

Offer employees a financial back-up plan for when an accident happens.

Accident insurance helps your employees cover out-of-pocket expenses after an accidental injury.



Life doesn't always go according to plan. Accidents happen, and they can have a big impact on the wallet. Sure, medical insurance helps pay for medical expenses, and disability insurance helps replace lost income. But they don't cover all the expenses associated with an accidental injury.

You can help your employees be better prepared to handle expenses that arise after an accidental injury—with accident insurance from Principal®. It can help your covered employees and their families manage additional expenses that pop up after an injury. The coverage pays tax-free* cash benefits directly to the employee, regardless of other insurance coverages or actual expenses.

It's a great fit for all of us. After all, accidents are unexpected, and can be expensive. But for people who lead active lifestyles or have kids in sports, accident insurance can be especially valuable.

How does accident insurance work?

Accident insurance from Principal is structured differently to make using it straightforward for employees. We make it easy by paying a simple, up-front benefit based on covered injuries received. The benefit isn't dependent on services, tests, or treatments to receive the maximum benefit. Instead, our approach is to pay a higher amount for the injury to help cover other expenses, which may include ambulance service, medical exams, and post-treatment care.

The employee receives a lump-sum benefit based on the covered injuries received. That means employees can get paid faster with less paperwork. And there's no guesswork about the benefit amount.

Covered injuries include:

- Burn
- Coma
- Concussion
- Dental injury
- Eye injury
- Dislocation
- Fracture
- Internal injury
- Disc, knee cartilage, tendon, ligament or rotator cuff injury
- And more



Let's look at an example

While on a bike ride with friends, Julian loses control, falls off, and hits the pavement hard. Friends take Julian to urgent care where tests confirm the wrist and elbow are fractured, requiring immediate surgery. Physical therapy is needed for a few weeks to make a full recovery.

Julian's accident coverage from Principal paid \$6,000 total (\$3,000 for the wrist fracture + \$3,000 for the elbow fracture). The lump-sum benefit helps cover the costs for immediate and future needs related to the accident.

How can employees use accident benefits?

Short answer: any way they want to. That could mean using the benefit for medical deductibles and copayments, childcare, lost income from missing work, home healthcare needs, or transportation, food, and lodging.

Key features

- Simplified design, minimal paperwork, and quick claims
- Proof of good health is never required
- Employees can buy protection for their spouse and/or kids
- You can include an accidental death and dismemberment (AD&D) benefit, wellness, and portability



Let's connect

Contact your local Principal representative.

* Based on current federal income tax laws, if insurance premiums are paid with after-tax dollars, the benefits are received income tax-free.



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ACCIDENT INSURANCE PROVIDES LIMITED BENEFITS. This is an overview of the benefits accident insurance provides, but there are limitations and exclusions. Some provisions may vary or not be available in all states. For additional details, contact your Principal financial professional.

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Arizona Accident Insurance Limitations and Exclusions

Covered Injuries and related Limitations, Exclusions, and reductions¹

Burn² — must be diagnosed and treated by a physician within 72 hours; 150% of the benefit is payable if the burn requires a skin graft performed within 90 days; excludes 1st degree burns; there are 4 benefit levels based on the degree and extent of the burns.

Coma² — must be diagnosed and treated by a physician within 30 days, last 15 or more consecutive days and require intubation for respiratory assistance; excludes medically-induced comas.

Concussion² — must be diagnosed and treated by a physician using a medical imaging procedure within 72 hours.

Dental Injury² — a broken tooth requiring extraction or repair with a crown, implant or denture must be treated by a dentist within 60 days; excludes injuries to teeth that are not sound, natural teeth and injuries caused by biting or chewing.

Dislocation³ — must be diagnosed, treated, and require correction with anesthesia by a physician within 90 days; the benefit varies based on the affected joint and whether it requires open (surgical) or closed (non-surgical) reduction; 25% benefit if physician corrects without anesthesia; 25% benefit for partial dislocation; for multiple dislocations due to the same accident, the policy pays a maximum of 200% of the dislocation with the highest benefit; subsequent dislocations of the same joint are excluded.

Eye Injury With Surgical Repair² — must be diagnosed and treated by a physician within 90 days; excludes exams and injuries which involve only the eyelid.

Fracture⁴ — must be diagnosed and treated by a physician within 90 days; the benefit varies based on the location and whether it requires open or closed reduction; 25% benefit If chip fracture; the policy pays one benefit per bone, per accident; for multiple fractures due to the same accident, the policy pays a maximum of 200% of the fracture with the highest benefit; if benefits were paid for a fracture, any new claim for a fracture is payable only if it is the result of a separate and distinct accident that occurs after the previous fracture is completely healed.

Injuries Not Specifically Listed² — must be diagnosed and treated by a physician within 30 days; pays 200% if it requires surgical repair.

Internal Injury² — must be diagnosed and treated by a physician within 72 hours; excludes exploratory surgery without repair and injuries related to a hernia; pays 200% if requires surgical repair.

Knee Cartilage Injury With Surgical Repair² — must be diagnosed and treated by a physician within 60 days and surgically repaired by a physician within 365 days of the accident; excludes exploratory surgery without repair.

Ruptured Disc With Surgical Repair² — must be diagnosed and treated by a physician within 60 days and surgically repaired by a physician within 365 days; excludes exploratory surgery without repair.

Tendon / Ligament / Rotator Cuff Injury With Surgical Repair — must be diagnosed and treated by a physician within 60 days and surgically repaired by a physician within 365 days; excludes exploratory surgery without repair; pays up to two benefits per accident.

Bodily injuries must result directly from an accident and be wholly independent of sickness, disease, bodily infirmity and other causes. The injury must be incurred while insured under this policy. All time limits for diagnosis, treatment, and surgical repair are from the time or date of the accident.

If a benefit is paid for an injury and the covered person later qualifies for a higher benefit for the same accident, we'll pay the appropriate benefit less any amount previously paid.

General Limitations and Exclusions

Benefits not paid for injuries caused indirectly or directly by, contributed to, or resulting from willful self-injury or self-destruction, while sane or insane; voluntary participation in an auto-erotic activity; war or act of war; voluntary participation in an assault, felony, criminal activity, insurrection, or riot; duty as a member of a military organization; injuries diagnosed outside of the United States unless the diagnosis can be confirmed by a physician in the United States; the use of any drug, narcotic, hallucinogen, or other controlled substance not prescribed for the covered person by a physician, or if prescribed, not used in a manner consistent with that prescription, directly or indirectly; deliberate use of poison, gas, fumes, or household items (such as aerosols), whether by ingestion, injection, inhalation or absorption; intoxication (a covered person will be considered intoxicated when their blood alcohol level exceeds the legal limit used for operating a motor vehicle in the jurisdiction in which the covered accident occurs regardless of whether they were actually operating a motor vehicle or not); sickness, disease, medical or surgical treatment of disease, or complications following the surgical treatment of disease; operating, learning to operate, or serving as a crew member or flight for life personnel of any aircraft or hot air balloon except as a crew member in a policyholder owned or leased aircraft on company business; jumping, parachuting, or falling from any aircraft or hot air balloon, including those which are not motor-driven; parasailing, bungee jumping or other aeronautic activities; riding in or driving any motor driven vehicle in a race, stunt show or speed test; any dental injury that occurs from biting or chewing; practicing for or participating in any semi-professional or professional competitive athletic activity, including officiating or coaching, for which any type of compensation or remuneration is received; and any injury to a dependent child received during child birth.

Employee coverage may exclude injury arising from or during employment for wage or profit (on-the-job). Coverage for spouses (if offered) excludes on-the-job injuries. Check with your employer regarding these provisions.

No benefits will be paid for any injury incurred while residing outside the United States for more than six months; incurred while incarcerated in any type of penal or detention facility; or for which proof is submitted by a physician who is part of the covered person's immediate family.

This summary is not an insurance contract or a complete statement of its provisions. It does not modify or change the provisions of any policy or rider. If there is a discrepancy, the policy is the final arbiter of the coverage. 1518265-022021

- ¹ Refer to the policy for definitions applicable to all terms used in this document, and for other applicable terms and conditions, and relevant clinical and diagnostic criteria. Proof of diagnosis and submission of medical records are required. Claim procedures must be satisfied. Limitations and exclusions must not apply.
- ² Limit of one benefit per injury type per accident.
- ³ Includes dislocation of the ankle, collarbone, elbow, foot (excludes toes), hand (excludes fingers), hip, knee, lower jaw, shoulder, and wrist.
- ⁴ Includes fracture of the ankle, arm, collarbone, elbow, facial bones, foot (excludes toes), hand (excludes fingers), hip, jaw, knee cap, lower leg (fibula, tibia), pelvis, rib, shoulder blade, skull (depressed), skull (non-depressed), sternum, tailbone (coccyx), thigh (femur), vertebrae, vertebral processes, and wrist.



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