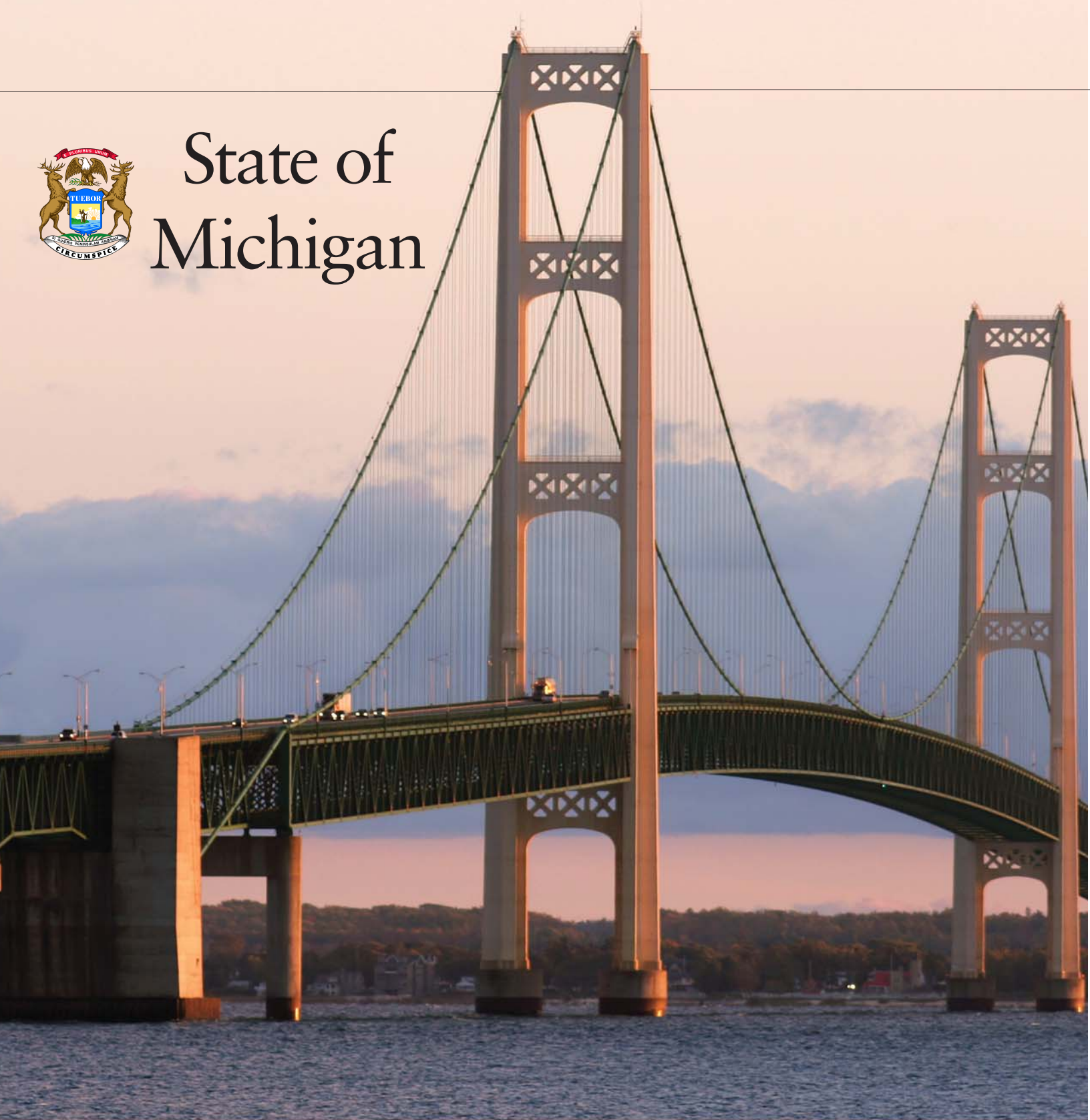


Group Term Life Insurance Certificate
For Active Employees and Retirees



State of
Michigan



Employee Group Term Life Certificate of Insurance

Minnesota Life Insurance Company - A Securian Company
400 Robert Street North • St. Paul, Minnesota 55101-2098

Effective August 1, 2023, as revised on October 12, 2023

Read Your Certificate Carefully

You are insured under the group policy identified on the specifications page, for benefits described in this certificate, subject to all 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. This certificate is an important

document and should be kept in a safe place. This certificate replaces any previous certificates issued to you under the group policy.

This certificate is a part of the group policy. The group policy is a contract between Minnesota Life and the policyholder and may be changed or ended without your consent or notice to you.



Secretary



President

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GROUP TERM LIFE CERTIFICATE OF INSURANCE

GENERAL INFORMATION

POLICYHOLDER: State of Michigan

POLICY NO.: 33667-G

PROGRAM DATE: October 1, 2008. This certificate describes the benefits under the group policy as of the program date. This Specifications page represents the plan of insurance in effect as of August 1, 2023, as revised on October 12, 2023.

GROUP: The group is composed of the following:

1. Any active employee in the category of classified State service with an appointment of at least 720 hours duration, but excluding employees with non-career appointments and those working less than 40% of full time.
2. Any active official or active unclassified employee of the State who has been approved for coverage by the Civil Service Commission.
3. Any retired employee or official who was insured under Policy No. 33667-G, or any policy replaced by Policy No. 33667-G, just prior to entry into a State Retirement System.
4. A Wayne County employee who:
 - (a) was a State Judicial Council employee on October 1, 1996 and whose employment was transferred to the Recorder’s Court on October 1, 1996; and
 - (b) whose employer subsequently became the Wayne County Clerk’s Office;

will be considered to be an eligible employee under this policy. Coverage under this policy shall terminate at such time as employment with the Wayne County Clerk’s Office terminates, unless the employee retires, at which time the amount of coverage will be subject to the retiree reduction schedule.

**CONTRIBUTORY/
NONCONTRIBUTORY:** Employee term life insurance and accidental duty death insurance is noncontributory insurance, except as noted in the certificate for those on layoff or leave of absence. Dependents insurance is contributory insurance except for dependents insurance for retirees, which is noncontributory insurance.

**CHANGES IN BASIC
ANNUAL SALARY:** Your insurance amount will automatically be adjusted whenever your basic annual salary changes. Increases in insurance amounts are subject to the actively at work requirement.

PLAN OF INSURANCE

EMPLOYEE TERM LIFE INSURANCE

Eligible Class

All eligible active employees other than physicians represented by the UAW

Amount of Insurance

Two times your basic annual salary, the result rounded to the next higher \$1,000 if not already a multiple thereof, with a minimum of \$10,000 and a maximum of \$200,000.

Or, if you select the Reduced Benefit Plan:

One times your basic annual salary, rounded to the next higher \$1,000 if not already a multiple thereof, with a minimum of \$10,000 and a maximum of \$50,000.

All eligible active physicians represented by the UAW

Two times your basic annual salary, the result rounded to the next higher \$1,000 if not already a multiple thereof, with a minimum of \$10,000 and no maximum.

Or, if you select the Reduced Benefit Plan:

One times your basic annual salary, rounded to the next higher \$1,000 if not already a multiple thereof, with a minimum of \$10,000 and a maximum of \$50,000.

All eligible retirees

25% of your life insurance in force immediately prior to retirement. This amount is rounded to the next higher \$100, provided you retired after July 1, 1974.

EMPLOYEE ACCIDENTAL DUTY DEATH INSURANCE

<u>Eligible Class</u>	<u>Amount of Insurance</u>
All eligible active employees other than Michigan State Employees Association (MSEA) bargaining employees	\$100,000
All eligible active Michigan State Employees Association (MSEA) bargaining employees	\$150,000

DEPENDENTS TERM LIFE INSURANCE

<u>Eligible Class</u>	<u>Amount of Insurance</u>
All eligible active employees	Plan F: Spouse: \$1,500 Children: \$1,000
All eligible active employees	Plan G: Spouse: \$5,000 Children: \$2,500
All eligible active employees	Plan H: Spouse: \$10,000 Children: \$5,000
All eligible active employees	Plan K: Spouse: \$25,000 Children: \$10,000
All eligible active employees	Plan L: Spouse: None Children: \$10,000
All eligible active employees	Plan M: Spouse: \$50,000 Children: \$15,000
All eligible active employees	Plan N: Spouse: None Children: \$15,000
All eligible retired employees*	Spouse: \$1,000 Children: \$1,000

*A retiree must have been insured for Plan F, G, H, K or L, M, N immediately prior to retirement in order to be eligible for the retiree dependents plan.

Definitions

application

Your application for insurance under the group policy.

associated employer

Any employer which is designated by the policyholder and agreed to by us to participate under the group policy. When an associated employer ceases its participation under the policy, the policy shall be considered to be terminated for all employees of the associated employer. All provisions related to the policy terminating will apply to such employees.

basic annual salary

For Fire Crash/Rescue Officers for the Department of Military Affairs: basic hourly rate times 2,740.5.

For all other employees: basic hourly rate times 2088.

contributory insurance

Insurance for which you are required to make premium contributions.

employee

An individual who is employed by the policyholder or by an associated employer.

employer

The policyholder or any designated associated employer.

insured

A person who is eligible for and becomes insured according to the terms of this certificate, including any supplements to this certificate.

non-work day

A day on which you are not regularly scheduled to work, including scheduled time off for vacations, personal holidays, weekends and holidays, and approved leaves of absence for non-medical reasons.

Non-work day does not include time off for medical leave of absence, temporary layoff, employer suspension of operations in total or in part and any time off due to sickness or injury including sick days, short-term disability, or long term disability.

noncontributory insurance

Insurance for which you are not required to make premium contributions.

pay status

The period of time during which you receive your earnings because you are actively employed or using accumulated leave time.

policyholder, State

State of Michigan.

specifications page

The outline which summarizes your coverage under the policyholder's plan of insurance. The specifications page is located at the front of this booklet.

we, our, us

Minnesota Life Insurance Company.

you, your, certificate holder

An insured employee.

General Information

What is your agreement with us?

You are insured under the group policy identified on the specifications page, subject to all provisions of this certificate.

Your application is deemed a part of this certificate. Any statements made in your application will, in the absence of fraud, be considered representations and not warranties. Also, any statement made will not be used to void your insurance nor defend against a claim unless the statement is contained in the application attached to your certificate.

Can this certificate be amended?

Yes. This certificate may be amended if the policyholder and we agree to the change. Any amendment will be without prejudice to any claim incurred for benefits prior to the effective date of the amendment.

Who is eligible for insurance?

You are eligible if you:

- (1) are a member of the group and of an eligible class as defined in the specifications page; and
- (2) meet the actively at work requirement as shown in the section entitled "What is the actively at work requirement?".

Are retired employees eligible for insurance?

Yes. Retired employees are eligible as described in the specifications page. The actively at work requirement does not apply to a retired employee.

What is the actively at work requirement?

To be eligible to become insured or to receive an increase in the amount of insurance, you must be actively at work performing your customary duties at the employer's normal place of business, or at other places the employer's business requires you to travel.

If you are not actively at work on the date coverage would otherwise begin, or on the date an increase in your

amount of insurance would otherwise be effective, you will not be eligible for the coverage or increase until you return to active work. However, 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 this certificate, you are eligible to continue to be insured only while you remain actively at work.

When does insurance become effective?

Insurance becomes effective on the date you meet all eligibility requirements.

Death Benefit

What is the amount of the death benefit?

The amount of the death benefit is the amount of insurance shown on the specifications page.

When will the death benefit be payable?

We will pay the death benefit upon receipt at our home office of written proof satisfactory to us that you died while insured under this certificate. All payments by us are payable from our home office. The death benefit will be paid in a single sum or by any other method agreeable to us and the beneficiary.

Payment of the death benefit will extinguish our liability under the certificate for which the death benefit has been paid.

What are the proof of death requirements?

Your beneficiary or representative must request a death claim be submitted by the MI HR Service Center* or the Office of Retirement Services. This request should be made as soon as reasonably possible.

You must notify the MI HR Service Center* or the Office of Retirement Services as SOON as possible, but not later than one year after death. Death claims submitted outside of one year will not be accepted.

To whom will we pay the death benefit?

We will pay the death benefit to the beneficiary or beneficiaries. You should designate a beneficiary or beneficiaries when you first enroll under the plan. You can change your beneficiary designation at any time, provided all of the following are true:

- (1) your coverage is in force; and
- (2) we have written consent of all irrevocable beneficiaries; and
- (3) you have not assigned the ownership of your insurance.

**Legislative, Judicial, House, Senate, or Auditor General employees should contact their respective Human Resource Office.*

A beneficiary designation must be made in writing or by any other method made available under the plan. Any beneficiary designation shall take effect as of the date it is signed, but will not affect any payment we make or action we take before receiving the designation.

You may also choose to name a beneficiary that you cannot change without the beneficiary's consent. This is called an irrevocable beneficiary.

If there is more than one beneficiary, each will receive an equal share, unless you have requested another method in your beneficiary designation. To receive the death benefit, a beneficiary must be living at the time of your death. In the event a beneficiary is not living at the time of your death, that beneficiary's portion of the death benefit shall be equally distributed to the remaining surviving beneficiaries. In the event of the simultaneous deaths of you and a beneficiary, the death benefit will be paid as if you survived the beneficiary.

If you designate your spouse as a beneficiary and subsequently get divorced, that beneficiary designation is automatically declared null and void as of the date of the divorce. If you want your ex-spouse to be a beneficiary, you must file a new beneficiary designation stating your ex-spouse as beneficiary.

If there is no eligible beneficiary, or if you do not name one, we will pay the death benefit to:

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

Termination

When does your coverage terminate?

Your coverage ends at midnight on the earliest of:

- (1) the last day of the pay period in which you are no longer eligible; or
- (2) the last day of the pay period in which you are no longer approved for coverage by the Civil Service Commission; or
- (3) the day before you enter the Armed Forces on full-time active duty (except for active duty of two weeks or less); or
- (4) the date the group policy is terminated; or
- (5) the day you terminate pay status with the State; or
- (6) the day you enter deferred retirement.

Your pay status will be considered terminated if we are so notified by the Civil Service Commission or if the State stops submitting premium for you.

If a lapse in coverage occurs between the date you separate from employment and the date you begin receiving retirement benefits, you are not eligible to again

be covered for life insurance, unless you return to State employment.

Can your coverage be continued during a leave of absence or layoff?

Yes. You may continue your life insurance coverage during a leave of absence or layoff for up to 12 or 36 months respectively. You must agree to pay the premiums in accordance with the State's direct billing system.

You will receive an application for continuation of insurance which must be completed and submitted within 60 days from the day you are no longer in pay status.

Can your coverage be continued during total disability?

If you become totally disabled for any reason prior to age 65, your life insurance will be continued while you remain in pay status. Thereafter, your active life insurance will be continued at no cost to you if you are declared totally disabled upon presentation of satisfactory evidence of total disability to Civil Service, which is defined as receiving benefits from one of the following:

- (1) The State's Long Term Disability Plan; or
- (2) Social Security Disability coverage; or
- (3) Workers Compensation Insurance; or
- (4) The State's Duty or Non-Duty Disability Retirement Plan.

If you become totally disabled prior to age 65, your amount of insurance being continued will be the amount in force on the day you became disabled. If you are still totally disabled on your 65th birthday, you will be considered retired and your life insurance amount will be reduced to 25% of the coverage in force on the day before you became disabled, and any dependents insurance you have will be reduced to the retiree dependent plan.

If you become totally disabled as described above on or after age 65, your life insurance will be continued at no cost to you at 25% of the coverage in force on the day you became disabled. If you have dependents insurance, it will reduce to the retiree dependents plan.

Conversion Right

What is the conversion right?

You may convert this insurance to a new individual life insurance policy if all or part of your life insurance under the group policy terminates.

What is the full conversion right?

You may convert up to the full amount of terminated insurance if termination occurs because your eligible employment ends or because you enter a class with a lower amount of insurance.

What is the limited conversion right?

Limited conversion is available if, after you have been insured for at least three years, insurance is terminated because:

- (1) the group policy is terminated; or
- (2) the class of employees to which you belong is no longer eligible under the policy.

For a limited conversion, you may convert an amount up to the lesser of:

- (1) \$3,000; and
- (2) the amount of life insurance which terminated minus any amount of group life insurance for which you become eligible under any group policy issued or reinstated by us or any other carrier within 31 days of the date your insurance terminated under the group policy.

When is conversion not available?

Neither the full conversion right nor the limited conversion right is available if your coverage under the group policy terminates due to failure to make, when due, required premium contributions.

To what type of policy may you convert?

Under both the full conversion right and the limited conversion right, you may convert your insurance to any type of individual policy of life insurance then customarily issued by us for purposes of conversion, except term insurance. The individual policy will not include any disability or other supplemental benefits.

How do you convert your insurance?

You convert your insurance by applying for an individual policy and paying the first premium within 31 days after your group insurance terminates. No evidence of insurability will be required. Call Minnesota Life at 866-365-2374 if you have questions or need a conversion application sent to you.

How is the premium for the individual policy determined?

We base the premium for the individual policy on the plan of insurance, your age, and the class of risk to which you belong on the date of the conversion.

When is the individual policy effective?

The individual policy takes effect 31 days after the group insurance provided under the group policy terminates.

What happens if you die during the 31-day period allowed for conversion?

If you die during the 31-day period allowed for conversion, we will pay a death benefit regardless of whether or not 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.

We will return any premium you paid for an individual policy to your beneficiary named under the group policy. In no event will we be liable under both the group policy and the individual policy.

Additional Information

What if your age has been misstated?

If your age has been misstated, the death benefit payable will be that amount to which you are entitled based on your correct age. A premium adjustment will be made so that the actual premium required at your correct age is paid.

When does your insurance become incontestable?

Except for employee, retiree and dependent eligibility determinations or the non-payment of premiums, after your insurance has been in force during your lifetime for two years from the effective date of your coverage, we cannot contest your coverage. However, if there has been an increase in the amount of insurance for which you were required to apply, then, to the extent of the increase, any loss which occurs within two years of the effective date of the increase will be contestable.

Any statements you make in your application as defined under this certificate will, in the absence of fraud, be considered representations and not warranties. Also, any statement you make will not be used to void your insurance, nor defend against a claim, unless the statement is contained in your application.

Who is the owner of this coverage?

Unless assigned otherwise, you, the insured employee, are the owner of the coverage provided under this certificate. Only the owner has the right to exercise ownership rights under the certificate, including but not limited to naming or changing a beneficiary, electing conversion to an individual policy, electing to change or cancel contributory insurance or assigning any or all ownership rights.

Can your insurance be assigned?

Yes. However, we will not be bound by an assignment of a certificate or of any interest in such certificate unless the assignment is made in writing or through any other method made available under the plan and we send the owner an acknowledgement of the assignment.

We are not responsible for the validity of any assignment. You are responsible for ensuring that the assignment is legal in your state and that it accomplishes your intended goals. If a claim is based on an assignment, we may require proof of interest of the claimant.

Can a change of ownership for a certificate be requested?

Yes. A change of ownership is a type of assignment. All provisions for assignments apply to ownership changes.

Is the policyholder required to maintain records?

Yes. The policyholder is required to maintain adequate records of any information necessary for us to administer this certificate. We can have access to the records at any reasonable time agreed upon by the policyholder and us.

If a clerical error is made in keeping records on the insurance under the group policy, it will not affect otherwise valid insurance. A clerical error does not continue insurance which is otherwise stopped. If an error causes a change in premium payment, we will make a fair adjustment.

Will the provisions of this certificate conform with state law?

Yes. If any provision in this certificate, or in the provisions of the group policy, is in conflict with the laws of the state governing the certificates or the group policy, the provision will be deemed to be amended to conform to such laws.

Accidental Duty Death Benefit Certificate Supplement

Minnesota Life Insurance Company - A Securian Company
400 Robert Street North • St. Paul, Minnesota 55101-2098

General Information

This certificate supplement is subject to every term, condition, exclusion, limitation, and provision of your certificate unless otherwise expressly provided for herein. Coverage under this supplement will not be included in any insurance issued under the conversion right section of your certificate.

What does this supplement provide?

This supplement provides a benefit for your accidental death which occurs as a result of an accidental injury that occurs while performing the duties of your employment with the policyholder or a participating employer.

Accidental Duty Death Benefit

What does accidental duty death mean?

Accidental duty death as used in this supplement means that your death results, directly and independently of all other causes, from an accidental injury which is unintended, unexpected, and unforeseen, and which occurs while you are performing the duties of your employment with the policyholder or a participating employer.

The injury must occur while your coverage under this supplement is in force. Your death must occur within 180 days after the date of the injury.

In no event will we pay the accidental duty death benefit where your death results from or is caused directly or indirectly by any of the following:

- (1) suicide or attempted suicide, whether sane or insane; or
- (2) war or any act of war, whether declared or undeclared; or
- (3) intentionally self-inflicted injuries; or
- (4) an accident while traveling between your work station and home, either as a pedestrian or in a private automobile, common carrier, carpool or vanpool (whether private or State sponsored), unless you are in official travel status.
- (5) an illness, including a heart attack or stroke, except for an illness which directly results from a covered occupational accident.

What is the amount of the accidental duty death benefit?

The amount of the benefit is shown on the specifications page.

When will the accidental duty death benefit be payable?

We will pay the accidental duty death benefit upon receipt at our home office of written proof satisfactory to us that you died as a result of an accidental injury while performing the duties of your employment with the policyholder or a participating employer. All payments by us are payable from our home office. The benefit will be paid in a single sum or by any other method agreeable to us and the beneficiary.

To whom do we pay the benefit?

We pay the accidental duty death benefit to the person or persons entitled to receive the life insurance benefit under the terms of your certificate, unless you have named a different beneficiary for this coverage. All provisions of the certificate related to beneficiary designation will apply to a designation under this coverage.

Termination

When does your coverage under this supplement terminate?

Your coverage ends on the earliest of:

- (1) the date you are no longer covered for life insurance under the group policy; or
- (1) the date the Accidental Duty Death Benefit Certificate Supplement is terminated from the group policy; or
- (2) the date the group policy is terminated.

Additional Information

Do we have the right to obtain independent medical verification?

Yes. Where not prohibited by law, we reserve the right to require and pay for an autopsy.



Secretary



President

Dependent Term Life Insurance Certificate Supplement

Minnesota Life Insurance Company - A Securian Company
400 Robert Street North • St. Paul, Minnesota 55101-2098

General Information

This certificate supplement is issued in consideration of the required premium and is subject to every term, condition, exclusion, limitation, and provision of your certificate unless otherwise expressly provided for herein.

What does this supplement provide?

This supplement provides insurance on the lives of your eligible dependents.

What members of your family are eligible for insurance under this supplement?

The following members of your family are eligible for insurance under this supplement:

- (1) your lawful spouse; and
- (2) your children by birth, legal adoption, or legal guardianship, who have attained the age of 14 days but have not attained the age of 23 years, who are unmarried and who are dependent upon you for at least 50% of their support; and
- (3) any other unmarried children who have attained the age of 14 days but have not attained the age of 23 years, who live with you and are dependent upon you for at least 50% of their support.

The following are not eligible for dependents insurance:

- (1) your divorced spouse or any married child; or
- (2) a child who has been legally adopted by another person (insurance ends on the date custody is assumed by the adoptive parents); or
- (3) anyone eligible for insurance as an employee or retiree; or
- (4) a spouse or child who is in the armed forces of any country, except for active duty of two weeks or less; or
- (5) a child less than 14 days old or a child 23 years old or older, except for an incapacitated child as described elsewhere in this supplement.

If both parents of a child qualify as eligible employees under the group policy, the child shall be considered a dependent of only one parent for purposes of this supplement.

Any dependent who, subsequent to the effective date of this supplement, meets the requirements of this provision will become insured on the date he or she so qualifies.

Can coverage be continued for an incapacitated child?

Yes. Insurance for a mentally or physically incapacitated child who attains age 23 while insured under this supplement may be continued if the child:

- (1) is chiefly dependent upon you for support; and
- (2) is not capable of self-sustaining employment.

The insurance will continue only if you provide proof of the child's incapacity:

- (1) no later than 31 days prior to the child's attainment of age 23; and
- (2) thereafter as may be required, but not more often than once every two years.

If your enrolled dependent is an incapacitated child, your coverage for the child will automatically continue at and beyond age 23 as long as he or she became incapacitated prior to age 23, continues to be incapacitated, and provided coverage does not terminate for any other reason.

Contact the MI HR Service Center* or the Office of Retirement Services for additional information. You may be periodically asked for proof that your child remains incapacitated.

When does insurance on a dependent become effective?

In order to insure your eligible dependents, you must request the coverage in the manner made available by the policyholder, and agree to pay the necessary premium contribution. If the MI HR Service Center* receives the request and any applicable supporting documentation within 31 days from the day you become employed in an eligible position, your dependents insurance will take effect the beginning of the following pay period after you've requested the enrollment through the MI HR Service Center*.

If you waive coverage for your dependents during your initial enrollment period, you may enroll for dependents coverage only during a subsequent annual insurance open enrollment.

However, if you do not have a dependent when you are first eligible for employee life insurance, the MI HR Service Center* must receive your request no later than 31 days from the date you first acquire an eligible dependent.

**Legislative, Judicial, House, Senate, or Auditor General employees should contact their respective Human Resource Office.*

Death Benefit

What is the amount of life insurance on each insured dependent?

The amount of life insurance on each insured dependent is shown on the specifications page.

To whom will we pay the death benefit?

The death benefit payable under this supplement will be paid to:

- (1) you, if living; otherwise
- (2) your lawful spouse, if living; otherwise
- (3) your natural or legally adopted child (children) in equal shares, if living; otherwise
- (4) the estate of the last survivor of the above.

Termination

When does an insured dependent's coverage under this supplement terminate?

An insured dependent's coverage ends at midnight on the earliest of:

- (1) the day before the dependent no longer meets the eligibility requirements. In the case of divorce, the date of the divorce; or
- (2) the date a premium contribution for dependents insurance is due and unpaid; or
- (3) the date the policy is terminated; or

- (4) the date the Dependents Term Life Insurance Certificate Supplement is terminated from the group policy; or
- (5) the day before a dependent enters the armed forces on full-time active duty, except for active duty of two weeks' duration or less; or
- (6) the date you are no longer covered under the group policy, except that retiree dependents life insurance may be continued after your death if you were covered as a retiree and surviving dependents continue to receive a pension benefit after your death.

Additional Information

What is the spouse conversion right under this supplement?

If an insured spouse's coverage under this supplement terminates because of your death or because your employment ends, your spouse may convert the insurance to a policy of individual insurance with Minnesota Life.

All other conditions and provisions of the conversion right section of your certificate to which this supplement is attached will apply to a spouse converting his or her coverage.



Secretary



President

Accelerated Benefits Certificate Supplement

Minnesota Life Insurance Company - A Securian Company
400 Robert Street North • St. Paul, Minnesota 55101-2098

Benefits received under this Accelerated Benefits Certificate Supplement may be taxable. You should seek assistance from a personal tax advisor prior to requesting an accelerated payment of death benefits.

General Information

This certificate supplement is subject to every term, condition, exclusion, limitation, and provision of your certificate unless otherwise expressly provided for herein.

What does this supplement provide?

This supplement provides for the accelerated payment of either the full or a partial amount of an insured's death benefit provided under your certificate. If an insured has a terminal condition as defined in this supplement, you may request an accelerated payment of the applicable death benefit.

What is a terminal condition?

A terminal condition is a condition caused by sickness or accident which directly results in a life expectancy of 12 months or less. We must be given medical evidence that satisfies us that you have a terminal condition. That evidence must include certification by a physician. For purposes of this supplement, a physician is an individual who is licensed to practice medicine or treat illness in the state in which treatment is received. The physician cannot be you or your spouse, children, parents, grandparents, grandchildren, brothers or sisters, or the spouse of any such individuals.

Accelerated Benefit

Who may request an accelerated payment of the death benefit?

You may request an accelerated payment of the insurance on your life or on the life of a spouse or dependent child insured under your certificate.

When can an accelerated benefit be requested?

An accelerated benefit can be requested any time, provided the following conditions are met:

- (1) the insurance is in force and all premiums due are fully paid; and
- (2) you are the sole owner of the certificate; and
- (3) the certificate does not have an irrevocable beneficiary; and

- (4) application is made in writing or through any other method made available by us under the group policy and in a form which is satisfactory to us.

Is there a minimum or maximum death benefit eligible for an accelerated benefit?

Yes. The minimum death benefit to be eligible for an accelerated benefit under this supplement is \$10,000. There is no maximum death benefit that can be accelerated.

Is a partial accelerated benefit available?

Yes. You may choose to accelerate only a portion of an insured's death benefit, providing the remaining amount of insurance is at least \$25,000. This is called a partial accelerated benefit.

You may reapply for the payment of the remaining amount of insurance at any time. However, we may ask for further satisfactory evidence that the insured meets all requirements for the accelerated benefit.

When will we pay an accelerated benefit?

We will pay an accelerated benefit upon receipt at our home office of written proof satisfactory to us that you meet the requirements herein.

The accelerated benefit will be paid in a single sum or by any other method agreeable to you and us.

To whom will we pay accelerated benefits?

We will pay the accelerated benefit to you unless you validly assign it otherwise.

What is the effect on the insured's coverage of the receipt of an accelerated benefit?

If you elect to accelerate the full amount of an insured's death benefit, the insured's coverage and all other benefits under the certificate and any certificate supplements for that insured will end. If it is your death benefit being accelerated, any spouse or child life insurance will terminate, though spouse coverage may be converted to a policy of individual life insurance according to the conversion right section of the certificate.

If a partial accelerated benefit is chosen, coverage will remain in force and premiums will be reduced accordingly. The remaining amount of insurance under your certificate will be the full amount of insurance minus the amount of insurance that was accelerated.

Termination

When does an insured's coverage under this supplement terminate?

An insured's Accelerated Benefits coverage terminates on the earliest of:

- (1) the date the insured is no longer insured for life insurance under the certificate; or
- (2) the date the Accelerated Benefits Certificate Supplement is terminated from the group policy; or
- (3) the date the group policy is terminated.

Additional Information


Is the request for an accelerated benefit voluntary?

Yes. An accelerated benefit will be made available on a voluntary basis only. An accelerated benefit under this supplement is not intended to cause an involuntary reduction of the death benefit ultimately payable to the beneficiary. Therefore, an accelerated benefit is not available if you:

- (1) are required by law to use this option to meet the claims of creditors, whether in bankruptcy or otherwise; or
- (2) are required by a government agency to use this option in order to apply for, obtain, or keep a government benefit or entitlement.

Do we have the right to obtain independent medical verification?

Yes. We retain the right to have you medically examined at our expense to verify your medical condition. We may do this as often as reasonably required while an accelerated benefit is being considered or paid.



Secretary



President

Minnesota Life Insurance Company
A Securian Company

Group Insurance
www.lifebenefits.com

400 Robert Street North, St. Paul, MN 55101-2098

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F64094-1 9-2008
A03377-0908

Questions?

For claims information, call
1-877-867-5781.

For conversion information, call
1-866-365-2374.

Coverage is offered under group policy form series 08-31074.