. 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

Claims and Appeal Procedures

An employee wishing to make a claim for or appeal a denial of benefit should contact the MIT Benefits Office or the Plan Administrator. The claim and appeal procedure is detailed in group policy certificate available for your review on the MIT Benefits website or during normal business hours in the MIT Benefits Office.
CERTIFICATE OF INSURANCE

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

Group policy as of January 1, 2004, last amended January 1, 2016, issued by Metropolitan Life Insurance Company to Massachusetts Institute of Technology.

Metropolitan Life Insurance Company ("MetLife"), a stock company, certifies that You and Your Dependents are insured for the benefits described in this certificate, subject to the provisions of this certificate. This certificate is issued to You under the Group Policy and it includes the terms and provisions of the Group Policy that describe Your insurance.

The Certificate of Insurance can be viewed by visiting the MIT Benefits Office.

PLEASE READ THE CERTIFICATE CAREFULLY. This certificate is part of the Group Policy. The Group Policy is a contract between MetLife and the Policyholder and may be changed or ended without Your consent or notice to You.

SCHEDULE OF INSURANCE

Policyholder: Massachusetts Institute of Technology
Group Policy Number: 112757-G
Plan Effective Date: January 1, 2004
Type of Insurance: Term Life & Accidental Death and Dismemberment Insurance

With respect to Basic Life Insurance coverage, you do not contribute toward the Plan’s cost.

With respect to Supplemental Life Insurance and Dependent Life coverage, you pay the Plan’s cost.

With respect to Accidental Death & Dismemberment coverage, you do not contribute toward the Plan’s cost.

THE TERM LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE BENEFITS DESCRIBED IN THIS DOCUMENT ARE THOSE IN EFFECT AS OF JANUARY 1, 2016.

For Residents of Massachusetts: The group insurance policy, alone, providing insurance under this certificate does not meet Minimum Creditable Coverage standards and will not satisfy the individual mandate that you have health insurance. Please see the Massachusetts Notice for additional information.

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 Massachusetts Institute of Technology and are subject to each state’s laws and availability. Specific details regarding these provisions can be found in the certificate. More detail regarding eligibility for coverage can be found on the MIT Benefits website at http://hrweb.mit.edu/benefits/life-other-insurance. You may also contact the MIT Benefits Office by email at benefits@mit.edu or call 617 253 6151 if you need further information.
1 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.

2 Will Preparation Services are offered by Hyatt Legal Plans, Inc., Cleveland, Ohio. In certain states, Will Preparation services are provided through insurance coverage underwritten by Metropolitan Property and Casualty Insurance Company and Affiliates, Warwick, Rhode Island. For New York situed 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.

3 Subject to state regulatory approval. Grief Counseling services are provided through an agreement with Harris, Rothenberg International (HRI), Inc. HRI is not an affiliate of MetLife, and the services HRI provides are separate and apart from the insurance provided by MetLife. HRI has a nationwide network of 46,700 counselors. Counselors have master’s or doctoral degrees and are licensed professionals with extensive experience working with people who have suffered a loss.

4 Estate Resolution Services are offered by Hyatt Legal Plans, Inc., Cleveland, Ohio. In certain states, Estate Resolution Services are provided through insurance coverage underwritten by Metropolitan Property and Casualty Insurance Company and Affiliates, Warwick, Rhode Island. The following are not covered by the Estate Resolution Service: Matters in which there is a conflict of interest between the executor, administrator, any beneficiary or heir and the estate; any disputes with the Policyholder, Employer, Plan Attorneys, 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.

5 Investment advisory services offered by MetLife Securities, Inc., 200 Park Avenue, NY, NY 10166.

6 Subject to state law, and/or group policyholder direction, the Total Control Account is provided for all Life and AD&D benefits of $5,000 or more. The TCA is not insured by the Federal Deposit Insurance Corporation or any government agency. The assets backing the TCA are maintained in MetLife’s general account and are subject to MetLife’s creditors. MetLife bears the investment risk of the assets backing the TCA, and expects to earn income sufficient to pay interest to TCA Accountholders and to provide a profit on the operation of the TCAs. Guarantees are subject to the financial strength and claims paying ability of MetLife.

Life and AD&D coverage are provided under a group insurance policy (Policy Form 112757-G) issued to Massachusetts Institute of Technology by MetLife. Life and AD&D coverage under your employer’s plan terminates when your employment ceases and when your Life and AD&D insurance premiums cease, or upon termination of the group contract. Dependent Life coverage will terminate when a dependent no longer qualifies as a dependent. Life insurance coverage for eligible enrolled retirees terminates on the June 30th after you attain age 70. Should your life insurance coverage terminate for reasons other than non-payment of premium, you may convert it within 31-days after termination to a MetLife individual permanent policy without providing medical evidence of insurability.

Pursuant to IRS Circular 230, MetLife is providing you with the following notification: The information contained in this document is not intended to (and cannot) be used by anyone to avoid IRS penalties. This document supports the promotion and marketing of insurance products. You should seek advice based on your particular circumstances from an independent tax advisor.