



Accident Insurance Plan Summary

Affirm, Inc.

Coverage Effective: 1/1/2022

Accident Insurance issued by **The Prudential Insurance Company of America (Prudential)** pays you regardless of what your medical plan covers. Your benefits are paid directly to you to spend however you like, including out-of-pocket medical costs or everyday living expenses.

Below is a summary of the benefits included in the coverage available to you, your spouse/domestic partner and child(ren). For a complete list of benefits, limitations and exclusions, please refer to your Certificate of Coverage.

This is a summary of benefits and does not include all plan provisions, exclusions and limitations. If there is a discrepancy between this document and the group contract issued by The Prudential Insurance Company of America, the terms of the group contract will govern.

Accidental Death Benefit	Benefit Amount
Basic Accidental Death Benefit- Employee	\$25,000
Basic Accidental Death Benefit- Spouse/Domestic Partner	\$12,500
Basic Accidental Death Benefit-Children	\$6,250
Accidental Death - Common Carrier-Employees	\$75,000
Accidental Death - Common Carrier-Spouse/Domestic Partner	\$37,500
Accidental Death-Common Carrier-Children	\$18,750
Accidental Dismemberment Benefit	Up to \$12,000
*Catastrophic Loss Benefit	Up to \$50,000

*Catastrophic Loss Benefit includes loss of sight, hearing and speech.

Type Of Loss	Benefit Amount
Fracture Benefit	Up to \$2,250 Closed / Open \$4,500
Dislocation Benefit	Up to \$2,550 Closed / Open \$5,100
Burn Benefit	Up to \$10,000
Eye Injury Benefit	Up to \$225
Laceration Benefit	Up to \$320
Torn Knee Cartilage Benefit	\$500
Torn, Ruptured or Severed Tendon/Ligament/Rotator Cuff Benefit	Up to \$800
Broken Tooth Benefit	Up to \$250

Additional Injuries Benefit	Benefit Amount
Concussion	\$200
Coma	\$11,500
Ruptured Disc with Surgical Repair	\$500
Puncture Wound	\$50

Hospital Benefits	Benefit Amount
Non-ICU Hospital Admission	\$1,000
ICU Hospital Admission	\$1,000
Non-ICU Hospital Confinement	\$300
ICU Confinement	\$400
Inpatient Rehabilitation Benefit	\$100
Transportation Benefit	\$500
Lodging Benefit	\$120

Optional Benefits and Provisions	Benefit Amount
*Wellness Benefit ¹	\$100
Child Care Benefit	\$15

* For a complete list of benefits, limitations, and exclusions, please refer to your Certificate of Coverage.

Paralysis Benefit	Benefit Amount
Four Limbs	\$16,000
Three Limbs	\$12,000
Two Limbs	\$10,750
One Limb	\$5,000

Above is a summary of the benefits included in the coverages available to you. This coverage may include Emergency and Non-Emergency benefits. For a complete list of benefits, limitations, and exclusions, please refer to your Certificate of Coverage.

¹ The Health Screening/Wellness Benefit is not available in all states.

This coverage is not health insurance coverage (often referred to as "Major Medical Coverage").

This type of plan is NOT considered "minimum essential coverage" under the Affordable Care Act and therefore does NOT satisfy the individual mandate that you have health insurance coverage.

Group Accident Insurance coverage is a limited benefit policy issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ. Prudential's Accident Insurance is not a substitute for medical coverage that provides benefits for medical treatment, including hospital, surgical, and medical expenses, and it does not provide reimbursement for such expenses. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. If there is a discrepancy between this document and the Booklet-Certificate/Group Contract issued by The Prudential Insurance Company of America, the Group Contract will govern. Please contact Prudential for more information. Contract provisions may vary by state. Contract Series: 83500.

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