



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

CERTIFICATE RIDER

Group Policy No.: 144072-1-G
Policyholder: Katy Independent School District
Effective Date: January 1, 2011

The Dental Certificate for Full-Time Active and Retired Employees is changed as follows:

1. In **DEFINITIONS**, replace **Child** with the following:

“Child means the following:

Your natural or adopted child; Your stepchild; or a child who resides with and is fully supported by You; and who, in each case, is under age 26 and unmarried. The term also includes Your grandchild who is under age 26 unmarried, and who was able to be claimed by You as a Dependent for Federal Income Tax purposes at the time You applied for Dental Insurance.

A child will be considered Your adopted child during the period You are party to a suit in which You are seeking the adoption of the child.

If You provide Us notice, a Child also includes a child for whom You must provide Dental Insurance due to a Qualified Medical Child Support Order as defined in the United States Employee Retirement Income Security Act of 1974 as amended.

The term does not include any person who is insured under the Group Policy as an employee.”

2. In **DENTAL INSURANCE: DESCRIPTION OF COVERED SERVICES**, replace **Orthodontic Covered Services** with the following:

“Orthodontic Covered Services

Orthodontia for You, Your Spouse, and Your Children up to age 26.”

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