LIFE INSURANCE

GENERAL INFORMATION

Overview

Whether you are single or married, own a home, have children or a family who rely on you for financial support, life insurance can provide income replacement upon your death. Over time, you will need to periodically review your life insurance needs and make adjustments as your life changes, including keeping your desired beneficiary designations current. You should review your life insurance needs as you face significant life events, such as a change in marital status or birth of a child.

Common Terms

Beneficiary – The person, persons, or entity named by you, a plan participant, to receive the plan's benefits when you die – or if you die prior to receiving a benefit due you.

Conversion – An opportunity to obtain other available individual coverage on a self-paid basis, from the Carrier with which the employee was enrolled at the time eligibility terminated.

Spouse – Includes the parties to a marriage of two persons of the opposite sex or of two persons of the same sex provided the marriage was lawful in the jurisdiction in which it occurred. If a marriage was lawful in the jurisdiction in which it occurred, it will be deemed lawful for plan administration purposes thereafter regardless of whether the participant or spouse later establish residence or become domiciled in a jurisdiction in which such marriage is not recognized or is otherwise deemed unlawful.

Surviving Spouse Coverage – Where applicable, provides benefits for your eligible spouse in the event that you die before your spouse.

Total Control Account Program® – The MetLife Total Control Account® (TCA) is an insurance settlement option, which is a method for paying insurance or annuity benefits in full.

Years of Participation – Under the Life and Disability Benefits Program, is defined as follows:

- Prior to September 1, 1950, Years of Participation, in general, equal your recognized length of service as of September 1, 1950.
- For service subsequent to September 1, 1950 and prior to October 1, 1975, Years of Participation shall be the total duration of all periods after September 1, 1950 during which you are insured for Life Insurance whether or not your service is continuous for such periods, plus any time spent on military leave, plus any period during which you received Total and Permanent Disability Benefits under the Program. After September 1, 1950 and prior to October 1, 1975, any employee who is not insured for Life Insurance under the Program for the whole of a period in excess of 24 consecutive months shall lose Years of Participation for any period prior to a subsequent resumption of coverage, except that there shall be no loss of Years of Participation while your seniority remains unbroken.

ADDITIONAL INFORMATION

Social Security Disability Insurance Benefits (SSDIB)

If you become disabled before age 65, you may be eligible for disability insurance benefits from Social Security. Your nearest Social Security office can tell you if you qualify. Benefits may be payable after you have been disabled for five full calendar months.

The amount of Social Security benefits payable because of disability generally is in accordance with benefits payable at age 65.

It is important for you to apply for SSDIB for these reasons:

- Failure to claim a Social Security disability award may result in a lesser Social Security Retirement Insurance Benefit.
- Your dependents also may qualify for Social Security benefits.
- Your Social Security benefits may be increased annually to reflect cost-of-living increases.
- Social Security disability awards are given favorable federal tax treatment.
- You become eligible for Medicare after 24 months of SSDIB. Medicare can provide additional coverage (office visits for TCN option enrollees for example).
- If you are receiving SSDIB and return to work, you may be eligible to continue these benefits, in addition to your wages, up to 12 months. You may contact your nearest Social Security office for additional information.

If you are receiving S&A or EDB, you may be required to complete an authorization form which allows the Social Security Administration to inform GM of the status of your claim for SSDIB. If you fail to complete this authorization, your S&A or EDB will be suspended until the authorization is received.

In addition, failure to provide proof of either an SSDIB award or denial by the 52nd week of disability will result in a suspension of future disability benefits until such proof is received.

- Notwithstanding the definition of Years of Participation prior to October 1, 1975, in the case of any employee under age 65 whose years of credited service accrued prior to the end of the month in which such employee attains age 65 under the General Motors Hourly-Rate Employees Pension Plan exceed the employee's Years of Participation under the Program, such credited service shall be used in lieu of Years of Participation.
- On and after October 1, 1975, Years of Participation shall be the sum of: (1) the greater of your Years of Participation or credited service accrued under the General Motors Hourly-Rate Employees Pension Plan as of September 30, 1975, plus (2) your credited service accrued under such Plan on and after October 1, 1975.

UNDERSTANDING YOUR BENEFITS

Eligibility

Traditional and In-Progression employees are eligible for Basic Life Insurance on their hire date assuming they are actively at work. Eligibility for self-paid coverage varies upon election and other plan rules.

Full-Time and Part-Time Temporary employees are not eligible.

Benefits At-A-Glance

	Employer Provided Coverage	Employee Paid Coverage
Life Insurance	Basic LifeExtra Accident	Optional LifeDependent Life
	Survivor Income Benefit Insurance (SIBI)	Personal Accident Insurance

Basic Life Insurance

Basic Life Insurance is employer-paid coverage on your life and is payable upon your death to your designated beneficiary(ies).

Extra Accident Insurance

An additional benefit called Extra Accident Insurance, may be payable to your Basic Life Insurance beneficiary for your death, or to you for loss of certain bodily members, or loss of eyesight as the result of an accident. For Extra Accident Insurance to be payable, (1) the loss must occur within two years of the accident, or (2) your death must occur within one year following the accident. Your loss or death must not in any way result from or be caused or contributed to, wholly or partly, directly or indirectly, by (1) disease or bodily or mental infirmity, or by medical or surgical treatment or diagnosis thereof, (2) any infection, except infection caused by an external visible wound accidentally sustained, (3) hernia, no matter how or when sustained, (4) war or any act of war or (5) intentional self-destruction or intentionally self-inflicted injury, while sane or insane.

Notwithstanding the provisions above and, other than for medical malpractice or other medical errors, a claim for Extra Accident Insurance will not be denied on the basis that a physical illness or infection either (1) contributed to an accidental covered Loss or (2) hastened the occurrence of an accidental covered Loss.

Three times the scheduled benefit amount of Extra Accident Insurance in force may be payable if death results from an accidental bodily injury caused solely by employment with GM. The above Extra Accident Insurance exclusions also apply to death resulting from employment with GM.

BASIC LIFE INSURANCE AND EXTRA ACCIDENT INSURANCE FOR TRADITIONAL EMPLOYEES AT WORK ON OR AFTER NOVEMBER 20, 2023			
	Active Amount		
Base Hourly Rate ¹⁹	Basic Life Insurance	Extra Accident Insurance ²⁰	Total Basic Life and Extra Accident Insurance
\$	\$	\$	\$
Under - 21.29	48,500	24,250	72,750
21.30 - 21.64	49,000	24,500	73,500
21.65 - 21.99	50,000	25,000	75,000
22.00 - 22.34	50,500	25,250	75,750
22.35 - 22.69	51,500	25,750	77,250
22.70 - 23.04	52,500	26,250	78,750
23.05 - 23.39	53,000	26,500	79,500
23.40 - 23.74	54,000	27,000	81,000
23.75 - 24.09	54,500	27,250	81,750
24.10 - 24.44	55,500	27,750	83,250
24.45 - 24.79	56,500	28,250	84,750
24.80 - 25.14	57,000	28,500	85,500
25.15 - 25.49	58,000	29,000	87,000
25.50 - 25.84	58,500	29,250	87,750

BASIC LIFE INSURANCE AND EXTRA ACCIDENT INSURANCE FOR TRADITIONAL EMPLOYEES AT WORK ON OR AFTER NOVEMBER 20, 2023

Active Amount			
Report Control			Total
		Extra Accident	Basic Life and Extra
Base Hourly Rate ¹⁹	Basic Life Insurance	Insurance ²⁰	Accident Insurance
\$	\$	\$	\$
25.85 - 26.19	59,500	29,750	89,250
26.20 - 26.54	60,500	30,250	90,750
26.55 - 26.89	61,000	30,500	91,500
26.90 - 27.24	62,000	31,000	93,000
27.25 - 27.59	62,500	31,250	93,750
27.60 - 27.94	63,500	31,750	95,250
27.95 - 28.29	64,500	32,250	96,750
28.30 - 28.64	65,000	32,500	97,500
28.65 - 28.99	66,000	33,000	99,000
29.00 - 29.34	67,500	33,750	101,250
29.35 - 29.69	68,000	34,000	102,000
29.70 - 30.04	69,000	34,500	103,500
30.05 - 30.39	70,000	35,000	105,000
30.40 - 30.74	70,500	35,250	105,750
30.75 - 31.09	71,500	35,750	107,250
31.10 - 31.44	72,000	36,000	108,000
31.45 - 31.79	73,000	36,500	109,500
31.80 - 32.14	74,000	37,000	111,000
32.15 - 32.49	74,500	37,250	111,750
32.50 - 32.84	75,500	37,750	113,250
32.85 - 33.19	76,000	38,000	114,000
33.20 - 33.54	77,000	38,500	115,500
33.55 - 33.89	78,000	39,000	117,000
33.90 - 34.24	78,500	39,250	117,750
34.25 - 34.59	79,500	39,750	119,250
34.60 - 34.94	80,500	40,250	120,750
34.95 - 35.29	81,000	40,500	121,500
35.30 - 35.64	82,000	41,000	123,000
35.65 - 35.99	82,500	41,250	123,750
36.00 - 36.34	83,500	41,750	125,250
36.35 - 36.69	84,500	42,250	126,750
36.70 - 37.04	85,000	42,500	127,500
37.05 - 37.39	86,000	43,000	129,000
37.40 - 37.74	86,500	43,250	129,750
37.75 - 38.09	87,500	43,750	131,250
38.10 - 38.44	88,500	44,250	132,750
38.45 - 38.79	89,000	44,500	133,500
38.80 - 39.14	90,000	45,000	135,000

BASIC LIFE INSURANCE AND EXTRA ACCIDENT INSURANCE FOR TRADITIONAL EMPLOYEES AT WORK ON OR AFTER NOVEMBER 20, 2023

Active Amount			
	Total		Total
		Extra Accident	Basic Life and Extra
Base Hourly Rate ¹⁹	Basic Life Insurance	Insurance ²⁰	Accident Insurance
\$	\$	\$	\$
39.15 - 39.49	91,000	45,500	136,500
39.50 - 39.84	91,500	45,750	137,250
39.85 - 40.19	92,500	46,250	138,750
40.20 - 40.54	93,000	46,500	139,500
40.55 - 40.89	94,000	47,000	141,000
40.90 - 41.24	95,000	47,500	142,500
41.25 - 41.59	95,500	47,750	143,250
41.60 - 41.94	96,500	48,250	144,750
41.95 - 42.29	97,000	48,500	145,500
42.30 - 42.64	98,000	49,000	147,000
42.65 - 42.99	99,000	49,500	148,500
43.00 - 43.34	99,500	49,750	149,250
43.35 - 43.69	100,500	50,250	150,750
43.70 - 44.04	101,500	50,750	152,250
44.05 - 44.39	102,000	51,000	153,000
44.40 - 44.74	103,000	51,500	154,500
44.75 - 45.09	103,500	51,750	155,250
45.10 - 45.44	104,500	52,250	156,750
45.45 - 45.79	105,500	52,750	158,250
45.80 - 46.14	106,000	53,000	159,000
46.15 - 46.49	107,000	53,500	160,500
46.50 - 46.84	108,000	54,000	162,000
46.85 - 47.19	108,500	54,250	162,750
47.20 - 47.54	109,500	54,750	164,250
47.55 - 47.89	110,000	55,000	165,000
47.90 - 48.24	111,000	55,500	166,500
48.25 - 48.59	112,000	56,000	168,000
48.60 - 48.94	112,500	56,250	168,750
48.95 - 49.29	113,500	56,750	170,250
49.30 - 49.64	114,000	57,000	171,000
49.65 - 49.99	115,000	57,500	172,500
50.00 - 50.34	116,000	58,000	174,000
50.35 - 50.69	116,500	58,250	174,750
50.70 - 51.04	117,500	58,750	176,250
51.05 - 51.39	118,500	59,250	177,750
51.40 - 51.74	119,000	59,500	178,500
51.75 - 52.09	120,000	60,000	180,000
52.10 - 52.44	120,500	60,250	180,750

BASIC LIFE INSURANCE AND EXTRA ACCIDENT INSURANCE FOR TRADITIONAL EMPLOYEES AT WORK ON OR AFTER NOVEMBER 20, 2023			
	Active Amount		
Base Hourly Rate ¹⁹	Basic Life Insurance	Extra Accident Insurance ²⁰	Total Basic Life and Extra Accident Insurance
\$	\$	\$	\$
52.45 - 52.79	121,500	60,750	182,250
52.80 - 53.14	122,500	61,250	183,750
53.15 - 53.49	123,000	61,500	184,500
53.50 & Over	124,000	62,000	186,000

BASIC LIFE INSURANCE AND EXTRA ACCIDENT INSURANCE FOR IN-PROGRESSION EMPLOYEES AT WORK ON OR AFTER NOVEMBER 20, 2023			
	Active Amount		
Base Hourly Rate	Basic Life Insurance	Extra Accident Insurance ²⁰	Total Basic Life and Extra Accident Insurance
\$	\$	\$	\$
N/A	45,000	22,500	67,500

Survivor Income Benefit Insurance

Two types of monthly Survivor Income Benefits are provided under the Life and Disability Benefits Program, a Transition Benefit and a Bridge Benefit.

TRANSITION BENEFIT

Benefits of \$700 per month may be payable to your eligible survivors for up to 24 months. However, the monthly Transition Benefit will be \$375 if the survivors are, or become, eligible for certain Social Security benefits.

BRIDGE BENEFIT

Benefits of \$700 per month may be payable to your surviving spouse who has received 24 monthly payments of Transition Benefits. Bridge Benefits cease if the surviving spouse (1) remarries, (2) attains either age 62 or the age at which full widow's or widower's insurance benefits or Retirement Insurance Benefits become payable under Social Security, or (3) dies.

The Bridge Benefit shall be reduced by an amount equal to the full amount of any monthly benefit payable to a surviving spouse under any pension plan or retirement program then in effect to which the Company or any of its subsidiaries has contributed.

¹⁹ For this purpose, base hourly rate includes premium for necessary continuous 7-day operations, but does not include overtime, night shift premium, or any cost-of-living allowance.

²⁰ Three times the scheduled amount may be payable for an occupation-related death.

Bridge Benefits are not payable for any month for which a surviving spouse could qualify for a mother's or father's insurance benefit under Social Security, whether or not your surviving spouse actually receives the mother's or father's benefit.

Eligible Widow or Widower

An eligible widow or widower will have Survivor Income Benefits reduced by any benefits to which the surviving spouse is entitled under the Pension Plan.

Survivors may be eligible for monthly Survivor Income Benefit Insurance in addition to Basic Life Insurance and Extra Accident Insurance benefits, if you die before you retire. Coverage is continued to age 65 for an employee receiving Total and Permanent Disability benefits under the Pension Plan.

Optional Life Insurance

To provide additional protection for your beneficiary, you may enroll for Optional Life Insurance in amounts of \$10,000, \$20,000, \$30,000, \$40,000, \$50,000, \$75,000, \$100,000, \$125,000, \$150,000 \$175,000, \$200,000, \$250,000, \$300,000, \$350,000, \$400,000 and \$450,000.

Eligibility

You are eligible for Optional Life Insurance on the first day of your employment with GM, provided Basic Life Insurance is in force. This is considered your eligibility date.

If you enroll on your eligibility date, Optional Life Insurance will become effective on your eligibility date.

If you enroll within 60 days of your eligibility date, Optional Life Insurance becomes effective on the first day of the calendar month following the date of your enrollment.

If you enroll after 60 days following your eligibility date, you must furnish proof of good health before your Optional Life Insurance will become effective. Proof of good health may be waived if you notify the <u>GM Benefits & Services Center</u> within 31 days of an increase in your family status (marriage, birth, or adoption).

If you become insured for Optional Life Insurance and decide to increase the amount of coverage, you must furnish proof of good health before your Optional Life Insurance will become effective.

If proof of good health is required, your coverage will become effective on the first day of the month following approval by the insurance company.

If you enroll in Optional Life Insurance and Basic Life Insurance is not in force the date the coverage would have been effective, Optional Life Insurance will become effective on the date Basic Life Insurance becomes effective.

Coverage, or an increased amount of coverage, becomes effective if you are actively at work when coverage would otherwise begin, or the first day you are actively at work thereafter. This coverage may be continued while Basic Life Insurance is in force.

Dependent Life Insurance

You may enroll for Dependent Life Insurance covering your spouse and each eligible dependent child. You can choose from one of the following schedules:

Amounts of Life Insurance	Spouse	Child
Schedule I	\$5,000	\$2,000
Schedule II	\$10,000	\$4,000
Schedule III	\$15,000	\$6,000
Schedule IV	\$20,000	\$8,000
Schedule V	\$25,000	\$10,000
Schedule VI	\$30,000	\$12,000
Schedule VII	\$35,000	\$14,000
Schedule VIII	\$40,000	\$16,000
Schedule IX	\$45,000	\$18,000
Schedule X	\$50,000	\$20,000
Schedule XI	\$60,000	\$24,000
Schedule XII	\$75,000	\$30,000
Schedule XIII	\$100,000	\$40,000
Schedule XIV	\$125,000	\$50,000
Schedule XV	\$150,000	\$50,000

Eligibility

You are eligible for Dependent Life Insurance on the first day of your employment with GM, provided you have an eligible dependent and Basic Life Insurance is in force. This is considered your eligibility date.

If you enroll on your eligibility date Dependent Life Insurance will become effective on your eligibility date, except for the amount of coverage on any dependent that exceeds \$75,000. If you enroll at any time for an amount of coverage that exceeds \$75,000, you must furnish for each dependent whose coverage amount exceeds \$75,000, proof of good health on that dependent.

If you enroll within 60 days of your eligibility date, Dependent Life Insurance becomes effective on the first day of the calendar month following the date of your enrollment, except for the amount of coverage on any dependent that exceeds \$75,000. You must furnish for each dependent whose coverage amount exceeds \$75,000, proof of good health on that dependent.

If you enroll after 60 days following your eligibility date, you must furnish proof of each dependent's good health before your Dependent Life Insurance will become effective. Proof of good health may be waived if you notify the GM Benefits & Services Center within 31 days of first acquiring an eligible dependent.

If you become insured for Dependent Life Insurance and decide to increase the amount of coverage, you must furnish proof of each dependent's good health before your Dependent Life Insurance will

become effective. If proof of good health is required, your coverage will become effective on the first day of the month following approval by the insurance company.

If you enroll in Dependent Life Insurance and Basic Life Insurance is not in force the date the coverage would have been effective, Dependent Life Insurance will become effective on the date Basic Life Insurance becomes effective.

Coverage, or an increased amount of coverage, becomes effective if you are actively at work when coverage would otherwise begin, or the first day you are actively at work thereafter providing you have at least one eligible dependent.

Definition of Dependent:

Eligible dependents are defined as follows:

- Your spouse.
- Any child
 - 1. of yours from the moment of live birth, legal adoption, or legal guardianship. "Live Birth" means that the child is born with spontaneous respiration or a heartbeat. Live birth does not include a stillbirth, miscarriage, spontaneous abortion or induced abortion,
 - 2. of your spouse,
 - 3. who is related by blood or marriage to you and for whom you provide principal support as defined by the Internal Revenue Code of the United States, and who was reported as a dependent on your most recent income tax return or who qualifies in the current year for dependency tax status.
- A child as defined in (1), (2), or (3), is included until the end of the month in which the child attains age 26, or regardless of age if totally and permanently disabled, provided such child became totally and permanently disabled prior to attaining age 26. A totally and permanently disabled child who is 26 years of age or older at the time of a newly eligible employee's enrollment also is included, provided such child became totally and permanently disabled prior to attaining age 26. "Totally and permanently disabled" means having any medically determinable physical or mental condition which prevents the child from engaging in substantial gainful activity and which can be expected to result in death or to be of long-continued or indefinite duration.

For the purposes of Dependent Life Insurance continued by your surviving spouse after your death, a child born after your death shall be an eligible Dependent only if such child is the issue of your surviving spouse's marriage to you and was conceived prior to your death. Any such child shall be eligible on the same basis as a child born prior to your death.

In the event that you no longer have an eligible dependent for the spouse and/or child coverage, you are responsible for calling the <u>GM Benefits & Services Center</u>. Select the "Life Insurance" prompt to cancel Dependent Life Insurance and/or dependent Personal Accident Insurance coverages. Consequently, if you do not cancel dependent coverage and a dependent claim is filed when you have no eligible dependents, the only payment for which you may be eligible will be a reimbursement of any overpaid premiums.

Personal Accident Insurance

You may be eligible to enroll for Personal Accident Insurance in units of \$10,000 up to a maximum benefit of \$500,000. You also may enroll your spouse and any eligible dependent children for this insurance. The maximum family coverage available is \$500,000. Your spouse may be covered for 50% of your coverage amount and each eligible dependent child may be covered for 10% of your coverage amount. However, when you retire, insurance in force on any person insured may not exceed \$150,000.

Eligibility

You are eligible for Personal Accident Insurance on your account (personal coverage) and on the account of your family (family coverage) on the first day of your employment with GM, provided Basic Life Insurance is in force. This is considered your eligibility date. You may enroll for family coverage if you have at least one eligible dependent.

If you enroll on your eligibility date, Personal Accident Insurance will become effective on your eligibility date.

If you enroll after your eligibility date, Personal Accident Insurance becomes effective on the first day of the calendar month following the date of your enrollment.

If you become insured for Personal Accident Insurance and decide to increase the amount of coverage, insurance will become effective on the first day of the calendar month following the date of your change.

If you enroll in Personal Accident Insurance and Basic Life Insurance is not in force the date the coverage would have been effective, Personal Accident Insurance will become effective on the date Basic Life Insurance becomes effective.

Coverage, or an increased amount of coverage, becomes effective if you are actively at work when coverage would otherwise begin, or the first day you are actively at work thereafter. You are eligible for family coverage on the date you become eligible for personal coverage provided, you have at least one eligible dependent.

Generally, an eligible dependent includes your spouse and dependent children. The definition of an eligible dependent is contained in the Guide to Dependent Eligibility, which can be found in your enrollment kit. Additional copies of the guide may be obtained upon request by calling the GM Benefits & Services Center.

HOW LIFE INSURANCE WORKS

Contributions

Optional Life Insurance

You contribute the full cost of Optional Life Insurance. Your monthly contribution during any calendar year will be based on your age as of December 31 of such year and will automatically increase when you reach a higher age bracket. The GM Benefits & Services Center, who administers all of your life insurance coverages, can inform you of the current monthly contribution rate for your age group. Rates are guaranteed by the insurance company during the term of the 2023 Agreement.

Dependent Life Insurance

You contribute the full cost of Dependent Life Insurance. Your monthly rate of contribution during any calendar year will be based on your age as of December 31 of such year and will automatically increase when you reach a higher age bracket. The <u>GM Benefits & Services Center</u>, who administers all of your life insurance coverages, can inform you of the current monthly contribution rate for your age group. Rates are guaranteed by the insurance company during the term of the 2023 Agreement.

You may continue Dependent Life Insurance while Basic Life Insurance is in force. However, you are responsible for canceling your Dependent Life Insurance if you no longer have any eligible dependents.

If you die while Dependent Life Insurance is in effect, your surviving spouse may continue this coverage. Your surviving spouse must pay the required monthly contribution. Your surviving spouse may continue this coverage until the earlier of remarriage, or death. Contribution rates for a surviving spouse will be based on the surviving spouse's progressing age.

Personal Accident Insurance

You pay the full cost of Personal Accident Insurance.

If you die while family coverage under Personal Accident Insurance is in effect, your surviving spouse may continue this coverage for up to twelve (12) months following the month of your death at no expense. Coverage may be continued beyond twelve (12) months, provided your surviving spouse pays the required contribution. The monthly rate of contribution for any such surviving spouse will be determined as set forth in the schedule applicable to a retiree and will be based on the amount of coverage which would have been in force on the employee, as if living.

The <u>GM Benefits & Services Center</u>, who administers all of your life insurance coverages, can inform you of the current monthly contribution rate for Personal Accident Insurance (personal or family coverage). Rates are guaranteed by the insurance company during the term of the 2023 Agreement.

Application for all Life Insurance Benefits

A beneficiary needs to make a claim on a form. A form may be obtained by calling the GM Benefits & Services Center at 1-800-489-4646 and selecting "Life Insurance" to be transferred to a MetLife Customer Service Associate; for hearing and/or speech support, call MetLife directly at 1-888-688-2860.

Beneficiaries

You may change or view your beneficiary designations at any time via gmbenefits.com > Life Insurance. You may also call the GM Benefits & Services Center at 1-800-489-4646 and select "Life Insurance" to be transferred to a MetLife Customer Service Associate; for hearing and/or speech support, call MetLife directly at 1-888-688-2860.

It is very important that you take the time to make sure that your life insurance beneficiaries are up to date and reflect the people that you desire to receive the life insurance proceeds in the event of your death. If circumstances in your life change, such as marriage, birth of a child, death of a spouse or divorce, you may want to consider the appropriateness of your beneficiary designation. It is especially critical to review your beneficiary in the event of a divorce, as a divorce decree does not change your beneficiary record.

Basic Life Insurance

You may name anyone you wish as your beneficiary or beneficiaries. Your beneficiary will receive the Basic Life Insurance benefit (less any Accelerated Benefits Option payment). Your Basic Life Insurance beneficiary will receive the Extra Accident Insurance benefit.

Optional Life Insurance

You may name anyone you wish as your beneficiary or beneficiaries. The beneficiary need not be the same as you designate for your Basic Life Insurance.

Dependent Life Insurance

You are the beneficiary for Dependent Life Insurance.

Personal Accident Insurance

You may name anyone you wish as your beneficiary or beneficiaries. The beneficiary will be the same as you designate for your Basic Life Insurance unless you designate a different beneficiary.

You are the beneficiary if you suffer accidental bodily injury resulting in one of the losses described in the table below. You also are the beneficiary if your spouse or eligible dependent child suffers accidental loss of life or other loss as described in the table below.

Schedule of Losses

Loss	Amount Payable
Loss of life	The full amount
Presumption of death benefit for loss of life ²¹	The full amount
Loss of both hands or both feet	The full amount
Loss of one hand and one foot	The full amount
Loss of the entire sight of both eyes	The full amount
Loss of speech and hearing	The full amount ²²
Loss of the entire sight of one eye and one hand or foot	The full amount
Loss of one hand or one foot	½ the full amount
Loss of the entire sight of one eye	½ the full amount
Loss of speech or hearing	½ the full amount ²²
Loss of thumb and index finger (of the same hand)	¼ the full amount ²²
Paralysis	
Quadriplegia	The full amount
Paraplegia	¾ the full amount
Hemiplegia	½ the full amount

²¹ "Presumption of death" means an assumption will be made that the covered person died as a result of an accidental injury if: (1) the aircraft or other vehicle the covered person was traveling in disappears, sinks, or is wrecked; and (2) the body of the person who disappeared is not found within one year of (i) the date the aircraft or other vehicle was scheduled to arrive at its destination, if traveling in an aircraft or other vehicle operated by a common Carrier; or (ii) the date the person is reported missing to the authorities, if traveling in any other aircraft or vehicle.

²² No benefit amount payable following the employee's retirement/separation from employment or under coverage continued by a surviving spouse.

Benefits are payable to your beneficiary if you should die as a result of an accident. However, benefits are only payable if you, your spouse or dependent child sustains an accidental loss within one year of the accident.

The loss must not in any way result from or be caused or contributed to, wholly or partly, directly or indirectly, by:

- (1) suicide or self-destruction or any attempt thereat, whether sane or insane
- (2) bodily infirmity, sickness or disease
- (3) medical or surgical treatment (except medical or surgical treatment necessitated only due to an injury sustained in an accident)
- (4) war, declared or undeclared, or any act of war except while the employee is outside the United States and Puerto Rico on Company assignment or while insured dependents are outside the United States and Puerto Rico because of the employee's assignment
- (5) injury sustained while serving in the armed forces of any country, for which premiums will be refunded; provided, however, that a member of an Organized Reserve Corps or National Guard Unit shall be covered during short periods of training or participation in public ceremonies
- (6) injury sustained while engaged in or taking part in aeronautics and/or aviation of any description or resulting from being in an aircraft. Coverage is provided when riding as a passenger but not as an operator or crew member, in or on, boarding or unloading from any aircraft having a current and valid airworthiness certificate or any transport type aircraft operated by the Military Airlift Command (MAC) of the United States of America or by any similar air transport service of any duly constituted governmental authority of the recognized government of any nation anywhere in the world. Persons who are not members of the operating crew of any aircraft, who are engaged in testing, measuring, calibrating and similar operations, shall be considered passengers and not crew members
- (7) the insured person's act of aggression, or participation in a felonious enterprise

Notwithstanding the provisions above and, other than for medical malpractice or other medical errors, a claim for Personal Accident Insurance will not be denied on the basis that a physical illness or infection either (1) contributed to an accidental covered Loss, or (2) hastened the occurrence of an accidental covered Loss.

In the event of an accidental death of any insured person, if the amount payable is \$5,000 or more, benefits will be paid automatically under the beneficiary's Total Control Account Program®.

The following benefits also are available:

Comatose — If you have personal or family coverage and if you, your insured spouse, or insured dependent child become comatose within 365 days of the accident, a monthly benefit equal to 1% of the amount of coverage in force will be paid starting on the 32nd day of the coma and will continue to be paid until the earlier of 100 months or death. If the covered person regains consciousness, benefits shall cease and coverage for Personal Accident Insurance would resume only upon re-enrollment and payment of premiums.

Common Disaster — If family coverage has been elected and if you and your insured spouse suffer a loss of life in the same accident or separate accidents which occur within 48 hours of each other, the amount payable by reason of the spouse's death will be the same as the amount payable due to your death. The maximum benefit payable for you and your spouse will not exceed \$1,000,000.

Special Child Care Center – If family coverage has been elected, and if you or your insured spouse suffer an accidental loss of life, a Special Child Care Center benefit is provided in an amount equal to 5% of your full benefit or the actual amount of child care costs incurred, whichever is less, but not to exceed \$6,000 per year. Benefits will be paid for up to four years for each eligible child under age 13 who is enrolled or enrolls within 90 days of the accident in a qualified child care center. If there is no dependent child who qualifies, an additional benefit of \$1,000 will be paid to the beneficiary.

Special Education – If family coverage has been elected and if you suffer an accidental loss of life, a Special Education benefit is provided for each eligible child for tuition expenses in an amount equal to 5% of your full benefit or the actual amount of the tuition, whichever is less, but not to exceed \$6,000 per year. Benefits will be paid for up to four consecutive years for each child who is enrolled or enrolls within 365 days of your death as a full-time student in an accredited college or university. No payment will be made for room, board, or other living, traveling, or clothing expenses. If there is no dependent child who qualifies, an additional benefit of \$1,000 will be paid to the beneficiary.

Spousal Occupational Training – If family coverage has been elected and if you suffer an accidental loss of life, a Spousal Occupational Training benefit is provided for your spouse to attend a formal occupational training program to qualify for active employment in an occupation for which your spouse would not otherwise qualify. Benefits are provided for expenses incurred within three years of your death and will be paid in an amount equal to 5% of your full amount or the actual amount of expenses incurred, whichever is less, but not to exceed \$6,000.

No benefit is payable after you retire/separate from employment or under coverage continued by a surviving spouse for Special Child Care Center, Special Education, or Spousal Occupational Training.

Seat Belt and Air Bag Benefit – If you, your covered spouse or your covered child suffers a loss of life as a result of a covered accident while in a private passenger car and the covered person's seat belt was properly used, an additional benefit of ten percent (10%) of the covered person's full amount (subject to a maximum of \$25,000) will be paid. An additional benefit of ten percent (10%) of the covered person's full amount (subject to a maximum of \$25,000) will also be payable if an air bag is deployed for the seat which such person occupied and while properly using a seat belt.

Repatriation Expense Benefit – If you, your covered spouse or your covered child suffers a loss of life as the result of a covered accident, a repatriation benefit of \$5,000 will be paid for the preparation and transportation of the covered person's body to the city of such person's principal residence, provided the death occurred at least one hundred (100) miles away from such person's principal residence.

Only one amount will be paid (i.e., the greatest amount) for all losses resulting from any one accident. For example: You suffer an accidental bodily injury resulting in one of the losses described in the Schedule of Loss table located in the <u>Beneficiaries > Personal Accident Insurance</u> section, entitling you to a payment of % the full amount of your coverage (e.g., loss of one hand). In the same accident, you suffer another bodily injury resulting in one of the losses described in the Schedule of Loss table located in the Beneficiaries > Personal Accident Insurance section, entitling you to a payment of the full amount of your coverage (e.g., loss of sight in both eyes). The amount paid to you will only equal the full amount (i.e., the greater amount) because the total amount paid to you for losses resulting from the same accident cannot exceed the total amount of Personal Accident Insurance in force.

Payment of Life Insurance Benefits

MetLife Total Control Account®

The MetLife Total Control Account® (TCA) is an insurance settlement option, which is a method of paying insurance or annuity benefits in full. The TCA gives beneficiaries immediate access to their insurance proceeds. If the amount of proceeds payable is \$5,000 or more, a TCA will usually be established in the beneficiary's name once their claim is approved. The beneficiary will receive a personalized "draft book" and a kit that includes a Customer Agreement and provides additional information regarding their account. The beneficiary can draw on their TCA for a minimum of \$250 up to the entire amount at any time.

The Total Control Account® (TCA) begins to earn interest the day the account is established. The account provides a minimum guaranteed interest rate of 0.50%. There are no monthly maintenance fees, service charges or transaction charges and there are no charges for withdrawals, drafts, or for reordering drafts. Fees may be charged for special services or for an overdrawn TCA. Accountholders have the ability to link the TCA to all popular mobile payment apps and services. Also, accountholders can set up automatic debits that are deducted directly from the account. Beneficiaries receive quarterly statements detailing the activity on the account and statements will be sent monthly if there has been withdrawal activity. The account is guaranteed by the financial strength and claims paying ability of Metropolitan Life Insurance Company. The TCA is not available to beneficiaries residing outside of the United States. Details regarding the TCA will be provided to the beneficiary when a claim is filed.

PLAN LIMITATIONS

Disqualification, Ineligibility, Denial, Loss, Forfeiture, Suspension, Offset, Reduction or Recovery of Benefits

The following circumstances may result in disqualification, ineligibility, loss, reduction or recovery of benefits. The circumstances include but are not limited to: failure to comply with Program eligibility rules, non-payment of premium, any benefit Plan overpayment due to any reason subject to any applicable limitations, end of continuance period, termination of the Plan, quit, discharge, proof of good health denial for Optional Life Insurance and Dependent Life Insurance, and insufficient years of participation, credited service or years of seniority for Basic Life Insurance.

APPEALS

To receive benefits, you (or your designated beneficiary following your death) must file an application or claim form obtained from the Carrier, in accordance with the instructions provided. Appropriate forms are available by calling the <u>GM Benefits & Services Center</u>.

Eligibility for benefits will be determined and the claim application will be processed by the Carrier. You will be notified of benefits paid or, if the application for benefits is denied in whole or in part, written notice of such denial will be provided within a reasonable time but not later than 90 days (unless special circumstances require an extension), or 45 days in the case of a claim for disability benefits (unless special circumstances require an extension), following receipt of the claim application.

The notice will include specific reasons for the denial and will refer to the Plan provisions upon which the denial is based. The notice will also include a description of any additional information that may be needed if the claim is to be resubmitted and an explanation of the procedure to be followed to have the claim reviewed if the claim has been denied.

The procedure for review of denied claims follows.

Appeal of Denied Life Insurance Claim

To afford yourself a means by which you can seek review and possible reconsideration of a denied claim for life insurance, internal procedures of GM will provide a procedure along the following lines:

With respect to claims denied by the Carrier:

Step 1: Following receipt of the formal notification letter from the Carrier by which you (or your beneficiary, following your death) is advised of the reasons for the denial of your or your beneficiary's claim, you or your beneficiary may request the representative whom your local union has designated to discuss Life and Disability Benefits Program matters to review the reasons for the denial with the management representative.

Step 2: The management representative will review your case with the local union benefit representative. If needed, more details with respect to the reasons for the denial will be obtained from the Carrier by the management representative and, if appropriate, the management representative will advise what, if anything, you or your beneficiary can do to support the claim for payment of benefits. At this meeting, there will be furnished to the local union benefit representative copies of all of the material pertinent to the claim which the Carrier has made available for examination.

Step 3: If after discussion with the management representative, the local union benefit representative contests the position of the Carrier as reflected by the management representative, the local union representative may refer the case on an appeal form provided for that purpose to the International Union for review with GM. A copy of such appeal form shall be presented to the management representative. The case should be referred to the International Union for review within 90 days after receipt of the appeal form as provided by the management representative. An extension of time will be allowed if needed.

Step 4: The International Union will notify GM within 60 days of its intent to review a case on a Step 4 appeal form provided for such purpose. An extension of time will be allowed if needed. GM will request a review by the Carrier and will attempt to resolve the case with the International Union by providing a written answer with respect to the Carrier's determination on such form.

Step 5: If GM and the International Union are unable to resolve their differences, GM upon written request of the International Union, will request a review within 60 days by the Carrier. Such request to the Carrier will be in writing and will incorporate the Union's position. An extension of time will be allowed if needed. The Carrier's review of the claim will be conducted by a committee of three employees of the Carrier, at least one of whom shall be an officer of the Carrier. A 5th Step meeting will take place with a representative of the International Union, GM and the Carrier to discuss the claim under consideration.

Step 6: The Carrier will report to the International Union and to GM its action as the result of such review.

Information regarding any delay in the release of a determination by the Carrier, lack of coverage, insufficient payment of a claim, or an anticipated claim, may be requested by the local union benefit representative in the same manner as set forth in Steps 1 and 2 of the procedure outlined herein. In such instances, the management representative shall expedite the Carrier determination, or shall provide the requested information with respect to lack of coverage, insufficient payment of a claim, or an anticipated claim. Any such issue which cannot be resolved locally may be appealed as set forth in Step 4 of the procedure outlined herein.

ADDITIONAL INFORMATION

Accelerated Benefits Option

If you are diagnosed as having a terminal illness with a life expectancy not to exceed 12 months, you may be eligible to receive an Accelerated Benefits Option payment of up to 80%, but not less than \$1,000, of your Basic Life Insurance. However, if your Basic Life Insurance would be reduced within 12 months following the date the Accelerated Benefits Option is approved for payment, such payment will be limited to 80% of the fully reduced amount of your Basic Life Insurance.

Additionally, you may be eligible to receive an Accelerated Benefits Option payment of up to 80%, but not less than \$1,000 of your Optional Life Insurance. An Accelerated Benefits Option payment will not affect any Extra Accident Insurance benefits to which you may be entitled.

If your dependent spouse is diagnosed as having a terminal illness with a life expectancy not to exceed 12 months, you may access a portion of your spouse Dependent Life Insurance coverage.

An Accelerated Benefits Option payment will be made (1) as of the date the insurance company certifies all eligibility requirements are met, (2) only once, under each coverage, regardless of the amount elected, (3) only in one lump sum (4) only if you are living when payment is made (Basic Life Insurance and Optional Life Insurance) or (5) only if your spouse or surviving spouse is living when the payment is made (Dependent Life Insurance).

An Accelerated Benefits Option payment will be reduced by any benefits paid to you under any GM benefit Plan which should not have been paid or should have been paid in a lesser amount.

An Accelerated Benefits Option payment will not be made if (1) your Basic Life Insurance, Optional Life Insurance and spouse Dependent Life Insurance is not in force, (2) you are making contributions for Basic Life Insurance, (3) all or a portion of your Basic Life Insurance or Optional Life Insurance is to be paid to a former spouse and/or child(ren) as part of a divorce agreement, (4) you previously received payment of Basic Life Insurance, Optional Life Insurance or spouse Dependent Life Insurance as an Accelerated Benefits Option, regardless of the amount paid, (5) you are not living as of the date the insurance company certifies all eligibility requirements are met (Basic Life Insurance or Optional Life Insurance), (6) your spouse is not living as of the date the insurance company certifies all eligibility requirements are met (spouse Dependent Life Insurance) or (7) you are totally and permanently disabled drawing out your life insurance benefits.

You may be required to be examined by a physician or physicians designated by the insurance company, at the insurance company's expense, for the purpose of determining if you are terminally ill and have a life expectancy not to exceed 12 months for Basic Life Insurance or Optional Life Insurance.

Your dependent spouse or surviving spouse may be required to be examined by a physician or physicians, designated by the insurance company, at the insurance company's expense, for the purpose of determining if your spouse is terminally ill and has a life expectancy not to exceed 12 months.

Upon your death Basic Life Insurance and/or Optional Life Insurance proceeds payable to your beneficiary will be reduced by the amount of any Accelerated Benefits Option payment. Upon the death of your spouse, spouse Dependent Life Insurance proceeds payable to you will be reduced by the amount of the Accelerated Benefits Option payment.

The total of an Accelerated Benefits Option payment and the amount of Basic Life Insurance and Optional Life Insurance payable at your death may never exceed the amount of Basic Life Insurance and Optional Life Insurance which would otherwise have been payable without the Accelerated Benefits Option payment.

The total of an Accelerated Benefits Option payment and the amount of spouse Dependent Life Insurance coverage payable at your spouses' death may never exceed the amount of Dependent Life Insurance which would otherwise have been payable without the Accelerated Benefits Option payment.

An accelerated benefit under spouse Dependent Life Insurance will not be payable to a surviving spouse if such a benefit was paid to you.

If you elect to receive an accelerated benefit, the maximum amount is 80% of the amount of your Basic Life Insurance and 80% of the amount of your Optional Life Insurance in force as of the date the insurance company accepts that all requirements are met. The combined accelerated benefit amounts under Basic Life Insurance and Optional Life Insurance may not exceed \$500,000.

The maximum amount of the accelerated benefit for your dependent spouse or surviving spouse is 80% of the amount of your Dependent Life Insurance in force as of the date the insurance company accepts that all requirements are met.

To apply for an Accelerated Benefits Option payment, you need to make a claim on a form by calling the *GM Benefits & Services Center*.

Program Conversion Privileges

During the 31 days following cancellation of your life insurance you may convert, at your expense, all or part of your Basic Life Insurance, Optional Life Insurance and Survivor Income Benefit Insurance to an individual policy without proof of good health. Dependent Life Insurance may be converted to an individual policy only by a covered dependent or the dependent's legal guardian. Optional Life Insurance and Dependent Life Insurance may not be converted if the insurance ceases due to failure to pay the required contributions. Term insurance is not available for conversion policies.

To convert your life insurance, you should call the <u>GM Benefits & Services Center</u> immediately. MetLife will arrange for a Financial Services Representative to follow up with you and assist you and/or your dependent(s) in the application process.

The conversion privilege is not applicable to any Personal Accident Insurance and Extra Accident Insurance coverage.

Life Insurance Certificates

Certificates containing all the detailed provisions of insured benefit coverages you have under the group policies issued to GM by its insurance Carriers will be made available to you by calling the <u>GM</u> <u>Benefits & Services Center</u>.

Recovery of Benefit Overpayments

Amounts of life insurance under the Life and Disability Benefits Program will be administered in compliance with state insurance laws, that conflict with insurance policy provisions, to the extent legally required and to the extent such laws are not preempted by federal law.