UNIVERSITY OF MISSOURI SYSTEM

Accidental Death and Dismemberment SPD

Effective January 1, 2024
This summary plan description (SPD) is designed to provide an overview of the University of Missouri System’s Accidental Death & Dismemberment Plan (Plan). While the University hopes to offer participation in this Plan indefinitely, it has the right to amend or terminate any benefit plan. In addition to this SPD, the University plans to continue to use other methods of communication such as memos, meetings, newsletter articles or electronic media to help you stay informed. In this document, we will refer to Plan when referencing the University of Missouri's Accidental Death & Dismemberment Plan.

This SPD is designed to meet your information needs. It supersedes any previous printed or electronic SPD for this Plan. The terms of this Plan may not be amended by oral statements made by the Plan sponsor, the claims administrator or any other person. In the event an oral statement conflicts with any term of the Plan, the Plan terms will control.

It's important for you to have a good understanding of all this Plan has to offer. Please review this SPD carefully. If you have questions, contact your HR Generalist (umurl.us/CBR) or HR Service Center (umurl.us/HRSC).

In the event there is a conflict of language between the Summary Plan Description and the insurance documents, the language in the insurance documents will control.
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The University's Accidental Death and Dismemberment (AD&D) Plan provides you and your family with financial security in the event of an accidental death. The Plan also helps you financially if you suffer other losses as described in the section titled “What are the benefits paid by the Plan?”.

This summary is designed to give you an overview of the major points of the Plan. The Plan is underwritten by MetLife under policy number 158738-2-G. If any description in this summary differs from the policy, the terms of the policy will be followed.

Am I eligible for coverage?

**Employees**

If you are an active Employee or subsidiary Employee (CRR 320.050) of the University, you are eligible for coverage, provided you also meet the following conditions:

- You are classified as .75 FTE or more
- You have an appointment duration of at least nine months
- You are regularly scheduled to work an average of 30 hours a week

For the purpose of this section any individual who is simultaneously employed by the University and the Harry S. Truman Veterans Administration Hospital pursuant to an agreement between said organizations, and whose joint appointments, combined, otherwise meet the requirements of this section, shall be considered an Employee.

**Disabled Employees (LTD Recipients)**

In addition, you are eligible for coverage under this plan if you are an individual who, while covered as an Employee (as defined in University Collected Rules and Regulations CRR 310.020 and CRR 320.050), became totally and permanently disabled in accordance with the University's Long Term Disability Plan and who is entitled to continued service credit (ie. vested) as a Disabled Employee under the University's Retirement, Disability and Death Benefit Plan, or, effective January 1, 2020, who has been a benefit eligible Employee for the five consecutive years immediately preceding the date on which the Employee became totally and permanently disabled. A Disabled Employee is a Long-Term Disability benefit recipient, also known as LTD Recipient.

Per diem and variable hour Employees are excluded as an Employee under this Plan.

**Retirees**

If you are a Retired Employee of the University (Retiree), you are eligible for coverage, provided the following conditions are met:

- you were covered under the Plan immediately prior to your retirement; and
- you re-enroll in the Plan when you retire; and
- if you retired on or before December 31, 2017, you were either:
  - age 55 or older with at least ten (10) years of service, or
  - age 60 or older with at least five (5) years of service; or
- if you retire on or after January 1, 2018, you must have been employed in a UM System benefit eligible-position and accumulated at least five (5) years of service, as measured by the University of Missouri Retirement, Disability and Death Benefit Plan, on December 31, 2017, and on your retirement date you must:
  - be at least 60 years old; and
  - have at least twenty (20) years of service with the UM System.

If you are a Retired Employee, are reemployed by the University after your retirement, and subsequently retire again, special rules apply:

- If, upon your initial retirement from the University, you were eligible to enroll in the Plan, based on your satisfaction of the eligibility requirements above, you will be eligible to reenroll in the Plan upon your retirement following reemployment (even if you did not initially enroll after your initial
retirement), provided you still meet all requirements above. For purposes of determining whether you still meet the requirements above upon your retirement following reemployment, your initial date of retirement will determine which eligibility requirements apply. For example, if you initially retired on August 1, 2017, and retired following reemployment on August 1, 2019, you must meet the age and service requirements above for individuals who retired on or before December 31, 2017, not the age and service requirements for individuals who retire on or after January 1, 2018.

- If, upon your initial retirement from the University, you were not eligible to enroll in the Plan, your eligibility to enroll in the Plan upon your retirement following reemployment depends on your reemployment date:
  - If you are reemployed prior to January 1, 2020, and upon your retirement following reemployment you now satisfy the eligibility provisions above, you may enroll in this Plan upon your retirement following reemployment. You must meet the eligibility requirements above applicable to the date of your retirement following reemployment.
  - If you are reemployed on or after January 1, 2020, you may not enroll in this Plan upon your retirement following reemployment, even if you now satisfy the eligibility provisions above.

If you experience a termination from employment, but were not eligible for retirement under the University's Retirement, Disability and Death Benefit Plan, are reemployed by the University, and subsequently separate from employment again, special rules apply:

- If you are reemployed prior to January 1, 2020, and upon your separation following reemployment you satisfy the eligibility provisions above, you may enroll in this Plan upon your separation following reemployment. You must meet the eligibility requirements above applicable to the date of your separation following reemployment.
- If you are reemployed on or after January 1, 2020, you may not enroll in this Plan, upon your separation following reemployment if you did not meet the eligibility requirements above on the date of your initial termination from employment, even if you satisfy the eligibility provisions above at the time of your separation following reemployment.

If you are eligible to reenroll (or enroll for the first time) upon retirement or separation after reemployment, you must enroll in this Plan consistent with the requirements in When does Coverage Begin, Retirees.

Please note: If, after retirement, you decrease the amount of your coverage or change coverage levels from “family” to “self”, you will not be allowed to increase your amount of coverage or change your coverage level back to “family”.

Are members of my family eligible for AD&D coverage?

Your eligible dependents include your Spouse or Sponsored Adult Dependent (also commonly known as a Domestic Partner) and Child(ren); each of your natural Children, stepchildren, foster Children, adopted Children, or Children placed in your home for adoption younger than age 26 (note the term “stepchild” does not include the children of your Sponsored Adult Dependent).

Children for whom a court has lawfully appointed the Employee (and/or the Employee’s legal Spouse) as a legal guardian (legal guardianship) may be covered provided:

- they are unmarried
- they reside full time with you in a parent-child relationship
- they are Principally Financially Supported by you;
- they are declared dependents on your federal income tax return, and
- legal guardianship was awarded prior to the Child’s 18th birthday and still in effect.
  - Legal guardianship ends on the Child’s 18th birthday, unless there is a court order extending the guardianship.

After exceeding the age limit, your Child’s coverage would normally end. However, your Child will remain eligible for coverage after reaching the age limit if:
• Your unmarried Child is mentally or physically incapable of self-sustaining employment prior to reaching the maximum age; and
• Your Child is dependent on you or your Spouse for Principal Financial Support, which means during the calendar year, you are continuously providing more than one half of the total support of the Child, including the amount spent to provide food, lodging, clothing, education, medical, dental and vision care, recreation, transportation and similar necessities.

You must notify the University of your Child's attainment of the age limit within thirty-one (31) days of the event.
• Employees, you must complete and submit a Life Event through the University’s self-service portal (myhr.umsystem.edu).
• LTD Recipients, you must complete and submit a LTD benefits change form to the HR Service Center.
• Retirees, you must complete and submit a Retiree benefits change form to the HR Service Center.

If your Child is disabled, application for continuation of dependent status for such a Child must be made thirty-one (31) days prior to the Child's attaining such maximum age. Proof of disability must be sent to the HR Service Center within 31 days after the Child becomes eligible and at reasonable intervals after such date upon request, but no more than once a year.

If you and your Spouse or Sponsored Adult Dependent are both eligible as Participants, only one may enroll for coverage for family members. An Participant covered as the Spouse or Sponsored Adult Dependent of another Participant may enroll for coverage as an Participant, but the total coverage amount provided under the Plan for this person who is covered as both a Spouse or Sponsored Adult Dependent and as an Participant cannot exceed the amount available to a Participant alone.

When does coverage begin?
As an Employee, you must be Actively at Work for coverage to begin.

New Hire Enrollment:
• Coverage begins on the date of hire or the benefit eligibility date provided you submit your completed benefits enrollment (via online or paper) within thirty-one (31) days of your date of hire or eligibility date.
• If you change from part-time to full-time or from temporary to permanent status and become benefit eligible, you must submit your completed benefits enrollment (via online or paper) within thirty-one (31) days of the date of your change in status.
• If you are not Actively at Work on the date your coverage would normally begin, the coverage will not be effective until you return to full-time active employment.

Annual Enrollment
• Coverage elected or changed during the Annual Enrollment change period begins on January 1 of the following year.
• If you are not Actively at Work on the date your coverage would normally begin, the coverage will not be effective until you return to full-time active employment.

Mid-Year Qualifying Event
• If you have no eligible dependents initially, but later acquire eligible dependents, you may obtain coverage, provided you apply within thirty-one 31 days of the date you first acquired dependents. You must apply by completing and submitting a Life Event through the University’s self-service portal (myhr.umsystem.edu) within thirty-one (31) days of the event. Coverage will be effective as follows:
  o In the case of birth or adoption or placement for adoption, on the date of the event, as applicable, and
In the case of any other event, on the first of the month following the date of the event, unless the event occurs on the first day of the month, then coverage will become effective on that date.

- If you are not Actively at Work on the date your coverage would normally begin, the coverage will not be effective until you return to full-time active employment.

As a Retiree, you must make written application to participate as a Retiree within thirty-one (31) days of retirement. Your AD&D coverage will begin on your retirement date.

If after retirement you become reemployed by the University or a University Subsidiary Entity and you become eligible for coverage as an Employee under University-sponsored active Employee insurance plans, your coverage will commence as follows: If your reemployment date is the first of the month, your Employee coverage under this Plan will commence on that date. If your reemployment date is effective any other day of the month, your Employee coverage under this Plan will commence on the first of the month following your rehire date. Your Retiree coverage under this Plan will “freeze” on the day immediately preceding the date in which coverage as an Employee commences. For example, if you are reemployed on October 1 and meet the eligibility requirements as an Employee on October 1, your coverage as an Employee will commence October 1 and your coverage as a Retiree will "freeze" September 30. If you are reemployed on October 1 and do not meet the eligibility requirements as an Employee until November 15 (because, for example, you were not initially in benefit eligible employment), your coverage as an Employee will begin December 1, and your coverage as a Retiree will freeze November 30. Upon your termination from regular employment and loss of University-sponsored active Employee insurance coverage (or upon loss of University-sponsored active Employee insurance coverage even while you are still employed, because you no longer meet the definition of Employee under this plan), if you are eligible to enroll in this Plan, you must immediately enroll in (if you have not previously been eligible to do so) or reinstate Retiree insurance coverage or you will forfeit your right to participate in this plan as a Retiree at a later date. For more information on eligibility, see Am I eligible for Coverage, Retirees.

How do I designate my Beneficiary(ies)?
When you enroll for coverage, you should name a Beneficiary(ies) to receive benefits in the event of your death. You may name a different Beneficiary(ies) at any time by completing a new Beneficiary designation form. Once the form is received, the new Beneficiary(ies) designation(s) form will be effective as of the date you sign the form. However, if any claim is paid prior to the University receiving the form, the change will not go into effect. The change will not apply to any payment made in good faith by MetLife before MetLife receives notice of the change in Beneficiary(ies).

You are automatically the Beneficiary(ies) of any benefits payable for coverage for dependents.

Who pays for this coverage?
You pay the full cost of the premium for your voluntary AD&D coverage on an after-tax basis. Employee contributions are made through payroll deduction. LTD Recipient contributions are billed monthly. Retiree contributions are deducted from your pension check or billed monthly.

How much coverage can I buy?
As an Employee or LTD Recipient, you may select from the following coverage amounts:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>$25,000</td>
</tr>
<tr>
<td>$50,000</td>
</tr>
<tr>
<td>$75,000</td>
</tr>
<tr>
<td>$100,000</td>
</tr>
<tr>
<td>$125,000</td>
</tr>
<tr>
<td>$150,000</td>
</tr>
</tbody>
</table>

As a Retiree, AD&D insurance amounts are based upon your age as of January 1 of the plan year and coverage ends on the December 31 of the plan year in which you turn age 80. You may select from the following coverage levels based on age, as long as the amount you select does not exceed the amount for which you were enrolled prior to retirement:

<table>
<thead>
<tr>
<th>Age</th>
<th>Coverage Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under Age 70:</td>
<td>$10,000, $25,000 or $50,000</td>
</tr>
</tbody>
</table>
You may enroll in “self” or “family” coverage levels. If you elect to insure your Spouse or Sponsored Adult Dependent and Children under the Plan (family), the amount of their coverage is a percentage of your benefit amount, as shown below:

- Spouse or Sponsored Adult Dependent only (no Children) 50% (max of $75,000)
- Spouse or Sponsored Adult Dependent and Children -Spouse or Sponsored Adult Dependent 40% (max of $60,000) -Child(ren) 5% (each Child-max of $7,500)
- Children only (no Spouse) 15% (each Child- max of $22,500)

All accidental death and dismemberment elections are guaranteed issue and will not require evidence of insurability or a statement of health form.

Can I make changes to my coverage?
As an Employee or LTD Recipient, you may elect to change the amount of coverage and coverage level for which you are enrolled during the Annual Enrollment change period. You may decrease or waive your coverage at any time during the year by completing an Employee benefits change form.

As a Retiree, you may decrease or cancel coverage at any time by completing the Retiree Benefits Change Form. Please note: Once you decrease or cancel your AD&D coverage, you cannot increase or re-enroll. You may not add or increase AD&D coverage at any time after retirement.

Does Retiree coverage reduce as I grow older?
As a Retiree, AD&D insurance amounts are based upon your age as of January 1 of the plan year. Your coverage amount shall be reduced in accordance with the following table:

<table>
<thead>
<tr>
<th>Amount of Insurance at Retirement</th>
<th>Age as of January 1</th>
<th>Reduced Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>$50,000</td>
<td>70-74</td>
<td>$25,000</td>
</tr>
<tr>
<td></td>
<td>75-80*</td>
<td>$10,000</td>
</tr>
<tr>
<td>$25,000</td>
<td>70-74</td>
<td>$25,000</td>
</tr>
<tr>
<td></td>
<td>75-80*</td>
<td>$10,000</td>
</tr>
<tr>
<td>$10,000</td>
<td>70-74</td>
<td>$10,000</td>
</tr>
<tr>
<td></td>
<td>75-80*</td>
<td>$10,000</td>
</tr>
</tbody>
</table>

*Coverage ends on the December 31 of the plan year in which you turn age 80.

What are the benefits covered and paid by the Plan?
Your AD&D benefit depends on the amount of coverage you chose when you enrolled. If your claim is approved, the benefit will pay according to the covered losses and percentages below. The benefit will be paid only if an accidental bodily injury results in one or more of the covered losses listed below within 365 days from the date of the accident. Also, the accident must occur while you or your dependent(s) are insured under the Plan.

<table>
<thead>
<tr>
<th>Covered Losses</th>
<th>Percent of Amount of Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life</td>
<td>100%</td>
</tr>
<tr>
<td>Any combination of hand, foot or sight of one eye</td>
<td>100%</td>
</tr>
<tr>
<td>Condition</td>
<td>Percentage</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>Speech and hearing</td>
<td>100%</td>
</tr>
<tr>
<td>Paralysis of both arms and both legs (Quadriplegia)</td>
<td>100%</td>
</tr>
<tr>
<td>Arm permanently severed at or above the elbow</td>
<td>75%</td>
</tr>
<tr>
<td>Leg permanently severed at or above the knee</td>
<td>75%</td>
</tr>
<tr>
<td>Paralysis of both legs and one arm or both arms and one leg (Triplegia)</td>
<td>75%</td>
</tr>
<tr>
<td>Hand permanently severed at or above wrist but below the elbow</td>
<td>50%</td>
</tr>
<tr>
<td>Foot permanently severed at or above the ankle but below the knee</td>
<td>50%</td>
</tr>
<tr>
<td>Sight in one eye</td>
<td>50%</td>
</tr>
<tr>
<td>Speech or hearing</td>
<td>50%</td>
</tr>
<tr>
<td>Paralysis of both legs (Paraplegia)</td>
<td>50%</td>
</tr>
<tr>
<td>Paralysis of the arm and leg on either side of body (Hemiplegia)</td>
<td>50%</td>
</tr>
<tr>
<td>Speech or Hearing</td>
<td>50%</td>
</tr>
<tr>
<td>Thumb and Index Finger of Same Hand</td>
<td>25%</td>
</tr>
<tr>
<td>Paralysis of one arm or leg (Uniplegia)</td>
<td>25%</td>
</tr>
</tbody>
</table>

- **Loss of sight** means permanent and uncorrectable loss of sight in the eye. Visual acuity must be 20/200 or worse in the eye or the field of vision must be less than 20 degrees.
- **Loss of thumb and index finger of same hand** means that the thumb and index finger are permanently severed through or above the third joint from the tip of the index finger and the second joint from the tip of the thumb.
- **Loss of speech** means the entire and irrecoverable loss of speech that continues for 6 consecutive months following the accidental injury.
- **Loss of hearing** means the entire and irrecoverable loss of hearing in both ears that continues for 6 consecutive months following the accidental injury.
- **Paralysis** means loss of use of a limb, without severance. A Physician must determine the paralysis to be permanent, complete and irreversible.

**Presumption of Death Benefit**
You and/or a Dependent will be presumed to have died as a result of an accidental injury if:
- the aircraft or other vehicle in which You and/or a Dependent were traveling disappears, sinks, or is wrecked; and
- the body of the person who has disappeared is not found within 1 year of:
  - the date the aircraft or other vehicle was scheduled to have arrived at its destination, if traveling in an aircraft or other vehicle operated by a Common Carrier; or
  - the date the person is reported missing to the authorities, if traveling in any other aircraft or other vehicle.

**Exposure Benefit**
MetLife will deem a loss to be the direct result of an accidental injury if it results from unavoidable exposure to the elements and such exposure was a direct result of an accident.

**Additional Benefits**
The following benefits are separate from any accidental death and dismemberment benefit which may be payable. In order to receive the below benefits, your or your dependent’s accidental death benefit must be paid first. For more information regarding these benefits and definitions, please refer to the MetLife Certificate available at umurl.us/SPD or contact MetLife with questions.

**Repatriation Benefit**
If as the result of a covered accident, you or your dependent suffers loss of life at least 100 miles away from your or your dependent’s principal place of residence, MetLife will pay an additional benefit for the
preparation and transportation of your or your dependent’s body to the city of the deceased’s principal residence. Maximum benefit is $5,000.

Seatbelt(s) and Air Bag Benefit
MetLife will pay you or your authorized representative an additional benefit if you or your dependent sustains an accidental bodily injury which causes you or your dependent’s death while you or your dependent is driving or riding in a private passenger car, provided certain requirements are met. Please refer to the MetLife Certificate (umurl.us/SPD) for requirements.

- **Seatbelts**
  - Benefit Amount: 10% of the full amount of your or your dependent’s accidental death and dismemberment insurance benefit.
  - Minimum benefit of $1,000
  - Maximum benefit of $25,000.

- **Air Bags**
  - Benefit Amount: 5% of the full amount of your or your dependent’s accidental death and dismemberment insurance benefit.
  - Minimum benefit of $1,000
  - Maximum benefit of $5,000.

Child Education Benefit
If as the result of a covered accident, you or your dependent suffers loss of life, MetLife will pay a Child education benefit. The accident must have occurred while you were insured under the plan. Proof must be provided to show on the date of death a Child was:

- enrolled as a full-time student in an accredited college, university or vocational school above the 12th grade level; or
- at the 12th grade level and, within one year after the date of death, enrolls as a full-time student in an accredited college, university or vocational school.

For each Child who qualifies for this benefit, We will pay an amount equal to the tuition charges incurred for a period of up to 4 academic years, but not more than a maximum benefit period of 6 years from the date the first benefit payment is made, not to exceed:

- an academic year maximum of $6,000; and
- an overall maximum of 6% of the full amount of your accidental death and dismemberment insurance.

In the event that both you and your Spouse die such that each death would cause a payment to be made for a Child under this additional benefit, the following rules apply:

- the academic year maximum will be 2 times the amount stated above;
- the overall maximum will be equal to the stated percentage applied to the sum of the full amount of you and your Spouse’s accidental death and dismemberment insurance in no event will the amount paid under all Child Education benefits exceed the amount of tuition incurred.

MetLife will pay this benefit semi-annually when they receive proof that tuition charges have been paid. Payment will be made to the person who pays such charges on behalf of the Child.

Are there any conditions under which AD&D benefits are not paid?
Yes. The Plan does not cover any losses caused or contributed to by:

- physical or mental illness or infirmity, or the diagnosis or treatment of such illness or infirmity;
- infection, other than pyogenic infection that results from an accidental bodily injury, or bacterial infection that results from the accidental ingestion of contaminated substances;
- suicide or attempted suicide while sane;
- See the MetLife certificate rider in the front of the certificate for the self-inflicted injury exclusion (umurl.us/SPD);
• Service in the armed forces of any country or international authority. However, service in reserve forces does not constitute service in the armed forces, unless in connection with such reserve service an individual is on active military duty as determined by the applicable military authority other than weekend or summer training. For purposes of this provision reserve forces are defined as reserve forces of any branch of the military of the United States or of any other country or international authority, including but not limited to the National Guard of the United States or the national guard of any other country;

• any incident related to:
  o travel in an aircraft as a pilot, crew member, flight student or while acting in any capacity other than as a passenger;
  o travel in an aircraft for the purpose of parachuting or otherwise exiting from such aircraft while it is in flight;
  o parachuting or otherwise exiting from an aircraft while such aircraft is in flight, except for self-preservation;
  o travel in an aircraft or device used:
    • for testing or experimental purposes;
    • by or for any military authority; or
    • for travel or designed for travel beyond the earth’s atmosphere;

• committing or attempting to commit a felony;

• the voluntary intake or use by any means of:
  o any drug, medication or sedative, unless it is:
    ▪ taken or used as prescribed by a Physician; or
    ▪ an “over the counter” drug, medication or sedative taken as directed;
  o Alcohol in combination with any drug, medication, or sedative; or
  o poison, gas, or fumes; or

• war, whether declared or undeclared; or act of war, insurrection, rebellion or riot.

MetLife will not pay benefits under this section for any loss if the injured party is intoxicated at the time of the incident and is the operator of a vehicle or other device involved in the incident.

Intoxicated means that the injured person’s blood alcohol level met or exceeded the level that creates a legal presumption of intoxication under the laws of the jurisdiction in which the incident occurred.

When will my AD&D coverage end?
Your coverage will end on the earliest of these dates:
• the date this policy ends; or
• the date the certificate holder no longer meets the eligibility requirements; or
• the date this policy is amended so the certificate holder is no longer eligible; or
• thirty-one (31) days (the grace period) after the due date of any unpaid premium if the premium remains unpaid at that time; or
• the last day for which premium contributions have been paid following a certificate holder’s written request to cease participation under this policy; or
• For Retirees, coverage ends on December 31 of the plan year in which you turn age 80.
• the date you retire, if you are already age 80, or the date your employment terminates (Retired Employees can enroll for limited coverage upon retirement.)

Can my Spouse or Sponsored Adult Dependent and Children have coverage after my death?
In the event of your death, your covered Spouse or Sponsored Adult Dependent and Children can continue coverage, provided they are not eligible under this Plan as an Employee. See Portability.
Portability

If your employment ends with the University, you retire and do not elect accidental death and dismemberment coverage as a Retiree or you are working less than the minimum number of hours to meet the eligibility requirements of the Plan as described under Am I eligible for coverage, you may elect to port coverage for yourself and your dependents. You must submit your application and first premium payment within thirty-one (31) days after your coverage ends.

Your Spouse or Sponsored Adult Dependent may choose to port their own insurance if their coverage ends because:

- you die; or
- your marriage ends in divorce or annulment; or
- your Sponsored Adult Dependent partnership ends

Your dependent Child may choose to port their own insurance if their coverage ends because they no longer meet the requirements described under Are members of my family eligible for AD&D coverage.

Dependents must apply for portable coverage and pay the first premium within thirty-one (31) days of when their coverage ends.

The University will notify MetLife of your ability to port coverage. If you do not receive information from MetLife within fifteen (15) days of your event, please contact MetLife directly at 1-877-275-6387 to inquire about Portability options and costs.

The portable insurance coverage will be the current coverage and amounts that you and your dependents are insured for under the group plan, subject to portability maximums. You may also be able to increase your life insurance amount at the time of porting. Please contact MetLife with questions. Your coverage will reduce or cease at any time it would have otherwise reduced or ceased under the Plan.

If portable coverage ends due to failure to pay required premiums, portable coverage cannot be reinstated.

How do I file a claim?

If you suffer a covered loss, you or your Beneficiary(ies) should provide notice to your HR Generalist or HR Service Center to initiate a claim. This notice should be given as soon as is reasonably possible but in any case within 20 days of the covered loss. The University will provide notification to MetLife and MetLife will furnish the necessary claim form to you or the Beneficiary or Beneficiaries of record. The claim form should be completed according to the instructions provided. If you or your Beneficiary(ies) do not receive the form from MetLife within fifteen (15) days of giving notice of the claim, send MetLife written proof of claim without waiting for the form. If notice of claim or proof is not given within the time limits described in this section, the delay will not cause a claim to be denied or reduced if such notice or proof are given as soon as is reasonably possible.
Definitions

**Actively at Work or Active Work** means that you are performing all of the usual and customary duties of Your job on a Full-Time basis. This must be done at:
- The Policyholder's place of business;
- an alternate place approved by the Policyholder; or
- a place to which the Policyholder's business requires You to travel.

You will be deemed to be Actively at Work during weekends or Policyholder approved vacations, holidays or business closures if You were Actively at Work on the last scheduled work day preceding such time off.

**Beneficiary(ies)** means the person(s) whom MetLife will pay insurance as determined in accordance with the policy.

**Child or Children** means:
- natural Children; or
- stepchildren (note that the child of an Employee's Sponsored Adult Dependent is not a stepchild); or
- foster Children (subject to court order or placement by an authorized agency); or
- legally adopted Children or Children placed in the Employee's home for adoption (subject to court order); or
- each Child, who otherwise meets the definition of "Child" under the Plan, of an Employee for whom the University has received a valid Notice of Order to Enroll and for which the University is obligated to comply under Senate Bill No. 253 which repeals various Sections of RSMO 1986 and RSMO Supp. 1992; or
- each Child who a court has lawfully appointed the Employee (and/or the Employee's legal Spouse) as a legal guardian (legal guardianship) who is responsible for providing Principal Financial Support provided the:
  - Child is unmarried,
  - Child resides full-time with the Employee in parent-child relationship,
  - Child is declared a dependent on the Employee’s federal income tax return; and
  - legal guardianship was awarded prior to the child’s 18th birthday and is still in effect.
    - Legal guardianship ends on the child’s 18th birthday, unless there is a court order extending the guardianship.

**Disabled Employee** means someone who is a Long-Term Disability benefit recipient, also known as LTD Recipient. See *Am I eligible for coverage*.

**Dependent** means your Spouse/Sponsored Adult Dependent and/or Child(ren).

**Domestic Partner** see Sponsored Adult Dependent

**Employee** means you are an Active Employee or Subsidiary Employee (CRR 320.050) of the University, you are eligible for coverage, provided you also meet the following conditions:
- You are classified as .75 FTE or more.
- You have an appointment duration of at least nine months.
- You are regularly scheduled to work an average of thirty (30) hours a week.

For the purpose of this section any individual who is simultaneously employed by the University and the Harry S. Truman Veterans Administration Hospital pursuant to an agreement between said organizations, and whose joint appointments, combined, otherwise meet the requirements of this section, shall be considered an Employee.
**LTD Recipient**, see “Disabled Employee”

**Participant** means an Employee, LTD Recipient or Retiree.

**Principal Financial Support** means during the calendar year, you are continuously providing more than one half of the total support of the Child, including the amount spent to provide food, lodging, clothing, education, medical, dental and vision care, recreation, transportation and similar necessities.

**Principally Financially Supported** see Principal Financial Support.

**Retiree** means you are a Retired Employee of the University (Retiree) and you are eligible for coverage, provided the conditions under *Am I eligible for coverage*, subsection Retiree, are met.

**Sponsored Adult Dependent**, also commonly referred to as a Domestic Partner, means an adult person who meets all of the following criteria:

- has had a single dedicated relationship of at least twelve (12) months with the Employee;
- has had the same principal residence as you for at least twelve (12) months, and continues to have the same principal residence as you, disregarding temporary absences due to special circumstances including illness, education, business, vacation or military service;
- is 18 years of age or older;
- is not currently married to another person under either statutory or common law;
- is not related to you by blood or a degree of closeness that would prohibit marriage in the law of the state in which you reside; and
- has not been determined by a court or physician to be mentally incompetent.

**Spouse** means the lawful Spouse of an Employee, LTD Recipient or Retiree.