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Your DuPont Benefit Resources

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# BeneFlex Accidental Death Insurance Plan

July 2003

As of July 2003, participating employers in the BeneFlex Accidental Death Insurance Plan include:

- E. I. du Pont de Nemours and Company
- DuPont Dow Elastomers L.L.C.
- Solae, L.L.C.
- DuPont Textiles & Interiors, Inc.
- DuPont Photonics Technologies, L.L.C.
- DuPont Protective Apparel Marketing Company

All references to “the Company” in this document pertain to the specific company that employs you.



*The miracles of science™*

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# TABLE OF CONTENTS

<b>DETAILS OF THE PLAN</b> .....	1
PREFACE .....	1
INTRODUCTION .....	1
ELIGIBILITY .....	1
ENROLLMENT .....	2
COST .....	3
PLAN BENEFIT .....	4
RESTRICTIONS AND EXCLUSIONS .....	6
FILING A CLAIM .....	7
ABOUT YOUR COVERAGE .....	8
FUTURE OF THE PLAN .....	9
<b>ADMINISTRATIVE INFORMATION</b> .....	9
ERISA RIGHTS .....	11
PLAN SPONSOR .....	12
PLAN NAME .....	12
TYPE OF PLAN AND ADMINISTRATION .....	12
PLAN ADMINISTRATOR .....	13
PLAN INSURER .....	13
PLAN SPONSOR'S EMPLOYER IDENTIFICATION NUMBER (EIN) .....	13
POLICY NUMBER .....	13
PLAN YEAR .....	13
SOURCE OF BENEFIT FUNDING .....	13
AGENT FOR SERVICE OF LEGAL PROCESS .....	13
<b>CONTACTS</b> .....	14
FOR QUESTIONS REGARDING ELIGIBILITY AND ENROLLMENT .....	14
FOR FILING A CLAIM .....	14
FOR BENEFICIARY DESIGNATIONS .....	14
FOR REVIEW OF A BENEFICIARY ON FILE .....	14
FOR APPEALING A DENIED CLAIM .....	15
TO PORT COVERAGE .....	15
<b>DICTIONARY TERMS</b> .....	15

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## **DETAILS OF THE PLAN**

### **Preface**

This **Summary Plan Description (SPD)** provides a concise description of Plan coverage available for you and your eligible dependents.

While this SPD contains detailed and important information about your benefit Plan, every attempt has been made to communicate that information clearly and in easily understandable terms.

While the **Company** intends to continue the benefits and policies described in this booklet, the Company reserves the right to change, modify or discontinue the Plan at its discretion at any time. This SPD does not constitute a contract of employment or guarantee any particular benefit.

In the event of a discrepancy between this SPD and the Plan document, the Plan document will govern.

### **Introduction**

BeneFlex Accidental Death Insurance provides an around-the-clock complement to your Employee Life Insurance in case of accidental death, and provides coverage for accidental loss of limb, sight, speech or hearing. You may elect coverage for yourself and your dependents.

The insurance provided under this Plan is accident insurance and not life insurance. It provides no cash, loan or paid-up values. There are no **conversion** privileges for this coverage.

You will need to satisfy the requirements described in this SPD to receive BeneFlex Accidental Death Insurance coverage.

### **Eligibility**

#### *Eligible employees*

You are eligible for BeneFlex Accidental Death Insurance coverage if you are one of the following:

- a **Full-Service Employee** of DuPont U.S. Region
- a Full-Service Employee of a participating DuPont subsidiary or joint venture that elects to adopt this Plan

Since January 1, 1992, the BeneFlex Benefit Plan has been offered to all DuPont U.S. Region employees. However, you are not eligible for the BeneFlex Accidental Death Insurance Plan if you are an employee, or dependent of such employee, in a bargaining unit represented by a union for collective bargaining unless and until the site manager has authorized the benefit, collective bargaining on the subject has taken place, and any requisite obligations thereunder have been fulfilled.

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### *Eligible dependents*

You can cover certain dependents under the BeneFlex Accidental Death Insurance Plan. Your eligible dependents are any of the following:

- your lawful spouse
- children who meet ALL these criteria:
  - unmarried
  - under age 25, and
  - claimed as dependents on your federal income tax return (except unmarried, full-time students age 24 who must meet only the first two criteria)

If you choose coverage for your child(ren), any newly eligible dependent children (due to birth, adoption or marriage) are covered immediately.

To cover eligible family members, you must elect coverage for yourself.

## **Enrollment**

### *Enrolling in the Plan*

You can enroll in the BeneFlex Accidental Death Insurance Plan during the annual **BeneFlex Election Change Period** or when you first become eligible. You enroll:

- by calling DuPont Connection toll-free at 1-800-775-5955
- by visiting BeneFlex OnLine at <http://resources.hewitt.com/dupont>

New employees can enroll for the current year. If you are a newly hired employee, you must call DuPont Connection or visit BeneFlex OnLine to make your benefit elections within 31 days of the date on your new hire package that is mailed to you. If you do not enroll, you will be defaulted to no coverage. In addition, you will not have coverage for your dependents, so it is important that you enroll in a timely manner.

Your benefit elections will stay in effect for the entire **Plan Year** (January 1–December 31).

You do not have to re-enroll each year. If you do not make a change during the annual BeneFlex Election Change Period, you will remain enrolled in the BeneFlex Accidental Death Insurance Plan for the following year with no change to your election.

There are limits to the total amount of coverage you may purchase when both you and your spouse are employed by DuPont or a participating DuPont subsidiary or joint venture that has adopted this Plan. The maximum coverage amount for any one person covered as an employee and as a spouse of another employee cannot exceed \$500,000. The maximum coverage amount for any covered dependent child cannot exceed \$100,000.

### *When coverage begins*

Once enrolled, your and your eligible dependents' BeneFlex Accidental Death Insurance coverage will start the first of the month following your election, or on January 1 if you enroll during the BeneFlex Change Period.

### ***Making changes***

If you have a **Qualifying Life Event** you can change your existing BeneFlex Accidental Death Insurance coverage. A change in election due to a Qualifying Life Event must be consistent with the event and cannot be for financial reasons. You must make changes to your coverage within 31 days of the Qualifying Life Event. The following is a list of events that are each considered to be a Qualifying Life Event:

- marriage or divorce
- birth or adoption of a child
- death of your spouse or dependent child
- gain or loss of an eligible dependent
- a change in your or your spouse's employment from part-time to full-time or vice versa
- the start or termination of your spouse's employment
- unpaid leave of absence by your spouse

Changes you make after a Qualifying Life Event become effective the first of the month following your election.

### ***Changes during the annual BeneFlex Change Period***

You may change your BeneFlex Accidental Death Insurance coverage election once each year during the BeneFlex Election Change Period.

During the the BeneFlex Election Change Period period, you may do any of the following:

- enroll to participate
- select more coverage than you have today
- change your current level of coverage (You only, You and your spouse, You and each eligible child, You and your spouse and each eligible child)
- reduce the amount of coverage you have
- cancel your participation

All changes in BeneFlex Accidental Death Insurance coverage made during the BeneFlex Election Change Period will become effective on the first day (January 1) of the new Plan Year.

## **Cost**

### ***Cost of coverage***

You pay the entire cost of your family's BeneFlex Accidental Death Insurance. To help lower your cost, your deductions are deducted from your paycheck on a before-tax basis.

The deductions for your BeneFlex Accidental Death Insurance coverage are calculated based on the amount of coverage you elect.

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For the year 2003, your cost is based on a monthly premium rate of \$0.015 per \$1,000 of coverage on you and your spouse, and \$0.030 per \$1,000 of coverage for your child(ren).

Your deductions are reviewed annually and are subject to change. Any adjustment to your deductions will be effective January 1. You will be notified in advance of any changes.

## **Plan Benefit**

### ***Benefit amount***

You can elect to purchase BeneFlex Accidental Death Insurance coverage for yourself equal to:

- Option A: \$500,000
- Option B: \$250,000
- Option C: \$100,000
- Option D: \$50,000
- Option N: No coverage

You can buy BeneFlex Accidental Death Insurance for your spouse equal to:

- Option A: \$300,000
- Option B: \$150,000
- Option C: \$50,000
- Option D: \$25,000
- Option N: No coverage

You can buy BeneFlex Accidental Death Insurance for your child equal to:

- Option A: \$100,000
- Option B: \$50,000
- Option C: \$25,000
- Option D: \$10,000
- Option N: No coverage

You may choose one of the following coverage levels for your BeneFlex Accidental Death Insurance:

- You only
- You and your lawful spouse
- You and each eligible dependent child, or
- You and your lawful spouse and each eligible dependent child

You must choose the same option for yourself and any family member you wish to cover.

Dismemberment benefits are paid as a percentage of your BeneFlex Accidental Death Insurance Plan death benefit, up to the Plan maximum. Refer to the summary below for details subject to conformity with state statutes.

<b>Loss</b>	<b>The coverage for you is</b>	<b>The coverage for your spouse is</b>	<b>The coverage for each eligible dependent child is</b>
Life	100% of the coverage amount elected for the employee	100% of your spouse's coverage amount	100% of your child's coverage amount
<ul style="list-style-type: none"> <li>• both feet</li> <li>• both hands</li> <li>• one foot and sight of one eye</li> <li>• one hand and one foot</li> <li>• one hand and sight of one eye</li> <li>• sight in both eyes</li> <li>• speech and hearing</li> </ul>	100% of the coverage amount elected by the employee	100% of your spouse's coverage amount	100% of your child's coverage amount
<ul style="list-style-type: none"> <li>• hearing</li> <li>• one hand</li> <li>• speech</li> <li>• sight in one eye</li> <li>• one foot</li> </ul>	50% of the coverage amount elected by the employee	50% of your spouse's coverage amount	50% of your child's coverage amount
<ul style="list-style-type: none"> <li>• loss of thumb and index finger of the same hand</li> </ul>	25% of the coverage amount elected by the employee	25% of your spouse's coverage amount	25% of your child's coverage amount

Loss of a hand or foot means complete severance through or above the wrist or the ankle joint.

Loss of a thumb or index finger means severance of each through or above the joint closest to the wrist.

Loss of sight means total and irrevocable loss of vision.

Loss of speech means total and irrevocable loss of audible communication.

Loss of hearing means total and permanent deafness in both ears such that it cannot be corrected to any functional degree by any aid or device.

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### ***Additional benefits***

If it is certified that you were wearing a seat belt during a car accident that causes death, BeneFlex Accidental Death Insurance coverage will pay a benefit of up to an additional 10% of the coverage amount with a maximum of \$10,000 in addition to any other benefit you receive under the Plan.

### ***Maximum benefit***

You are eligible for up to \$500,000 of BeneFlex Accidental Death Insurance coverage.

Your spouse is eligible for up to \$300,000 of BeneFlex Accidental Death Insurance coverage.

Your child is eligible for up to \$100,000 per covered dependent child of BeneFlex Accidental Death Insurance coverage.

### ***When benefits are paid***

The Plan will pay a benefit to you or a beneficiary if an approved loss is suffered while covered by the Plan. The loss must be directly related to the injuries from the accident and take place within 365 days of an accident covered by the Plan. BeneFlex Accidental Death Insurance coverage payments are not offset by any other Company-provided benefits.

If a person covered under this Plan sustains more than one loss as the result of any one accident, only one benefit will be paid. The amount paid in this case will be the largest amount that applies to the loss resulting from the accident.

## **Restrictions and Exclusions**

BeneFlex Accidental Death Insurance does not pay a benefit for the following:

- an accident that occurs while serving on full-time active duty in any Armed Forces for more than 30 days (Reserve or National Guard active duty for training is not excluded)
- commission of a felony by the insured
- declared or undeclared war or act of war in the United States of America
- hang gliding
- intentionally self-inflicted injuries or any attempt to inflict such injuries
- parachuting (except for self-preservation)
- riding as a passenger in any aircraft not licensed to carry passengers for hire (employees traveling on Company business in any licensed aircraft are not excluded)
- serving as a pilot, crew member or student taking flying lessons (employees who are employed by the Company as pilots, aircraft mechanics or crew members are not excluded when flying in aircraft on Company business)
- sickness, disease or bodily infirmity except when a direct result of a covered accident
- travel in aircraft used by or for any military authority (aircraft flown by U.S. Military Airlift command not excluded)
- travel in aircraft used for test or experimental purposes or designed for use beyond the earth's atmosphere

## **Filing a Claim**

### *How to file a claim*

#### **For death**

Upon your or your dependent’s death, you or a beneficiary should contact DuPont Connection. DuPont Connection will work with you or your beneficiary and the insurance company to process the claim. You or your beneficiary will need to file a claim and submit proof of death to receive benefits.

If the claim is approved, you or a beneficiary will be notified in writing and will receive information about the payment of insurance proceeds.

#### **For dismemberment**

Upon your or your dependent’s loss, you should follow the instructions above and submit proof of loss to receive benefits. The loss must be directly related to the injuries from the accident and take place within 365 days of an accident covered by the policy to be covered under the Plan.

Acceptable proof of death and loss include the following:

<b>Event</b>	<b>Required Documents</b>
Death	<ul style="list-style-type: none"> <li>• a certified copy of the death certificate</li> <li>• an accident report</li> <li>• other information as may be requested by the insurance company</li> </ul>
Dismemberment	<ul style="list-style-type: none"> <li>• an accident report</li> <li>• a physician’s statement</li> <li>• X rays</li> <li>• other information as may be requested by the insurance company</li> </ul>

### *If a claim is denied*

If your claim for benefits is denied, you or a beneficiary will be notified in writing. The notice will include the reason for the denial, references to the provisions of the Plan or practice involved, a description of what additional information is necessary and why and a copy of these procedures or comparable information about steps you need to take to resubmit the claim.

### *Appealing a denied claim*

If the decision to deny or reduce the amount of the claim is not explained to your satisfaction or you have additional information that may change the decision, you should follow these steps to try to bring the claim denial to a resolution:

- Step 1: Contact the insurance company for a clearer explanation of the denial.
- Step 2: Provide additional information to the insurance company that may allow reconsideration of your claim.

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You also have the right to request, free of charge, access to and copies of all documents, records and other information relevant to your claim for benefits. If, after contacting the insurance company and requesting additional information, you still have not received an adequate explanation concerning your claim for benefits under the Plan, you have a legal right to appeal the denial or partial denial of your claim.

Your final **appeal** is to DuPont. To appeal the denial, you should notify DuPont Connection in writing requesting a claim review. The request for the appeal should include additional documentation supporting the claim and the reasons why you disagree with the decision.

DuPont, as Plan Administrator, has full discretion and authority to interpret Plan provisions, resolve any ambiguities and evaluate claims. The decision made by DuPont is final and binding.

The exhaustion of the claim and appeal procedure is mandatory for resolving any claim arising under this Plan. Applicable law requires you to pursue all claim and appeal rights on a timely basis before seeking any other legal recourse regarding claims for benefits.

You or a beneficiary must make this request in a timely manner, preferably within 60 days after receiving the original claim decision or after receiving a claim denial.

You or a beneficiary will receive information about the final decision within 60 days of the date DuPont Connection receives the request. Special circumstances may cause the review to take longer. If an extension is needed, you or a beneficiary will be notified by DuPont Connection. When you or a beneficiary is notified of the final decision, the notice will provide the reason for the decision and the specific Plan provisions on which it is based.

Also, if your survivors question your beneficiary designation on record, they can ask for a review. Your survivors should send a request for a review to DuPont Connection and state why they question the beneficiary on record.

### ***How the Plan will handle your appeal***

In reviewing your appeal, all information that you submit, regardless of whether that information was considered at the time of the initial claim, will be considered and a new review will be completed. The party reviewing your appeal will not have participated in the original claim determination and will not be a subordinate of the party who made the original claim determination, the insurance company.

## **About Your Coverage**

### ***If you leave the company***

Your BeneFlex Accidental Death Insurance coverage ends at the end of the month of your employment termination for any reason, including retirement.

Under some circumstances, you may be eligible to apply for coverage under the portability feature if you are no longer eligible for the group coverage.

***Coverage when you are not working***

Taking a leave of absence does not affect your BeneFlex Accidental Death Insurance coverage. You are responsible for continued payment of **premiums** if you are on an unpaid leave of absence.

***If you retire***

Retirees of the Company are not eligible to continue BeneFlex Accidental Death Insurance coverage.

***If you die***

If you die while employed by the Company, your BeneFlex Accidental Death Insurance coverage ends.

***When coverage ends***

Your BeneFlex Accidental Death Insurance coverage ends at the end of the month of your employment termination for any reason, including retirement. You may also choose to cancel your BeneFlex Accidental Death Insurance coverage after a Qualifying Life Event (QLE) or during the annual BeneFlex Change Period.

Your spouse's coverage ends on the date your coverage ends or when your spouse is no longer eligible.

Your dependent child's coverage ends on the date your coverage ends or when the dependent child is no longer eligible.

**Future of the Plan**

While the Company intends to continue the benefits and policies described in this booklet, the Company reserves the right to suspend, modify, or terminate this Plan at its discretion at any time.

**ADMINISTRATIVE INFORMATION**

The information presented in this Summary Plan Description is intended to comply with the disclosure requirements of the regulations issued by the U.S. Department of Labor under the Employee Retirement Income Security Act (**ERISA**) of 1974.

***Overpayments and other errors***

If a benefit is paid that is larger than the amount allowed by the Plan, the Plan has a right to recover the excess amount from the person or agency who received it. Erroneous statements will not change the rights or obligations under the Plan and will not operate to grant additional benefits or coverage.

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### ***Assignment of benefits***

When you are covered by an insurance plan, you have the right to assign your benefits. You can transfer those rights by assigning them to someone else, called the assignee. There are restrictions on whom you can name as an assignee. The restrictions include the following:

The assignment must be made without consideration to one or more of the following persons or their estates, or to a trustee of trust under which any one of the following is a beneficiary:

- the employee's spouse
- brothers or sisters of the employee or the employee's spouse
- lineal ascendants or descendants of the employee, the employee's spouse or the brothers or sisters of the employee or the employee's spouse
- brothers or sisters of lineal ascendants of the employee or his spouse

Making an assignment of rights irrevocably transfers ownership of your insurance plan benefit to someone else. Once coverage has been assigned, the new "owner" has all the rights you once had. Some examples of these rights include naming a beneficiary and making coverage changes at the annual BeneFlex Election Change Period. Assignment of benefits is permanent.

### ***Conversion rights***

BeneFlex Accidental Death Insurance coverage does not offer conversion privileges.

### ***Applying for the portability feature***

Portability is a feature of the Plan that allows you to obtain similar accidental insurance coverage after you lose eligibility for this group coverage. You can port BeneFlex Accidental Life Insurance only if you also port your BeneFlex Employee Life Insurance.

You must contact the insurance company within 31 days of the loss of coverage under this Plan to obtain a portability application. The application must be completed within 31 days of the date it is mailed, or the opportunity to port coverage is lost.

### ***Naming a beneficiary***

To name one or more beneficiaries, you must contact DuPont Connection. You may name anyone you choose as your beneficiary. Your beneficiary can be one individual or several individuals.

If you want benefits to be shared among two or more individuals, you can arrange to have them share the benefit equally or according to a percentage of the total. You may designate a beneficiary as primary or contingent. A primary beneficiary is the person you name to receive any benefits provided by the Plan if you die. A contingent beneficiary is an alternate beneficiary who receives your benefit if your primary beneficiary dies before you do.

If you don't designate beneficiaries or if no named beneficiary survives you, benefits will be paid in order to the first of the following survivors: your spouse, followed by your child or children (equally), followed by your mother and/or father (equally), followed by your sisters and/or brothers (equally), followed by your estate.

If you would like to assign your benefit, refer to the "Assignment of benefits" section.

You may change your beneficiary at any time by contacting DuPont Connection at 1-800-775-5955. To request a beneficiary change form, contact DuPont Connection.

You cannot change your beneficiary if you assigned your benefits.

You are always the beneficiary for your covered dependents. In the event of the death or dismemberment of a covered spouse or dependent, the loss of life or dismemberment benefit is paid to you or to your estate.

## **ERISA Rights**

As a participant in the BeneFlex Accidental Death Insurance Plan, you are entitled to certain rights and protections under ERISA. ERISA entitles you to:

- examine, at the Plan Administrator's office and other specified locations, including work sites and union halls if applicable, without charge, all Plan documents governing the Plan. These documents may include insurance contracts, collective bargaining agreements if applicable, and the latest annual report (Form 5500) filed by the Plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration.
- obtain, after sending a written request to the Plan Administrator, copies of documents governing the operation of the Plan, including insurance contracts and collective bargaining agreements if applicable, and copies of the latest annual report (Form 5500 Series) and updated Summary Plan Description. You may be asked to pay a fee for the copies.
- receive a written summary of the Plan's annual financial report. The Plan Administrator is required by law to provide each participant with a copy of this summary annual report.

In addition to creating rights for Plan participants, ERISA imposes duties on the people responsible for the operation of the Plan. The people who operate your Plan, called "fiduciaries," have a duty to do so prudently and in the best interest of you and other Plan participants and beneficiaries. No one, including your employer, your union or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a benefit or exercising your rights under ERISA.

If your claim for a benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules.

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Under ERISA, there are several steps you can take to enforce your rights. For instance, if you request a copy of Plan documents or the latest annual report from the Plan and do not receive it within 30 days, you may file suit in federal court. In such a case, the court may require the Plan Administrator to provide the materials and pay you up to \$110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the Plan Administrator's control.

If you have a claim for benefits that is denied or ignored, in whole or in part, you may file suit in a state or federal court. In addition, if you disagree with the Plan's decision or lack of decision about the qualified status of a domestic relations order or medical child support order, you may file suit in federal court. If Plan fiduciaries misuse the Plan's money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in federal court. The court will decide who should pay court costs and legal fees. If you are successful, the court may order the person you sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees if, for example, it finds your claim is frivolous.

If you have any questions about your Plan, contact the Plan Administrator. If you have questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the Plan Administrator, contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory. You may also contact the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, D.C. 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

## **Plan Sponsor**

E. I. du Pont de Nemours and Company  
1007 Market Street  
Wilmington, DE 19898  
Phone: 1-302-774-1000

Other companies related to DuPont also adopt the Plan for the benefit of their employees from time to time. You can get a list of adopting employers and their addresses from the Plan Administrator.

## **Plan Name**

This summary describes benefits for the BeneFlex Accidental Death Insurance Plan.

## **Type of Plan and Administration**

The Plan is a welfare plan, as defined by the Employee Retirement Income Security Act of 1974 (ERISA) that provides group life insurance. The Company contracts with an insurance company for the purposes of providing any benefits under this Plan.

**Plan Administrator**

E. I. du Pont de Nemours and Company  
1007 Market Street  
Wilmington, DE 19898  
Phone: 1-302-774-1000

**Plan Insurer**

The Prudential Insurance Company of America  
290 West Mount Pleasant Avenue  
Livingston, NJ 07039  
Phone: 1-888-257-0412

**Plan Sponsor's Employer Identification Number (EIN)**

The EIN is 51-0014090.

**Policy Number**

The Policy number is G-93413.

**Plan Year**

The Plan Year is January 1 through December 31.

**Source of Benefit Funding**

You pay the entire cost of coverage.

**Agent for Service of Legal Process**

E. I. du Pont de Nemours and Company  
1007 Market Street  
Wilmington, DE 19898  
Phone: 1-302-774-1000

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## **CONTACTS**

### **For Questions Regarding Eligibility and Enrollment**

DuPont Connection  
P.O. Box 1407  
Lincolnshire, IL 60069-1407  
Phone: 1-800-775-5955  
Online: <http://resources.hewitt.com/dupont>

### **For Filing a Claim**

DuPont Connection  
P.O. Box 1407  
Lincolnshire, IL 60069-1407  
Phone: 1-800-775-5955  
Online: <http://resources.hewitt.com/dupont>

### **For Beneficiary Designations**

DuPont Connection  
P.O. Box 1407  
Lincolnshire, IL 60069-1407  
Phone: 1-800-775-5955  
Online: <http://resources.hewitt.com/dupont>

### **For Review of a Beneficiary on File**

DuPont Connection  
P.O. Box 1407  
Lincolnshire, IL 60069-1407  
Phone: 1-800-775-5955  
Online: <http://resources.hewitt.com/dupont>

## **For Appealing a Denied Claim**

DuPont Connection  
P.O. Box 1407  
Lincolnshire, IL 60069-1407  
Phone: 1-800-775-5955  
Online: <http://resources.hewitt.com/dupont>

## **To Port Coverage**

The Prudential Insurance Company of America  
250 Gibraltar Road  
Horsham, PA 19044  
Phone: 1-800-778-3827

## **DICTIONARY TERMS**

The following terms are highlighted throughout the SPDs. In this section, you will find the definitions for these terms to help clarify their meaning and to provide information to better help you understand the provisions of your benefit plans.

### ***Appeal***

A request for reconsideration of a denied claim. Either the Claims Administrator or the Plan Administrator reviews the appeal and decides if the claim's previous denial should be overturned. Certain appeals are governed by requirements set forth by the Employee Retirement Income Security Act of 1974 (ERISA), including how appeals are submitted and responded to, relevant time frames and responsibilities of the claimant, the Claims Administrator and the Plan Administrator.

### ***Assignment***

The transfer of ownership of insurance coverage to someone else, known as the assignee. Once assigned, the assignee has all the ownership rights to the insurance coverage. Assignment of insurance coverage is permanent.

### ***Before-tax paycheck deductions***

Contributions taken from your paycheck before applicable federal, state, local and other taxes are withheld.

### ***Beneficiary***

The person entitled to benefits if you or a covered person dies. You or the covered person names or designates the beneficiary.

### ***Company***

The association or organization you work for and that provides your benefit program.

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***Convert***

Ability to transfer your company benefit plan to non-group coverage without having to meet any eligibility requirements.

***Dismemberment***

The loss of one or more arms, legs, hands, feet or eyesight because of an accident that doesn't cause death.

***ERISA*** (Employee Retirement Income Security Act of 1974)

This federal law requires employee benefit plans to disclose information about the plan to participants and establish claims procedures.

***Evidence of insurability***

In some cases, the insurance company may require you to complete a medical questionnaire or have a physical exam to receive coverage.

***Full-Service Employee***

Any person designated by the Company as a full-time employee. Any employee who works at least 20 hours per week on a regular basis is considered a Full-Service Employee.

***Monthly premium***

The amount of money you pay each month for your benefit coverage.

***Plan Year***

The 12-month period, or policy or fiscal year on which the Plan's records are kept. The Plan Year runs from January 1 through December 31.

***Portability***

Subject to restrictions, the right to apply for similar coverage without evidence of insurability in the event you are no longer eligible under the group coverage.

***Qualifying Life Event***

An event recognized by Section 125 of the Internal Revenue Code that entitles you to make a change in the benefit elections you made.

***Spouse***

Your lawful husband or wife.

***Summary Plan Description (SPD)***

A legally required document intended to help you understand your benefits, how the Plan operates, how to file claims, and your rights and responsibilities as a Plan participant. It does not describe every feature in the Plan and it is not intended to be a full statement of the Plan documents.



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*The miracles of science™*