

Policyholder: KESSLER TOPAZ MELTZER & CHECK, LLP

Group accident insurance Benefit summary for all members

Your coverage renews every June 1

This summary was created on 09/25/2025 and shows benefits available at that time.

Eligibility					
Eligible employees	ligible employees All active, full-time employees working at least 30 hours a week				
Benefits if you or your spou	use are accidentally injured on or off t	the job			
Injury ¹	Benefit				
Burn 2nd degree up to 25% of body 2nd degree over 25% of body 3rd degree up to 25% of body 3rd degree over 25% of body		\$500 \$1,500 \$2,500 \$5,000			
Coma		\$15,000			
Concussion		\$500			
Dental injury		\$500			
Dislocation ² Hip Knee Ankle, collarbone, elbow, foot fingers), lower jaw, shoulder, v	(excluding toes), hand (excluding wrist	Open reduction (surgical) \$7,500 \$5,000 \$3,000	Closed reduction (non-surgical) \$3,750 \$2,500 \$1,500		
Eye injury with surgical repair		\$500			
	, skull (non-depressed), vertebrae , facial bones, foot (excluding toes), hand	Open reduction (surgical) \$10,000 \$5,000 \$3,000 \$2,000 \$1,000	Closed reduction (non-surgical) \$5,000 \$2,500 \$1,500 \$1,000 \$500		
Injuries not specifically listed		\$100			
Internal injury		\$1,500			
Knee cartilage injury with surg	gical repair	\$1,500			
Ruptured disc with surgical re	pair	\$1,500			

Tendon / ligament / rotator cuff injury with surgical repair ³	\$1,500	
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¹One benefit per injury type is payable per accident, unless noted.

This benefit summary is a summary only. For a complete list of benefit information and limitations, please refer to your booklet.

What benefits does Accidental Death and Dismemberment (AD&D) provide?

AD&D			
You	\$25,000		
Your spouse	\$12,500		
Your child(ren)	\$6,250		
Loss			
Loss of life, or loss of both hands or both feet or one hand and one foot	100%		
Loss of one hand or one foot	50%		
Loss of thumb and index finger on the same hand	25%		
Common carrier - If you die while a passenger on public or commercial transportation	additional 200%		
Seat belt / airbag - If you die in a car accident while wearing a seat belt or protected by an airbag	additional 25%		
Loss of use / paralysis - total loss of movement for 12 consecutive mor	nths or permanent paralysis		
Quadriplegia	100%		
Paraplegia, hemiplegia, or 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%		
Loss of sight, speech and/or hearing - total loss for 12 consecutive mor	nths		
Loss of speech and hearing in both ears, or loss of sight in both eyes	100%		
Loss of speech or hearing in both ears, or loss of sight in one eye	50%		
Loss of hearing in one ear	25%		

Additional benefits:

Wellness	If you or your covered dependent has a covered screening test performed, you each may receive a \$50 benefit, once per calendar year. Make sure to file your claim within a year of the date of service.
Portability	If you no longer qualify for coverage, you may be able to continue coverage for yourself and your covered dependents.

²If you suffer multiple dislocations and/or fractures, your benefit will be up to 200% of the benefit amount for the dislocation/fracture with the highest benefit.

³Up to two benefits are payable per accident.

What's available to me?

Be better prepared financially for accidents before they happen. This coverage pays a lump-sum benefit for injuries received from an accident.

Who can buy coverage?

- You may buy coverage if you're an active, full-time employee working at least 30 hours a week. Seasonal, temporary, or contract employees can't purchase.
 - o If you're on a regularly scheduled day off, holiday, vacation day, jury duty, funeral leave, or personal time off, you're still considered actively at work, as long as you're fulfilling your regular duties and were working the day immediately prior to your time off.
 - o You must enroll within 31 days of being eligible. If you don't, you'll have to wait until the next open enrollment period.
- If you're covered, you may buy coverage for your dependents, if they're not confined at home, in a hospital or skilled nursing facility (this is referred to as Period of Limited Activity).

Additional eligibility requirements may apply.

What are the limitations and exclusions of my coverage?

There are limitations and exclusions to your coverage. A complete list is included in your booklet.



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ACCIDENT INSURANCE PROVIDES LIMITED BENEFITS.

This is a summary of accident coverage insured by or with administrative services provided by Principal Life Insurance Company. This outline is a brief description of your coverage. It is not an insurance contract or a complete statement of the rights, benefits, limitations and exclusions of the coverage. If there is a discrepancy between the policy and this document, the actual policy provision prevails. For complete coverage details, refer to the booklet.

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