

## Benefit Exclusions

The Policy does not cover a Loss caused directly or indirectly by:

- suicide or attempted suicide, whether sane or insane, (in Missouri or Colorado while sane);
- intentionally self-inflicted injuries;
- an act of war, declared or undeclared, whether civil or international, or due to any substantial armed conflict between organized forces of a military nature;
- active participation in a riot;
- committing or attempting to commit a felony;
- use of any drug, hallucinogen, controlled substance, or narcotic unless prescribed by a Physician;
- driving while intoxicated, as defined by the applicable state law where a Loss occurred;
- disease, bodily or mental infirmity, or medical or surgical Treatment of these;
- Your being engaged in an illegal occupation;
- Injury sustained during travel in or descent from any aircraft:
  - as a student pilot, pilot, officer, or other member of the crew; or
  - when the aircraft is used to train, test, or experiment; or
  - when the aircraft is part of any military, naval, or air force; or
- Your being in the armed forces of any country or international authority for a period greater than 30 days (in such event the pro rata unearned premium shall be returned to You for any period of full-time active duty for more than 30 days provided You notify Us within 12 months of entering the armed forces.

## How to Apply

To receive a proposal please contact the plan administrator, Lockton Affinity, LLC at 800/336-4759.

*PIA National membership, when required, must be current at all times. Please see the Eligibility section for membership exceptions.*

*The complete listing of coverage, including exclusions and limitations, can be found in the policy/certificate. If differences exist between this summary and the policy/certificate, the policy/certificate will govern. To obtain a sample certificate, please contact the Plan Administrator.*



PIA SERVICES GROUP  
INSURANCE FUND

If you have any questions about the AD&D plan or any other PIA Trust plan, please call:

**800/336-4759**

or visit our website at:

**[www.piatruster.com](http://www.piatruster.com)**

Administered By:

**Lockton Affinity, LLC**

P.O. Box 410679

Kansas City, MO 64141-0679

Fax: 913/652-7599

Coverage described in this brochure underwritten by:

**Unimerica Insurance Company**

Association Administrative Address:

P.O. Box 17828

Portland, ME 04112-8828

under Policy Form ADD-6001-A (UIC)

# Accidental Death & Dismemberment Insurance Plan



## HIGHLIGHTS OF COVERAGE

You can't always prevent an accident...  
but you can prepare for one with the  
PIA Trust Accidental Death &  
Dismemberment Insurance Plan



PIA SERVICES GROUP  
INSURANCE FUND

Accidents can occur *anytime, anywhere*. With the PIA Trust Accidental Death & Dismemberment Insurance Plan, you and your qualified dependents can be covered in case of an accident 24 hours a day, anywhere in the world - at home, at work, or on vacation.

## Product Offering

If you suffer an injury which results in a loss of life or limb, the coverage will pay the sum as outlined below for the Loss provided the accident that caused the Loss occurred while covered under this benefit; and except for loss of life, the Loss occurs within the 365 day period immediately after the date of the accident.

### Principal Sum Paid for Loss of:

- Life
- Both hands or both feet or sight of both eyes
- One hand and one foot
- One hand and sight of one eye
- One foot and sight of one eye
- Speech and hearing

### One-Half Principal Sum Paid for Loss of:

- One leg or one arm
- One hand, one foot or sight of one eye
- Speech or hearing

### One-Quarter Principal Sum Paid for Loss of:

- Thumb and index finger of the same hand

## Eligibility

A person described below is an eligible person if he or she:

- is under age 70 at time of application;
- works at least 20 hours per week; and
- resides in the United States.

Individual proprietors, partners, corporate officers, limited liability partners, and managers of Member Agencies who are principally engaged in the business of the Member Agency and who maintain current membership status in the National Association of Professional Insurance Agents;

Trustees of PIA Services Group Insurance Fund who maintain current membership status in the National Association of Professional Insurance Agents;

Persons employed as executive directors, department heads, division heads, or senior staff of the National Association of Professional Insurance Agents, a local PIA affiliate, or PIA Services, Inc.

Licensed employees of Member Agencies;

Independent producers who:

- work exclusively for a Member Agency;
- maintain current membership status in the National Association of Professional Insurance Agents;
- receive from the Member Agency a monthly commission which, when combined with any draw against commission, equals an amount not less than minimum wage times 150 hours; and
- are certified by the Member Agency as working at least 30 hours per week.

Employees of a Member Agency;

Employees of PIA Services Group Insurance Fund;

Employees of the National Association of Professional Insurance Agents or its local PIA affiliates; and

Employees of PIA Services, Inc.

**Member Agency:** an individual proprietorship, partnership, limited liability company, or corporation which is:

1. principally engaged in the insurance business; and
2. a member of the National Association of Professional Insurance Agents.

Dependents (covered if Family Plan elected) include:

- **Dependent Spouse:** a legal Spouse, provided he or she is not legally separated or divorced from You. To be eligible to apply for coverage or make an elective change that increases coverage, he or she must be under Age 70\* at the time of enrollment.
- **Dependent Child:** An unmarried Child at least 14 days of age, but under Age 19, or an Eligible Student. A Child is an Eligible Student if he or she:
  1. is under Age 25 and not married;
  2. is not in the armed forces of any country;
  3. attends an accredited post-secondary school (other than a correspondence school) on a full-time basis as defined by the post-secondary school; and
  4. is enrolled in the next scheduled term;
  5. primarily depends on You for financial support.

The term "Child" includes a natural child, legally adopted child, stepchild, foster child, or any child You claim as a Dependent on Your most recent federal income tax return. To be eligible for coverage or an elective change that increases coverage, he or she must reside in the United States.

## Plans Available:

### Member/Employee Only Plan

Eligible members/employees choose coverage amounts starting at a Minimum of \$30,000 up to a Maximum of \$400,000 in increments of \$10,000.

### Family Plan

Eligible members/employees can include coverage for family members while insuring themselves.

Amount of Coverage as Percent of Member/Employee Principal Sum:

### Dependent Spouse:

- 50% if there are no Dependent Children insured
- 40% if there are Dependent Children insured

### Dependent Child(ren):

- 10% for each covered Dependent Child

## Coverage Reduces As You Age

Principal Sum amounts for persons who have attained age 70\*\* will be reduced in accordance with the following schedule:

Attainment of Age	Principal Sum is reduced to:
70	65% of benefit
75	45% of benefit
80	30% of benefit
85	15% of benefit

An Insured or Insured Dependent may not increase coverage once age 70 has been attained. All such reductions in amounts shall be effective at the end of the calendar year in which the Insured attains the stated age.

## How Much Does Coverage Cost?

The cost of benefits has been calculated for you in the following table:

Coverage Amount	Annual Rates	
	Member/Employee Only	Member/Employee & Family
\$ 30,000	\$ 12.00	\$ 17.40
\$ 50,000	\$ 20.00	\$ 29.00
\$ 100,000	\$ 40.00	\$ 58.00
\$ 150,000	\$ 60.00	\$ 87.00
\$ 200,000	\$ 80.00	\$116.00
\$ 250,000	\$100.00	\$145.00
\$ 300,000	\$120.00	\$174.00
\$ 400,000	\$160.00	\$232.00