

UNIVERSITY OF MISSOURI SYSTEM
Dependent Life Insurance SPD

Effective date January 1, 2024



This summary plan description (SPD) is designed to provide an overview of the University of Missouri System's Dependent Life Insurance Plan (Plan). While the University hopes to offer participation in these Plans 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 Dependent Life Insurance 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](http://umurl.us/CBR) (umurl.us/CBR) or [HR Service Center](http://umurl.us/HRSC) (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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What is Dependent Life insurance?

The Dependent Life Insurance Plan allows you to obtain group term life insurance for your Spouse or your Sponsored Adult Dependent, also commonly known as a Domestic Partner, and/or your Dependent Children. The Plan allows you to choose from several amounts of coverage for both your Spouse/Sponsored Adult Dependent and/or Dependent Children.

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

Benefit summary

The Dependent life insurance Plan offers several coverage amount choices. If you elect certain coverages you may be required to submit a Statement of Health Form for Evidence of Insurability. The Evidence of Insurability must be accepted by MetLife as satisfactory for such coverages and/or increases to take effect.

Coverage for your Spouse or Sponsored Adult Dependent

You may choose coverage in increments of \$10,000 up to a maximum of \$100,000. The following outlines the opportunities for Employees and LTD Recipients to elect Dependent Life for a Spouse or Sponsored Adult Dependent, also commonly known as Domestic Partner, and the Evidence of Insurability (EOI) requirements:

- **New Hire Enrollment:** You may elect coverage up to \$20,000 guaranteed issue without EOI, provided you submit your completed benefits enrollment (via online or paper) within thirty-one (31) days of your date of hire or benefit eligibility date. Coverage in excess of \$20,000 requires a Statement of Health Form for EOI.
- **Annual Enrollment:** You may elect to enroll or change the amount of coverage for which you've enrolled. A Statement of Health Form for EOI is required for newly elected and increases in coverage. Decreases in coverage do not require EOI.
- **Mid-Year Qualifying Event:** You may elect coverage up to \$20,000 guaranteed issue without EOI, provided you submit your completed Life Event through the University's self-service portal (myhr.umsystem.edu) within thirty-one (31) days of the date of marriage. A Statement of Health Form for EOI is required for an existing Spouse/Sponsored Adult Dependent to enroll in any amount of coverage, unless your Spouse/Sponsored Adult Dependent was a UM benefit-eligible Employee who lost their UM basic life coverage and is newly eligible for UM spousal life coverage; then, you may elect up to \$20,000 without EOI, provided you do so within thirty-one (31) days of the date UM Employee coverage ended. Coverage in excess of \$20,000 requires a Statement of Health Form for EOI.

Coverage for your Child(ren)

You may choose coverage in increments of \$5,000 up to a maximum of \$25,000. The amount of coverage will be applicable to each eligible Child. The following outlines the opportunities for Employees and LTD Recipients to elect Dependent Life for a Child:

- **New Hire Enrollment:** You may elect coverage up to \$25,000, provided you submit your completed benefits enrollment (via online or paper) within thirty-one (31) days of your date of hire or benefit eligibility date. Otherwise, you must wait until the next Annual Enrollment or until you have a mid-year qualifying event.
- **Annual Enrollment:** You may elect to enroll or change the amount of coverage for which you've enrolled.
- **Mid-Year Qualifying Event:** You may elect coverage up to \$25,000, provided you complete and submit the Life Event through the University's self-service portal (myhr.umsystem.edu) within thirty-one (31) days of the date of birth, adoption or legal guardianship. If your Dependent Child was a UM benefit-eligible Employee who lost their UM basic life coverage and is newly eligible for UM Dependent Life Child coverage; then, you may elect up to \$25,000, provided you do so within thirty-one (31) days of the date UM Employee coverage ended; otherwise, you must wait until the next Annual Enrollment.

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 this 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.

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

Disabled Employees (LTD Recipients)

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.

Retirees

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

- you were enrolled in the Spouse/Sponsored Adult Dependent and/or Child(ren) Dependent life plan(s), immediately prior to your retirement; and
- you re-enroll in the same plan(s) 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 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 Spouse/Sponsored Adult Dependent and/or Child(ren) Dependent life plan(s), based on your satisfaction of the eligibility requirements above, you will be eligible to reenroll in the same plan(s) 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

Spouse/Sponsored Adult Dependent and/or Child(ren) Dependent life plan(s), your eligibility to enroll in the same plan(s) 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 the same plan(s) 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 the same plan(s) 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 the same plan(s) 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 the Spouse/Sponsored Adult Dependent and/or Child(ren) Dependent life plan(s), 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 the Spouse/Sponsored Adult Dependent and/or Child(ren) Dependent life plan(s), consistent with the requirements in *When does Coverage Begin, Retirees*.

Please note: If, after retirement, you drop coverage on any of your Dependents, you may not re-enroll them in the Plan.

What family members can be covered?

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.

You may choose to cover only your Spouse or Sponsored Adult Dependent, only your Child(ren), or both your Spouse or Sponsored Adult Dependent and Child(ren). If you enroll for Child(ren) coverage, then all of your Children are covered. For this Plan, you need not provide specific information on Children. **However, if you are an Employee, it is your responsibility to notify the University within 31 days of when you no longer have a Spouse, Sponsored Adult Dependent and/or Children who are eligible for this coverage by completing and submitting a Life Event through the University's self-service portal (myhr.umsystem.edu) within thirty-one (31) days of the Dependent's ineligibility. If you are a Retiree, you must complete and submit a Retiree benefits change form to the HR Service Center within thirty-one (31) days of the Dependent's ineligibility.**

A Participant cannot be covered under this Plan as a Dependent of another Participant. In addition, Children cannot be covered as Dependent(s) of more than one Participant. So, if both you and your Spouse or Sponsored Adult Dependent are eligible for this coverage as Participants, neither of you may enroll for spousal coverage for the other, and only one of you may enroll to cover your Children.

When does coverage begin?

For Employees and LTD Recipients, if your Spouse or Sponsored Adult Dependent is confined at home under a Physician's care or hospitalized at the time coverage is scheduled to take effect, your Spouse or Sponsored Adult Dependent's coverage will begin on the date your they are no longer confined or hospitalized. This provision does not apply to Dependent Children.

New Hire Enrollment:

- Coverage that does not require a Statement of Health Form 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 benefit 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.
- In no case will coverage on your Spouse or Sponsored Adult Dependent in excess of \$20,000 become effective prior to the date of approval by MetLife. Coverage is effective the first of the month coincident with or next following the date approved.

Annual Enrollment

- A Statement of Health Form is required for any level increase or new enrollment for Spouse or Sponsored Adult Dependent coverage. Coverage elected or changed during the Annual Enrollment change period begins on January 1 of the following year, or upon approval by MetLife if after January 1.

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. If you are an Employee, you must apply by completing and submitting a Life Event through the

University's self-service portal (myhr.umssystem.edu) within thirty-one (31) days of the event.

Coverage Retiree Retiree will be effective as follows:

- 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.
 - In no case will coverage on your Spouse or Sponsored Adult Dependent in excess of \$20,000 become effective prior to the date of approval by MetLife.
 - Coverage requiring a Statement of Health Form is effective the first of the month coincident with or next following the date approved by MetLife.

As a Retiree, you must make written application to participate as a Retiree within thirty-one (31) days of retirement. Your Dependent Life 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 that does not require a Statement of Health Form 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 submit a Statement of Health Form (SOH)?

For Employees and LTD Recipients, if you elected Dependent Life insurance coverage that requires a Statement of Health Form, you will need to provide MetLife with your Spouse or Sponsored Adult Dependent's email address so the SOH form can be sent to them. First, login to myHR (myhr.umssystem.edu). Once logged in, click on the "myBenefits" tile, select "Statement of Health (MetLife)" from the left-hand menu and click the "Access MetLife Statement of Health" link to connect to MetLife. The Statement of Health Form is only available online for a limited period of time after your application for coverage. Please have your Spouse or Sponsored Adult Dependent complete it as soon as possible.

Who pays for this coverage?

You will pay the full cost of the premium for Dependent Life insurance 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.

The premium for coverage for your Spouse or Sponsored Adult Dependent is based on the Spouse or Sponsored Adult Dependent's age as of January 1 of the plan year and the amount of coverage you select.

The premium for coverage on your Child(ren) is based on the amount of coverage you select.

May I change my choice of coverage?

As an Employee or LTD Recipient, you may elect to change the amount of coverage for which you've enrolled during the Annual Enrollment change period. Any increase in Spouse or Sponsored Adult Dependent coverage must be approved by MetLife.

You may elect to enroll or change the amount of coverage for which you are enrolled if you experience a qualifying family status change and the change that you are requesting is consistent with the event. Review the above *Benefit Summary* for mid-year qualifying events. To enroll,

- Employees must complete and submit a Life Event through the University's self-service portal (myhr.umsystem.edu) within thirty-one 31 days after the event occurs.
- LTD Recipients must complete and submit a LTD benefits change form to the HR Service Center within thirty-one 31 days after the event occurs.

You may decrease or waive your coverage at any time during the year by completing an Employee/LTD 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 Dependent Life coverage(s), you cannot increase or re-enroll. You may not add or increase Dependent Life coverage(s) at any time after retirement.

How do I designate a Beneficiary(ies)?

You do not designate a Beneficiary(ies) for this coverage. You, the University Policy Holder are automatically the Beneficiary of any Dependent Life insurance coverage.

How are benefits paid?

The insurance company will pay benefits to you, the University Policy Holder, upon receiving written proof of your Dependent's death.

The Plan will pay accelerated benefits, up to 100% of the face amount, in lieu of death benefit for a Spouse or Sponsored Adult Dependent with a life expectancy of less than twelve (12) months. Accelerated benefit requests for less than 100% of the face amount, must be in \$10,000 increments.

What happens when I retire?

If you retire, the coverage in effect at retirement may be continued provided you agree to continue to pay the required premiums to the University.

Note: If after retirement you become reemployed by the University or a University Subsidiary Entity, please see *Eligibility* and *When does coverage begin* for more information regarding your coverage options.

When will this coverage end?

Dependent Life coverage will end on the earliest of the following dates:

- the date you stop paying the premiums
- the date you are no longer eligible for coverage
- the date your Spouse or Sponsored Adult Dependent or Child ceases to be eligible for coverage.
 - In order to stop your contributions, you must notify the University within thirty-one (31) days of the Dependent's ineligibility.
 - 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.
- the date you or eligible Spouse, Sponsored Adult Dependent or Child dies
- the date the University discontinues the Plan

The Dependent Life coverage may be continued during any authorized leave of absence. If you go on an unpaid leave of absence, you must continue to pay the required monthly premium to the University in advance or through monthly billing.

Portability

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 *What family member can be covered?*.

Dependents must apply for portable coverage and pay the first premium within thirty-one (31) 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 refer to the MetLife Certificate (umurl.us/SPD) or contact MetLife with questions.

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

Conversion Privilege

When Dependent Life coverage ends, if you choose not to Port, Dependent Life benefits may be converted to an individual life insurance policy from MetLife. The maximum amount of coverage that you can convert is the coverage amount immediately prior to conversion. A Statement of Health Form will not be required for this policy, however, application for it and payment of the first premium must be made directly to MetLife within thirty-one (31) days of the date the coverage terminates. The premium for the individual policy will be Dependent on a number of factors including, but not limited to, the amount of the policy and your Dependent's age.

How do I file a claim?

If you suffer a covered loss, you should provide notice to your HR Generalist or HR Service Center to initiate a claim. The University will provide notification to MetLife and MetLife will furnish the necessary forms which should be completed according to the instructions provided.

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.

Policy Holder 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.