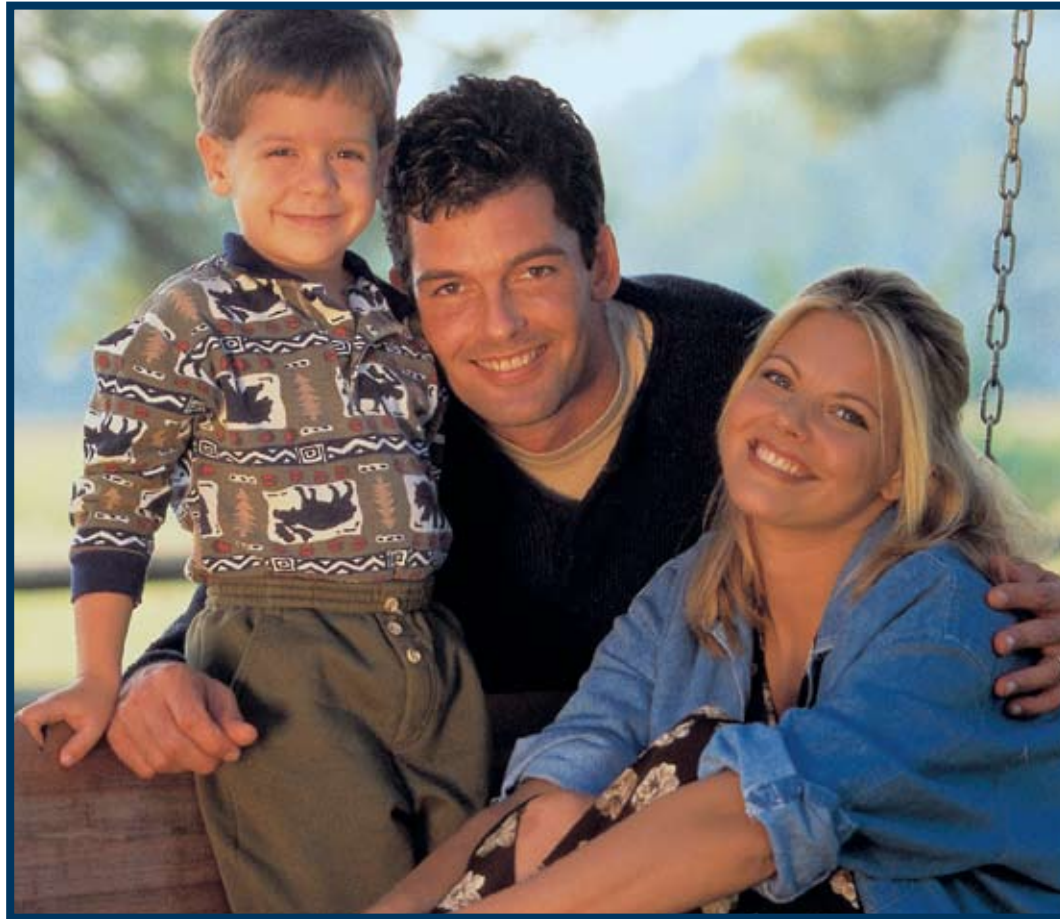


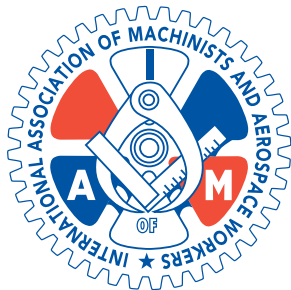
Custom Choices



Worksite Benefits

Catastrophic Loss Coverage

Protection for an Unexpected Loss of Independence



**Developed for the International
Association of Machinists and
Aerospace Workers**

Boston Mutual Worksite Insurance

We often take for granted the simple activities of our daily lives such as dressing, eating and bathing. Would you be surprised to learn that a person age 45 today has a 31% chance of being unable to perform two or more activities of daily living for more than 90 days? *

Boston Mutual's Catastrophic Loss coverage is designed to help provide financial assistance should you lose (*either temporarily or permanently*), the ability to care for yourself. There is no requirement that you be confined in a Nursing Home, Assisted Living Facility or receiving Home Health Care!

BENEFITS

This coverage provides a monthly benefit of \$1,000, \$2,000 or \$3,000 payable to you for up to 12, 24 or 36 months after you have satisfied the 90 day elimination period and continue to qualify for benefits. The benefits paid under this coverage will not reduce the face amount of your life insurance coverage with us.

You qualify for benefits when you:

- are unable to perform 2 or more activities of daily living (*Bathing, Transferring, Dressing, Toileting, Eating and Continence*)
- are under the regular care and attendance of a Physician and
- have satisfied the elimination period.

The diagnosis of this loss must occur after the effective date of this coverage.

When the Payor Waiver of Premium and Strike Waiver of Premium Rider is added to your Boston Mutual life insurance coverage, the premiums for this Catastrophic Loss Rider will also be waived under the same terms.

ELIGIBILITY

You and your spouse can purchase this rider as long as you are eligible and apply for the Boston Mutual life insurance policy this rider will be attached to. The total face amount of any Boston Mutual life insurance coverage you have with us (*including the new policy you are applying for*) will help determine how much Catastrophic Loss coverage you can purchase.

LIMITATIONS & EXCLUSIONS

Pre-Existing Conditions-Limitations: Benefits will not be payable for any pre-existing conditions during the first six (6) months this coverage is in force. A **Pre-Existing Condition** means an Injury or Sickness for which, during a six-month period immediately preceding the Effective Date of this coverage, You have 1) received a diagnosis or advice from a Physician; 2) received treatment; 3) incurred expenses; or 4) taken prescription drugs.

Exclusions: This benefit is not payable for any Catastrophic Loss which is due to 1) an intentionally self-inflicted injury while sane or insane; 2) active participation in a riot; 3) commission of a felony; 4) war, declared or undeclared or any act of war, while serving in the military or any auxiliary unit thereto; 5) a Pre-Existing Condition, except as provided for under the Pre-Existing Condition Limitation; 6) the voluntary use of alcohol or any controlled substance (*as defined in Title II of the Comprehensive Drug Abuse and Prevention and Control Act of 1970 and all amendments*) unless prescribed by a Physician. No benefits are payable during any period in which You are incarcerated. In addition, no benefits are payable to You for any period of thirty (30) or more consecutive days during which You are outside of the United States, its territories or possessions, Canada or Mexico.

Exclusions vary slightly in the states of AL, DC & SD. Please refer to the Rider for specific policy language.

* Statistics compiled by DaVinci Consulting Group, LLC 9/2009

CATASTROPHIC LOSS RIDER - OPTIONAL RATES

Rider Form: CATLOSS - Rider 8/09 – Weekly Premium Rates for 90-Day Elimination Period

	12-Month Maximum Benefit Period			24-Month Maximum Benefit Period			36-Month Maximum Benefit Period		
Monthly Benefit	\$1,000	\$2,000	\$3,000	\$1,000	\$2,000	\$3,000	\$1,000	\$2,000	\$3,000
Minimum ELO Face Amount In Force to Qualify	\$8,000	\$10,000	\$15,000	\$10,000	\$20,000	\$30,000	\$15,000	\$30,000	\$50,000
<u>AGE</u>									
18 - 25	\$0.19	\$0.38	\$0.57	\$0.30	\$0.59	\$0.89	\$0.37	\$0.74	\$1.10
26	\$0.20	\$0.40	\$0.61	\$0.32	\$0.64	\$0.96	\$0.40	\$0.80	\$1.20
27	\$0.22	\$0.43	\$0.65	\$0.34	\$0.68	\$1.02	\$0.43	\$0.86	\$1.29
28	\$0.23	\$0.46	\$0.69	\$0.37	\$0.73	\$1.10	\$0.46	\$0.91	\$1.37
29	\$0.24	\$0.49	\$0.73	\$0.39	\$0.78	\$1.16	\$0.49	\$0.97	\$1.46
30	\$0.26	\$0.52	\$0.78	\$0.41	\$0.82	\$1.24	\$0.52	\$1.03	\$1.55
31	\$0.27	\$0.55	\$0.82	\$0.44	\$0.87	\$1.31	\$0.55	\$1.10	\$1.64
32	\$0.29	\$0.57	\$0.86	\$0.46	\$0.92	\$1.38	\$0.58	\$1.16	\$1.73
33	\$0.30	\$0.60	\$0.90	\$0.48	\$0.97	\$1.45	\$0.61	\$1.21	\$1.82
34	\$0.32	\$0.63	\$0.95	\$0.51	\$1.01	\$1.52	\$0.64	\$1.27	\$1.91
35	\$0.33	\$0.66	\$0.99	\$0.53	\$1.06	\$1.59	\$0.67	\$1.33	\$2.00
36	\$0.36	\$0.72	\$1.08	\$0.58	\$1.16	\$1.74	\$0.73	\$1.46	\$2.19
37	\$0.39	\$0.78	\$1.18	\$0.63	\$1.26	\$1.89	\$0.80	\$1.59	\$2.39
38	\$0.42	\$0.85	\$1.27	\$0.68	\$1.36	\$2.04	\$0.86	\$1.72	\$2.58
39	\$0.46	\$0.91	\$1.37	\$0.73	\$1.46	\$2.19	\$0.93	\$1.85	\$2.78
40	\$0.49	\$0.98	\$1.47	\$0.78	\$1.56	\$2.34	\$0.99	\$1.98	\$2.97
41	\$0.52	\$1.04	\$1.56	\$0.83	\$1.66	\$2.50	\$1.05	\$2.10	\$3.16
42	\$0.55	\$1.10	\$1.65	\$0.88	\$1.77	\$2.65	\$1.12	\$2.23	\$3.35
43	\$0.58	\$1.17	\$1.75	\$0.93	\$1.87	\$2.80	\$1.18	\$2.36	\$3.54
44	\$0.61	\$1.23	\$1.84	\$0.99	\$1.97	\$2.95	\$1.25	\$2.49	\$3.74
45	\$0.65	\$1.29	\$1.94	\$1.03	\$2.07	\$3.10	\$1.31	\$2.62	\$3.93
46	\$0.72	\$1.45	\$2.17	\$1.16	\$2.32	\$3.48	\$1.47	\$2.94	\$4.41
47	\$0.80	\$1.60	\$2.40	\$1.29	\$2.57	\$3.85	\$1.63	\$3.26	\$4.89
48	\$0.88	\$1.75	\$2.63	\$1.41	\$2.82	\$4.23	\$1.79	\$3.57	\$5.36
49	\$0.95	\$1.91	\$2.86	\$1.53	\$3.07	\$4.60	\$1.95	\$3.89	\$5.84
50	\$1.03	\$2.06	\$3.09	\$1.66	\$3.33	\$4.99	\$2.11	\$4.21	\$6.32
51	\$1.11	\$2.21	\$3.32	\$1.79	\$3.57	\$5.36	\$2.27	\$4.53	\$6.80
52	\$1.18	\$2.37	\$3.55	\$1.91	\$3.83	\$5.74	\$2.43	\$4.85	\$7.28
53	\$1.26	\$2.52	\$3.78	\$2.04	\$4.08	\$6.11	\$2.58	\$5.17	\$7.75
54	\$1.34	\$2.67	\$4.01	\$2.16	\$4.33	\$6.49	\$2.74	\$5.49	\$8.23
55	\$1.41	\$2.83	\$4.24	\$2.29	\$4.58	\$6.87	\$2.90	\$5.80	\$8.71
56	\$1.62	\$3.24	\$4.86	\$2.63	\$5.25	\$7.88	\$3.33	\$6.66	\$9.99
57	\$1.83	\$3.65	\$5.48	\$2.96	\$5.93	\$8.89	\$3.76	\$7.51	\$11.27
58	\$2.03	\$4.06	\$6.10	\$3.30	\$6.60	\$9.89	\$4.18	\$8.37	\$12.55
59	\$2.24	\$4.47	\$6.71	\$3.63	\$7.27	\$10.90	\$4.61	\$9.22	\$13.84
60	\$2.44	\$4.89	\$7.33	\$3.97	\$7.95	\$11.92	\$5.04	\$10.08	\$15.12
61	\$2.65	\$5.30	\$7.95	\$4.31	\$8.62	\$12.93	\$5.47	\$10.93	\$16.40
62	\$2.86	\$5.71	\$8.57	\$4.65	\$9.29	\$13.94	\$5.90	\$11.79	\$17.69
63	\$3.06	\$6.12	\$9.19	\$4.98	\$9.97	\$14.95	\$6.32	\$12.65	\$18.97
64	\$3.27	\$6.54	\$9.80	\$5.32	\$10.64	\$15.96	\$6.75	\$13.50	\$20.25
65	\$3.47	\$6.95	\$10.42	\$5.66	\$11.31	\$16.97	\$7.18	\$14.35	\$21.53
66	\$3.68	\$7.36	\$11.04	\$5.99	\$11.99	\$17.98	\$7.61	\$15.21	\$22.82
67	\$3.89	\$7.77	\$11.66	\$6.33	\$12.66	\$18.99	\$8.03	\$16.06	\$24.09
68	\$4.09	\$8.18	\$12.28	\$6.67	\$13.33	\$20.00	\$8.46	\$16.92	\$25.38
69	\$4.30	\$8.59	\$12.89	\$7.00	\$14.01	\$21.01	\$8.89	\$17.78	\$26.66
70	\$4.50	\$9.01	\$13.51	\$7.34	\$14.68	\$22.02	\$9.32	\$18.63	\$27.95

The premium for this Rider will be added to the Boston Mutual life insurance premium for calculating the Payor Waiver/Strike Waiver premium.

Benefits are subject to the limitations and provisions shown in the policy and rider. This brochure provides a general description of the important features of the CATLOSS-Rider 8/09. This brochure is not the insurance contract and only the actual provisions will control. This rider is not a Long-Term Care or Disability Income product.

“Custom Choices Worksite Benefits” is a marketing name used for the employee worksite benefit programs presented and enrolled by Employee Benefit Systems, Inc. and is not the name of the products being offered under this name by the respective underwriting companies.

Underwritten and Administered by:

Boston Mutual Life Insurance Company

120 Royall Street • Canton, MA 02021
Toll Free 1-877-624-2249



Presented and Enrolled by:

Employee Benefit Systems, Inc.

P.O. Box 2489 • Houston, TX 77252
1-888-521-2900