

## State of Florida Employee Plan Overview

Apply by visiting  
[peoplefirst.myflorida.com](http://peoplefirst.myflorida.com)

### Coverage options: MetLife Basic Term Life Insurance

Specific details regarding these provisions can be found in the booklet certificate.

| Who's Eligible                 | Coverage Choices | Requirements for this Enrollment Period        |
|--------------------------------|------------------|------------------------------------------------|
| All Full-time Active Employees | \$25,000         | Basic coverage is paid by the State of Florida |
| OPS/Variable Hour Employees    | \$25,000         | Basic coverage is paid by you                  |

### Coverage options: MetLife Optional Term Life Insurance

Specific details regarding these provisions can be found in the booklet certificate.

|                                |                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| All Full-time Active Employees | <b>MetLife Optional Term Life Insurance:</b><br><br>Specific details regarding these provisions can be found in the booklet certificate.<br><br>1 to 7 times your annual earnings, rounded to the next higher \$1,000, up to a maximum of \$1,000,000 | <b>New Hires:</b><br>During your initial eligibility (60 Days), you can elect up to the lesser of 5 times your annual earnings or \$500,000 on a guaranteed issue basis.<br><br><b>During Open Enrollment or after a Qualified Status Change.</b><br>Increase your current optional coverage by 1 times your annual earnings to the lesser of 5 times your annual earnings or \$500,000 without answering any health questions.<br><br><b>OPS/Variable Hour Employees are not eligible</b> |
| Spouse                         | \$15,000 or \$20,000                                                                                                                                                                                                                                  | During initial eligibility, you can elect either benefit option on a guaranteed issue basis.                                                                                                                                                                                                                                                                                                                                                                                               |
| Dependent Child(ren)           | \$10,000                                                                                                                                                                                                                                              | No health questions are required.<br><br>Child(ren)'s eligibility is from live birth to the end of the year the child attains age 26.                                                                                                                                                                                                                                                                                                                                                      |

### MetLife Advantages<sup>SM</sup>

Your plan includes access to MetLife Advantages<sup>SM</sup>—a comprehensive suite of valuable services for support, planning and protection when you need it most at no additional cost to you. For a full list of services visit [www.metlife.com/info/stateoffl](http://www.metlife.com/info/stateoffl). Services include:

#### Will Preparation Services<sup>2</sup>

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

#### Estate Resolution Services<sup>2</sup>

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

Accelerated Benefit Option<sup>4</sup>:

In case of terminal illness, you can get early access to a portion of your life insurance proceeds.

Waiver of Premium<sup>5</sup>:

If you become Totally Disabled, you may qualify to continue certain insurance. You may also be eligible for waiver of your Basic and Optional Life insurance premium until you reach age 65, die or recover from your disability, whichever is sooner.

Portability<sup>6</sup>:

Should you leave State of Florida for any reason other than retirement and your Basic and Optional Life insurance under this plan terminates, you will have an opportunity to continue group term coverage ("portability") under a different policy, subject to plan design and state availability.

Cost of Coverage:

Rates are guaranteed<sup>3</sup> until December 31, 2029.

Cost is based on the amount of coverage you elect and your current age. Please note that rate changes are reflected the month prior to moving into a new age bracket. The rates shown are the monthly cost of coverage. Monthly cost for dependent child(ren) covers all eligible child(ren).

Employee Monthly Cost Per \$1,000 of Coverage:

|              | Employee |
|--------------|----------|
| AGE          | Rates    |
| 29 & Younger | \$.050   |
| 30-34        | \$.079   |
| 35-39        | \$.084   |
| 40-44        | \$.090   |
| 45-49        | \$.127   |
| 50-54        | \$.189   |
| 55-59        | \$.284   |
| 60-64        | \$.546   |
| 65-69        | \$.680   |
| 70 & Above   | \$1.455  |

| OPS/Variable Hour Monthly Cost of Coverage |        |
|--------------------------------------------|--------|
| \$25,000                                   | \$3.18 |

| Spouse Monthly Cost of Coverage |        |
|---------------------------------|--------|
| \$15,000                        | \$5.18 |
| \$20,000                        | \$6.90 |

| Dependent Child(ren) Monthly Cost of Coverage |        |
|-----------------------------------------------|--------|
| \$10,000                                      | \$0.85 |

Coverage is paid through convenient payroll deductions.

How to Calculate My Monthly Cost:

|                                                                                                                  |         |          |
|------------------------------------------------------------------------------------------------------------------|---------|----------|
| 1. Enter the rate from the table (example age 36)                                                                | \$0.084 | \$       |
| 2. Enter the amount of insurance in thousands of dollars<br><br>(Example: for \$100,000 of coverage enter \$100) | 100     |          |
| 3. Monthly premium (1) x (2)                                                                                     | \$8.40  | \$ _____ |

Call us with questions at  
**1-844-222-9104**

1. All applications for coverage are subject to review and approval by MetLife. If you choose to apply for increased coverage, the increase may be subject to underwriting. MetLife will review your information and evaluate your request for coverage based upon your answers to the health questions, MetLife's underwriting rules and other information you authorize us to review. In certain cases, MetLife may request additional information to evaluate your request for coverage. Coverage will be effective in accordance with the applicable policy and certificate after approval by MetLife. Only applicants who reside in a US state, the District of Columbia, or Guam, Northern Mariana Islands, Puerto Rico or US Virgin Islands are allowed to complete their SOH form online (where available). Otherwise, applicants will be provided with a paper SOH form. Individuals residing outside of the US or in certain US territories must be on US payroll and be approved by MetLife before being provided with an SOH form.
2. Included with Optional Life Insurance. Will Preparation and Estate Resolution Services are offered by MetLife Legal Plans, Inc., Cleveland, Ohio. In certain states, legal services benefits are provided through insurance coverage underwritten by Metropolitan General Insurance Company, Warwick, Rhode Island. For New York situated or principally located cases, the Will Preparation service is an expanded offering that includes office consultations and telephone advice for certain other legal matters beyond Will Preparation. Tax Planning and preparation of Living Trusts are not covered by the Will Preparation Service. Certain services are not covered by Estate Resolution Services, including matters in which there is a conflict of interest between the executor and any beneficiary or heir and the estate; any disputes with the group policyholder, MetLife and/ or any of its affiliates; any disputes involving statutory benefits; will contests or litigation outside probate court; appeals; court costs, filing fees, recording fees, transcripts, witness fees, expenses to a third party, judgments or fines; and frivolous or unethical matters.
3. The group contract provides MetLife with the right to adjust the rates and/or the rate guarantee period should overall group participation change significantly.
4. The ABO benefits are intended to qualify for favorable federal tax treatment under Section 101(g) of the Internal Revenue Code (26 U.S.C. Sec 101(g)), in which case the benefits will not be subject to federal taxation. This information was written as a supplement to the marketing of life insurance products. Tax laws relating to accelerated benefits are complex and limitations may apply. You are advised to consult with and rely on an independent tax advisor about your own particular circumstances. Receipt of ABO benefits may affect your eligibility, or that of your spouse or your family, for public assistance programs such as medical assistance (Medicaid), Temporary Assistance to Needy Families (TANF), Supplementary Social Security Income (SSI) and drug assistance programs. You are advised to consult with social service agencies concerning the effect that receipt of ABO benefits will have on public assistance eligibility for you, your spouse or your family. This is a life insurance benefit that also gives you the option to accelerate some or all of the death benefit in the event you meet the criteria for a qualifying event described in the policy. This policy or certificate does not provide long-term care insurance subject to California long-term care insurance (LTC) law. This policy or certificate is not a California Partnership for Long-Term Care program policy. LTC insurance provides nursing home care, home-health care, personal or adult day care for individuals above age 65 or with chronic or disabling conditions that need constant supervision. This policy or certificate is not a Medicare supplement (policy or certificate).
5. Waiver of Premiums for Total Disability (Continued Protection) Offering continued coverage when you need it most If you become Totally Disabled, you may qualify to continue certain insurance. You may also be eligible for waiver of your basic and optional and dependent term life insurance premium until you reach age 65, die, or recover from your disability, whichever is sooner.
6. Portability: So you can keep your coverage even if you leave your current employer. Should you leave the State of Florida for any reason, and your Basic and Optional and Dependent Term Life and insurance under this plan terminates, you will have an opportunity to continue group term coverage ("portability") under a different policy, subject to plan design and state availability. Rates will be based on the experience of the ported group and MetLife will bill you directly. Rates may be higher than your current rates. To take advantage of this feature, you must have coverage of at least \$10,000 up to a maximum of \$1,000,000. Portability is also available on coverage you've selected for your spouse and dependent child(ren). The maximum amount of coverage for spouse is \$20,000; the maximum amount of dependent child coverage is \$10,000. Increases, decreases and maximums are subject to state availability. Generally, there is no minimum time for you to be covered by the plan before you can take advantage of the portability feature. Please see your plan administrator/employer or certificate for specific details. Please note that if you experience an event that makes you eligible for portable coverage, please call a MetLife representative at 1-844-222-9104 or contact your plan administrator/employer for more information.

This summary provides an overview of your plan's benefits. These benefits are subject to the terms and conditions of the contract between MetLife and your Plan Sponsor and are subject to each state's laws and availability. Specific details regarding these provisions can be found in the booklet certificate. Life coverages are provided under a group insurance policy (Policy Form GPN99/G2130-S) issued to your employer by MetLife. Life coverages under your employer's plan terminates when your employment ceases, when your Life contributions cease, or upon termination of the group insurance policy. Dependent Life coverage will terminate when a dependent no longer qualifies as a dependent or as otherwise determined by plan design. Should your life insurance coverage terminate, for reasons other than non-payment of premium, you may convert it to a MetLife individual permanent policy without providing medical evidence of insurability.

Nothing in these materials is intended to be advice for a particular situation or individual. Please consult with your own advisors for such advice. Like most group insurance policies, insurance policies offered by MetLife contain certain exclusions, exceptions, waiting periods, reductions, limitations and terms for keeping them in force. Please contact your benefits administrator or MetLife for costs and complete details.

