

**LIFE INSURANCE COMPANY OF NORTH AMERICA
(herein called the Company)**

Amendment to be attached to and made a part of the Group Policy
A Contract between the Company and

East Texas Employee Benefits Co-op
(herein called the Policyholder)

Policy No.: SLH - 100001

PLEASE READ

IMPORTANT: The attached amendment to your policy has been made at your request, and will be effective on the date shown within the amendment. Please review this amendment immediately and confirm that it accurately reflects your request and is consistent with your intentions. If amended certificates have been provided, please review these as well. If there are any errors or discrepancies, please notify your account manager or account service representative immediately. If you have not notified your account manager or account service representative of any errors or concerns, continued payment of premium more than 31 days after delivery of this amendment will be deemed acceptance of this amendment.

LIFE INSURANCE COMPANY OF NORTH AMERICA
(herein called the Company)

Amendment to be attached to and made a part of the Group Policy
A Contract between the Company and

East Texas Employee Benefits Co-op
(herein called the Policyholder)

Policy No.: SLH - 100001

This Amendment is attached to and made part of the Policy specified above. It is subject to all of the policy provisions that do not conflict with its provisions.

The Company and the Policyholder hereby agree that the Policy is amended as follows:

1. This Amendment will be in effect on the Effective Date(s) shown below only for insured Employees in Active Service on that date. If an Employee is not in Active Service on the date his insurance would otherwise become effective, it will be effective on the date he returns to Active Service.

Effective September 1, 2020, the Elimination Period under the Schedule of Benefits for Class 1 is deleted in its entirety and is replaced by the following:

Elimination Period

For Disability Benefits, an Employee may elect one of the following options:

	<u>Accident</u>	<u>Sickness</u>
Option 1	0 days	7 days
Option 2	14 days	14 days
Option 3	30 days	30 days
Option 4	60 days	60 days

For any selected Elimination Period of 30 days or less, the Elimination Period will end on the date the Employee is admitted as an inpatient in a hospital if that date is before the end of the time period specified.

Any Employee insured under the disability plan may enroll in a plan option with a shorter Elimination Period during a subsequent open enrollment. If an Employee becomes Disabled and is subject to the Pre-Existing Condition Limitation for any period of Disability caused or contributed by, or resulting from, a Pre-Existing Condition, benefits may be paid on a limited basis as outlined in the Pre-Existing Condition Waiver provision. Once benefits have been exhausted under the Pre-Existing Condition Waiver provision they may recommence if the Elimination Period of the previously elected option and all other provisions of the disability plan are satisfied.

2. This Amendment will be in effect on the Effective Date(s) shown below only for insured Employees in Active Service on that date. If an Employee is not in Active Service on the date his insurance would otherwise become effective, it will be effective on the date he returns to Active Service.

Effective September 1, 2020, the Gross Disability Benefit under the Schedule of Benefits for Class 1 is deleted in its entirety and is replaced by the following:

Gross Disability Benefit

A percentage elected by an Employee from one of the Options listed below, subject to a maximum Benefit of \$8,000. The amount elected cannot exceed 70% of an Employee’s pre-disability income, rounded to the nearest \$100, if not already a multiple thereof.

- Option 1 30% of an Employee’s Covered Earnings
- Option 2 40% of an Employee’s Covered Earnings
- Option 3 50% of an Employee’s Covered Earnings
- Option 4 60% of an Employee’s Covered Earnings
- Option 5 70% of an Employee’s Covered Earnings

3. This Amendment will be in effect on the Effective Date(s) shown below only for insured Employees in Active Service on that date. If an Employee is not in Active Service on the date his insurance would otherwise become effective, it will be effective on the date he returns to Active Service.

Effective September 1, 2020, the Maximum Benefit Period under the Schedule of Benefits for Class 1 is deleted in its entirety and is replaced by the following:

Maximum Benefit Period

Age When Disability Begins

Under Age 63

Age 63

Age 64

Age 65

Age 66

Age 67

Age 68

Age 69 or older

Maximum Benefit Period

The later of the Employee’s SSNRA* or the date the 48th Monthly Benefit is payable, if later.

The later of the Employee’s SSNRA* or the date the 42nd Monthly Benefit is payable.

The date the 36th Monthly Benefit is payable.

The date the 30th Monthly Benefit is payable.

The date the 27th Monthly Benefit is payable.

The date the 24th Monthly Benefit is payable.

The date the 21st Monthly Benefit is payable.

The date the 18th Monthly Benefit is payable.

*SSNRA means the Social Security Normal Retirement Age in effect under the Social Security Act on the Policy Effective Date.

4. Effective September 1, 2020, the following rates will be in force for Class 1 for coverage under the Policy:

Premium Rates

All rates in the below table are per \$100 of elected Benefit.

	Elimination Period Option 1	Elimination Period Option 2	Elimination Period Option 3	Elimination Period Option 4
Gross Disability Benefit Option 1	\$2.77	\$2.16	\$1.86	\$1.69
Gross Disability Benefit Option 2	\$3.03	\$2.36	\$2.03	\$1.62
Gross Disability Benefit Option 3	\$3.25	\$2.54	\$2.18	\$1.75
Gross Disability Benefit Option 4	\$3.66	\$2.86	\$2.46	\$1.97
Gross Disability Benefit Option 5	\$3.82	\$2.98	\$2.56	\$2.05

No change in rates will be made until 36 months after the effective date of this Amendment. However, the Company reserves the right to change the rates at any time during a period for which the rates are guaranteed if the conditions described in the Changes in Premium Rates provision under the Administrative Provisions section of the Policy apply.

Except for the above, this Amendment does not change the Policy in any way.

FOR THE COMPANY



William J. Smith, President

Date: March 31, 2020

Amendment No. 05

TL-004780