

Hospital Indemnity Plus

Plan options at a glance

Set cash benefits paid directly to you for hospital stays, surgery, outpatient care and emergencies, with no deductible, in addition to any other coverage you have.

Benefit	Premier	Enhanced	Essential
Benefit Maximums			
Lifetime maximum	\$5,000,000	\$5,000,000	\$5,000,000
Benefit period maximum	\$250,000	\$250,000	\$250,000
Outpatient benefit period maximum	\$10,000	\$7,500	\$5,000
Hospital Confinement Benefits			
Hospital confinement, sickness or injury	\$2,000 per day	\$1,500 per day	\$1,000 per day
ICU confinement, sickness or injury	\$1,000 per day	\$750 per day	\$500 per day
Rehabilitation or skilled nursing facility	\$1,000 per day	\$750 per day	\$500 per day
Mental health facility (60 days per benefit period)	\$1,000 per day	\$750 per day	\$500 per day
Hospital short stay	\$1,000 per stay	\$750 per stay	\$500 per stay
Hospital admission (one per benefit period)	\$4,000	\$3,000	\$2,000
Surgery Benefits			
Daily surgery benefit, Tier 1	\$12,000 per day	\$8,000 per day	\$4,000 per day
Daily surgery benefit, Tier 2	\$3,000 per day	\$2,000 per day	\$1,000 per day
Daily surgery benefit, Tier 3	\$600 per day	\$400 per day	\$200 per day
Assistant surgeon (one per covered surgery)	25% of surgery	25% of surgery	25% of surgery
Anesthesia (one per covered surgery)	25% of surgery	25% of surgery	25% of surgery
Outpatient Benefits			
Office visit	\$150 per day	\$100 per day	\$50 per day
Therapy office visit	\$50 per day	\$40 per day	\$30 per day
MRI / PET / CAT scan	\$800 per scan	\$600 per scan	\$400 per scan
X-ray	\$100 per x-ray	\$75 per x-ray	\$50 per x-ray
Lab / blood panel	\$100 per test	\$75 per test	\$50 per test
Mammogram, Pap smear, prostate exam	\$400 per exam	\$300 per exam	\$200 per exam
Colonoscopy	\$1,200	\$900	\$600
Emergency Benefits			
Urgent care	\$400 per day	\$300 per day	\$200 per day
Emergency room	\$1,000 per day	\$750 per day	\$500 per day
Ground or water ambulance	\$1,000 per day	\$750 per day	\$500 per day
Air ambulance	\$3,000 per day	\$2,250 per day	\$1,500 per day



Brief description of benefits only; the actual policy provisions control. See the policy and outline of coverage for benefits, limitations, exclusions, renewability, waiting periods and pre-existing conditions. Eligibility is subject to underwriting. MedMutual Protect is the brand name for insurance products issued by subsidiaries of Medical Mutual of Ohio; this policy is underwritten by Reserve National Insurance Company, Policy Form HI. The MedMutual Protect insurance policies, either alone or in combination with each other, are not major medical coverage or "Minimum Essential Coverage" under the federal Patient Protection and Affordable Care Act. Form numbers and availability may vary by state. Not for use in New Mexico.