The Accidental Death and Dismemberment Insurance Policy has been amended as follows:

In order to document that exclusions 8b and c do not apply to medical trauma team crew members, the exclusions shown under number 8b and c under the “Exclusions” section has been amended to read as follows:

**Exclusions**

**What are the exclusions under this policy?**

In no event will we pay the accidental death or dismemberment benefit where the insured’s death or dismemberment results from or is caused directly or indirectly by any of the following:

1. suicide or attempted suicide, whether sane or insane; or
2. intentionally self-inflicted injury or any attempt at self-inflicted injury, whether sane or insane; or
3. the insured’s participation in or attempt to commit a crime, assault or felony; or
4. bodily or mental infirmity, illness or disease; or
5. medical or surgical treatment including diagnostic procedures; or
6. alcohol, drugs, poisons, gases or fumes, voluntarily taken, administered, absorbed, inhaled, ingested or injected; or
7. bacterial infection, other than infection occurring simultaneously with, and as a result of, the accidental injury; or
8. travel or flight in or on any vehicle used for aerial navigation including getting in, out, on, or off such vehicle, if the insured is:
   a. riding as a passenger in any aircraft not intended or licensed for the transportation of passengers; or
   b. acting as a pilot or a crew member of any aircraft, unless riding as a passenger (does not apply to medical trauma team crew members); or
   c. riding as a passenger in a non-chartered aircraft which is owned, leased, operated, or controlled by the eligible employee’s employer (does not apply to medical trauma team crew members); or
   d. a student taking a flying lesson, unless riding as a passenger; or
   e. hang gliding; or
   f. parachuting, except when the insured has to make a parachute jump for self-preservation; or
(9) war or any act of war, whether declared or undeclared; or
(10) active participation in a riot or civil insurrection; or
(11) service in the military of any nation.

Agreed to by Minnesota Life Insurance Company this 25th day of January, 2016.

By ___________________________________

JLM
Second Vice President
To be attached to and made a part of Group Policy No. 33915-G issued by Minnesota Life Insurance Company to the University of Cincinnati. This amendment is effective as of January 1, 2015. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

The minimum number of hours per week for Classes 2-6 will be reduced to 30 hours to match the policyholder’s medical/dental plans. As a result, the section entitled Minimum Hours Per Week Required on page A of the AD&D Insurance Policy Specifications Page is amended to read as follows:

MINIMUM HOURS PER WEEK REQUIRED:

Class 1: 26 hours per week
Classes 2–6: 30 hours per week

Agreed to by Minnesota Life Insurance Company this 24th day of June, 2014.

By ________________________________

mmj
Assistant Secretary
Read Your Policy Carefully

This policy was issued to the policyholder on the effective date shown on the specifications page attached to this policy. We promise to pay the benefits provided by this policy, subject to its conditions, limitations, and exceptions. We make this promise and issue this policy in consideration of the application for this policy and the payment of the premiums.

Minnesota Life Insurance Company is a subsidiary of Minnesota Mutual Companies, Inc., a mutual insurance holding company. The policyholder is a member of Minnesota Mutual Companies, Inc., which holds its annual meetings on the first Tuesday in March of each year at 3 p.m. local time. The meetings are held at 400 Robert Street North, St. Paul, Minnesota 55101-2098.

Legal Actions

No legal action may be brought to recover on this policy within the first sixty days after written proof of loss has been given as required by this policy. No such action may be brought after three years from the time written proof of loss is required to be given.

Signed for Minnesota Life Insurance Company at St. Paul, Minnesota on the effective date.

Secretary

President

TABLE OF CONTENTS

Definitions ................................................................. 2
General Information .................................................. 2
Premiums ................................................................. 4
Accidental Death and Dismemberment Benefit .......... 4
Exclusions .............................................................. 6
Additional Benefits ................................................ 6
Portability Benefit ....................................................... 7
Termination ............................................................. 8
Family Coverage ....................................................... 9
Dependents Benefit Termination .............................. 10
Additional Information ............................................ 11
## GENERAL INFORMATION

| POLICY SITUS: | The policy is delivered in and governed by the laws of Ohio. |
| POLICYHOLDER: | University of Cincinnati |
| POLICY EFFECTIVE DATE: | January 1, 2011. This specifications page represents the plan in effect as of January 1, 2016. |
| POLICY ANNIVERSARY DATE: | January 1 of each year beginning January 1, 2012 |
| PREMIUM DUE DATE(S): | The first day of each month |

### GROUP:
The group is composed of active full-time employees of the policyholder and its associated companies in the following Classes:

| Class 1: | All faculty members or librarians represented by AAUP (65% FTE or greater) in active employment in the United States with the employer. |
| Class 2: | All full-time and part-time employees (80% FTE or greater) represented by AFSCME in active employment in the United States with the employer. |
| Class 3: | All unrepresented full-time and part-time employees, Visiting Faculty, and employees represented by the Fraternal Order of Police with an FTE 80% or greater as well as College of Medicine Faculty with FTE 65% or greater, in active employment in the United States with the employer. |
| Class 4: | All full-time and part-time employees (80% FTE or greater) represented by IUOE in active employment in the United States with the employer. |
| Class 5: | All full-time and part-time (80% FTE or greater) nurses represented by ONA in active employment in the United States with the employer. |
| Class 6: | All full-time and part-time (80% FTE or greater) represented by SEIU 1199 in active employment in the United States with the employer. |

### ENROLLMENT PERIOD:
31 days from the first day of eligibility for contributory insurance.

### WAITING PERIOD:
Class 1: First of the month following 28 days of continuous active employment or the University’s contractual obligation to the employees.

Classes 2-6: First of the month following 28 days of continuous active employment.

If an employee’s employment ends and the employee is rehired within the time period allowed by the employer, the employee’s previous work while in an eligible group will apply toward the waiting period.

### MINIMUM HOURS PER WEEK REQUIREMENT:
Class 1: 26 hours per week
Classes 2-6: 32 hours per week
EMPLOYEE PERSONAL ACCIDENT (AD&D) INSURANCE:

Personal Accident Insurance

<table>
<thead>
<tr>
<th>Eligible Class</th>
<th>Amount of Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Employees in Classes 1-6</td>
<td>An employee may elect $50,000, $100,000 or $150,000.</td>
</tr>
</tbody>
</table>

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the portability provision.

CONTRIBUTORY/ NONCONTRIBUTORY: Personal accident insurance is paid for by the employee.

INCREASES AND DECREASES: Requests for increases and decreases may be made once a year and shall be effective on the January 1 following the request for change.

TERMINATION: An employee shall remain eligible until the end of the month in which the employee is no longer in active employment, unless continued due to a covered layoff or leave of absence or due to an injury or sickness, as described in this policy.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS AD&D INSURANCE:

<table>
<thead>
<tr>
<th>Eligible Class</th>
<th>Amount of AD&amp;D Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse/Domestic Partner</td>
<td>50% of the employee’s amount of personal accident insurance, to a maximum of $75,000.</td>
</tr>
<tr>
<td>Children</td>
<td>10% of the employee’s amount of personal accident insurance, to a maximum of $15,000.</td>
</tr>
</tbody>
</table>

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

AGE REQUIREMENTS: Children are eligible if they are 14 days old or older, but have not attained the age of 19, or have not attained the age of 25 (Class 1) 23 (Classes 2-6) if a full-time student in an accredited post-secondary school.

Children age 19 or older are also eligible if they are physically or mentally incapable of self-support, were incapable of self-support prior to age 19 (25 or 23 if a full-time student) and are financially dependent on the certificate holder for more than one-half of their support and maintenance.

CONTRIBUTORY/ NONCONTRIBUTORY: All dependents insurance is paid for by the employee.

INCREASES AND DECREASES: Requests for increases and decreases may be made once a year and shall be effective on the January 1 following the request for change.
Definitions

age
Attained age as of most recent birthday.

certificate effective date
The date the certificate holder’s coverage under this policy becomes effective.

certificate holder
An insured employee.

contributory insurance
Insurance for which the employee is required to make premium contributions.

employee
An individual who is employed by the policyholder. A sole proprietor will be considered the employee of the proprietorship. A partner in a partnership will be considered an employee so long as the partner’s principal work is the conduct of the partnership’s business. The term employee does not include temporary employees, seasonal employees nor corporate directors who are not otherwise employees.

employer
The policyholder named on the specifications page of this policy.

insured
A person who is eligible for and becomes insured under the terms of this policy.

licensed physician
An individual who is licensed to practice medicine or treat illness in the state in which treatment is received. The physician cannot be the certificate holder or the certificate holder’s spouse/domestic partner, children, parents, grandparents, grandchildren, brothers or sisters, or the spouse of any such individuals.

non-work day
A day on which the employee is 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, strike, and any time off due to sickness or injury including sick days, short-term disability, or long-term disability.

noncontributory insurance
Insurance for which the employee is not required to make premium contributions.

policy anniversary
The policy anniversary date shown on the specifications page attached to this policy.

policy effective date
The date this policy was issued as shown on the specifications page attached to this policy.

policyholder
The owner of the group policy as shown on the specifications page attached to this policy.

specifications page
The outline which summarizes the policyholder’s plan of insurance.

waiting period
The period, if any, of continuous employment with the employer that the employee must satisfy prior to becoming eligible for coverage under this policy. The waiting period is shown on the specifications page attached to this policy.

we, our, us
Minnesota Life Insurance Company.

you, your
The policyholder named on the specifications page attached to this policy.

General Information

What is your agreement with us?
This policy and your attached signed application contain the entire contract between you and us. Any statements you make will, in the absence of fraud, be considered representations and not warranties. Also, any statement that you make will not be used to void this policy, nor will it be used in our defense if we refuse to pay a claim, unless the statement is contained in your application a copy of which has been furnished to you.

No change or waiver of any provision of this policy, or any certificate issued under it, will be valid unless made in writing by us and signed by our president, a vice-president, our secretary, or an assistant secretary. No agent or other person has the authority to change or waive any provision of this policy, nor of any certificate issued under it.
In making any benefits determination under this policy, we shall have the discretionary authority both to determine an individual’s eligibility for benefits and to construe the terms of this policy.

**Can this policy be amended?**

Yes. The certificate holder's consent is not required to amend this policy or any certificates issued under it. Any amendment will be without prejudice to any claim for benefits incurred prior to the effective date of the amendment.

**Who is eligible for insurance?**

An employee is eligible if he or she:

1. is a member of the eligible group and of an eligible class as shown on the specifications page attached to this policy; and
2. works for the employer for at least the number of hours per week shown as the minimum hours per week requirement on the specifications page attached to this policy; and
3. has satisfied the waiting period as shown on the specifications page attached to this policy; and
4. meets the actively at work requirement described in the “What is the actively at work requirement?” provision of this section.

**Are retired employees eligible for insurance?**

If the policyholder’s plan of insurance, as shown on the specifications page attached to this policy, does not specifically provide insurance for retired employees, a retired employee shall not be eligible to become insured, nor to have his or her insurance continued. If the policyholder’s plan of insurance specifically provides insurance for retired employees, the minimum hours per week and actively at work requirements will not apply to such persons.

**What is the actively at work requirement?**

To be eligible to become insured or to receive an increase in the amount of insurance, an employee must be actively at work fully performing his or her customary duties for his or her regularly scheduled hours at the employer’s normal place of business, or at other places the employer’s business requires him or her to travel.

Employees not working due to illness or injury do not meet the actively at work requirement nor do employees receiving sick pay, short-term disability benefits or long-term disability benefits.

If the employee is not actively at work on the date coverage would otherwise begin, or on the date an increase in his or her amount of insurance would otherwise be effective, he or she will not be eligible for the coverage or increase until he or she returns to active work.

However, if the absence is on a non-work day, coverage will not be delayed provided the employee was actively at work on the work day immediately preceding the non-work day.

Except as otherwise provided for in this policy, an employee is eligible to continue to be insured only while he or she remains actively at work.

**When does a certificate holder's insurance become effective?**

A certificate holder’s insurance becomes effective on the date that all of the following conditions have been met:

1. the certificate holder meets all eligibility requirements; and
2. if required, the certificate holder applies for the insurance on forms which are approved by us; and
3. we receive the required premium.

**Can an insured's coverage be continued during the employee’s sickness, injury, leave of absence or temporary layoff?**

Yes. Insurance may be continued on an insured employee who is not actively at work due to sickness, injury, leave of absence or temporary layoff, subject to the employer's practices and procedures, including the employer's limits on the length of continuation allowed for the type of absence. Continuation is contingent upon continued premium payment and is subject to the following maximum time frames:

1. for an employee on non-medical leave of absence, insurance can be continued up to the employee’s retirement date, if approved by the University;
2. for an employee on temporary layoff, insurance can be continued through the end of the month that immediately follows the month in which the temporary layoff begins;
3. for an employee on a medical leave of absence, insurance can be continued up to the employee’s retirement date, if approved by the University;
4. for an employee on a family medical leave (FMLA), if the leave has been approved by the policyholder, insurance can be continued until the end of the latest of: a) the leave period required by the federal Family and Medical Leave Act of 1993, and any amendments; or b) the leave period required by applicable state law; or c) the leave period provided to the employee for injury or sickness.

Continuation of insurance must be in accordance with practices and procedures that preclude individual selection.
Coverage during a leave of absence and upon return from a leave of absence shall meet all state and federal requirements. The above limits will be expanded if necessary in order to meet such requirements.

**Premiums**

**When and how often are premiums due?**

Unless we have agreed to some other premium payment procedure, premiums for this policy are remitted to us monthly. Premiums are due on the premium due date as shown on the specifications page attached to this policy. We apply premiums consecutively to keep the insurance in force.

You may pay premiums before they are due for any period up to the next policy anniversary. Premiums paid in advance should be calculated at the rate of the monthly premium currently due.

Premium contributions for contributory insurance are to be paid to you unless we have agreed to some other premium payment procedure. The premium contributions by employees for contributory insurance should be remitted to us as due along with the premiums payable for noncontributory insurance.

**How is the premium determined?**

The premium will be the premium rate multiplied by the number of $1,000 units of insurance in force on the date premiums are due. The premium may also be computed by any other method on which you and we agree.

We may change the premium rate:

1. on any premium due date following the expiration of any rate guarantee; or
2. irrespective of any rate guarantee, anytime, if the policy terms are amended or the total amount of insurance in force changes by 15% or more.

**Can a premium be paid after the date it is due?**

Yes. This policy has a 31-day grace period. If a premium is not received by us on or before the date it is due, that premium may be paid during the 31-day grace period following the due date. The insurance under this policy will remain in effect during the 31-day grace period. This grace period does not apply to the first premium payment.

**Can the premium be adjusted?**

Yes. We will adjust the premium on each due date for insurance which was effective or terminated before the most recent due date, but not reflected in prior premium payments. We will charge you for any additional premium, and will refund any overpayment, excluding any overpayment made more than 12 months before the adjustment.

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**Accidental Death and Dismemberment Benefit**

**What does accidental death or dismemberment by accidental injury mean?**

Accidental death or dismemberment by accidental injury means that an insured's death or dismemberment results, directly and independently of all other causes, from an accidental injury which is unintended, unexpected, and unforeseen.

The injury must occur while the insured's coverage is in force. The insured's death or dismemberment must occur within 365 days after the date of the injury and while his or her coverage is in force.

**What is the amount of the accidental death and dismemberment benefit?**

The amount of the benefit shall be a percentage of the amount of insurance shown on the specifications page attached to this policy. The percentage is determined by the type of loss as shown in the following table:

<table>
<thead>
<tr>
<th>TYPE OF LOSS</th>
<th>PERCENT OF AMOUNT OF INSURANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life</td>
<td>100%</td>
</tr>
<tr>
<td>Both Hands or Both Feet</td>
<td>100%</td>
</tr>
<tr>
<td>Sight of Both Eyes</td>
<td>100%</td>
</tr>
<tr>
<td>Speech and Hearing</td>
<td>100%</td>
</tr>
<tr>
<td>One Hand and One Foot</td>
<td>100%</td>
</tr>
<tr>
<td>One Foot and Sight of One Eye</td>
<td>100%</td>
</tr>
<tr>
<td>One Hand and Sight of One Eye</td>
<td>100%</td>
</tr>
<tr>
<td>Quadruplegia</td>
<td>100%</td>
</tr>
<tr>
<td>Paraplegia</td>
<td>75%</td>
</tr>
<tr>
<td>Sight of One Eye</td>
<td>50%</td>
</tr>
<tr>
<td>Speech or Hearing</td>
<td>50%</td>
</tr>
<tr>
<td>One Hand or One Foot</td>
<td>50%</td>
</tr>
<tr>
<td>Hemiplegia</td>
<td>50%</td>
</tr>
<tr>
<td>Thumb and Index Finger of One Hand</td>
<td>25%</td>
</tr>
</tbody>
</table>

Loss of hands or feet means complete severance at or above the wrist or ankle joints. Loss of sight, speech, or hearing means the entire and irrecoverable loss of sight, speech, or hearing which cannot be corrected by medical or surgical treatment or by artificial means. Loss of thumb and index finger means complete severance of both the thumb and the index finger at or above the metacarpophalangeal joints. Quadruplegia means total paralysis of both upper and lower limbs. Paraplegia means total paralysis of both lower limbs. Hemiplegia means total paralysis of upper and lower limbs on one side of the body.

A benefit is not payable for both loss of thumb and index finger of one hand and the loss of one hand for injury to the same hand as a result of any one accident.
Benefits may be paid for more than one accidental injury, but the total amount of insurance payable for an insured's losses under this policy due to any one accident, not including any amount paid according to the terms of the Additional Benefits section of this policy, will never exceed such insured's full amount of insurance shown on the specifications page attached to this policy. Under no circumstance will more than one payment be made for the same loss or paralysis of the same limb.

**Can a certificate holder request a change in the amount of his or her contributory insurance?**

Yes. A certificate holder can request an increase or a decrease in the amount of his or her contributory insurance as shown on the specifications page attached to this policy. Requests may be made in writing, by telephone or any other method made available by us.

**When will changes in coverage amounts be effective?**

Increases and decreases in amounts of contributory insurance will be effective as shown on the specifications page attached to this policy. All increases in the amount of insurance are subject to the actively at work requirement.

**What are the notice of claim and proof of loss requirements?**

Written notice of injury on which a claim may be based must be given to us within 30 days after the accident. Proof of loss must be furnished to us within 90 days after the date of loss. However, failure to give such notice and proof within the time provided will not invalidate the claim if it is shown that notice and proof were given as soon as reasonably possible.

When we receive written notice of claim, we will send the claimant our claim forms if he or she needs them. If the claimant does not receive the forms within 15 days, we will accept his or her written description as proof of loss.

**When will the accidental death or dismemberment benefit be payable?**

We will pay the accidental death or dismemberment benefit upon receipt at our home office of written proof satisfactory to us that a certificate holder died or suffered a covered dismemberment as a result of a covered accidental injury. All payments by us are payable from our home office.

The benefit will be paid in a single sum. We will pay interest on the benefit from the date of the certificate holder's death or dismemberment until the date of payment. Interest will be at an annual rate determined by us, but never less than 3% per year or the minimum required by state law, whichever is greater.

**To whom will we pay the accidental death or dismemberment benefit?**

In the case of a certificate holder’s accidental death, we will pay the accidental death benefit to the beneficiary or beneficiaries. All other benefits will be payable to the certificate holder, if living, otherwise to the certificate holder’s estate.

A beneficiary is named by a certificate holder to receive the accidental death benefit to be paid at the certificate holder’s accidental death. The certificate holder may name one or more beneficiaries. The certificate holder cannot name you as a beneficiary.

The certificate holder may also choose to name a beneficiary that the certificate holder 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 the certificate holder has requested another method in writing. To receive the accidental death benefit, a beneficiary must be living at the time of the certificate holder's accidental death. In the event a beneficiary is not living at the time of the certificate holder's accidental death, that beneficiary's portion of the accidental death benefit shall be equally distributed to the remaining surviving beneficiaries. In the event of the simultaneous deaths of the certificate holder and a beneficiary, the accidental death benefit will be paid as if the certificate holder survived the beneficiary.

If there is no eligible beneficiary, or if the certificate holder does not name one, we will pay the accidental death benefit to:

(1) the certificate holder's lawful spouse (does not include a domestic partner), if living, otherwise;
(2) the certificate holder's natural or legally adopted child (children) in equal shares, if living, otherwise;
(3) the certificate holder's parents in equal shares, if living, otherwise;
(4) the certificate holders brothers and sister in equal shares, if living, otherwise;
(5) the personal representative of the certificate holder’s estate.

**Can a certificate holder add or change beneficiaries?**

Yes. A certificate holder can add or change beneficiaries if all of the following are true:

(1) the certificate holder's coverage is in force; and
(2) we have written consent of all irrevocable beneficiaries; and
(3) the certificate holder has not assigned the ownership of his or her insurance.

A request to add or change a beneficiary must be made in writing. All requests are subject to our approval. A change will take effect as of the date it is signed, but will not affect any payment we make or action we take before receiving a certificate holder’s request.
Exclusions

What are the exclusions under this policy?

In no event will we pay the accidental death or dismemberment benefit where the insured’s death or dismemberment results from or is caused directly or indirectly by any of the following:

1. suicide or attempted suicide, whether sane or insane; or
2. intentionally self-inflicted injury or any attempt at self-inflicted injury, whether sane or insane; or
3. the insured’s participation in or attempt to commit a crime, assault or felony; or
4. bodily or mental infirmity, illness or disease; or
5. medical or surgical treatment including diagnostic procedures; or
6. alcohol, drugs, poisons, gases or fumes, voluntarily taken, administered, absorbed, inhaled, ingested or injected; or
7. bacterial infection, other than infection occurring simultaneously with, and as a result of, the accidental injury; or
8. travel or flight in or on any vehicle used for aerial navigation including getting in, out, on, or off such vehicle, if the insured is:
   a. riding as a passenger in any aircraft not intended or licensed for the transportation of passengers; or
   b. acting as a pilot or a crew member of any aircraft, unless riding as a passenger (does not apply to medical trauma team crew members); or
   c. riding as a passenger in a non-chartered aircraft which is owned, leased, operated, or controlled by the eligible employee’s employer (does not apply to medical trauma team crew members); or
   d. a student taking a flying lesson, unless riding as a passenger; or
   e. hang gliding; or
   f. parachuting, except when the insured has to make a parachute jump for self-preservation; or
9. war or any act of war, whether declared or undeclared; or
10. active participation in a riot or civil insurrection; or
11. service in the military of any nation.

Additional Benefits

Unless stated otherwise, additional benefits are payable to the same person or persons who receive the accidental death and dismemberment benefits. Additional benefits are paid in addition to any accidental death and dismemberment benefits described in the Accidental Death and Dismemberment section, unless otherwise stated. All provisions of this policy, including but not limited to the “What does accidental death or dismemberment by accidental injury mean?” section shall apply to these additional benefits.

Air Bag Benefit

What is the air bag benefit?

If an insured dies as a result of a covered accident which occurs while he or she is driving or riding in a private passenger car, we will pay an additional accidental death benefit equal to the lesser of $5,000 or 5% of the amount payable due to the death, provided:

1. the seat in which the insured was seated was equipped with a properly installed airbag at the time of the accident; and
2. the private passenger car is equipped with seatbelts; and
3. a seatbelt was in proper use by the insured at the time of the accident as certified in the official accident report or by the investigating officer; and
4. at the time of the accident, the driver of the private passenger car was a licensed driver and was not intoxicated, impaired, or under the influence of alcohol or drugs.

Airbag means a passive restraint device in a vehicle which inflates upon collision to protect an individual from injury or death.

Seatbelt means a properly installed seatbelt (or child restraint if the insured is a child), lap and shoulder restraint, or other restraint approved by the National Highway Traffic Safety Administration or any successor governmental agency. A private passenger car means a validly registered four-wheeled private passenger car or policyholder-owned car, jeep, pickup truck or van, including a sport utility vehicle (SUV), that is not licensed commercially or being used for racing, or acrobatic or stunt driving.

Disappearance Benefit

What is the disappearance benefit?

If an insured’s body has not been found after one year from the date the conveyance in which he or she was traveling disappeared, exploded, sank, became stranded, made a forced landing or was wrecked, it shall be presumed, subject to all other terms of the policy, that the insured has died as a result of an accidental injury which was unintended, unexpected and unforeseen. Such death shall be considered a covered loss under this policy.

Exposure Benefit

What is the exposure benefit?

If an insured is unavoidably exposed to the elements by reason of a covered accident and suffers a loss that is included in the list of covered losses as a result of such exposure, such loss will be covered under the terms of this policy.
Repatriation Benefit

What is the repatriation benefit?

If, as a result of a covered accident, a certificate holder dies at least 100 miles from his or her principal residence, an additional accidental death benefit shall be paid for the preparation and transportation of the body to a mortuary. The additional benefit shall be the lesser of the actual cost of such preparation and transportation or $5,000. The benefit will be paid to the person who has or who will incur such cost, as evidenced to the satisfaction of Minnesota Life. This may or may not be the beneficiary for the rest of the accidental death proceeds. Minnesota Life may at its sole discretion pay benefits directly to the facility handling the preparation and/or transportation. All determinations and payments by Minnesota Life will be final and fully release and discharge Minnesota Life from any further liability under this repatriation benefit.

Seatbelt Benefit

What is the seatbelt benefit?

If an insured dies as a result of a covered accident which occurs while he or she is driving or riding in a private passenger car, we will pay an additional accidental death benefit equal to the lesser of:

1. $25,000; or
2. 10% of the amount payable due to the death.

In order to be eligible for this benefit, the following must apply:

1. the private passenger car was equipped with seatbelts; and
2. a seatbelt was in proper use by the insured at the time of the accident as certified in the official accident report or by the investigating officer; and
3. at the time of the accident, the driver of the private passenger car was a licensed driver and was not intoxicated, impaired, or under the influence of alcohol or drugs.

Seatbelt means a properly installed seatbelt (or child restraint if the insured is a child), lap and shoulder restraint, or other restraint approved by the National Highway Traffic Safety Administration or any successor governmental agency. A private passenger car means a validly registered four-wheeled private passenger car or policyholder-owned car, jeep, pickup truck or van, including a sport utility vehicle (SUV), that is not licensed commercially or being used for racing, or acrobatic or stunt driving.

Portability Benefit

What is the portability benefit?

The portability benefit provides for continuation of group accidental death and dismemberment insurance if a certificate holder no longer meets the eligibility requirements of this group policy, except as provided for herein.

To continue coverage under the provisions of this benefit, an eligible certificate holder must make a written request and make the first premium contribution within 31 days after insurance provided by this group policy would otherwise terminate. Coverage provided by this benefit will then be deemed effective retroactive to the beginning of the 31-day period. This date is considered to be the certificate holder’s portability date and the certificate holder is then considered to have portability status.

Who is eligible to continue insurance under this benefit?

A certificate holder is eligible to continue insurance under this benefit if he or she, except as provided by this benefit, no longer meets the eligibility requirements of this policy due to any of the following:

1. the employee terminates employment, including retirement; or
2. the employee is no longer in a class eligible for insurance or is on a leave or layoff; or
3. a class or group of employees insured under the policy is no longer considered eligible and there is no successor plan for that class or group.

Successor plan means an insurance policy or policies provided by us or another insurer that replaces insurance provided under this policy.

The certificate holder will not be eligible to request coverage under this benefit if he or she:

1. was not actively at work due to sickness or injury on the day immediately preceding his or her portability date; or
2. loses eligibility due to termination of this policy.

What insurance can be continued under this benefit?

Only contributory insurance may be continued under this benefit. If the certificate holder elects to continue his or her own coverage according to the provisions of this benefit, he or she may also elect to continue contributory insurance for any other individual insured under his or her certificate. The certificate holder may also continue coverage under all additional benefits to such certificate which apply to contributory insurance and by which he or she was insured immediately preceding his or her portability date.
The amount of insurance continued under this benefit for any individual will be subject to any applicable state law or regulation relating to allowable amounts of insurance.

What is the minimum amount of insurance that can be continued under this benefit?

The minimum amount of insurance that can be continued under this benefit is $5,000 for a certificate holder and $1,000 for a spouse/domestic partner or child.

What is the maximum amount of insurance that can be continued under this benefit?

The maximum amount of insurance that can be continued under this benefit is the amount of insurance that was in force on the certificate holder’s portability date, but not more than $750,000 for an employee.

Will the amount of insurance continued under this benefit change?

Yes. When a certificate holder or spouse/domestic partner attains age 65, the amount of insurance continued under this benefit will reduce to 65% of the amount of insurance in force on the day prior to his or her attainment of age 65.

Can a certificate holder request a change in his or her amount of insurance continued under this benefit?

Yes. The certificate holder may elect to reduce the amount of insurance provided under his or her certificate. The remaining amount of insurance must be at least $10,000.

The amount of insurance continued under this benefit will never increase.

How will premium contributions be paid?

Premium contributions will be paid directly to us on a monthly, quarterly, semi-annual, or annual basis and will be subject to an administrative charge per billing period. We may adjust the amount of the charge, but not more often than once per year.

Can the premium rate change?

Yes. The premium rate may increase on the portability date. The premium rate may also increase in the future but will not change more often than once per year.

What happens if a certificate holder again becomes eligible under this policy?

If a certificate holder who is continuing coverage under the provisions of this benefit again meets the eligibility requirements of this policy, not including the terms of this benefit, he or she shall no longer be considered to have portability status. Insurance for that certificate holder may be provided only under the terms of this policy, not including this benefit, unless and until he or she no longer meets the eligibility requirements of this policy and again returns to portability status as provided for herein.

An insured cannot be covered under this policy with both portability status and non-portability status.

What happens to insurance provided under this benefit when this policy terminates?

Anything in this policy notwithstanding, termination of this policy by the policyholder or us will not terminate insurance then in force for any person under the terms of this benefit. This policy will be deemed to remain in force solely for the purpose of continuing such insurance, but without further obligation of the policyholder.

Any insurance continued under the terms of this benefit will remain in force until terminated by the provision entitled “When will insurance continued under this benefit terminate?”.

No individual may elect coverage under this benefit on or after the date of termination of this policy.

When will insurance continued under this benefit terminate?

Insurance continued under this benefit will terminate on the earliest of the following:

(1) the date the certificate holder again meets the eligibility requirements of this policy, not including the terms of this benefit; or
(2) in the case of a dependent child or a spouse/domestic partner who is insured under the certificate holder’s coverage, the date the certificate holder’s coverage is no longer being continued under this benefit or the date the certificate holder’s spouse/domestic partner or child ceases to be eligible as defined under the terms of this policy; or
(3) 31 days after the due date of any premium contribution which is not made.

Termination

When does a certificate holder’s insurance end?

A certificate holder’s insurance ends on the earliest of the following:

(1) the date this policy ends; or
(2) the date the certificate holder no longer meets the eligibility requirements, unless the insurance can be continued under the portability provisions, if any; or
(3) the date this policy is amended so the certificate holder is no longer eligible, unless the insurance can be continued under the portability provisions, if any; or
(4) 31 days (the grace period) after the due date of any unpaid premium if the premium remains unpaid at that time; or
(5) the last day for which premium contributions have been paid following a certificate holder’s written request to cease participation under this policy.
If a certificate holder’s insurance under this policy terminates due to non-payment of premiums, his or her coverage may be reinstated if all premiums due are paid and received by us within 31 days of the date of termination and during the certificate holder’s lifetime.

**Can a certificate holder’s coverage be reinstated after termination?**

No. A certificate holder’s insurance under this policy will not be automatically reinstated after coverage terminates due to loss of eligibility under the plan. A certificate holder who again becomes eligible after loss of coverage may apply according to the plan of insurance available to newly eligible employees.

**When does this policy terminate?**

You may terminate this policy by giving us 31 days prior written notice. We reserve the right to terminate this policy on the earliest of the following to occur:

1. 31 days (the grace period) after the due date of any premiums which are not paid; or
2. on any subsequent policy anniversary after the date the number of employees insured is less than any minimum established by us or as required by applicable state law; or
3. 31 days after we provide you with notice of our intent to terminate this policy.

**Can this policy be reinstated?**

No. We will not reinstate this policy after it terminates. You must submit a new application for a new policy after this policy has terminated.

**Family Coverage**

If a certificate holder has dependents, he or she may elect coverage for his or her eligible dependents as described below:

**Dependents Benefit**

**What is the dependents benefit?**

The dependents benefit provides accidental death and dismemberment insurance on the lives of the insured employee’s eligible dependents.

**What members of the insured employee’s family are eligible for this benefit?**

The following members of the insured employee’s family are eligible for this benefit:

1. the insured employee’s lawful spouse who is not legally separated from the insured employee, or domestic partner*, who is not eligible for insurance as an employee under this policy nor insured under this policy with portability status, who meets any age requirement as shown on the specifications page attached to this policy; and
2. the insured employee’s natural children, lawfully adopted children (a child will be considered adopted on the date of placement in the employee’s home), stepchildren, and foster children and other children who are dependent upon the employee for main support and living with the employee in a regular parent child relationship, who are unmarried, dependent on the insured for financial support, and who meet the age requirements as shown on the specifications page attached to this policy.

If both parents of a child qualify as eligible employees under this policy, the child shall be considered a dependent of only one parent for purposes of this benefit. If any child qualifies as an eligible employee under this policy, he or she is not eligible to be insured as a dependent child.

*Domestic partner means any individual of the same or opposite gender who lives with the employee in a long-term relationship of indefinite duration, in an exclusive mutual agreement in which the partners agree to be jointly responsible for each other’s common welfare and share financial obligations. The partners may not be related by blood by a degree of closeness which would prohibit legal marriage in the state in which they legally reside. An employee adding a domestic partner is required by the policyholder to provide a Domestic Partner Affidavit on which they affirm the above.

**When does insurance on a dependent become effective?**

Insurance on a dependent becomes effective on the date when all of the following conditions have been met:

1. the dependent meets all eligibility requirements; and
2. if required, the insured employee applies for dependents coverage on forms which are approved by us; and
3. we receive the required premium.

Any dependent who, subsequent to the effective date of the insured employee’s certificate supplement for dependents accidental death and dismemberment insurance, meets the requirements of this provision will become insured on the date he or she so qualifies unless additional premium is required. If additional premium is required, the insurance of such later-acquired dependent shall be effective under the same conditions which apply if the employee was then first becoming eligible for dependents insurance under this policy.

If a dependent is hospitalized or confined because of illness or disease on the date his or her insurance would otherwise become effective, his or her effective date shall be delayed until he or she is released from such hospitalization or confinement. However, in no event will insurance on a dependent be effective before the insured employee’s insurance under this policy is effective.
Dependents Accidental Death and Dismemberment Benefit

When will the accidental death or dismemberment benefit be payable?

We will pay the accidental death or dismemberment benefit upon receipt at our home office of written proof satisfactory to us that an insured dependent died or suffered dismemberment as a result of an accidental injury. All payments by us are payable from our home office.

The benefit will be paid in a single sum. We will pay interest on the benefit from the date of the insured dependent's death or dismemberment until the date of payment. Interest will be at an annual rate determined by us, but never less than 3% per year or the minimum required by state law, whichever is greater.

To whom will we pay a dependents accidental death or dismemberment benefit?

A dependents accidental death or dismemberment benefit will be paid to the certificate holder, if living, otherwise to his or her estate.

Family Coverage Additional Benefits

The following benefits apply to those certificate holders who are insured for dependents insurance. Unless stated otherwise, additional benefits are payable to the same person or persons who receive the accidental death and dismemberment benefits. Additional benefits are paid in addition to any accidental death and dismemberment benefits described in the Accidental Death and Dismemberment section, unless otherwise stated. All provisions of this policy, including but not limited to the “What does accidental death or dismemberment by accidental injury mean?” section shall apply to these additional benefits.

Education Benefit

What is the education benefit?

If a certificate holder dies as a result of a covered accident and he or she is survived by or one or more dependent children, we will pay an education benefit, not to exceed 6% of the employee's amount of AD&D insurance to a maximum of $6,000 per dependent child per year. Benefits will be paid for up to four consecutive years of enrollment per dependent child, but not beyond the date the child attains age 25, provided that at the time of the certificate holder’s death:

1) the dependent child is enrolled as a full-time student at an accredited post-secondary educational institution; or

2) the dependent child enrolls as a full-time student in an accredited post secondary educational institution within one year of the certificate holder’s death.

The benefit will be paid to the certificate holder's spouse, if living, otherwise to or on behalf of the dependent children.

Spouse Training Benefit

What is the spouse training benefit?

If a certificate holder dies as a result of a covered accident and he or she is survived by his or her dependent spouse, we will pay a training benefit to the surviving spouse provided that the spouse:

1) is not working for wage or profit on the date of such accident; and
2) enrolls as a full-time student in an accredited educational institution or an institution of vocational training for the purpose of preparing for full-time employment; and
3) expenses are incurred within 30 months after the date of such accident.

The maximum benefit will be $3,000. Proof of such costs will be required before benefits are paid.

Dependents Benefit Termination

When does an insured dependent’s coverage terminate?

An insured dependent’s coverage terminates on the earliest of the following:

1) the date the dependent no longer meets the eligibility requirements; or
2) 31 days (the grace period) after the due date of any unpaid premium if the premium remains unpaid at that time; or
3) the last day for which premium contributions have been made following an insured employee's written request that insurance on his or her dependents be terminated; or
4) the date the employee is no longer covered under the group policy.

The insured employee must notify us or the employer when a dependent is no longer eligible for coverage under this benefit so that premiums may be discontinued. All premiums paid for dependents who are no longer eligible for coverage under this benefit will be refunded without any payment of claim.
Additional Information

Do we have the right to obtain independent medical verification?

Yes. We retain the right to have an insured medically examined at our expense whenever a claim is pending and, where not forbidden by law, we reserve the right to have an autopsy performed in the case of death.

What if an insured’s age has been misstated?

If an insured’s age has been misstated, the accidental death or dismemberment benefit payable will be that amount to which the insured is entitled based on his or her correct age.

A premium adjustment will be made to the premium you pay for the insured's noncontributory insurance and to the premium an insured pays for contributory insurance, if any, so that the actual premium required at the insured's correct age is paid.

When does an insured's insurance become incontestable?

Except for fraud or the non-payment of premiums, after the insured's insurance has been in force during his or her lifetime for two years from the effective date of his or her coverage, we cannot contest the insured's coverage. However, if there has been an increase in the amount of insurance for which the insured was 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 the insured makes in his or her application will, in the absence of fraud, be considered representations and not warranties. Also, any statement an insured makes will not be used to void his or her insurance, or defend against a claim, unless the statement is contained in the application attached to the insured’s certificate.

Can a certificate holder's insurance be assigned?

Yes. However, we will not be bound by an assignment of the certificate or of any interest in it unless it is made as a written instrument, the certificate holder files the original instrument or a certified copy with us at our home office, and we send the certificate holder an acknowledged copy.

We are not responsible for the validity of any assignment. A certificate holder is responsible for ensuring that the assignment is legal in his or her state and that it accomplishes his or her intended goals. If a claim is based on an assignment, we may require proof of interest of the claimant. A valid assignment will take precedence over any claim of a beneficiary.

Are you required to maintain records?

Yes. You are required to maintain adequate records of any information necessary for us to administer this policy. We can obtain them from you at any reasonable time.

If a clerical error is made in keeping records on the insurance under this policy, it will not affect otherwise valid insurance. A clerical error does not continue insurance which is otherwise stopped, nor put into effect insurance to which an insured is not otherwise entitled. If an error causes a change in premium payment, we will make a fair adjustment.

Will a certificate of insurance be provided for each certificate holder?

Yes. We will provide you with a certificate of insurance for delivery to each certificate holder. The certificate will include information regarding the principal provisions of his or her coverage.

Will this policy receive experience credits?

Each year we will determine if this policy will receive an experience credit.

Are you our agent?

No. For all purposes of this policy, neither you nor any administrator you appoint is our agent. We will not be liable for any of your acts or omissions or those of an administrator.

Will the provisions of this policy conform with state law?

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