

SERFF Tracking Number: META-128327706 State: Arkansas
 Filing Company: Metropolitan Life Insurance Company State Tracking Number:
 Company Tracking Number: A11-119 DH (LW)
 TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other
 Product Name: Group Life Insurance
 Project Name/Number: GCR11-21 Uprobate sp/A11-119 DH

Filing at a Glance

Company: Metropolitan Life Insurance Company

Product Name: Group Life Insurance

TOI: L08 Life - Other

Sub-TOI: L08.000 Life - Other

Filing Type: Form

SERFF Tr Num: META-128327706 State: Arkansas

SERFF Status: Closed-Approved-
Closed State Tr Num:

Co Tr Num: A11-119 DH (LW)

Authors: Sandra Bennett, Ruth
Rivera, Linda Williams

Date Submitted: 05/03/2012

State Status: Approved-Closed

Reviewer(s): Linda Bird

Disposition Date: 05/08/2012

Disposition Status: Approved-
Closed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name: GCR11-21 l/probate sp

Project Number: A11-119 DH

Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments: We are filing the
forms concurrently in all states, including New
York, our domiciliary state.

Explanation for Combination/Other:

Submission Type: New Submission

Group Market Type: Employer, Association, Discretionary, Trust, Other

Market Type: Group

Group Market Size: Small and Large

Explanation for Other Group Market Type:

Labor Union

Overall Rate Impact:

Filing Status Changed: 05/08/2012

State Status Changed: 05/08/2012

Deemer Date:

Submitted By: Linda Williams

Filing Description:

This is a Group Life Insurance Form Filing. Please see the Filing Letter for a detailed description of this filing submission.

Created By: Linda Williams

Corresponding Filing Tracking Number:

State Narrative:

Company and Contact

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Filing Contact Information

Cathy Weldon, Consultant-GRP Contracts- cweldon@metlife.com
 Dev.
 501 Route 22 908-253-1569 [Phone] 1569 [Ext]
 Bridgewater, NJ 08807 908-253-2161 [FAX]

Filing Company Information

Metropolitan Life Insurance Company CoCode: 65978 State of Domicile: New York
 MetLife Group Code: 241 Company Type: Life
 1095 Avenue of the Americas Group Name: State ID Number:
 New York, NY 10036-6796 FEIN Number: 13-5581829
 (212) 578-2211 ext. [Phone]

Filing Fees

Fee Required? Yes
 Fee Amount: \$150.00
 Retaliatory? No
 Fee Explanation: \$50.00 Per Form Submitted for Approval. (3) Forms x \$50.00 = \$150.00.
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Metropolitan Life Insurance Company	\$150.00	05/03/2012	58916152

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	05/08/2012	05/08/2012

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Disposition

Disposition Date: 05/08/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: META-128327706

State: Arkansas

Filing Company: Metropolitan Life Insurance Company

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Filing Letter		Yes
Form	Certificate Rider		Yes
Form	Policy Endorsement		Yes
Form	Policy Amendment		Yes

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Form Schedule

Lead Form Number: GCR11-21 I/probate sp

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	GCR11-21 I/probate sp	Certificate	Certificate Rider Amendmen t, Insert Page, Endorseme nt or Rider	Initial		49.000	GCR11-21 I/probate sp (Certificate Rider) - NW.pdf
	GPEND11-03 I/probate sp	Policy/Cont	Policy Endorsement tract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		54.000	GPEND11-03 I/probate sp (Policy Endorsement) - NW.pdf
	GPA11-02 I/probate sp	Policy/Cont	Policy Amendment tract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		55.000	GPA11-02 I/probate sp (Policy Amendment) - NW.pdf



Metropolitan Life Insurance Company
[200 Park Avenue, New York, New York 10166]

CERTIFICATE RIDER

Group [Policy] No.: [XXXXXX]

[Policyholder]: [AnyCompany]

Effective Date: [June 1, 2012]

[The certificate is changed as follows:]

The following statement is added to the [Schedule of Benefits]:

“[If You become insured for group supplemental life insurance coverage and You or Your Spouse die while such group supplemental life insurance coverage is in effect, a probate benefit (the “Benefit”) will be made available to Your estate in the event of Your death or to Your Spouse's estate in the event of Your Spouse's death. Such benefit will be made available through a MetLife affiliate (“Affiliate”).]

The Benefit provides for certain probate services to be made available, free of charge, by attorneys designated by [the Affiliate]. If probate services are provided by an attorney not designated by [the Affiliate], the estate of the deceased must pay for those attorney's services directly. [Upon Proof of such payment,] the estate of the deceased will be reimbursed for the attorney's services in an amount equal to the lesser of the amount such estate paid for the attorney's services [and the amount customarily reimbursed for such services by the Affiliate].

This Benefit will be provided at no cost to You [and will end on the date Your group supplemental life insurance coverage ends.]”

The Effective Date of this rider is the later of the Effective Date shown above or Your Original Effective Date shown in [the Schedule of Benefits].

This rider is to be attached to and made a part of the Certificate.



Metropolitan Life Insurance Company
[200 Park Avenue, New York, New York 10166]

[POLICY] ENDORSEMENT

Group [Policy] No.: [XXXXXX]

[Policyholder]: [ABC Company]

Effective Date: [June 1, 2012]

Metropolitan Life Insurance Company ("MetLife"), a stock company, issues this endorsement to change the above referenced [policy] as follows:

- Issue Certificate rider GCR11-21 I/probate sp [and add such Certificate rider to EXHIBIT 2, CERTIFICATE FORMS]; and
- Add the following [policy] provision:

["MetLife and the Policyholder have agreed that a MetLife affiliate ("Affiliate") shall make a probate benefit ("Benefit") available to the estate of each Employee who elects group supplemental life insurance coverage and to the estate of such Employee's Spouse when either the Employee or Spouse dies while such group supplemental life insurance coverage is in effect. This Benefit will be made available at no cost to the Policyholder or to such Employees."]

This endorsement is to be attached to and made a part of the policy. This endorsement is subject to the terms and provisions of the policy.

[Steven A. Kandarian
President and Chief Executive Officer]



Metropolitan Life Insurance Company
[200 Park Avenue, New York, New York 10166]

[POLICY] AMENDMENT

Group [Policy] No.: [XXXXX]

[Policyholder]: [ABC Company]

Effective Date: [June 1, 2012]

Metropolitan Life Insurance Company ("MetLife"), a stock company, hereby amends the above referenced [policy] as follows:

- Issue Certificate rider GCR11-21 l/probate sp [and add such Certificate rider to EXHIBIT 2, CERTIFICATE FORMS]; and
- Add the following [policy] provision:

["MetLife and the Policyholder have agreed that a MetLife affiliate ("Affiliate") shall make a probate benefit ("Benefit") available to the estate of each Employee who elects group supplemental life insurance coverage and to the estate of such Employee's Spouse when either the Employee or Spouse dies while such group supplemental life insurance coverage is in effect. This Benefit will be made available at no cost to the Policyholder or to such Employees."]

This amendment is to be attached to and made a part of the [policy]. This amendment is subject to the terms and provisions of the [policy].

To be completed by the [Policyholder]:

Signed at: _____
(City) (State)

Date: _____

(Signature of [Policyholder's] Authorized Representative)

(Print Name and Title of Authorized Representative)

(Signature of Witness)

(Print Name of Witness)]

To be completed by Metropolitan Life Insurance Company:

Signed at: _____
(City) (State)

Date: _____

(Signature of Registrar)

[Steven A Kandarian
President and Chief Executive Officer]

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Supporting Document Schedules

	Item Status:	Status Date:
<p>Satisfied - Item: Flesch Certification Comments: Attached are the required Certifications. Attachments: ARCERTREAD.pdf ARCERTREG19.pdf</p>		
<p>Bypassed - Item: Application Bypass Reason: Not Applicable. Comments:</p>		
<p>Satisfied - Item: Filing Letter Comments: Attached is the Filing Letter with a detailed description of this filing submission. Attachment: A11-119 Spousal ERS letter - AR.pdf</p>		



Metropolitan Life Insurance Company
NAIC Company Number: 65978
NAIC Group Number: 241

ARKANSAS FLESCH CERTIFICATION

I certify that the form shown below has achieved the Flesch Reading Ease Score shown below and complies with the requirements of Ark. Stat. Ann. Section 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

Form No.	Form Description	Flesch Score
GCR11-21 I/probate sp	Certificate Rider	53.0
GPEND11-03 I/probate sp	Group Policy Endorsement	54.0
GPA11-02 I/probate sp	Group Policy Amendment	55.0

Michael F. Tietz
Vice President



Metropolitan Life Insurance Company
NAIC Company Number: 65978
NAIC Group Number: 241

ARKANSAS CERTIFICATION
Rule and Regulation 19
Unfair Sex Discrimination in the Sale of Insurance

I certify that this submission meets the provisions of Rule and Regulation 19, and all applicable requirements of the Arkansas Department of Insurance.

A handwritten signature in black ink, appearing to read "Michael F. Tietz".

Michael F. Tietz
Vice President

Metropolitan Life Insurance Company
501 U.S. Highway 22 West, Area 02C
Bridgewater Township, NJ 08807
Tel 908 253-1569 Fax 908 253-2528
cweldon@metlife.com



Cathy Weldon
Consultant
Insurance Products Contracts

May 3, 2012

Arkansas Department of Insurance
1200 West 3rd Street
Little Rock, Arkansas 72201-1904

Re: A11-119 DH
Group Life Insurance
Our NAIC Company No. 241 - 65978
Our FEIN -13-5581829

Dear Sir/Madam:

We enclose for filing final printed copies of the group insurance forms described below. These forms are new and do not replace any forms previously filed with the Department.

MetLife provides, as an additional service to the individual insureds of policyholders who offer certain plans of group life insurance, a probate service. This service is insured under a policy of Group Legal Services Insurance issued by Metropolitan Property and Casualty Insurance Company, a Rhode Island Corporation, and administered through Hyatt Legal Plans, Inc., an affiliate of Metropolitan Property and Casualty Insurance Company. We had previously filed forms for the purpose of disclosing the probate service to plan participants, which were approved by your Department on 04/21/2008 (File No. 38661). The forms we are filing here are for the purpose of disclosing when such service is available to the estate of the certificateholder and/or to the estate of the certificateholder's spouse. The cost of these services will continue to be borne by MetLife.

An additional filing of new Group Legal Services policy and certificate forms will be made with your Department under separate cover.

Form No.	Description
GCR11-21 l/probate sp	Certificate Rider discloses the availability of the probate service to the certificateholder when such service is available to the estate of the certificateholder and / or to the estate of the certificateholder's spouse. This Certificate Rider may be used in conjunction with any group life insurance certificate forms approved by your Department including: <ul style="list-style-type: none">• Group Certificate Series G.23000 which was approved by your department on February 14, 1984; and• Group Certificate Series GCERT2000 which was approved by your department on July 24, 2001.

Text which is subject to variation has been enclosed in brackets.

A11-119 DH

GPEND11-03
I/probate sp

Group Policy Endorsement form adds Certificate Rider **GCR11-21** I/probate sp to the policy and discloses the availability of the probate service to the Policyholder when such service is available to the estate of the certificateholder and / or to the estate of the certificateholder's spouse.

This group policy endorsement may be used in conjunction with any group policy forms approved by your Department including:

- Group Policy Form G.2130-S which was approved by your department on March 21, 1979; and
- Group Policy Form GPNP99 which was approved by your department on April 28, 1999.

Text which is subject to variation has been enclosed in brackets.

GPA11-02
I/probate sp

Group Policy Amendment form adds Certificate Rider **GCR11-21** I/probate sp to the policy and to disclose the availability of the probate service to the Policyholder, when such service is available to the estate of the certificateholder and / or to the estate of the certificateholder's spouse.

This group policy amendment may be used in conjunction with any group policy forms approved by your Department including:

- Group Policy Form G.2130-S which was approved by your department on March 21, 1979; and
- Group Policy Form GPNP99 which was approved by your department on April 28, 1999.

Text which is subject to variation has been enclosed in brackets.

Additional Information

These forms are designed to be issued in conjunction with any eligible group with the exception of creditors groups.

We request the right to have the option to incorporate the contents of the attached group policy amendment or endorsement into the policy form and the attached certificate rider into the certificate form.

The enclosed forms may be translated into a language other than English. Any such translation will be performed by a professional translation service, and we will obtain certification from such service that the form, as translated, is an accurate representation of the English language version. The non-English version of the certificate form will include a disclosure in the foreign language indicating that the non-English version is a translation of an English language form, and that in any conflict that may arise between the English and translated versions, the English language version of the form will control.

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The officer signing below certifies that the enclosed forms achieve a Flesch Reading Ease Score of:

Form No.	Readability Score
GCR11-21 I/probate sp	53
GPEND11-03 I/probate sp	54
GPA11-02 I/probate sp	55

We enclose the required filing fee.

The enclosed forms will not be marketed with an illustration.

The enclosed forms are being concurrently filed in all states.

The enclosed forms do not impact rates.

Please direct any questions, comments or correspondence regarding this filing to me. My telephone and fax numbers and e-mail address appear in the letterhead above. I look forward to hearing from you.

Very Truly Yours,



Cathy Weldon
Consultant



Michael F. Tietz
Vice President