



The Group Legal Services Plan

Effective 1/1/25

The JPMorgan Chase Group Legal Services Plan (the “Group Legal Services Plan” or “Plan”), offers you and your family access to an affordable network of attorneys in the United States. The Plan provides coverage for attorney fees for routine legal services related to personal or family legal issues. Most services authorized by the Plan are covered at 100% when you use network attorneys. A reimbursement schedule applies to fees charged by out-of-network attorneys.

This section of the Guide will provide you with a better understanding of how coverage under the Group Legal Services Plan works, including how and when benefits are paid.

Be sure to see important additional information about the Plan, in the sections titled About This Guide, What Happens If... and Plan Administration.

Questions?

If you still have questions after reviewing this Guide, there are a number of resources that can provide answers. As a first stop for the Group Legal Services Plan, contact the claims administrator:

MetLife Legal Plans

(800) 821-6400

Representatives are available from 8 a.m. to 8 p.m. Eastern Time, Monday – Friday.

For additional resources, consult the *Contacts* section.

Additional Legal Support

In addition to the Group Legal Services described in this Guide, you have access to certain free or discounted legal services through LifeCare. For more information on the legal services offered through LifeCare, go to go/lifecare.

About This Summary Plan Description

This section is the summary plan description (SPD) and the plan document for the JPMorgan Chase Group Legal Services Plan. Please retain this section for your records. Other sections may also constitute the complete SPD/plan document, including the *Plan Administration* section.

This summary does not include all of the details contained in the applicable insurance contracts, if any. For plans that are funded through insurance, if there is a discrepancy between the insurance contract and the SPD/plan document, the insurance contract will control.

The JPMorgan Chase U.S. Benefits Program is available to most employees on a U.S. payroll who are regularly scheduled to work 20 hours or more a week and who are employed by JPMorgan Chase & Co. or one of its subsidiaries to the extent that such subsidiary has adopted the JPMorgan Chase U.S. Benefits Program. This information does not include all of the details contained in the applicable insurance contracts, plan documents, and trust agreements. If there is any discrepancy between this information and the governing documents, the governing documents will control. JPMorganChase expressly reserves the right to amend, modify, reduce, change, or terminate its benefits and plans at any time. The JPMorgan Chase U.S. Benefits Program does not create a contract or guarantee of employment between JPMorganChase and any individual. JPMorganChase or you may terminate the employment relationship at any time.

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Legal Services Plan Highlights

Benefits of Participating

The Plan offers you and your family access to an affordable network of attorneys for routine legal services related to personal and family legal issues.

Most services are covered at 100% when you use in-network attorneys. In-network services are available only in the continental United States, U.S. Virgin Islands, Puerto Rico and Hawaii.

A reimbursement schedule applies to fees charged by out-of-network attorneys.

Attorneys will only provide services for U.S.-related issues.

Covered Services

Covered services include all of the following:

- Advice and consultation;
- Consumer protection;
- Identity Theft;
- Defense of civil lawsuits;
- Document preparation and review;
- Family law;
- Immigration;
- Real estate matters;
- Traffic and criminal matters; and
- Wills and estate matters.

Please see “What Is Covered” on page 8 for details of covered services.

Pre-Existing Legal Matters Excluded

Any legal matter for which an attorney-client relationship existed prior to you joining the Plan will be excluded, and no benefits will apply.

Who’s Covered?

If you enroll for coverage, the Plan provides coverage for you, your spouse and dependents who are eligible and qualify for the JPMorgan Chase Medical Plan coverage (your spouse or domestic partner and your children under age 26). For more details, see “Your Eligible Dependents” in the *Health Care Participation* section of this Guide.

Costs

You pay the full cost of your coverage on an after-tax basis. There is a flat rate for coverage — your cost per pay period is the same regardless of how many dependents are covered with you. For more details, see “Cost of Coverage” on page 5.

Enrolling and Changing Coverage

Enrolling: You can only enroll for coverage during Annual Benefits Enrollment or when you first become eligible (generally, as a newly hired employee or due to a work status change). Because there is one contribution level for the Group Legal Services Plan coverage, your cost for coverage does not increase if you add dependents (e.g., if you marry, add a domestic partner, or have a baby, they will be considered covered as of the date of the event).

Changing Coverage: You may not drop coverage during the plan year. You can only make changes to your coverage during Annual Benefits Enrollment (usually held in the fall of each year for the following year's participation). Midyear changes due to a Qualified Status Change (QSC) are not permitted under this Plan. When you enroll, your participation is in effect through December 31 and you may not stop participating unless you are no longer eligible due to a work status change.

Claims Administrator

The Plan's claims administrator is MetLife Legal Plans.

Participating in the Plan

Who's Eligible?

In general, you are eligible to participate if you are:

- Employed by JPMorgan Chase & Co., or one of its subsidiaries that has adopted the Plan, on a U.S. payroll and you are subject to FICA taxes;
- Paid hourly, salary, draw, commissions, or production overrides;
- Regularly scheduled to work 20 or more hours per week; and

Who's Not Eligible?

An individual who does not meet the criteria under "Who's Eligible?," as well as an individual classified or employed in a work status other than as a common law salaried employee by his or her employer is not eligible for the Plan regardless of whether an administrative or judicial proceeding subsequently determines this individual to have instead been a common law salaried employee.

Examples of such individuals include an:

- Independent contractor/agent (or its employee);
- Intern; and/or
- Occasional/seasonal, leased, or temporary employee.

When You Become Eligible

Employees are eligible to participate in the Group Legal Plan as follows:

- If you are a full-time employee (regularly scheduled to work 40 hours per week), you are eligible to join the Plan on your date of hire.
- If you are a part-time employee (regularly scheduled to work at least 20 but less than 40 hours per week), you are eligible to join the Plan on the first of the month after 60 days from your date of hire.

Who's Covered?

If you, the JPMorganChase employee, enroll in the Plan, the Plan automatically covers you, your spouse/domestic partner, and all eligible children that are eligible and qualify for coverage under the JPMorgan Chase Medical Plan. For details about your eligible dependents, please see "Your Eligible Dependents" in the *Health Care Participation* section of this Guide.

An Important Note About Your Coverage

If you and your spouse/domestic partner both work at JPMorganChase and if one of you enrolls in the Group Legal Services Plan, the other will automatically be covered. However, in cases involving a dispute between you and your spouse/domestic partner, only the employee enrolled in coverage (and paying for the coverage through payroll deductions) will be eligible for benefits. If you and your spouse/domestic partner enroll separately, you cannot be covered as dependents under one another's coverage.

Cost of Coverage

You pay the entire cost for coverage under the Plan with after-tax contributions. Your cost is the same regardless of how many dependents are covered under the Plan.

Your contributions toward the cost of coverage start when your coverage begins. (Please see "When Coverage Begins" on page 6 for more information.) Your contributions are automatically deducted from your pay.

If you have coverage but are away from work because of an unpaid sickness or leave of absence, you will pay for coverage on an after-tax basis through direct-billing with JPMorganChase's administrator.

How to Enroll

You can only enroll for coverage when you first become eligible (generally, as a newly hired employee) or during Annual Benefits Enrollment. Unlike other JPMorganChase benefits, you cannot enroll, change, or cancel your coverage during the year, even if you have a Qualified Status Change (QSC). Participation in the Plan is optional. You must enroll to have coverage.

If you want to enroll, the process varies, depending on whether you are a:

- Current, eligible employee, enrolling during Annual Benefits Enrollment;
- Newly hired employee; or
- Newly eligible employee (because of a change in work status).

Enrolling if You Are an Employee

You'll receive information on Plan benefits as well as instructions on enrolling during Annual Benefits Enrollment. You make your elections through the Benefits Web Center on **My Health** or contact 1-844-ASK-JPMC.

Elections you make during Annual Benefits Enrollment are effective the following January 1.

You need to consider your choice carefully, as you can't change or cancel your choice during the year, even if you have a Qualified Status Change (QSC).

If you're already participating in the Plan and do not cancel coverage during Annual Benefits Enrollment, you'll continue with the same coverage you had before Annual Benefits Enrollment. However, you'll be subject to any changes in the Plan and coverage costs effective with the new plan year.

Enrolling if You Are a Newly Hired Employee

If you've just joined JPMorganChase and are enrolling for the first time, you need to make your choices through the Benefits Web Center on **My Health** or contact 1-844-ASK-JPMC.

You have 31 days after you join to make your enrollment elections; however, coverage will be effective as of your date of hire if you are a full-time employee, and within 31 days prior to becoming eligible if you are a part-time employee, as explained below.

- **If you are a full-time employee**, you may receive information regarding benefits enrollment after accepting a position with JPMorganChase but before your date of hire. Your coverage will begin on your date of hire, as long as you enroll within 31 days of your date of hire.

- **If you are a part-time employee**, you are eligible for coverage on the first of the month after 60 days from your date of hire. You will receive your enrollment materials within 31 days before becoming eligible for coverage. You need to enroll within 31 days before your effective date.

You can access your benefits enrollment materials online at **My Health > Benefits Enrollment**.

Enrolling if You Are a Newly Eligible Employee

If you're enrolling during the year because you're a newly eligible employee due to a work status change, you'll have 31 days from the date of the change in work status to make your new choices through the Benefits Web Center on **My Health > Benefits Web Center** or contact 1-844-ASK-JPMC.

If You Do Not Enroll

If You Are an Enrolled Employee

If you're already participating in the Plan and do not cancel coverage during Annual Benefits Enrollment, you'll generally keep the same coverage you had before Annual Benefits Enrollment. However, you'll be subject to any changes in the Plan and coverage costs effective with the new plan year.

If You Are a Newly Hired or Newly Eligible Employee

If you're a newly hired or newly eligible employee and do not actively enroll before the end of the designated 31-day enrollment period, you won't be able to enroll in the Group Legal Services Plan until the next Annual Benefits Enrollment.

When Coverage Begins

If You Are an Employee

If you enroll during Annual Benefits Enrollment, your coverage will be effective January 1 and you will continue to participate for the full calendar year (January through December).

If You Are a Newly Hired or Newly Eligible Employee

If you enroll, coverage will be effective on your date of hire if you are a full-time employee. If you are a part-time employee, coverage will be effective the first day of the month following 60 days from your date of hire.

You will continue to participate from the effective date through the end of the calendar year. If you go on a leave of absence and not receiving payroll deductions, your participation will continue as long as you continue to pay applicable premiums.

Your Membership Number

MetLife Legal Plans will send your membership number to you after you enroll. Please retain this number as you will need it for identification purposes when calling the Call Center.

No Midyear Changes

When you enroll, your participation is in effect through December 31 and you may not stop participating unless you are no longer eligible. Midyear changes are not permitted under this Plan, even if you have a Qualified Status Change (QSC) that allows you to change other JPMorganChase benefits.

You can only make changes to your coverage during Annual Benefits Enrollment (usually held in the fall of each year for the following year's participation).

If your work status changes and you are then scheduled to work fewer than 20 hours per week, your Group Legal Services Plan coverage will end on the date of the work status change.

When Coverage Ends

Generally, your coverage ends on your last day of active employment. Other reasons your coverage ends are when:

- You stop paying applicable premiums; or
- After you have been on an approved Long-Term Disability (LTD) leave and receiving LTD benefits under the LTD Plan for 24 months.
- You no longer meet the eligibility requirements of the Group Legal Services Plan (unless you are temporarily approved for additional leave under another JPMorganChase Policy, such as the Disability and Reasonable Accommodation Policy);
- The Group Legal Services Plan is discontinued;
- You pass away.

Coverage for you, your spouse and dependents ends the earlier of when your coverage ends or when your dependents no longer meet the eligibility requirements described in “Your Eligible Dependents” in the *Health Care Participation* section of this Guide. For your spouse/domestic partner, this means when you pass away, divorce, or end your relationship. For a child, this means when you pass away or the last day of the month in which he or she turns age 26.

- **Please Note:** You may continue coverage beyond age 26 for an unmarried child who is not capable of supporting himself or herself due to a mental or physical disability that began before the age limits described above and who is fully dependent on you for financial support.
- Coverage for a domestic partner ends when the domestic partner ceases to meet the eligibility requirements described in “Your Eligible Dependents” in the *Medical Plan* section of this Guide.

Continuing Coverage After It Ends

You have the option to continue coverage by enrolling in an Individual Legal Plan by visiting [MetLife.com/individual-legal-plans](https://www.mylife.com/individual-legal-plans).

Services in Progress Continue

Even if you don't enroll into an individual legal plan, any services in progress before your coverage end date will be provided.

How the Plan Works

The Plan provides coverage for attorney fees for routine, U.S.-related legal services related to personal or family legal issues.

The Plan offers access to a network of U.S. attorneys who provide a wide range of legal services. In-network services are available only in the United States, U.S. Virgin Islands, and Puerto Rico.

- Most services authorized by the Plan are covered at 100% when you use network attorneys.
- A reimbursement schedule applies to fees charged by out-of-network attorneys.

Finding Network Attorneys

You can call MetLife Legal Plans' Call Center to find a network attorney. A Client Service Representative will ask you to identify yourself as a JPMorganChase employee and will request your membership number, which is located in your welcome letter MetLife Legal Plans sends to you after you elect coverage.

Your spouse/domestic partner and any eligible child may use the Plan. Those family members will be required to provide your membership number when requested, to verify their eligibility.

The Plan Call Center

The Client Service Representative is responsible for all of the following:

- Verifying eligibility for services over the phone;
- Making an initial determination of whether and to what extent your case is covered (the Plan attorney will make the final determination of coverage);
- Providing a membership number (i.e., a unique identifier you'll provide to your network attorney to verify eligibility and coverage for services), which you will use for the duration on your plan coverage;
- Providing the telephone number of the Plan attorney(s) most convenient to you; and
- Answering any questions you have about the Group Legal Services Plan.

Following your initial phone call, you may schedule an appointment with a Plan attorney. Evening and Saturday appointments are available, if requested.

Plan and Out-of-Network Attorneys

When you use a Plan (in-network) attorney, all attorney's fees for covered services are paid in full by the Plan (except for certain limits shown in "What Is Covered" on page 8).

If you choose to seek legal services from an out-of-network attorney, MetLife Legal Plans will reimburse you for out-of-network attorneys' fees in accordance with a set fee schedule. Please see "What Is Covered" on page 8.

For services to be covered, you or your eligible dependents must establish an attorney-client relationship while you are an enrolled member of the Group Legal Services Plan.

Your use of the Plan and the legal services provided by the Plan are totally confidential.

The Role of Plan Attorneys

The Plan attorney is required to maintain the strict confidentiality of a traditional attorney-client relationship. The attorney's relationship is exclusively with you. JPMorganChase will not receive information about your legal issues or the services you use under the Plan. In addition, no one will interfere with your Plan attorney's independent exercise of professional judgment when representing you.

The attorney will adhere to the rules of the Plan. MetLife Legal Plans, or the law firm providing services under the Plan, is responsible for all services provided by their attorneys.

JPMorganChase has no liability for the conduct of any Plan attorney. You have the right to file a complaint with the state bar concerning attorney conduct pursuant to the Plan. If you have a complaint about the legal services you have received or the conduct of an attorney, you can register a complaint by calling MetLife Legal Plans. Your complaint will be reviewed, and you will receive a response within two business days of your call.

Plan attorneys will refuse to provide services if the matter is clearly without merit, frivolous, or for the purpose of harassing another person.

What Is Covered

The following fee schedule describes the maximum amounts that the Group Legal Services Plan will reimburse you for covered legal services provided if you use an in-network or out-of-network attorney. Only one fee category per case-type applies to each matter — the fee category that best describes the services that were provided.

The Plan provides only for the personal legal matters listed below. Once you receive services from an out-of-network attorney, you cannot then use an in-network Plan attorney for the same matter.

If you or your attorney have any questions regarding coverage or exclusions, please visit the Plan website at <https://www.metlife.com/info/jpmc/> or call (800) 821-6400 and ask to speak with MetLife's Payment Administrator before services are provided.

The list of covered services may change at any time.

Advice and Consultation

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Office Consultation and Telephone Advice	100%	\$70 (If no further covered services are provided)

Consumer Protection

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Consumer Protection Matters Excludes disputes over real estate, construction or insurance. Disputed amount exceeds small claims limit and is evidenced by writing.		
Prior to Lawsuit Filing	100%	\$500
After Lawsuit Filing	100%	\$2,000, plus Trial Supplement*
Property Protection		
Prior to Lawsuit Filing	100%	\$500
After Lawsuit Filing	100%	\$2,000, plus Trial Supplement*
Small Claims		
Negotiation and Settlement	100%	\$350
Filing Answer, Litigation Ending in Settlement or Judgment	100%	\$1,050, plus Trial Supplement*

* Trial Supplement — In addition to the fees indicated, the Plan will pay one-half of the attorney's hourly rate for representation in trial beyond the third day of trial, for a maximum of \$800 per day up to a \$100,000 total trial supplement maximum.

Identity Theft

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Identity Theft	100%	
Correspondence/Notice to Creditors	100%	\$250

Defense of Civil Lawsuits

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Administrative Hearing		
School Matters and Veterans Benefits Disputes	100%	\$250
Civil Litigation Defense Excludes defense of matters arising from divorce, post-decree actions or other family law matters.		
Negotiation and Settlement	100%	\$650
Filing Answer, Litigation Ending in Settlement or Judgment	100%	\$1,800, PLUS TRIAL SUPPLEMENT*
Incompetency Defense		
Negotiation and Settlement	100%	\$500
Contested Hearings Ending in Settlement or Judgment	100%	\$1,800, PLUS TRIAL SUPPLEMENT*

* Trial Supplement — In addition to the fees indicated, the Plan will pay one-half of the attorney's hourly rate for representation in trial beyond the third day of trial, for a maximum of \$800 per day up to a \$100,000 total trial supplement maximum.

Document Preparation and Review

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Affidavits	100%	\$75
Deeds	100%	\$100
Demand Letters	100%	\$75
Document Review	100%	\$100
Elder Law Matters (Counseling and document review of only documents pertaining to the participant's parents as affecting the participant)	100%	\$140
Mortgages	100%	\$70
Promissory Notes	100%	\$70

Family Law

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Adoption and Legitimization		
Uncontested	100%	\$650
Contested	100%	\$1,500, plus Trial Supplement*
Change or Establishment of Custody Order		
Uncontested	100%	\$650
Contested	100%	\$1,500

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Divorce, Dissolution and Annulment (Available to Eligible Plan Member only)		
Uncontested	100%	\$900
Contested	100%	\$2,200, plus Trial Supplement*
Enforcement or Modification of Support Order	100%	\$750
Enforcement or Modification of Visitation Order (Defense Only)	100%	\$750
Protection from Domestic Violence (Available to Eligible Plan Member only)	100%	\$425
Reproductive Assistance Law	100% (up to 20 hours/event)	\$4,000
Guardianship or Conservatorship		
Uncontested	100%	\$650
Contested	100%	\$1,500, plus Trial Supplement*
Juvenile Court Proceeding Parental Responsibilities in Juvenile Court	100%	\$600, plus Trial Supplement*
Name Change	100%	\$400
Prenuptial Agreement	100%	\$750
Postnuptial Agreement	100%	\$750

* Trial Supplement — In addition to the fees indicated, the Plan will pay one-half of the attorney's hourly rate for representation in trial beyond the third day of trial, for a maximum of \$800 per day up to a \$100,000 total trial supplement maximum.

Immigration

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Immigration assistance Counseling on Preparing Forms and Hearing Preparation	100%	\$500

Real Estate Matters

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Boundary or Title Disputes		
Prior to Lawsuit Filing	100%	\$500
After Lawsuit Filing	100%	\$1,500, plus Trial Supplement*

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Building/Permit Code Violations (Primary Residence)		
Negotiation and Settlement	100%	\$500
Trial	100%	\$1,000, plus Trial Supplement*
Eviction and Tenant Problems (Primary Residence - Tenant only)		
Prior to Lawsuit Filing	100%	\$280
After Lawsuit Filing	100%	\$840, plus Trial Supplement*
Natural Disaster Insurance Claims (Primary or Secondary Residence) Correspondence and Negotiations	100%	\$500
Property Tax Assessment (Primary Residence)		
Correspondence and Negotiations	100%	\$500
Hearing	100%	\$620, plus Trial Supplement*
Sale, Purchase or Refinance of Primary, Secondary, Vacation and Investment Home (Applies only to attorney who represents the Plan member, not the attorney representing the lending institution.)	100%	\$500
Zoning and Variances (Primary Residence)		
Negotiation and Settlement	100%	\$500
Trial	100%	\$800, plus Trial Supplement*

* Trial Supplement — In addition to the fees indicated, the Plan will pay one-half of the attorney's hourly rate for representation in trial beyond the third day of trial, for a maximum of \$800 per day up to a \$100,000 total trial supplement maximum.

Traffic and Criminal Matters

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Driving Privileges/Restoration of Suspended License Before Trial	100%	\$385
Traffic Ticket Defense (No DUI)		
• Before Trial	100%	\$250
• Representation at Trial	100%	\$500, plus Trial Supplement*

* Trial Supplement — In addition to the fees indicated, the Plan will pay one-half of the attorney's hourly rate for representation in trial beyond the third day of trial, for a maximum of \$800 per day up to a \$100,000 total trial supplement maximum.

Wills and Estate Matters

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Living Wills		
Individual	100%	\$75
Member and Spouse	100%	\$80
Powers of Attorney		
Individual	100%	\$65
Member and Spouse	100%	\$75
Probate Proceedings		
Estate Administration and Closing	Up to the first \$500	\$500
Affidavit/Simple Procedure/Tax Only	100%	\$500
Standard Probate/Court Supervised Probate	100%	\$500
Trusts		
Individual	100%	\$325
Member and Spouse	100%	\$450
Wills and Codicils		
Codicil — Individual	100%	\$150
Codicil — Member and Spouse	100%	\$200
Standard Will — Individual	100%	\$150
Standard Will — Member and Spouse	100%	\$200

Miscellaneous

Case Type	In-Network	Out-of-Network The Plan Will Pay Up to
Attorney Services for Non-Covered Matters	100% (8 Hours per plan year)	\$100 per hour to max of \$800

If there is any question about whether a service would be included or excluded, or the extent of coverage of a service, it is important to call MetLife Legal Plans and receive confirmation as to whether and for how much a service is covered.

What Is Not Covered

The Plan does not cover the following:

- Employment-related matters, including company or statutory benefits;
- Matters involving JPMorgan Chase & Co., MetLife® and affiliates, and Plan attorneys;
- Matters in which there is a conflict of interest between employee and spouse/domestic partner or children, in which case services are excluded for the spouse/domestic partner and children;
- Appeals and class actions;
- Farm and business matters, including rental issues when the participant is the landlord;
- Patent, trademark, and copyright matters;
- Costs or fines;
- Frivolous or unethical matters; and
- Matters for which an attorney-client relationship exists prior to the participant becoming eligible for Plan benefits.

This list may change at any time.

Pre-Existing Legal Matters

Any legal matter for which an attorney-client relationship existed prior to your becoming eligible for services under the Group Legal Services Plan will be excluded and no benefits will apply.

Items Not Listed and Not Excluded

If there is any question about whether a service would be included or excluded, or the extent of coverage, it is important to call MetLife Legal Plans and receive confirmation as to whether a service is covered.

Claiming Benefits

The following explains when and how to file claims for covered expenses under the Group Legal Services Plan. For more information on your rights with respect to claims, please see the *Plan Administration* section.

How to File Claims

Rules regarding claims depend on whether you receive your services in- or out-of-network, as shown below:

Source of Benefits	Claims Process
In-Network Benefits	You do not need to file a claim form.
Out-of-Network Benefits	Contact MetLife Legal Plans, the claims administrator, to obtain an out-of-network claim form and case number. (See contact information below under "Where to Submit Claims" on page 15.)

To have your claim considered for benefits, you need to file your claim by December 31 of the year following the year in which services were provided. If you fail to meet this deadline, your claim will be denied. Be sure to attach itemized bills or receipts to your claim form, and keep copies for your records. Separate claim forms must be submitted for each covered family member for whom a claim is made. Your claim will be processed within 15 business days of receipt by the claims administrator.

Where to Submit Claims

The claims administrator's is MetLife Legal Plans, Inc.:

MetLife Legal Plans, Inc.
1111 Superior Avenue
Cleveland, OH 44114

(800) 821-6400

8 a.m. to 8 p.m. Eastern Time

Appealing Claims

If a claim for reimbursement under the Group Legal Services Plan is denied, either in whole or in part, you can appeal the denial by following the appropriate procedures described in the *Plan Administration* section of this Guide.

Defined Terms

As you read this summary of the JPMorgan Chase Group Legal Services Plan, you'll come across some important terms related to the Plan. To help you better understand the Plan, many of those important terms are defined here.

After-Tax Contributions

After-tax contributions are contributions that are taken from your pay after federal (and in most cases, state and local income taxes) have been withheld.

In-Network/Out-of-Network

Terms referring to whether a covered service is performed by a provider who is part of the network associated with the Group Legal Services Plan or by a provider who is not part of the network. When a service is performed through a network provider, benefits are paid at a higher level than they are when a service is performed through an out-of-network provider.