



Policyholder: DESIGN SUPPLY

# Accident Benefit Summary

Effective Date: 11/01/2019

This chart provides you a brief summary of the key Accident benefits available from Principal Life Insurance Company. Following the chart, you will find additional information to answer questions you may have. For a complete list of all your Accident benefits and restrictions, please refer to your booklet or contact your benefits administrator.

Eligibility		
Job Class	ALL MEMBERS	
Eligible Employees	All active, full-time employees (except seasonal, temporary or contract workers) who work at least 30 hours per week. If you are covered as an employee, your dependents may also be eligible. Additional eligibility requirements may apply.	
Benefits Payable		
Injury	Scheduled Benefit	
Burn		
2nd degree up to 25% of body	\$500	
2nd degree over 25% of body	\$1,500	
3rd degree up to 25% of body	\$2,500	
3rd degree over 25% of body	\$5,000	
Coma	\$15,000	
Concussion	\$500	
Dental injury	\$500	
Dislocation	Open reduction (surgical)	Closed reduction (non-surgical)
Hip	\$7,500	\$3,750
Knee	\$5,000	\$2,500
Ankle, collarbone, elbow, foot (excluding toes), hand (excluding fingers), lower jaw, shoulder, wrist	\$3,000	\$1,500
Eye injury with surgical repair	\$500	
Fracture	Open reduction (surgical)	Closed reduction (non-surgical)
Hip, skull (depressed), thigh (femur)	\$10,000	\$5,000
Lower leg (fibula, tibia), pelvis, skull (non-depressed), vertebrae	\$5,000	\$2,500
Ankle, arm, collarbone, elbow, facial bones, foot (excluding toes), hand (excluding fingers), jaw, knee cap, shoulder blade, wrist	\$3,000	\$1,500
Sternum, vertebral processes	\$2,000	\$1,000
Rib, tailbone (coccyx)	\$1,000	\$500
Injuries not specifically listed	\$100	

## ACCIDENT

Internal injury	\$1,500
Knee cartilage injury with surgical repair	\$1,500
Ruptured disc with surgical repair	\$1,500
Tendon / ligament / rotator cuff injury with surgical repair	\$1,500
<b>Accidental Death &amp; Dismemberment (AD&amp;D)</b>	
You	\$25,000
Your covered spouse	\$12,500
Your covered children	\$6,250
<b>Covered Loss</b>	<b>% of AD&amp;D Benefit</b>
Loss of life	100%
Loss of one hand or one foot	50%
Loss of both hands or both feet or one hand and one foot	100%
Loss of thumb and index finger on the same hand	25%
If the loss is due to exposure to the elements or disappearance, the loss may be covered. The loss must occur within 365 days of the accident.	
Common carrier	An additional 200% of the scheduled benefit will be paid if the loss is incurred while a passenger in an airplane, ship, train, subway, bus, taxi, rideshare or trolley.
Seat belt/airbag	An additional 25% of the scheduled benefit will be paid if you or your covered dependent dies in an automobile accident while wearing a seat belt or protected by an airbag.
Repatriation	Up to an additional 10% of the scheduled benefit will be paid to prepare the body and its transportation to the place of burial or cremation if you or your covered dependent dies at least 100 miles from your permanent residence.
<b>Loss of Use or Paralysis</b>	<b>% of AD&amp;D Benefit</b>
Total and irrevocable loss of voluntary movement for 12 consecutive months or paralysis that is permanent, complete and irreversible.	
Quadriplegia	100%
Paraplegia or hemiplegia	50%
Loss of use of both hands or both feet or one hand and one foot	50%
Loss of use of one arm, one leg, one hand or one foot	25%
<b>Loss of Sight, Speech and/or Hearing</b>	<b>% of AD&amp;D Benefit</b>
Total and irrevocable loss for 12 consecutive months that is permanent, complete and irreversible.	
Loss of speech and hearing in both ears	100%
Loss of speech or hearing in both ears	50%
Loss of hearing in one ear	25%
Loss of sight in both eyes	100%
Loss of sight in one eye	50%
<b>Additional Benefits</b>	
Wellness	If you or your covered spouse has a covered wellness test performed, you may be eligible for a \$50 benefit. This benefit is payable once per calendar year.
Portability	If you cease to qualify as an employee, you may be able to continue coverage for you and your covered dependents.

## ACCIDENT

Limitations & Exclusions	
<b>Limitations</b>	Benefits will not be paid for an injury arising from or during employment for wage or profit. There are additional limitations and exclusions to your coverage. A complete list is included in your booklet.

## Understanding Your Accident Benefits

### Am I Eligible For Coverage?

To be eligible for coverage, you must qualify as an eligible employee and be considered actively at work.

You will be considered actively at work if you are able and available for active performance of all of your regular duties. Short term absence because of a regularly scheduled day off, holiday, vacation day, jury duty, funeral leave, or personal time off is considered active work provided you are able and available for active performance of all of your regular duties and were working the day immediately prior to the date of your absence.

You must enroll within 31 days of being eligible. If you don't, you'll have to wait until the next open enrollment period, or if you have a qualifying event.

### Are My Dependents Eligible For Coverage?

You must be enrolled for accident coverage before it can be offered to your dependents.

Eligible dependents include your spouse (if not also enrolled as an employee) and children, if not hospital, skilled nursing facility or home confined and provided they do not elect benefits as an employee.

Special eligibility requirements may exist for step, foster, adopted, legal age or other child relationships. Additional information may be necessary to determine child eligibility.

Additional eligibility requirements may apply.

### How Do We Qualify For Benefits?

To qualify for a benefit, you or your covered dependents must incur an injury while insured under this policy; the injury must be through external, violent, and accidental means; the covered accident must be the direct and sole cause of the injury; and the terms and conditions for an applicable benefit listed below must be met.

#### **Burn**

We will pay a burn benefit when you or your covered dependent incurs a 2nd or 3rd degree burn as a result of a covered accident. If the burns meet more than one of the burn benefit classifications, we will pay the single highest burn benefit. We will pay 150% of the burn benefit if the burn requires a skin graft. We will pay one burn benefit per accident.

#### **Coma**

We will pay a coma benefit when you or your covered dependent has been in a coma for 15 or more consecutive days as a result of a covered accident. We will pay one coma benefit per accident.

#### **Concussion**

We will pay a concussion benefit when you or your covered dependent incurs a concussion as a result of a covered accident. We will pay one concussion benefit per accident.

#### **Dental Injury**

We will pay a dental injury benefit when you or your covered dependent incurs a broken tooth which requires extraction or repair with a crown, implant or denture as a result of a covered accident. We will pay one dental injury benefit per accident.

**Dislocation**

We will pay a dislocation benefit when you or your covered dependent incurs a dislocation requiring correction through open or closed reduction as a result of a covered accident. If a physician corrects the dislocation without anesthesia or diagnoses the dislocation as a partial dislocation, we will pay 25% of the scheduled benefit amount for the applicable dislocation. If multiple joints are dislocated due to the same accident, we will pay a maximum of 200% of the scheduled benefit amount for the dislocation with the highest benefit for all dislocations combined.

**Eye Injury with Surgical Repair**

We will pay an eye injury with surgical repair benefit when you or your covered dependent incurs an eye injury requiring surgical repair as a result of a covered accident. We will pay one eye injury with surgical repair benefit per accident.

**Fracture**

We will pay a fracture benefit when you or your covered dependent incurs a fracture requiring correction through open or closed reduction as a result of a covered accident. If a physician diagnoses the fracture as a chip fracture, we will pay 25% of the scheduled benefit amount for the applicable fracture. We will pay one fracture benefit per bone per accident. If multiple bones are fractured due to the same accident, we will pay a maximum of 200% of the scheduled benefit amount for the fracture with the highest benefit for all fractures combined.

**Injuries Not Specifically Listed**

We will pay an injuries not specifically listed benefit when you or your covered dependent incurs an injury not otherwise specifically listed as a result of a covered accident. We will pay 200% of the injuries not specifically listed benefit if the injury is surgically repaired by a physician. We will pay one injuries not specifically listed benefit per accident.

**Internal Injury**

We will pay an internal injury benefit when you or your covered dependent incurs an internal injury as a result of a covered accident. We will pay 200% of the internal injury benefit if the internal injury is surgically repaired by a physician. We will pay one internal injury benefit per accident.

**Knee Cartilage Injury with Surgical Repair**

We will pay a knee cartilage injury with surgical repair benefit when you or your covered dependent incurs a torn, ruptured or severed knee cartilage in one or both knees requiring surgical repair as a result of a covered accident. We will pay one knee cartilage injury with surgical repair benefit per accident.

**Ruptured Disc with Surgical Repair**

We will pay a ruptured disc with surgical repair benefit when you or your covered dependent incurs one or more ruptured discs in the spine requiring surgical repair as a result of a covered accident. We will pay one ruptured disc with surgical repair benefit per accident.

**Tendon / Ligament / Rotator Cuff Injury with Surgical Repair**

We will pay a tendon / ligament / rotator cuff injury with surgical repair benefit when you or your covered dependent incurs one or more torn, ruptured or severed tendons, ligaments and/or rotator cuffs requiring surgical repair as a result of a covered accident. We will pay up to two tendon / ligament / rotator cuff injury with surgical repair benefits per accident.

What Additional Benefits are Included?	
<b>Wellness</b>	<p>If you or your covered spouse has one of the following wellness tests or procedures performed, you may be eligible for a \$50 benefit. Wellness tests or procedures covered are limited to:</p> <ul style="list-style-type: none"> <li>– Bone marrow cancer screening (serum protein electrophoresis);</li> <li>– Breast cancer screening (CA 15-3, clinical breast exam, mammogram, MRI, ultrasound);</li> <li>– Chest x-ray;</li> <li>– Colorectal cancer screening (CEA, colonoscopy, fecal occult blood test, sigmoidoscopy);</li> <li>– Completion of a smoking cessation program;</li> <li>– Completion of a weight reduction program;</li> <li>– Diabetes testing (fasting blood glucose test, hemoglobin A1c);</li> <li>– Electrocardiogram (ECG) - resting or stress;</li> <li>– Standard blood chemistry profile or lipid panel (cholesterol, triglycerides, HDL, LDL);</li> <li>– Ovarian cancer screening;</li> <li>– Pap smear;</li> <li>– Prostate cancer screening (digital rectal exam, PSA blood test);</li> <li>– Skin cancer screening.</li> </ul>
<b>Portability</b>	<p>You may continue coverage for yourself and your covered dependents if you cease to qualify as an employee. You must be insured under the policy for at least 12 consecutive months and enroll within 60 days from the date you cease to qualify.</p>
<b>Continuation of Coverage for Sickness or Injury</b>	<p>If you stop working because you are sick or injured, your coverage may be continued, with payment of premium, for up to 90 days.</p>



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