Accidental Death and Dismemberment (AD&D), provides benefits for you or your insured dependents in the event of a covered accident—on or off the job—which results in loss of life, limbs, use of limbs, eyesight, hearing or speech. You may select \$25,000 to \$500,000 (in \$25,000 increments) of coverage.

You must be enrolled for coverage in order to cover your dependents. Your dependent's coverage is a percentage of your selected benefit amount. They are as follows:

Spouse - The spouse's benefit amount will be 40 percent of the employee's, or 50 percent if the employee has no dependent children. This amount cannot exceed \$250,000.

Children - Each covered child's benefit amount will be 10 percent of the employee's, or 15 percent if the employee has no spouse. The maximum children's benefit is \$25,000.

What accidents are not covered?

Benefits will not be paid for a loss caused by or resulting from:

- Sickness, physical or mental illness or infirmity, or the diagnosis or treatment of such illness or infirmity;
- Infection, other than infection occurring in an external accidental wound;
- Suicide or attempted suicide; intentionally self-inflicted injury;
- Service in the armed forces of any country or international authority, except the United States National Guard; Any incident related to:
 - 1) travel in an aircraft as a pilot, crew member, flight student or while acting in any capacity other than as a passenger;
 - travel in an aircraft for the purpose of parachuting or otherwise exiting from such aircraft while it is in flight;
 - parachuting or otherwise exiting from an aircraft while such aircraft is in flight except for self preservation;
 - travel in an aircraft or device used for testing or experimental purposes; by or for any military authority; or for travel or designed for travel beyond the earth's atmosphere;
- Committing or attempting to commit a felony;
- The voluntary intake or use by any means of:
 - any drug, medication or sedative, unless it is: taken or used as prescribed by a Physician, or an "over the counter" drug, medication or sedative, taken as directed;
 - 2) alcohol in combination with any drug, medication, or sedative; or
 - 3) poison, gas, or fumes; or war, whether declared or undeclared; or any act of war, insurrection, rebellion, or riot; or driving a vehicle or other device while intoxicated as defined by the laws of the jurisdiction in which the vehicle or other device was being operated.

Employees under the AFSCME bargaining units are not eligible to purchase this product.

Who is eligible?

An employee will become insured on the date the employee becomes eligible.

All full-time employees who are employed and compensated for services by the employer in accordance with the employer's general practices and work a minimum of 17 hours per week.

What injuries are covered and for how much?

Accidental Death and Dismemberment (AD&D) will pay the following percentage of the amount of coverage you purchase (from \$25,000 up to \$500,000 for employee coverage) if, within 365 days of an eligible accident, bodily injuries result in:

| • Loss of life | 100% |
|--|------|
| Total paralysis of arms and legs | 100% |
| Loss of any combination of two: hands, | |
| feet or eyesight | 100% |
| Loss of speech and hearing in both ears | 100% |
| Total paralysis of both legs | 50% |
| Total paralysis of arm and leg on one | |
| side of the body | 50% |
| Loss of one hand, foot or sight in one eye | 50% |
| Loss of speech or hearing in both ears | 50% |
| Loss of thumb and index finger on the | |
| same hand | 25% |
| | |

For example, if you purchase \$200,000 in coverage for yourself and you are in an accident that results in your death, the benefit would pay \$200,000.

If the accident results in total paralysis of both your legs, the benefit would pay \$100,000. If the accident results in loss of your thumb and index finger on the same hand, the benefit would pay \$50,000.

If you or a dependent sustain more than one covered loss due to an accidental injury, the amount we will pay will not exceed the full amount

Benefits will be reduced based upon the age of you or your spouse:

- If you are age 65 to 69, your benefit will be reduced to 70 percent of the amount of coverage
- If you are age 70 to 74, benefits will be reduced to 45 percent of the amount of coverage.
- If you are age 75 to 79, benefits will be reduced to 30 percent of the amount of coverage.
- If you are age 80 to 84, benefits will be reduced to 15 percent of the amount of coverage.
- If you are age 85 and over, benefits will be reduced to 15 percent of the amount of coverage.
- Coverage for children ends when they no longer qualify as eligible dependents.

Can I purchase coverage for my dependents?

If you sign up for employee coverage under the Employee-Paid FlexPlan Benefit you can also choose to select coverage for your family. The amount of insurance applies to only those dependents insured at the time the loss occurs. Benefits are as follows:

- Spouse-only coverage will provide 50 percent of the employee's coverage to a maximum of \$250,000
- Children-only coverage will provide 15 percent of the employee's coverage, with a maximum of \$25,000 per child.
- Spouse and children coverage will provide 40 percent of the employee's coverage for the spouse and 10 percent of the employee's coverage for each dependent child, with a maximum of \$25,000 per child.

How do I obtain claim forms?

To obtain claim forms, call the MetLife's onsite representative at (305) 995-7029. Note: Dependent Eligibility will be determined at the time of claim.

Can I port my Employee-Paid insurance if I terminate employment?

MetLife will reach out to you via mail to advise you of your right to port this policy.

What insurance company makes this plan available to me?

Metropolitan Life Insurance Company. A.M. Best's Reports, which compares and rates the financial strength and performance of insurance companies, rates MetLife "A+, Superior."

This information is a brief description of the important features of the plan. It is not a contract. Terms and conditions of life insurance coverage are set forth in Group Policy # OK 82 11 33 on Policy form # LM-2160, issued in Florida. The group policy is subject to the laws of the jurisdiction in which it is issued. The availability of this offer may change. Please keep this material as a reference.

Are benefits taxable?

The IRS may require you to pay taxes on payments you receive from the AD&D Coverage plan under current law. For further information, consult your personal tax advisor.

What other benefits does this policy offer?

| BENEFIT | WHEN IT APPLIES | AMOUNT | | | |
|---|---|--|--|--|--|
| SEATBELT | Upon death from injuries sustained in an accident while driving or riding as a passenger in a passenger car*, provided the person was wearing a properly fastened seat belt that meets published, US Government safety standards, is properly installed by the manufacturer and has not been altered after installation, at the time of the accident. *Passenger car is any validly registered four-wheel private passenger car. It does not include any commercially licensed car or a private car that is being sued for commercial purposes, recreation or professional racing. | up to \$25,000; minimum amount is \$1,000. The correct position of the seat belt must be certified by the investigating officer or included in the official accident report and a copy of the police report must be submitted with a claim for this benefit. | | | |
| EDUCATION* | The Child Education Benefit provides an additional benefit equal to the tuition charges for each eligible dependent child to attend college or another accredited institution for up to 4 consecutive years as long as the child is: enrolled in an accredited college, university or vocational school above the 12th grade level at the time of the employee's accidental death; or is at the 12th grade level and, within one year after the employee's accidental death, enrolls as a full-time student in an accredited college, university or vocational school. | The benefit amount will not exceed \$10,000 per year and an overall maximum of 20% of the employee's AD&D Full Amount. If at the time of the accident there are no dependents who qualify for the education benefit, the plan will pay an additional benefit of \$1,000 to the designated beneficiary. | | | |
| SPOUSE TRAINING | If your spouse is enrolled in an accredited school on the date of your death or enrolls in such a school within 12 months of the date of your death. | The additional amount we will pay is equal to the tuition charges for 1 academic year up to \$5,000 per year. The overall maximum additional benefit is 3% of the AD&D Full Amount. If there is no Spouse who qualifies, \$1,000 will be paid to the beneficiary. | | | |
| COBRA CONTINUATION | If benefit is paid for a covered loss of your life. | Up to \$3,000 reimbursement per year for three (3) years. Minimum amount is \$1,000 and maximum amount is 10% of the full amount. | | | |
| HOSPITAL CONFINEMENT DAILY INCOME BENEFIT | This benefit becomes payable if a covered person is confined in a hospital as a result of an accidental injury. | Pays an additional monthly benefit equal to 1% of the AD&D Full Amount. Benefits will be determined on a pro-rate basis for partial month of confinement. If more than one confinement for any one accident, we will pay for just one hospital confinement. We will pay for the first confinement while under doctor's care. | | | |
| CHILD DAY CARE BENEFIT | The Child Care Benefit provides an additional amount equal to the Child Care Center* for each eligible dependent child, 11 years of age or younger, to attend a licensed Child Care Center for up to 4 consecutive years as long as the eligible child is enrolled in a Child Care Center at the time of the employee's accidental death. | Additional amount equal to the Child Care Center* charge up to a maximum of \$5,000 per year and an overall maximum of 12% of the AD&D Full Amount. *Child Care Center means a facility that is operated and licensed according to the law of the jurisdiction where it is located and provides care and supervision for children in a group setting on a regularly scheduled and daily basis. | | | |
| | | This benefit is paid quarterly when MetLifereceives proof that Child Care Center charges have been paid. Payment is made to the person who pays the charges on behalf of the Child. | | | |

* If, at the time of the accident, you have coverage for your family but there is no dependent who is or could become eligible for the education or spouse education benefits, an additional benefit of \$1,000 will be paid to the insured's designated beneficiary.

| BENEFIT | WHEN IT APPLIES | AMOUNT |
|--------------------------------|--|--------|
| WAIVER OF PREMIUM PROVISION | The Waiver of Premium disability provision applies to total disabilities beginning before age 60. Proof that the you have been continuously, totally, disabled for at least 9 months must be provided to MetLife within 12 months of the date your total disability begins. During the waiting period, premium payment is continued through the employer and is not refundable. Waiver of Premium begins once MetLife determines proof of total disability to be satisfactory. | |
| | Employees who become totally disabled on or after the effective date of coverage and: the coverage is still in effect; the coverage is still in effect; the disability occurred before the employee attained age 60; and the application for total disability is approved; | |
| | Will have continuing coverage without premium payment until death. Continuation will end at the earliest of: the date of your death the date you are no longer totally disabled, the date you attain age 65, the date you have not given us proof of total disability, and the date you refuse to be examined by our physician | |
| | At age 65, If you remain on disability, the death benefit will reduce to zero. | |

Value-Added Features:

Air Bag Benefit:

If an Air Bag is deployed for the covered person during the accident and the covered person dies as a result of the accident while driving or riding in a passenger car* and wearing a properly fastened seat belt, we will pay an additional benefit of 5% of the AD&D Full Amount to a maximum of \$10,000. When the Air Bag Benefit and the Seat Belt Benefit both apply, the combined additional benefit will not exceed 15% of the AD&D Full Amount, to a combined maximum of \$20,000.

*Passenger Car is any validly registered four-wheel private passenger vehicle. It does not include any commercially licensed car; or a private passenger car that is being used for commercial purposes, or any vehicle used for recreational or professional racing.

Brain Damage Benefit:

Brain Damage is a covered loss that pays a benefit equal to 100% of the AD&D Full Amount as long as the brain damage* manifests itself within 30 days of the accidental injury, the covered person requires hospitalization for at least 5 days and brain damage persists for 12 consecutive months after the injury.

*Brain Damage means permanent and irreversible physical damage to the brain causing the complete inability to perform all the substantial and material functions and activities normal to everyday life.

Child Care Benefit:

The Child Care Benefit provides an additional amount equal to the Child Care Center* charge up to a maximum of \$3,000 per year and an overall maximum of 3% of the AD&D Full Amount for each eligible dependent child, 11 years of age or younger, to attend a licensed Child Care Center for up to 5 consecutive years as long as the eligible child is enrolled in a Child Care Center at the time of the employee's accidental death.

If no child qualifies, \$1,000 will be paid to the covered person's beneficiary.

*Child Care Center means a facility that is operated and licensed according to the law of the jurisdiction where it is located and provides care and supervision for children in a group setting on a regularly scheduled and daily basis.

This benefit is paid quarterly when MetLife receives proof that Child Care Center charges have been paid. Payment is made to the person who pays the charges on behalf of the Child.

Child Education Benefit:

The Child Education Benefit provides an additional benefit equal to the tuition charges for each eligible dependent child to attend college or another accredited institution for up to 4 consecutive years as long as the child is: enrolled in an accredited college, university or vocational school above the 12th grade level at the time of the employee's accidental death; or is at the 12th grade level and, within one year after the employee's accidental death, enrolls as a full-time student in an accredited college, university or vocational school. The benefit amount will not exceed the lesser of 3% or \$7,500 per year and an overall maximum of 20% of the employee's AD&D Full Amount.

If at the time of the accident there are no dependents who qualify for the education benefit, the plan will pay an additional benefit of \$1,000 to the designated beneficiary.

Coma Benefit:

Coma is a covered loss that provides a benefit amount of 1% monthly of the AD&D Full Amount up to a maximum of 60 months if a covered person goes into a coma* as a result of an accidental injury and independent of other causes. Such state must begin within 30 days of the accidental injury and continue for 7 consecutive days.

*Coma means a state of deep and total unconsciousness from which the comatose person cannot be aroused.

Common Carrier Benefit:

The Common Carrier Benefit pays an additional benefit in an amount equal to 100% of the AD&D Full Amount if a covered person dies as a result of an accidental injury while traveling in a Common Carrier*.

*Common Carrier means a government regulated entity that is in the business of transporting fare-paying passenger. This does not include chartered or other privately arranged transportation, taxis, or limousines.

Common Disaster Benefit for VADD:

If the employee and the employee's spouse are injured in the same accident and die as a result of injuries sustained in the accident, the spouse's benefit amount will be increased to 100% of the VAD&D Full Amount payable for the employee's loss of life.* In Texas, Children age 25 only and Student age 25 only.

Exposure:

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

Full Amount:

Regarding Accidental Death & Dismemberment, the scheduled dollar benefit amount for an accidental death and certain accidental injuries.

Hospitalized:

Includes inpatient hospital care, care in a hospice, intermediate or long-term care facility, or receipt of chemotherapy, radiation therapy, or dialysis treatment wherever performed.

Hospital Confinement Benefit:

Hospital Confinement Benefit pays an additional monthly benefit equal to 1/30th of 1% of the AD&D Full Amount if a covered person is confined in a Hospital as a result of an accidental injury. Benefits begin on the 5th day of continuous confinement and are subject to a monthly limit of \$2,500 and a maximum duration of 12 continuous months.

Benefits will be determined on a pro-rate basis for partial month of confinement. If more than one confinement for any one accident, we will pay for just one hospital confinement. We will pay for the first confinement.

*Hospital means a facility which is licensed as such in the jurisdiction in which it is located and; provides a broad range of medical and surgical services on a 24 hour a day basis for injured and sick persons by or under the supervision of staff of Physicians; and provides a broad range of nursing care on a 24 hour a day basis by or under the direction of a registered professional nurse.

Travel Assistance & Identity Theft Solutions:

Employees and their dependents enrolled in MetLife's Accidental Death & Dismemberment coverage will have access to Travel Assistance services that provide immediate access to doctors, hospitals, pharmacies, and certain other services when faced with an emergency while traveling internationally or domestically more than 100 miles from home.

Covered employees and their dependents may travel (together or separately) with greater peace of mind knowing that they are just one phone call away from being connected to a global alarm center to provide vital assistance services including: Medical Consultation and Evaluation, Emergency Evacuation, Dispatch of Prescription Medication, and even Emergency Message Transmission.

Identity Theft Solutions, an additional benefit packaged with Travel Assistance, educates participants on preventing identify theft and provides personal assistance and guidance to help alleviate the stress and time burden that victims of identity theft often face. This important feature can be used while the Participant is home or away and is available 24 hours a day 365 days a year. Participants receive assistance with filing police reports, contacting creditor fraud departments, taking inventory of lost or stolen items and more.

There is no travel requirement and no additional charge for Identity Theft Solutions.

Travel Assistance services are administered by AXA Assistance USA, Inc. Certain benefits provided under the Travel Assistance program are underwritten by ACE American Insurance Company. AXA Assistance and ACE American are not affiliated with MetLife, and the Travel Assistance & Identity Theft Solutions services they provide are separate and apart from the insurance provided by MetLife.

Paralysis means loss of use of a limb, without severance. A Physician must determine the paralysis to be permanent, complete and irreversible.

Presumption of Death:

A person will be presumed to have died as a result of an accidental injury if the aircraft or other vehicle in which the person is traveling disappears, sinks or is wrecked and the person's body is not found within 1 year of the date the aircraft or vehicle was scheduled to have arrived at its destination, or, if not a Common Carrier, the date the person was reported missing to authorities.

Seat Belt Benefit:

Seat Belt Benefit provides an additional benefit equal to 10% of the AD&D Full Amount , subject to a minimum benefit of \$1,000, up to a maximum of \$10,000 if a covered person dies from injuries sustained in an accident while driving or riding as a passenger in a Passenger Car*, provided the person was wearing a properly fastened Seat Belt* at the time of the accident. When the Seat Belt Benefit and the Air Bag Benefit both apply, the combined additional benefit will not exceed 15% of the AD&D Full Amount, to a combined maximum of \$20,000.

*Passenger Car: Any validly registered four-wheel private passenger car. It does not include any commercially licensed car; or a private car that is being used for commercial purposes, or any vehicle used for recreation or professional racing.

*Seat Belt means any restraint device that meets published, US Government safety standards, is properly installed by the car manufacturer and has not been altered after installation. The term also includes a child restraint device that meets the requirements of state law.

The correct position of the seat belt must be certified by the investigating officer or included in the official accident report, and a copy of the police report must be submitted with a claim for this benefit..

Spouse Education Benefit:

If the Spouse is enrolled in an accredited school on the date the covered employee dies, or enrolls in such a school within 12 months of the employee's death, the additional amount we will pay is equal to the tuition charges for 1 academic year up to \$3,000 per year.

If there is no Spouse who qualifies, \$1,000 will be paid to the beneficiary.

What insurance company makes this plan available to me?

Metropolitan Life Insurance Company, underwrites this plan. A.M. Best's Reports, which compares and rates the financial strength and performance of insurance companies, rates MetLife "A+ Superior"

This information is a brief description of the important features of the plan. It is not a contract. Terms and conditions of life insurance coverage are set forth in Group Policy # 24400, issued in Florida. The group policy is subject to the laws of the jurisdiction in which it is issued. The availability of this offer may change. Please keep this material as a reference.

NOTE: This product description does not constitute an insurance certificate or policy. The information provided is a summary of benefits. Final determination of benefits, exact terms and exclusion of coverage for each benefit plan are contained in certificates of insurance issued by the participating insurance company.

Certificate(s) of Coverage for your insurance benefits are available to you online throughout the year. A hard copy of these certificates will not be mailed to you automatically. Your Certificate(s) of Coverage are document(s) issued by the insurance company for benefits registered with the State of Florida. These documents are available for the benefits you selected during Open Enrollment or as a new employee. To view or print a copy of a Certificate of Coverage for any benefit, log on to www.dadeschools.net.Click on Employee Benefits, then click on "Employee Benefits." Your Certificate(s) of Coverage will be located under your tab (i.e., M-DCPS Employees, Retirees, Part-Time Food Service or COBRA). If you prefer to have a hard copy mailed to your home address, please contact the appropriate insurance company directly. Their phone numbers are listed on the M-DCPS Web site under "Important Phone Numbers."

Your Personal Insurance rates are listed below.

Accidental Death and Dismemberment (AD&D) Employee Coverage

| Employee C | overage | | | | | | | | |
|------------|-----------------|-------------|-------------|-----------------|-------------|-----------------|---------|-------------|-------------|
| | 10-MONTH | | | | 11-MONTH | | | 12-MONTH | |
| | (20 Deductions) | | | (24 Deductions) | | (26 Deductions) | | | |
| | EE Only | EE & Family | Family Only | EE Only | EE & Family | Family Only | EE Only | EE & Family | Family Only |
| \$25,000 | \$0.20 | \$0.39 | \$0.20 | \$0.16 | \$0.33 | \$0.16 | \$0.15 | \$0.30 | \$0.15 |
| \$50,000 | \$0.39 | \$0.78 | \$0.39 | \$0.33 | \$0.65 | \$0.33 | \$0.30 | \$0.60 | \$0.30 |
| \$75,000 | \$0.59 | \$1.17 | \$0.59 | \$0.49 | \$0.98 | \$0.49 | \$0.45 | \$0.90 | \$0.45 |
| \$100,000 | \$0.78 | \$1.56 | \$0.78 | \$0.65 | \$1.30 | \$0.65 | \$0.60 | \$1.20 | \$0.60 |
| \$125,000 | \$0.98 | \$1.95 | \$0.98 | \$0.81 | \$1.63 | \$0.81 | \$0.75 | \$1.50 | \$0.75 |
| \$150,000 | \$1.17 | \$2.34 | \$1.17 | \$0.98 | \$1.95 | \$0.98 | \$0.90 | \$1.80 | \$0.90 |
| \$175,000 | \$1.37 | \$2.73 | \$1.37 | \$1.14 | \$2.28 | \$1.14 | \$1.05 | \$2.10 | \$1.05 |
| \$200,000 | \$1.56 | \$3.12 | \$1.56 | \$1.30 | \$2.60 | \$1.30 | \$1.20 | \$2.40 | \$1.20 |
| \$225,000 | \$1.76 | \$3.51 | \$1.76 | \$1.46 | \$2.93 | \$1.46 | \$1.35 | \$2.70 | \$1.35 |
| \$250,000 | \$1.95 | \$3.90 | \$1.95 | \$1.63 | \$3.25 | \$1.63 | \$1.50 | \$3.00 | \$1.50 |
| \$275,000 | \$2.15 | \$4.29 | \$2.15 | \$1.79 | \$3.58 | \$1.79 | \$1.65 | \$3.30 | \$1.65 |
| \$300,000 | \$2.34 | \$4.68 | \$2.34 | \$1.95 | \$3.90 | \$1.95 | \$1.80 | \$3.60 | \$1.80 |
| \$325,000 | \$2.54 | \$5.07 | \$2.54 | \$2.11 | \$4.23 | \$2.11 | \$1.95 | \$3.90 | \$1.95 |
| \$350,000 | \$2.73 | \$5.46 | \$2.73 | \$2.28 | \$4.55 | \$2.28 | \$2.10 | \$4.20 | \$2.10 |
| \$375,000 | \$2.93 | \$5.85 | \$2.93 | \$2.44 | \$4.88 | \$2.44 | \$2.25 | \$4.50 | \$2.25 |
| \$400,000 | \$3.12 | \$6.24 | \$3.12 | \$2.60 | \$5.20 | \$2.60 | \$2.40 | \$4.80 | \$2.40 |
| \$425,000 | \$3.32 | \$6.63 | \$3.32 | \$2.76 | \$5.53 | \$2.76 | \$2.55 | \$5.10 | \$2.55 |
| \$450,000 | \$3.51 | \$7.02 | \$3.51 | \$2.93 | \$5.85 | \$2.93 | \$2.70 | \$5.40 | \$2.70 |
| \$475,000 | \$3.71 | \$7.41 | \$3.71 | \$3.09 | \$6.18 | \$3.09 | \$2.85 | \$5.70 | \$2.85 |
| \$500,000 | \$3.90 | \$7.80 | \$3.90 | \$3.25 | \$6.50 | \$3.25 | \$3.00 | \$6.00 | \$3.00 |

Benefit payout will be:

Spouse only coverage = Children only coverage = Spouse & Children = 50 percent of employee's coverage 15 percent of employee coverage Spouse 40 percent of employee's coverage Each child 10 percent of employee's coverage