

Massachusetts Mutual Life Insurance Company
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(800)272-2216

**DISABILITY INCOME PROTECTION COVERAGE
FOR NON-CANCELABLE POLICY**

OUTLINE OF COVERAGE

This brief Outline of Coverage tells some of the main features of Your Policy. This is not the Policy. The Policy describes Your rights and Ours. Only the terms of the Policy will control.

READ YOUR POLICY WITH CARE

Disability Income Protection Coverage

This Policy provides certain benefits if the Insured is Disabled. The Insured's Disability must be caused by an Injury or Sickness covered by the Policy. We will not cancel this Policy, change its terms or increase the premiums. As long as the premiums are paid on time, We will continue coverage until the Expiration Date. The Policy also sets forth certain limits.

Benefits of this Policy

Regardless of the Maximum Benefit Period described below for all Policy and Rider Coverages, the Maximum Benefit Period is 24 months for each period of Disability caused or contributed to by a Mental Disorder.

1. **Definition of Total Disability.** The Insured is Totally Disabled if he/she cannot perform the main duties of his/her Occupation and is not working at any other occupation due to Sickness or Injury. The Insured must be under a Doctor's care. The Disability must begin while the Policy is In Force.
- 1a. **Total Disability Benefit.** We will make payments as long as the Insured is Totally Disabled. But we will pay only up to the Maximum Benefit Period.

For Coverage with Simplified Underwriting:

Monthly Benefit	Maximum Benefit Period	Waiting Period	Premium
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For Coverage with Full Underwriting:

Monthly Benefit	Maximum Benefit Period	Waiting Period	Premium
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2. **Waiver of Premium.** The Insured must be Disabled for 90 days, then We will waive payment of premiums as long as the Insured remains Disabled. We will refund any premium paid during the 90 day period before the Insured qualified for benefits.

3. **Optional Benefits.** (Your Policy provides the optional benefits shown below.)

CS. Short Term. This Rider will provide Disability benefits for a short period of time.

For Coverage with Simplified Underwriting:

Monthly Benefit	Maximum Benefit Period	Waiting Period	Premium
Monthly Benefit	Maximum Benefit Period	Waiting Period	

For Coverage with Full Underwriting:

Monthly Benefit	Maximum Benefit Period	Waiting Period	Premium
Monthly Benefit	Maximum Benefit Period	Waiting Period	

ES. Group Supplement. This rider will provide Disability benefits to supplement employer provided disability benefits and disability benefits from any other source by adding benefits to Your Disability Income Policy.

For Coverage with Simplified Underwriting:

Coverage Monthly Benefit	Maximum Benefit Period	Waiting Period	Premium
Coverage Monthly Benefit	Maximum Benefit Period	Waiting Period	

For Coverage with Full Underwriting:

Coverage Monthly Benefit	Maximum Benefit Period	Waiting Period	Premium
Coverage Monthly Benefit	Maximum Benefit Period	Waiting Period	

FS. Future Insurability Option. This rider will provide the opportunity to apply for additional benefits during the Option Periods without proof of the Insured's Good Health (other than the proof that the Insured is not Disabled) or the nature of his/her occupation. This rider does not apply to coverage under the RetireGuard rider.

For Coverage with Simplified Underwriting:

Monthly Benefit			Premium
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For Coverage with Full Underwriting:

Monthly Benefit

Premium

KS. Cost of Living. This rider will provide benefit increases based on 3% of Your Monthly Benefit while the Insured is Disabled. This rider does not apply to coverage under the RetireGuard rider.

For Coverage with Simplified Underwriting:

Monthly Benefit

Premium

For Coverage with Full Underwriting:

Monthly Benefit

Premium

QS. Automatic Additional Benefit Increase. This rider will provide the opportunity to add additional benefits automatically to Your Policy on each Policy Anniversary without Proof of Good Health providing the Insured is not Disabled.

PS. Partial Disability. This Rider will provide 50% of the base benefit for up to 6 months if the Insured is Disabled throughout the full Waiting Period, and has been Totally Disabled for at least 30 days during the Waiting Period. However, Partial Disability Benefits will not be paid beyond the Maximum Benefit Period for Total Disability under the Policy. The Insured is Partially Disabled if he/she:

- is suffering from a current Disability;
- is working at his/her Occupation;
- can do some, but not all of the main duties of his/her Occupation, or can work at his/her Occupation no more than one-half the hours worked before becoming Disabled; and
- is under a Doctor's Care.

For Coverage with Simplified Underwriting:

Monthly Benefit

Premium

For Coverage with Full Underwriting:

Monthly Benefit

Premium

EPS. Extended Partial Disability. This Rider will provide for payment of benefits if the Insured is Partially Disabled. Partial Disability benefits will not be paid beyond the Maximum Benefit Period for Total Disability under the Policy. Partial Disability is defined in the Rider.

For Coverage with Simplified Underwriting:

Monthly Benefit

Premium

For Coverage with Full Underwriting:

Monthly Benefit

Premium

SIR. Social Insurance Rider. This Rider provides a monthly benefit for Disability of the Insured without duplicating benefits that may be provided by social insurance programs. The amount of the Rider benefit will be reduced by the amount of benefits payable by all social insurance programs for that month.

For Coverage with Simplified Underwriting:

Monthly Benefit	Maximum Benefit Period	Waiting Period	Premium
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For Coverage with Full Underwriting:

Monthly Benefit	Maximum Benefit Period	Waiting Period	Premium
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RG. RetireGuard Rider. This Rider provides Total Disability benefits if the Insured becomes Totally Disabled. There are optional Cost of Living Adjustment (COLA) and Future Insurability Option (FIO) benefits under this Rider. The COLA and FIO benefit options allow the Insured to increase the amount of Monthly Benefit under this Rider.

For Coverage with Simplified Underwriting:

Monthly Benefit *****	Maximum Benefit Period	Waiting Period	Premium
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For Coverage with Full Underwriting:

Monthly Benefit *****	Maximum Benefit Period	Waiting Period	Premium
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For COLA Optional Benefit under RetireGuard:

For Coverage with Simplified Underwriting:

Monthly Benefit			Premium
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For Coverage with Full Underwriting:

Monthly Benefit			Premium
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For FIO Optional Benefit under RetireGuard:

For Coverage with Simplified Underwriting:

Monthly Benefit			Premium
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For Coverage with Full Underwriting:

Monthly Benefit			Premium
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OOC. Own Occupation Rider. This Rider provides for a benefit to be paid if the Insured has a condition caused by a Sickness or Injury in which the Insured:

- cannot perform the main duties of his/her Occupation;
- is working in another occupation;
- must be under a Doctor's Care; and

- the Disability must begin while the Rider is In Force.

For Coverage with Simplified Underwriting:

Monthly Benefit	Maximum Benefit Period	Waiting Period	Premium
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For Coverage with Full Underwriting:

Monthly Benefit	Maximum Benefit Period	Waiting Period	Premium
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Monthly Benefit payments under the Own Occupation Rider will be in lieu of any Monthly Benefit under the Extended Partial Disability Benefits Rider equal to the Monthly Benefit for the Own Occupation Rider shown in the Policy Specifications. We will evaluate eligibility for Monthly Benefits under the Extended Partial Disability Benefits Rider for the amount, if any, that exceeds the Monthly Benefit of the Own Occupation Rider.

Conditions For Renewal

This Policy may be renewed on the Policy Anniversary that falls on or next following the Insured's 65th birthday. Renewal is conditional for one-year periods on each Policy Anniversary Date up to the Insured's 75th birthday. This Policy Anniversary Date is also the Renewal Date.

This Policy may be renewed if the Insured:

- Is not Disabled; and
- Is Actively At Work; and
- Qualifies financially, based on Our Published Underwriting Limits in effect at the time of renewal.

Premiums at renewal are based on the Insured's Attained Age and rates in effect at the time of renewal.

Exceptions, Reductions and Limits of this Policy

This Policy does not provide any benefit for any Disability:

- While the Insured is imprisoned. Also, this time does not apply for completion of the Waiting Period.
- Caused by war while the Insured is in the military forces of any country at war or in any civilian non-combatant unit serving with those forces. "War" includes declared or undeclared war or any act of war. "Country" includes any international organization or group of countries.
- Caused by any intentionally, self-inflicted injury.
- Sustained during the Insured's commission of, or attempt to commit, a felony under local, state or federal law.
- Due to the suspension, revocation or surrender of the Insured's professional or occupational license or certification.
- Caused by, or contributed to by, or resulting from a Pre- Existing Condition, unless You have been insured under the Policy for a period of 12 consecutive months after the Effective Date.

See the Policy to determine if the Limitation of Pre-Existing Conditions applies. See the policy for the definition of Pre- Existing Condition.

We may suspend this Policy if the Insured enters active military service for 90 days or more. If the Insured is released from active duty within 5 years, You may restore coverage within 90 days of the Insured's release. We will not require Proof of Insurability.

(Please sign and release next page)

Massachusetts Mutual Life Insurance Company

I certify that ALL 6 PAGES of the required Outline of Coverage Form OME-12(CT) were delivered to and read by the applicant _____, at the time the application was completed.

Date of Application

Soliciting Agent

Signature of Insured

(This certification must accompany the application when sent to the Home Office)