



Hospital Indemnity Insurance Plan Summary

St. Peter's Health

Hospital Indemnity 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 and everyday living expenses.

Below is a summary of 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.

Benefit Type: Hospital Benefits	Benefit Limits	Benefit Amounts
Hospital Admission	5 time(s) per calendar year	\$1,000
ICU Admission	5 time(s) per calendar year	\$2,000
Hospital Confinement	Up to 30 days per confinement; payable to a maximum of 5 confinements per calendar year. When an admission benefit is paid, the confinement benefit pays on day 2.	\$200
ICU Confinement	Up to 30 days per confinement; payable to a maximum of 5 confinements per calendar year. When an admission benefit is paid, the confinement benefit pays on day 2.	\$400
Rehabilitation Confinement	Up to 15 days per calendar year	\$200

Benefit Type: Additional Benefits	Benefit Limits	Benefit Amounts
Health Screening/ Wellness ¹	Paid 1x per calendar year per insured person if they take one of the eligible screening/preventive tests.	\$75

*Health Screening/Wellness Benefit: Prudential will pay an annual benefit (defined above) when you or a covered dependent take one of the eligible screening/preventive measures. You will not receive an additional payment if you take more than one.

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

Hospital Indemnity Insurance is not approved in all states.

Hospital Indemnity Insurance is not a Medicare Supplement insurance plan. If you are eligible for Medicare, review the Guide to Health Insurance for People with Medicare available from the company. Hospital Indemnity Insurance is not medical coverage. It does not provide any type of medical coverage and is not a substitute for medical coverage or disability insurance. Hospital Indemnity Insurance may be coordinated with Medicare or Medicaid. As a result, certain benefits payable to you under these plans may result in a corresponding reduction in the Medicare or Medicaid benefits otherwise payable to you.

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.

Hospital Indemnity 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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Hospital Indemnity Insurance Rate Sheet

St. Peter's Health

Issued by **The Prudential Insurance Company of America**

Monthly cost to you

Insured	Cost to you
Employee	\$17.75
Employee and Spouse/Domestic Partner	\$32.28
Employee and Child/ren	\$44.47
Family	\$59.00

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