GERBER LIFE INSURANCE COMPANY OUTLINE OF MEDICARE SUPPLEMENT COVERAGE – COVER PAGE STANDARDIZED BENEFIT PLAN A AND SELECT BENEFIT PLANS F AND G

Benefit Chart of Medicare Supplement Plans Sold for Effective Dates on or After June 1, 2010.

These charts show the benefits included in each of the standard Medicare supplement plans. Every company must make available Plan "A." Some plans may not be available in your state.

Basic Benefits:

Hospitalization: Part A coinsurance plus coverage for 365 additional days after Medicare benefits end.

Medical Expenses: Part B coinsurance (generally 20% of Medicare-approved expenses) or copayments for hospital outpatient services. Plans K, L, and N

require insureds to pay a portion of Part B coinsurance or copayments.

Blood: First 3 pints of blood each year. Hospice: Part A coinsurance.

Α	В	С	D	F * F**	G*	K	L	М	N
Basic, includ- ing 100% Part B co-insur- ance	Basic, including 100% Part B co- insurance	Hospitalization and preventive care paid at 100%; other basic benefits paid at 50%	Hospitalization and preventive care paid at 100%; other basic benefits paid at 75%	Basic, including 100% Part B co- insurance	Basic, including 100% Part B coinsurance, except up to \$20 copayment for office visit, and up to \$50 copayment for ER				
		Skilled Nursing Facility Co- insurance	Skilled Nursing Facility Co- insurance	Skilled Nursing Facility Co- insurance	Skilled Nursing Facility Co- insurance	50% Skilled Nursing Facility Coinsurance	75% Skilled Nursing Facility Coinsurance	Skilled Nursing Facility Co- insurance	Skilled Nursing Facility Coinsurance
	Part A Deductible	Part A Deductible Part B	Part A Deductible	Part A Deductible Part B	Part A Deductible	50% Part A Deductible	75% Part A Deductible	50% Part A Deductible	Part A Deductible
		Deductible		Part B Excess (100%)	Part B Excess (100%)				
		Foreign Travel Emer- gency	Foreign Travel Emer- gency	Foreign Travel Emer- gency	Foreign Travel Emer- gency			Foreign Travel Emergency	Foreign Travel Emergency
			e.			Out-of-pocket limit \$4,940; paid at 100% after limit reached	Out-of-pocket limit \$2,470; paid at 100% after limit reached		

*SELECT PLANS F AND G contain restrictions on your use of providers. Standardized Plans A, F and G are also available. NOTICE TO BUYER: This policy/certificate may not cover all costs associated with medical care incurred by the buyer during the period of coverage. The buyer is advised to review all policy/certificate limitations. **Plan F also has an option called a high deductible Plan F. This high deductible plan pays the same benefits as Plan F after one has paid a calendar year \$2,140 deductible. Benefits from high deductible Plan F will not begin until out-of-pocket expenses exceed \$2,140. Out-of-pocket expenses for this deductible are expenses that would ordinarily be paid by the policy/certificate. These expenses include the Medicare deductibles for Part A and Part B, but do not include the plan's separate foreign travel emergency deductible.

MONTHLY NON-TOBACCO RATES ZIP CODES: 733, 755-756, 758-760, 762-769, 778-781, 783, 785-792, 795-799, 885

	FEMALE	5: /33, /35-/30, /36-		, , , ,	MALE	
Plan A	Plan F	Plan G	Attained	Plan A	Plan F	Plan G
MTG20	MTG42†	MTG43†	Age	MTG20	MTG42†	MTG43†
323.76			Thru 64	372.14		
102.85	120.98	100.54	65	118.22	139.05	115.56
104.35	122.57	101.84	66	119.94	140.89	117.06
105.80	124.11	103.10	67	121.61	142.65	118.50
109.27	128.20	106.51	68	125.59	147.36	122.43
112.63	132.44	110.03	69	129.46	152.22	126.47
115.84	136.55	113.48	70	133.15	156.96	130.44
119.14	140.79	117.05	71	136.94	161.83	134.54
122.25	144.90	120.51	72	140.52	166.55	138.52
125.09	148.70	123.72	73	143.78	170.92	142.20
127.61	152.27	126.76	74	146.67	175.03	145.70
129.79	155.54	129.54	75	149.18	178.79	148.89
134.21	161.55	134.61	76	154.26	185.69	154.72
135.95	164.37	137.02	77	156.26	188.93	157.50
138.91	168.65	140.65	78	159.67	193.85	161.66
140.44	171.23	142.87	79	161.42	196.81	164.22
141.96	173.82	145.12	80	163.18	199.80	166.81
143.40	176.36	147.30	81	164.82	202.71	169.31
146.12	180.53	150.87	82	167.95	207.50	173.41
147.32	182.85	152.89	83	169.34	210.18	175.73
148.44	185.14	154.89	84	170.62	212.80	178.03
150.90	189.13	158.29	85	173.44	217.39	181.94
151.93	191.35	160.25	86	174.63	219.95	184.20
152.98	193.67	162.28	87	175.84	222.61	186.53
154.01	195.93	164.26	88	177.02	225.21	188.81
155.06	198.26	166.29	89	178.23	227.89	191.14
157.60	202.55	170.02	90	181.15	232.82	195.43
158.71	204.96	172.20	91	182.43	235.59	197.93
159.86	207.47	174.47	92	183.74	238.47	200.54
161.04	210.04	176.77	93	185.10	241.43	203.19
162.24	212.76	179.22	94	186.48	244.56	206.00
164.97	217.50	183.36	95	189.63	250.00	210.76
166.13	220.21	185.83	96	190.96	253.12	213.59
167.19	222.82	188.19	97	192.17	256.12	216.31
168.22	225.48	190.58	98	193.36	259.17	219.06
169.27	228.19	193.06	99+	194.56	262.29	221.90

†SELECT Plans

MONTHLY TOBACCO RATES
ZIP CODES: 733, 755-756, 758-760, 762-769, 778-781, 783, 785-792, 795-799, 885

	FEMALE	5: /33, /35-/30, /36-	700,702 705,770		MALE	
Plan A	Plan F	Plan G	Attained	Plan A	Plan F	Plan G
MTG20	MTG42†	MTG43†	Age	MTG20	MTG42†	MTG43†
372.14			Thru 64	427.75		
118.22	139.05	115.56	65	135.88	159.83	132.83
119.94	140.89	117.06	66	137.86	161.94	134.55
121.61	142.65	118.50	67	139.78	163.97	136.21
125.59	147.36	122.43	68	144.36	169.38	140.72
129.46	152.22	126.47	69	148.80	174.97	145.37
133.15	156.96	130.44	70	153.05	180.41	149.93
136.94	161.83	134.54	71	157.40	186.01	154.64
140.52	166.55	138.52	72	161.52	191.44	159.22
143.78	170.92	142.20	73	165.26	196.46	163.45
146.67	175.03	145.70	74	168.59	201.18	167.47
149.18	178.79	148.89	75	171.47	205.50	171.14
154.26	185.69	154.72	76	177.31	213.44	177.84
156.26	188.93	157.50	77	179.61	217.16	181.03
159.67	193.85	161.66	78	183.53	222.81	185.82
161.42	196.81	164.22	79	185.54	226.22	188.76
163.18	199.80	166.81	80	187.56	229.65	191.73
164.82	202.71	169.31	81	189.45	233.00	194.61
167.95	207.50	173.41	82	193.05	238.51	199.32
169.34	210.18	175.73	83	194.64	241.58	201.99
170.62	212.80	178.03	84	196.11	244.60	204.63
173.44	217.39	181.94	85	199.36	249.87	209.13
174.63	219.95	184.20	86	200.72	252.81	211.72
175.84	222.61	186.53	87	202.11	255.87	214.40
177.02	225.21	188.81	88	203.47	258.86	217.02
178.23	227.89	191.14	89	204.86	261.94	219.70
181.15	232.82	195.43	90	208.22	267.61	224.63
182.43	235.59	197.93	91	209.69	270.79	227.50
183.74	238.47	200.54	92	211.20	274.10	230.50
185.10	241.43	203.19	93	212.76	277.50	233.55
186.48	244.56	206.00	94	214.35	281.10	236.78
189.63	250.00	210.76	95	217.96	287.36	242.25
190.96	253.12	213.59	96	219.49	290.94	245.51
192.17	256.12	216.31	97	220.89	294.39	248.63
193.36	259.17	219.06	98	222.25	297.90	251.79
194.56	262.29	221.90	99+	223.63	301.48	255.06

†SELECT Plans

MONTHLY NON-TOBACCO RATES ZIP CODES: 750-751, 753-754, 757, 761, 784

	FEMALE				MALE	
Plan A	Plan F	Plan G	Attained	Plan A	Plan F	Plan G
MTG20	MTG42†	MTG43†	Age	MTG20	MTG42†	MTG43†
349.67			Thru 64	401.91		
111.08	130.65	108.58	65	127.67	150.18	124.81
112.69	132.38	109.99	66	129.53	152.16	126.42
114.26	134.04	111.35	67	131.34	154.07	127.98
118.01	138.46	115.03	68	135.64	159.15	132.22
121.64	143.03	118.83	69	139.81	164.40	136.59
125.11	147.48	122.56	70	143.81	169.51	140.87
128.67	152.05	126.41	71	147.89	174.78	145.30
132.04	156.49	130.16	72	151.76	179.88	149.60
135.09	160.60	133.61	73	155.28	184.59	153.58
137.81	164.46	136.90	74	158.41	189.03	157.36
140.17	167.99	139.90	75	161.11	193.09	160.80
144.94	174.48	145.38	76	166.60	200.55	167.10
146.82	177.52	147.98	77	168.76	204.04	170.10
150.03	182.14	151.90	78	172.45	209.35	174.60
151.67	184.92	154.30	79	174.33	212.56	177.36
153.32	187.73	156.73	80	176.23	215.78	180.15
154.87	190.47	159.08	81	178.01	218.93	182.86
157.81	194.97	162.93	82	181.39	224.10	187.28
159.11	197.48	165.12	83	182.88	226.99	189.79
160.31	199.95	167.28	84	184.27	229.83	192.27
162.97	204.26	170.95	85	187.32	234.78	196.50
164.08	206.66	173.07	86	188.60	237.54	198.93
165.22	209.16	175.26	87	189.90	240.42	201.45
166.33	211.61	177.40	88	191.18	243.23	203.91
167.46	214.12	179.59	89	192.49	246.12	206.43
170.21	218.76	183.62	90	195.64	251.45	211.06
171.41	221.36	185.97	91	197.02	254.43	213.76
172.65	224.06	188.42	92	198.44	257.55	216.58
173.92	226.84	190.92	93	199.91	260.74	219.44
175.22	229.79	193.56	94	201.40	264.12	222.48
178.17	234.90	198.03	95	204.80	270.00	227.62
179.42	237.83	200.69	96	206.23	273.37	230.68
180.57	240.65	203.24	97	207.55	276.61	233.61
181.68	243.52	205.83	98	208.83	279.91	236.58
182.81	246.45	208.50	99+	210.12	283.27	239.65

†SELECT Plans

MONTHLY TOBACCO RATES ZIP CODES: 750-751, 753-754, 757, 761, 784

	FEMALE				MALE	
Plan A	Plan F	Plan G	Attained	Plan A	Plan F	Plan G
MTG20	MTG42†	MTG43†	Age	MTG20	MTG42†	MTG43†
401.91	'	ı	Thru 64	461.97	1	1
127.67	150.18	124.81	65	146.75	172.62	143.46
129.53	152.16	126.42	66	148.89	174.90	145.31
131.34	154.07	127.98	67	150.96	177.09	147.11
135.64	159.15	132.22	68	155.91	182.93	151.98
139.81	164.40	136.59	69	160.70	188.97	157.00
143.81	169.51	140.87	70	165.29	194.84	161.92
147.89	174.78	145.30	71	169.99	200.89	167.01
151.76	179.88	149.60	72	174.44	206.76	171.96
155.28	184.59	153.58	73	178.48	212.18	176.53
158.41	189.03	157.36	74	182.08	217.27	180.87
161.11	193.09	160.80	75	185.19	221.94	184.83
166.60	200.55	167.10	76	191.50	230.52 234.53	192.07
168.76	204.04	170.10	77	193.98		195.51
172.44	209.35	174.60	78	198.21	240.64	200.69
174.33	212.56	177.36	79	200.38	244.32	203.86
176.23	215.78	180.15	80	202.57	248.02	207.07
178.01	218.93	182.86	81	204.61	251.64	210.18
181.39	224.10	187.28	82	208.49	257.59	215.27
182.88	226.99	189.79	83	210.21	260.91	218.15
184.27	229.83	192.27	84	211.80	264.17	221.00
187.32	234.78	196.50	85	215.31	269.86	225.86
188.60	237.54	198.93	86	216.78	273.04	228.66
189.90	240.42	201.45	87	218.28	276.34	231.55
191.18	243.23	203.91	88	219.75	279.57	234.38
192.49	246.12	206.43	89	221.25	282.90	237.28
195.64	251.45	211.06	90	224.88	289.02	242.60
197.02	254.43	213.76	91	226.47	292.45	245.70
198.44	257.54	216.58	92	228.10	296.03	248.94
199.91	260.74	219.44	93	229.78	299.70	252.23
201.40	264.12	222.48	94	231.50	303.59	255.72
204.80	270.00	227.62	95	235.40	310.35	261.63
206.23	273.37	230.68	96	237.05	314.22	265.15
207.55	276.61	233.61	97	238.56	317.94	268.52
208.83	279.91	236.58	98	240.03	321.73	271.93
210.12	283.27	239.66	99+	241.52	325.60	275.47

†SELECT Plans

MONTHLY NON-TOBACCO RATES ZIP CODES: 752, 770-777, 782, 793 - 794

	FEMALE			•	MALE	
Plan A	Plan F	Plan G	Attained	Plan A	Plan F	Plan G
MTG20	MTG42†	MTG43†	Age	MTG20	MTG42†	MTG43†
388.52			Thru 64	446.57		
123.42	145.17	120.65	65	141.86	166.86	138.67
125.22	147.09	122.21	66	143.93	169.07	140.47
126.96	148.93	123.72	67	145.93	171.19	142.20
131.12	153.85	127.81	68	150.71	176.83	146.91
135.15	158.92	132.04	69	155.35	182.67	151.77
139.01	163.86	136.18	70	159.78	188.35	156.53
142.96	168.95	140.46	71	164.33	194.19	161.44
146.71	173.88	144.62	72	168.63	199.86	166.23
150.10	178.44	148.46	73	172.53	205.10	170.64
153.13	182.73	152.11	74	176.01	210.03	174.84
155.74	186.65	155.44	75	179.02	214.54	178.67
161.05	193.86	161.53	76	185.11	222.83	185.67
163.14	197.24	164.43	77	187.51	226.72	189.00
166.70	202.37	168.78	78	191.61	232.61	194.00
168.52	205.47	171.45	79	193.70	236.17	197.07
170.36	208.59	174.14	80	195.81	239.76	200.17
172.07	211.63	176.76	81	197.79	243.25	203.17
175.34	216.63	181.04	82	201.54	249.00	208.09
176.79	219.42	183.46	83	203.20	252.21	210.88
178.12	222.17	185.86	84	204.74	255.36	213.63
181.07	226.95	189.95	85	208.13	260.86	218.33
182.31	229.62	192.30	86	209.55	263.93	221.04
183.57	232.40	194.74	87	211.00	267.13	223.83
184.81	235.12	197.12	88	212.42	270.25	226.57
186.07	237.91	199.55	89	213.87	273.47	229.37
189.12	243.07	204.03	90	217.38	279.38	234.51
190.46	245.95	206.63	91	218.92	282.71	237.51
191.83	248.96	209.36	92	220.49	286.16	240.64
193.25	252.05	212.13	93	222.12	289.71	243.83
194.69	255.32	215.06	94	223.78	293.47	247.20
197.97	261.00	220.03	95	227.55	300.00	252.91
199.36	264.25	222.99	96	229.15	303.74	256.31
200.63	267.39	225.83	97	230.61	307.34	259.57
201.87	270.58	228.70	98	232.03	311.01	262.87
203.12	273.83	231.67	99+	233.47	314.75	266.28

†SELECT Plans

MONTHLY TOBACCO RATES ZIP CODES: 752, 770-777, 782, 793 - 794

	FEMALE				MALE	
Plan A	Plan F	Plan G	Attained	Plan A	Plan F	Plan G
MTG20	MTG42†	MTG43†	Age	MTG20	MTG42†	MTG43†
446.57	1	'	Thru 64	513.30	1	1
141.86	166.86	138.68	65	163.06	191.80	159.40
143.93	169.07	140.47	66	165.43	194.33	161.46
145.93	171.19	142.20	67	167.74	196.76	163.45
150.71	176.83	146.91	68	173.23	203.26	168.86
155.35	182.67	151.77	69	178.56	209.96	174.44
159.78	188.35	156.53	70	183.66	216.49	179.92
164.33	194.19	161.44	71	188.88	223.21	185.57
168.63	199.86	166.23	72	193.82	229.73	191.06
172.53	205.10	170.64	73	198.31	235.75	196.14
176.01	210.03	174.84	74	202.31	241.42	200.96
179.02	214.54	178.67	75	205.76	246.60	205.37
185.11	222.83	185.67	76	212.77	256.13	213.41
187.51	226.72	189.00	77	215.53	260.59	217.24
191.61	232.61	194.00	78	220.24	267.37	222.98
193.70	236.17	197.07	79	222.65	271.46	226.51
195.81	239.76	200.17	80	225.07	275.58	230.08
197.79	243.25	203.17	81	227.34	279.60	233.53
201.54	249.00	208.09	82	231.66	286.21	239.18
203.20	252.21	210.88	83	233.57	289.90	242.39
204.74	255.36	213.63	84	235.33	293.52	245.56
208.13	260.86	218.33	85	239.23	299.84	250.96
209.55	263.93	221.04	86	240.86	303.37	254.06
211.00	267.13	223.83	87	242.53	307.04	257.28
212.42	270.25	226.57	88	244.16	310.63	260.42
213.87	273.47	229.37	89	245.83	314.33	263.64
217.38	279.39	234.51	90	249.86	321.13	269.56
218.92	282.71	237.51	91	251.63	324.95	273.00
220.49	286.16	240.64	92	253.44	328.92	276.60
222.12	289.71	243.83	93	255.31	333.00	280.26
223.78	293.47	247.20	94	257.22	337.32	284.14
227.55	300.00	252.91	95	261.55	344.83	290.70
229.15	303.74	256.31	96	263.39	349.13	294.61
230.61	307.34	259.57	97	265.07	353.27	298.36
232.03	311.01	262.87	98	266.70	357.48	302.15
233.47	314.75	266.28	99+	268.36	361.78	306.07

†SELECT Plans

Premium Information

We, Gerber Life, can only raise your premium if we raise the premium for all the policies like yours in this state. Until you are age 99, your premium may change each year. This change will only be made on the first renewal date that coincides with or follows each anniversary of the policy date. Schedules of rates may vary depending upon your policy date.

Disclosures

Use this outline to compare benefits and premiums among policies.

Read Your Policy Very Carefully

This is only an outline describing your policy's most important features. The policy is your insurance contract. You must read the policy itself to understand all of the rights and duties of both you and your insurance company.

Right to Return Policy

If you find that you are not satisfied with your policy, you may return it to Gerber Life Insurance Company at our administrative office, 3316 Farnam Street, Omaha, NE 68175. If you send the policy back to us within 30 days after you receive it, we will treat the policy as if it had never been issued and return all of your payments.

Policy Replacement

If you are replacing another health insurance policy, do NOT cancel it until you have actually received your new policy and are sure you want to keep it.

Notice

The policy may not fully cover all of your medical costs. Neither Gerber Life nor its agents are connected with Medicare. This outline of coverage does not give all the details of Medicare coverage. Contact your local Social Security office or consult "Medicare & You" for more details.

Limitations and Exclusions

We will not pay benefits for:

- (a) services for which a charge is normally not made when there is no insurance;
- (b) expense incurred before the policy date;
- (c) expense incurred which is paid for by Medicare;
- (d) expense incurred while this policy is not in force;
- (e) services for non-Medicare Eligible Expenses; or
- (f) loss or expense payable under any other Medicare supplement insurance policy or certificate.

Refund of Premium

In the event of cancellation or death, we will promptly return the unearned portion of any premium paid.

Grievance Procedure

We strive to provide a high-quality customer service program to supply information to you, handle complaints, and attempt to satisfy your concerns. Our toll-free customer service telephone number is shown on the face page of your policy. However, for settlement of disputes that have not been successfully resolved through the customer service program, or that you desire to have settled by means of a written grievance, a formal Grievance procedure has been established.

The following Grievance Procedure for all grievances except those relating to ongoing hospital treatment is aimed at achieving mutual agreement for settlement of disputes:

- (a) All grievances must be presented to us in written form and must contain the words "This is a Grievance" or other words that clearly state that the intention of the communication is to serve as a written grievance to be handled according to this procedure.
- (b) A grievance must be filed by submitting the complete details in writing to:

Grievance Review

Gerber Life Insurance Company

P. O. Box 2271

Omaha, Nebraska 68103-2271

- (c) Each grievance will be addressed immediately and resolved as soon as possible after it is first received by us. Each level of the Grievance process will be dealt with by a person with problem-solving authority. A physician, other than your primary care physician, must be involved in reviewing any medically related grievances.
- (d) If a grievance is found to be valid, corrective action shall be taken promptly.
- (e) All concerned parties will be notified about the results of a grievance.
- (f) You shall have the right to appeal to the Department of Insurance after first completing our grievance process.
- (g) Any meeting with you will be scheduled at a location or in a manner which is convenient and does not necessitate excessive travel or hardship for you.

The following procedure for in-hospital grievances is aimed at achieving mutual agreement for settlement of disputes:

(a) All in-hospital grievances must be presented to us in written or oral form and must contain the words "This is a Grievance" or other words that clearly state that the intention of the communication is to serve as a written or oral grievance to be handled according to this procedure.

(b) A written grievance must be filed by submitting the complete details in writing to:

Grievance Review

Gerber Life Insurance Company

P. O. Box 2271

Omaha, Nebraska 68103-2271

- (c) An oral grievance must be communicated to us by calling us at the customer service phone number listed on the face page of this policy.
- (d) Each grievance will be addressed immediately and resolved as soon as possible after it is first received by us. Each level of the grievance process will be dealt with by a person with problemsolving authority. A physician, other than your primary care physician, must be involved in reviewing any medically related grievances.
- (e) If a grievance is found to be valid, corrective action will be taken promptly.
- (f) All concerned parties will be notified about the results of a grievance.
- (g) You will have the right to appeal to the Department of Insurance after first completing our grievance process.
- (h) Any meeting with you will be scheduled at a location or in a manner which is convenient and does not necessitate excessive travel or hardship for you.

Complete Answers Are Very Important

When you fill out the application for the new policy, be sure to answer truthfully and completely all questions about your medical and health history. The Company may cancel your policy and refuse to pay any claims if you leave out or falsify important medical information. Review the application carefully before you sign it. Be certain that all information has been properly recorded.

PLAN A MEDICARE (PART A) - HOSPITAL SERVICES - PER BENEFIT PERIOD

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

Services	Medicare Pays	Plan A Pays	You Pay
HOSPITALIZATION*	•	•	
Semiprivate room and board, general nursing and miscellaneous services and			
supplies			
First 60 days	All but \$1,216	\$0	\$1,216 (Part A
·			Deductible)
61st through 90th day	All but \$304 a day	\$304 a day	\$0
91st day and after:		·	
While using 60 lifetime reserve days	All but \$608 a day	\$608 a day	\$0
Once lifetime reserve days are used:		·	
Additional 365 days	\$0	100% of Medicare	\$0**
		Eligible Expenses	
Beyond the additional 365 days	\$0	\$0	All costs
SKILLED NURSING FACILITY CARE*			
You must meet Medicare's requirements, including having been in a hospital for			
at least 3 days and entered a Medicare approved facility within 30 days after			
leaving the hospital.			
First 20 days	All approved amounts	\$0	\$0
21st through 100th day	All but \$152 a day	\$0	Up to \$152 a day
101st day and after	\$0	\$0	All costs
BLOOD			
First 3 pints	\$0	3 pints	\$0
Additional amounts	100%	\$0	\$0
HOSPICE CARE	All but very limited	Medicare copayment/	\$0
You must meet Medicare's requirements, including a doctor's certification of	copayment/coinsurance	coinsurance	
terminal illness.	for outpatient drugs and		
	inpatient respite care		

**NOTICE: When your Medicare Part A hospital benefits are exhausted, the insurer stands in the place of Medicare and will pay whatever amount Medicare would have paid for up to an additional 365 days as provided in the policy/certificate's "Core Benefits."

During this time the hospital is prohibited from billing you for the balance based on any difference between its billed charges and the amount Medicare would have paid.

PLAN A MEDICARE (PART B) - MEDICAL SERVICES - PER CALENDAR YEAR

*Once you have been billed \$147 of Medicare Approved Amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

Services	Medicare Pays	Plan A Pays	You Pay
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT			
HOSPITAL TREATMENT, such as physician's services, inpatient and			
outpatient medical and surgical services and supplies, physical and speech			
therapy, diagnostic tests, durable medical equipment			
First \$147 of Medicare Approved Amounts*	\$0	\$0	\$147 (Part B Deductible)
Remainder of Medicare Approved Amounts	Generally 80%	Generally 20%	\$0
Part B Excess Charges (above Medicare Approved Amounts)	\$0	\$0	All costs
BLOOD			
First 3 pints	\$0	All costs	\$0
Next \$147 of Medicare Approved Amounts*	\$0	\$0	\$147 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	\$0
CLINICAL LABORATORY SERVICES—TESTS FOR DIAGNOSTIC			
SERVICES	100%	\$0	\$0

PARTS A AND B

HOME HEALTH CARE—MEDICARE APPROVED SERVICES			
Medically necessary skilled care services and medical supplies	100%	\$0	\$0
Durable medical equipment			
First \$147 of Medicare Approved Amounts*	\$0	\$0	\$147 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	\$0

PLAN F

MEDICARE (PART A) - HOSPITAL SERVICES - PER BENEFIT PERIOD

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

Services	Medicare Pays	Plan F Pays	You Pay
HOSPITALIZATION*	•	•	
Semiprivate room and board, general nursing and miscellaneous services and			
supplies			
First 60 days	All but \$1,216	\$1,216 (Part A Deductible)	\$0
61st through 90th day	All but \$304 a day	\$304 a day	\$0
91st day and after:			
While using 60 lifetime reserve days	All but \$608 a day	\$608 a day	\$0
Once lifetime reserve days are used:			
Additional 365 days	\$0	100% of Medicare	\$0**
		Eligible Expenses	
Beyond the additional 365 days	\$0	\$0	All costs
SKILLED NURSING FACILITY CARE*			
You must meet Medicare's requirements, including having been in a hospital			
for at least 3 days and entered a Medicare approved facility within 30 days			
after leaving the hospital.			
First 20 days	All approved amounts	\$0	\$0
21st through 100th day	All but \$152 a day	Up to \$152 a day	\$0
101st day and after	\$0	\$0	All costs
BLOOD			
First 3 pints	\$0	3 pints	\$0
Additional amounts	100%	\$0	\$0
HOSPICE CARE	All but very limited	Medicare	\$0
You must meet Medicare's requirements, including a doctor's certification of	copayment/coinsurance	copayment/coinsurance	
terminal illness.	for outpatient drugs and		
	inpatient respite care		

**NOTICE: When your Medicare Part A hospital benefits are exhausted, the insurer stands in the place of Medicare and will pay whatever amount Medicare would have paid for up to an additional 365 days as provided in the policy/certificate's "Core Benefits."

During this time the hospital is prohibited from billing you for the balance based on any difference between its billed charges and the amount Medicare would have paid.

PLAN F MEDICARE (PART B) - MEDICAL SERVICES - PER CALENDAR YEAR

*Once you have been billed \$147 of Medicare Approved Amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

Services	Medicare Pays	Plan F Pays	You Pay
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT	_	•	
HOSPITAL TREATMENT, such as physician's services, inpatient and			
outpatient medical and surgical services and supplies, physical and speech			
therapy, diagnostic tests, durable medical equipment			
First \$147 of Medicare Approved Amounts*	\$0	\$147 (Part B Deductible)	\$0
Remainder of Medicare Approved Amounts	Generally 80%	Generally 20%	\$0
Part B Excess Charges (above Medicare Approved Amounts)	\$0	100%	\$0
BLOOD			
First 3 pints	\$0	All costs	\$0
Next \$147 of Medicare Approved Amounts*	\$0	\$147 (Part B Deductible)	\$0
Remainder of Medicare Approved Amounts	80%	20%	\$0
CLINICAL LABORATORY SERVICES—TESTS FOR DIAGNOSTIC			
SERVICES	100%	\$0	\$0

PARTS A AND B

HOME HEALTH CARE—MEDICARE APPROVED SERVICES Medically necessary skilled care services and medical supplies	100%	\$0	\$0
Durable medical equipment			
First \$147 of Medicare Approved Amounts*	\$0	\$147 (Part B Deductible)	\$0
Remainder of Medicare Approved Amounts	80%	20%	\$0

OTHER BENEFITS - NOT COVERED BY MEDICARE

FOREIGN TRAVEL—NOT COVERED BY MEDICARE Medically necessary emergency care services beginning during the first 60 days of each trip outside the USA			
First \$250 each calendar year	\$0	\$0	\$250
Remainder of charges	\$0	80% to a lifetime	20% and amounts over the
			\$50,000 lifetime Maximum
		of \$50,000	Benefit

PLAN G MEDICARE (PART A) - HOSPITAL SERVICES - PER BENEFIT PERIOD

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

Services	Medicare Pays	Plan G Pays	You Pay
HOSPITALIZATION*		•	_
Semiprivate room and board, general nursing and miscellaneous services			
and supplies			
First 60 days	All but \$1,216	\$1,216 (Part A Deductible)	\$0
61st through 90th day	All but \$304 a day	\$304 a day	\$0
91st day and after:			
While using 60 lifetime reserve days	All but \$608 a day	\$608 a day	\$0
Once lifetime reserve days are used:			
Additional 365 days	\$0	100% of Medicare	\$0**
		Eligible Expenses	
Beyond the additional 365 days	\$0	\$0	All costs
SKILLED NURSING FACILITY CARE*			
You must meet Medicare's requirements, including having been in a			
hospital for at least 3 days and entered a Medicare approved facility within			
30 days after leaving the hospital.			
First 20 days	All approved amounts	\$0	\$0
21st through 100th day	All but \$152 a day	Up to \$152 a day	\$0
101st day and after	\$0	\$0	All costs
BLOOD			
First 3 pints	\$0	3 pints	\$0
Additional amounts	100%	\$0	\$0
HOSPICE CARE	All but very limited	Medicare	\$0
You must meet Medicare's requirements, including a doctor's certification	copayment/coinsurance for	copayment/coinsurance	
of terminal illness.	outpatient drugs and		
	inpatient respite care		

**NOTICE: When your Medicare Part A hospital benefits are exhausted, the insurer stands in the place of Medicare and will pay whatever amount Medicare would have paid for up to an additional 365 days as provided in the policy/certificate's "Core Benefits."

During this time the hospital is prohibited from billing you for the balance based on any difference between its billed charges and the amount Medicare would have paid.

PLAN G MEDICARE (PART B) - MEDICAL SERVICES - PER CALENDAR YEAR

*Once you have been billed \$147 of Medicare Approved Amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

Services	Medicare Pays	Plan G Pays	You Pay
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND		_	
OUTPATIENT HOSPITAL TREATMENT, such as physician's services,			
inpatient and outpatient medical and surgical services and supplies,			
physical and speech therapy, diagnostic tests, durable medical equipment			
First \$147 of Medicare Approved Amounts*	\$0	\$0	\$147 (Part B Deductible)
Remainder of Medicare Approved Amounts	Generally 80%	Generally 20%	\$0
Part B Excess Charges (above Medicare Approved Amounts)	\$0	100%	\$0
BLOOD			
First 3 pints	\$0	All costs	\$0
Next \$147 of Medicare Approved Amounts*	\$0	\$0	\$147 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	\$0
CLINICAL LABORATORY SERVICES—TESTS FOR DIAGNOSTIC			
SERVICES	100%	\$0	\$0

PARTS A AND B

HOME HEALTH CARE—MEDICARE APPROVED SERVICES Medically necessary skilled care services and medical supplies	100%	\$0	\$0
Durable medical equipment			
First \$147 of Medicare Approved Amounts*	\$0	\$0	\$147 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	\$0

OTHER BENEFITS - NOT COVERED BY MEDICARE

FOREIGN TRAVEL—NOT COVERED BY MEDICARE			
Medically necessary emergency care services beginning during the first 60			
days of each trip outside the USA			
First \$250 each calendar year	\$0	\$0	\$250
Remainder of charges	\$0	80% to a lifetime Maximum	20% and amounts over the
		Benefit of \$50,000	\$50,000 lifetime Maximum
			Benefit

Gerber Life Insurance Company

Provider Directory Medicare SELECT Insurance

WELCOME

Welcome to the individual Medicare SELECT Medicare supplement program from Gerber Life Insurance Company. We are pleased to offer these hospitals to our policyholders. Medicare SELECT has a participating hospital network that is serving the medical needs of your community by containing costs while maintaining quality health care.

For information on hospitals located in a specific area, please refer to the provider listings on the following pages.

IMPORTANT DIRECTORY INFORMATION

With Medicare SELECT Medicare supplement coverage, you have the freedom to choose any participating network hospital in your area. If you need emergency care, your policy pays the Medicare Part A deductible no matter what hospital you use. For non-emergency care, you must use a participating network hospital for the Medicare Part A deductible to be covered.

IDENTIFICATION CARD (ID)

When you're issued your Medicare SELECT policy, you will receive an ID card. Please present your card whenever you receive medical services.

PARTICIPATING HOSPITALS

Please understand that this directory lists participating hospitals as of the publication date. From time to time, hospitals may be added or removed from the participating hospital network. Before receiving care from a hospital, ask the hospital if it's still participating in our Medicare SELECT network.

For current information on participating hospitals call (877) 656-5424.

IF YOU HAVE QUESTIONS

Our Customer Service staff will be glad to help with your questions or concerns about your coverage, participating hospitals or the care you receive. Please call Customer Service whenever you have a question, (877) 778-0839.

For details about your coverage, please read your policy.

Gerber Life Insurance Company does not supervise, control or guarantee the health care services of any hospital, including those participating in its Medicare SELECT hospital network.

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HOSPITALS

ALABAMA

Andalusia

Andalusia Regional Hospital 849 S. Three Notch St. Andalusia, AL 36420 (334) 222-8466

Decatur

Decatur General Hospital 1201 7th Ave. SE Decatur, AL 35601 (256) 341-2000

Enterprise

Medical Center Enterprise 401 N. Edwards St. Enterprise, AL 36330 (334) 347-0584

Gadsden

Gadsden Regional Medical Center 1007 Goodyear Blvd. Gadsden, AL 35903 (256) 494-4000

Jacksonville

Jacksonville Hospital 1701 S. Pelham Rd. Jacksonville, AL 36265 (256) 435-4970

Opp

Mizell Memorial Hospital 702 N. Main St. Opp, AL 36467 (334) 493-9664

Ozark

Dale Medical Center 100 Hospital Ave. Ozark, AL 36360 (334) 774-2601

Dale Medical Center 126 Hospital Ave. Ozark, AL 36360 (334) 774-2601

Roanoke

Randolph Medical Center 59928 Hwy. 22 Roanoke, AL 36274 (334) 863-4111

Wedowee

Wedowee Hospital 209 Main St. North Wedowee, AL 36278 (256) 357-2111

FLORIDA

Belle Glade

Lakeside Medical Center 39200 Hooker Hwy. Belle Glade, FL 33430 (561) 996-6571

Bradenton

Blake Medical Center 2020 59th St. West Bradenton, FL 34209 (941) 798-6611

Lakewood Ranch Medical Center 8330 Lakewood Ranch Bradenton, FL 34202 (941) 782-2100 Manatee Memorial Hospital and Health System 206 2nd St. East Bradenton, FL 34208 (941) 746-5111

Brooksville

Brooksville Regional Hospital 17240 Cortez Blvd. Brooksville, FL 34601 (352) 796-5111

Oak Hill Hospital 11375 Cortez Blvd. Brooksville, FL 34613 (352) 596-6632

Springbrook Hospital 7007 Grove Rd. Brooksville, FL 34609 (352) 596-4306

Clearwater

Morton Plant Mease Healthcare 300 Pinellas St. Clearwater, FL 33756 (727) 462-7000

Coral Springs

Coral Springs Medical Center 3000 Coral Hills Dr. Coral Springs, FL 33065 (945) 344-3000

Crystal River

Seven Rivers Regional Medical Center 6201 N. Suncoast Blvd. Crystal River, FL 34428 (352) 795-6560

Davenport

Heart of Florida Regional Medical Center 1615 U.S. Hwy. 27 North Davenport, FL 33837 (863) 422-4971

Dunedin

Mease Dunedin Hospital 601 Main St. Dunedin, FL 34698 (727) 733-1111

Englewood

Englewood Community Hospital 700 Medical Blvd. Englewood, FL 34223 (941) 475-6571

Fort Lauderdale

Broward General Medical Center 1600 S. Andrews Ave. Fort Lauderdale, FL 33316 (954) 355-4400

Imperial Point Medical Center 6401 N. Federal Hwy. Fort Lauderdale, FL 33308 (954) 776-8500

Hialeah

Palm Springs General Hospital 1475 W. 49th St. Hialeah, FL 33012 (305) 558-2500

Hudson

Regional Medical Center Bayonet Point 14000 Fivay Rd. Hudson, FL 34667 (727) 819-2929

Inverness

Citrus Memorial Hospital 502 W. Highland Blvd. Inverness, FL 34452 (352) 726-1551

Jacksonville

Shands Jacksonville Medical Center 655 W. 8th St. Jacksonville, FL 32209 (904) 244-0411 Shands Jacksonville – Pavilion 580 W. 8th St. Jacksonville, FL 32209 (904) 244-0411

Largo

Largo Medical Center 201 14th St. SW Largo, FL 33770 (727) 588-5200

Largo Medical Center – Indian Rocks 2025 Indian Rocks Rd. Largo, FL 33774 (727) 581-9474

Lehigh Acres

Lehigh Regional Medical Center 1500 Lee Blvd. Lehigh Acres, FL 33936 (239) 369-2101

Miami

Jackson Memorial Hospital 1611 NW 12th Ave. Miami, FL 33136 (305) 585-1111

Jackson South Community Hospital 9333 SW 152nd St. Miami, FL 33157 (305) 251-2500

Miami Jewish Home and Hospital 5200 NE 2nd Ave. Miami, FL 33137 (305) 751-8626

Westchester General Hospital 2500 SW 75th Ave. Miami, FL 33155 (305) 264-5252

Naples

Physicians Regional – Collier 8300 Collier Blvd. Naples, FL 34114 (239) 354-6000 Physicians Regional – Pine Ridge 6101 Pine Ridge Rd. Naples, FL 34119 (239) 348-4000

New Port Richey

Community Hospital 5637 Marine Pkwy. New Port Richey, FL 34652 (727) 848-1733

Morton Plant North Bay Hospital 6600 Madison St. New Port Richey, FL 34652 (727) 842-8468

North Miami Beach

Jackson North Medical Center 160 NW 170th St. North Miami Beach, FL 33169 (305) 651-1100

Ocala

Munroe Regional Medical Center 1500 SW 1st Ave. Ocala, FL 34478 (352) 351-7200

Ocoee

Health Central Hospital 10000 W. Colonial Dr. Ocoee, FL 34761 (407) 296-1000

Plant City

South Florida Baptist Hospital 301 N. Alexander St. Plant City, FL 33563 (813) 757-1200

Pompano Beach

North Broward Medical Center 201 E. Sample Rd. Pompano Beach, FL 33064 (954) 941-8300

Port Charlotte

Fawcett Memorial Hospital 21298 Olean Blvd. Port Charlotte, FL 33952 (941) 629-1181

Peace River Regional Medical Center 2500 Harbor Blvd. Port Charlotte, FL 33952 (941) 766-4122

Punta Gorda

Charlotte Regional Medical Center 809 E. Marion Ave. Punta Gorda, FL 33950 (941) 639-3131

Safety Harbor

Mease Countryside Hospital 3231 McMullen Booth Rd. Safety Harbor, FL 34695 (727) 725-6111

Sarasota

Doctors Hospital of Sarasota 5731 Bee Ridge Rd. Sarasota, FL 34233 (941) 342-1100

Spring Hill

Spring Hill Regional Hospital 10461 Quality Dr. Spring Hill, FL 34609 (352) 688-8200

St. Petersburg

Bayfront Medical Center 701 6th St. South St. Petersburg, FL 33701 (727) 823-1234

Edward White Hospital 2323 9th St. North St. Petersburg, FL 33704 (727) 323-1111

Northside Hospital 6000 49th St. North St. Petersburg, FL 33709 (727) 521-4411

St. Anthony's Hospital 1200 7th Ave. North St. Petersburg, FL 33705 (727) 825-1100

Tampa

H. Lee Moffitt Cancer Center & Research Institute 12902 Magnolia Dr. Tampa, FL 33612 (813) 972-4673

St. Joseph's Hospital 3001 W. MLK Jr. Blvd. Tampa, FL 33607 (813) 870-4000

St. Joseph's Women's Hospital 3030 W. MLK Jr. Blvd. Tampa, FL 33607 (813) 879-4730

University Community Hospital – Carrollwood 7171 N. Dale Mabry Ave. Tampa, FL 33614 (813) 932-2222

Venice

Venice Regional Medical Center 540 The Rialto Venice, FL 34285 (941) 485-7711

Vero Beach

Indian River Medical Center 1000 36th St. Vero Beach, FL 32960 (772) 567-4311

Wellington

Wellington Regional Medical Center 10101 Forest Hill Blvd. Wellington, FL 33414 (561) 798-8500

Zephyrhills

Florida Hospital Zephyrhills 7050 Gall Blvd. Zephyrhills, FL 33541 (813) 788-0411

LOUISIANA

Alexandria

CHRISTUS St. Frances Cabrini Hospital 3330 Masonic Dr. Alexandria, LA 71301 (318) 487-1122

Baton Rouge

Integra Hospital – Baton Rouge LLC 8000 Summa Ave. Baton Rouge, LA 70809 (225) 819-0703

Bossier City

CHRISTUS Schumpert Bossier 2105 Airline Dr. Bossier City, LA 71111 (318) 848-8000

Breaux Bridge

St. Martin Hospital 210 Champagne Blvd. Breaux Bridge, LA 70517 (337) 332-2178

Coushatta

CHRISTUS Coushatta Health Care Center 1635 Marvel St. Coushatta, LA 71019 (318) 932-2077

Crowley

American Legion Hospital 1305 Crowley Rayne Hwy. Crowley, LA 70526 (337) 783-3222

Ferriday

Riverland Medical Center 1700 EE Wallace Blvd. North Ferriday, LA 71334 (318) 757-6551

Franklinton

Riverside Medical Center 1900 Main St. Franklinton, LA 70438 (985) 839-4431

Greensburg

St. Helena Parish Hospital Hwy. 43 North Greensburg, LA 70441 (225) 222-6111

Gretna

Meadowcrest Hospital 2500 Belle Chasse Hwy. Gretna, LA 70056 (504) 392-3131

Houma

Physicians Surgical Specialty Hospital 218 Corporate Dr. Houma, LA 70360 (985) 853-1390

Terrebonne General Medical Center 8166 Main St. Houma, LA 70360 (985) 873-4141

Kaplan

Abrom Kaplan Memorial 1310 W. 7th St. Kaplan, LA 70548 (337) 643-8300

Kenner

Kenner Regional Medical Center 180 W. Esplanade Ave. Kenner, LA 70065 (504) 468-8600

Kinder

Allen Parish Hospital 108 N. 6th St. Kinder, LA 70648 (337) 738-2527

La Place

River Parishes Hospital 500 Rue De Sante La Place, LA 70068 (985) 652-7000

Lacombe

Louisiana Heart Hospital 64030 Hwy. 434 Lacombe, LA 70445 (985) 690-7500

Lafayette

Heart Hospital of Lafayette 1105 Kaliste Saloom Rd. Lafayette, LA 70508 (337) 521-1000

Lafayette General Medical Center 1214 Coolidge St. Lafayette, LA 70503 (337) 289-7991

Lafayette General Surgical Center 1000 W. Pinhook Rd. Lafayette, LA 70503 (337) 289-8095 Rehabilitation Hospital of Acadiana 310 Youngsville Hwy. Lafayette, LA 70508 (337) 839-9880

Lake Charles

CHRISTUS St. Patrick Hospital 524 S. Ryan St. Lake Charles, LA 70601 (337) 436-2511

Lake Charles Memorial Hospital 1701 Oak Park Blvd. Lake Charles, LA 70601 (337) 494-3000

Mamou

Savoy Medical Center 801 Poinciana Ave. Mamou, LA 70554 (337) 468-0144

Metairie

Doctors Hospital of Jefferson 4320 Houma Blvd. Metairie, LA 70006 (504) 849-4000

Minden

PHC-Minden LP 1 Medical Plaza Pl. Minden, LA 71055 (318) 377-2321

Monroe

EA Conway Medical Center 4864 Jackson St. Monroe, LA 71202 (318) 330-7000

P & S Surgical Hospital 312 Grammont St. Monroe, LA 71201 (318) 388-4040 St. Francis Medical Center 309 Jackson St. Monroe, LA 71210 (318) 327-4000

St. Francis North Hospital 3421 Medical Park Dr. Monroe, LA 71203 (318) 388-1946

New Orleans

Community Care Hospital 1421 General Taylor St. New Orleans, LA 70115 (504) 899-2500

Memorial Medical Center – Baptist 2700 Napoleon Ave. New Orleans, LA 70115 (504) 899-9311

Memorial Medical Center – Mercy 301 N. Jefferson Davis Pkwy. New Orleans, LA 70119 (504) 483-5000

Methodist Hospital 5620 Read Blvd. New Orleans, LA 70127 (504) 244-5100

New Roads

Pointe Coupee General Hospital 2202 False River Dr. New Roads, LA 70760 (225) 638-6331

Opelousas

Opelousas General Hospital 539 E. Prudhomme St. Opelousas, LA 70570 (337) 948-3011

Pineville

Huey P. Long Medical Center 352 Hospital Blvd. Pineville, LA 71361 (318) 448-0811

Ruston

Green Clinic Surgical Hospital 1118 S. Farmerville St. Ruston, LA 71270 (318) 232-7700

Shreveport

CHRISTUS Schumpert Hospital Highland 1453 E. Bert Kouns Shreveport, LA 71105 (318) 681-5000

CHRISTUS Schumpert Hospital St. Mary Place One St. Mary Place Shreveport, LA 71101 (318) 681-4500

LSUHSC Shreveport University Hospital 1501 Kings Hwy. Shreveport, LA 71103 (318) 675-5000

Slidell

Oschner Medical Center – NorthShore 100 Medical Center Dr. Slidell, LA 70461 (985) 649-7070

Springhill

Springhill Medical Center 2001 Doctors Dr. Springhill, LA 71075 (318) 539-1001

MISSISSIPPI

Columbia

Marion General Hospital 1560 Sumrall Rd. Columbia, MS 39429 (601) 736-6303

Hazlehurst

Hardy Wilson Memorial Hospital 233 Magnolia St. Hazlehurst, MS 39083 (601) 894-4541

Laurel

South Central Regional Medical Center 1220 Jefferson St. Laurel, MS 39440 (601) 426-4000

Magnolia

Beacham Memorial Hospital 205 N. Cherry St. Magnolia, MS 39652 (601) 783-2353

Mendenhall

Simpson Community Healthcare Inc. 1842 Simpson Hwy. 149 Mendenhall, MS 39114 (601) 847-2221

Poplarville

Pearl River County Hospital & Nursing Home 305 W. Moody St. Poplarville, MS 39470 (601) 795-4543

Port Gibson

Patients Choice Medical Center of Claibo 123 McComb Ave. Port Gibson, MS 39150 (601) 437-5141

Tylertown

Walthall County General Hospital 100 Hospital Dr. Tylertown, MS 39667 (601) 876-2122

NORTH CAROLINA

Chapel Hill

University of North Carolina Hospitals 101 Manning Dr. Chapel Hill, NC 27514 (919) 966-4131

Reidsville

Annie Penn Memorial Hospital 618 S. Main St. Reidsville, NC 27320 (336) 634-1010

OKLAHOMA

Anadarko

Physicians Hospital in Anadarko 1002 E. Central Blvd. Anadarko, OK 73005 (405) 247-2551

Edmond

Edmond Medical Center One S. Bryant St. Edmond, OK 73034 (405) 341-6100

Eufaula

Epic Medical Center 1 Hospital Dr. Eufaula, OK 74432 (918) 689-2535

Midwest City

Midwest Regional Medical Center 2825 Parklawn Dr. Midwest City, OK 73110 (405) 610-4411

Oklahoma City

Community Hospital 3100 SW 89th St. Oklahoma City, OK 73159 (405) 602-8100

OU Medical Center 1200 N. Everett Dr. Oklahoma City, OK 73104 (405) 271-8558

Presbyterian Tower Hospital 700 NE 13th St. Oklahoma City, OK 73104 (405) 271-5100

Sallisaw

Sequoyah Memorial Hospital and Homecare 213 E. Redwood Ave. Sallisaw, OK 74955 (918) 774-1100

Sayre

Sayre Memorial Hospital 911 Hospital Dr. Sayre, OK 73662 (580) 928-5541

Sulphur

Arbuckle Memorial Hospital 2011 W. Broadway Ave. Sulphur, OK 73086 (580) 622-2161

Tulsa

Hillcrest Medical Center 1120 S. Utica Ave. Tulsa, OK 74104 (918) 579-1000

Oklahoma State University Medical Center 744 W. 9th St. Tulsa, OK 74127 (918) 587-2561

Wilburton

Latimer County General Hospital (806) Hwy. 2 North Wilburton, OK 74578 (918) 465-2391

PENNSYLVANIA

Allentown

St. Luke's Hospital – Allentown Campus 1736 Hamilton St. Allentown, PA 18104 (610) 628-8300

Bethlehem

St. Luke's HomeStar Services, LLC 77 S. Commerce Way Bethlehem, PA 18017 (610) 419-7600

St. Luke's Hospital – Bethlehem Campus 801 Ostrum St. Bethlehem, PA 18015 (484) 526-4000

St. Luke's Physician Group, Inc. 240 Union Station Bethlehem, PA 18015 (484) 526-4700

Visiting Nurse Association of St. Luke's Home Health/ Hospice, Inc. 1510 Valley Center Pkwy., Ste. 200 Bethlehem, PA 18017 (484) 526-1100

Coaldale

St. Luke's Miners Memorial Hospital 360 W. Ruddle St. Coaldale, PA 18218 (570) 645-2131

Drexel Hill

Delaware County Memorial Hospital 501 N. Lansdowne Ave. Drexel Hill, PA 19026 (610) 284-8100

Easton

St. Luke's Hospital – Anderson Campus 1872 Riverside Cr. Easton, PA 18045 (484) 503-3000

Glen Mills

Crozer Medical Plaza and CK Cancer Center 500 Evergreen Ave. Glen Mills, PA 19342 (610) 579-3400

Greensburg

Westmoreland Hospital 532 W. Pittsburgh St. Greensburg, PA 15601 (724) 832-4000

Philadelphia

Episcopal Hospital 100 E. Lehigh Ave. Philadelphia, PA 19125 (215) 427-7000

Graduate Hospital 1800 Lombard St. Philadelphia, PA 19146 (215) 893-2000

Hahnemann University Hospital 230 N. Broad St. Philadelphia, PA 19102 (215) 762-7000

St. Christopher's Hospital for Children 3601 A St. Philadelphia, PA 19134 (215) 427-5000

Quakertown

St. Luke's Emergency & Transport Services, Inc. 124 S. 10th St., #126 Quakertown, PA 18951 (215) 538-4543

St. Luke's Quakertown Hospital 1021 Park Ave. Quakertown, PA 18951 (215) 538-4500

Ridley Park

Crozer-Chester Medical Center Taylor Hospital 175 E. Chester Pike Ridley Park, PA 19078 (610) 595-6000

Warminster

Warminster Hospital 225 Newton Rd. Warminster, PA 18974 (215) 441-6600

TENNESSEE

Cleveland

Skyridge Medical Center – Main Campus 2305 Chambliss Ave. NW Cleveland, TN 37311 (423) 559-6100

Skyridge Medical Center – Westside Campus 2800 Westside Dr. NW Cleveland, TN 37312 (423) 339-4100

Erin

Patients Choice Medical Center of Erin 5001 E. Main St. Erin, TN 37061 (931) 289-4211

Erwin

Unicoi Memorial Hospital 100 Greenway Cir. Erwin, TN 37650 (423) 743-3141

Knoxville

University of Tennessee Medical Center 1924 Alcoa Hwy. Knoxville, TN 37920 (865) 544-9000

Manchester

Medical Center of Manchester 481 Interstate Dr. Manchester, TN 37355 (931) 728-6354

Memphis

Delta Medical Center 3000 Getwell Rd. Memphis, TN 38118 (901) 369-8100

Nashville

Vanderbilt University Medical Center 1211 22nd Ave. South Nashville, TN 37232 (615) 322-5000

Oneida

Scott County Hospital 18797 Alberta St. Oneida, TN 37841 (423) 569-8521

TEXAS

Alice

CHRISTUS Spohn Hospital Alice 2500 E. Main St. Alice, TX 78332 (361) 661-8000

Amarillo

Baptist St. Anthony's Health System 1600 Wallace Blvd. Amarillo, TX 79106 (806) 212-6006

Baptist St. Anthony's Health System – St. Anthony Campus 200 NW 7th Ave. Amarillo, TX 79107 (806) 212-2000

Panhandle (Physician) Surgical Hospital 7100 W. 9th Ave. Amarillo, TX 79106 (806) 212-0247

Quail Creek (Physician) Surgical Hospital 6819 Plum Creek Dr. Amarillo, TX 79124 (806) 354-6101

Andrews

Permian Regional Medical Center 720 Hospital Dr. Andrews, TX 79714 (432) 523-2200

Anson

Anson General Hospital 101 Avenue J Anson, TX 79501 (325) 823-3231

Aransas Pass

North Bay Hospital 1711 W. Wheeler Ave. Aransas Pass, TX 78336 (512) 758-8585

Aspermont

Stonewall Memorial Hospital 821 N. Broadway St. Aspermont, TX 79502 (940) 989-3551

Athens

East Texas Medical Center – Athens 2000 S. Palestine St. Athens, TX 75751 (903) 676-1000

Austin

Austin Surgical Hospital 3003 Bee Cave Rd. Austin, TX 78746 (512) 314-3800

Beaumont

CHRISTUS St. Elizabeth Hospital 2830 Calder St. Beaumont, TX 77702 (409) 892-7171

Memorial Hermann Baptist Beaumont Hospital 3080 College St. Beaumont, TX 77701 (409) 212-5000

Beeville

CHRISTUS Spohn Hospital Beeville 1500 E. Houston St. Beeville, TX 78102 (361) 354-2000

Bowie

Bowie Memorial Hospital 705 E. Greenwood Ave. Bowie, TX 76230 (940) 872-1126

Bryan

Physicians Centre 3131 University Dr. East Bryan, TX 77802 (979) 731-3952

St. Joseph Home Health 3030 E. 29th St. Bryan, TX 77802 (979) 776-6544 St. Joseph Regional Health Center 2801 Franciscan Dr. Bryan, TX 77802 (979) 776-3777

St. Joseph Rehabilitation Center 1600 Joseph Dr. Bryan, TX 77802 (979) 821-7500

Caldwell

Burleson St. Joseph Health Center 1101 Woodson Dr. Caldwell, TX 77836 (979) 567-3245

St. Joseph Caldwell Family Medicine Clinic 1103 Woodson Dr. Caldwell, TX 77836 (979) 567-7080

Carthage

East Texas Medical Center Carthage 409 Cottage Rd. Carthage, TX 75633 (903) 693-3841

Center

Shelby Regional Medical Center 602 Hurst St. Center, TX 75935 (936) 598-2781

Centerville

St. Joseph Powell Memorial Family Health Center 102 E. Main St. Centerville, TX 75833 (903) 536-2313

Cleveland

Cleveland Regional Medical Center 300 E. Crockett St. Cleveland, TX 77327 (281) 593-1811

Corinth

Atrium Medical Center at Corinth 3305 Corinth Pkwy. Corinth, TX 76208 (940) 270-4136

Corpus Christi

CHRISTUS Spohn Hospital Corpus Christi – Memorial 2606 Hospital Blvd. Corpus Christi, TX 78405 (361) 902-4000

CHRISTUS Spohn Hospital Corpus Christi – Shoreline 600 Elizabeth St. Corpus Christi, TX 78404 (361) 881-3000

CHRISTUS Spohn Hospital Corpus Christi – South 5920 Saratoga Blvd. Corpus Christi, TX 78405 (361) 985-5000

Corpus Christi Medical Center 7101 S. Padre Island Dr. Corpus Christi, TX 78469 (361) 761-1000

Corpus Christi Medical Center – Bay Area Surgery 7101 S. Padre Island Dr. Corpus Christi, TX 78469 (361) 985-1200

Corpus Christi Medical Center – Northwest 13725 Northwest Blvd. Corpus Christi, TX 78410 (361) 767-4300 Corpus Christi Medical Center – The Heart Hospital 7002 Williams Dr. Corpus Christi, TX 78412 (361) 761-6800

Doctors Regional Medical Center 3315 S. Alameda St. Corpus Christi, TX 78469 (361) 761-1400

Padre Behavioral Hospital 6629 Wooldridge Rd. Corpus Christi, TX 78414 (361) 986-9444

Crockett

East Texas Medical Center – Crockett 1100 E. Loop 304 Crockett, TX 75835 (936) 546-3862

Dallas

Pine Creek Medical Center 9032 Harry Hines Blvd. Dallas, TX 75235 (214) 231-2273

Dilley

Community General Hospital 230 W. Miller St. Dilley, TX 78017 (830) 965-2003

Eagle Lake

Rice Medical Center 600 S. Austin Rd. Eagle Lake, TX 77434 (979) 234-5571

Edinburg

Doctors Hospital at Renaissance 5501 S. McColl Rd. Edinburg, TX 78539 (956) 661-7100 Edinburg Regional Medical Center 1102 W. Trenton Edinburg, TX 78539 (956) 388-6000

Edna

Jackson Healthcare Center 1013 S. Wells St. Edna, TX 77957 (361) 782-5241

El Paso

East El Paso Physicians Medical Center LLC 1416 George Dieter Dr. El Paso, TX 79936 (915) 598-4240

University Medical Center of El Paso 4815 Alameda Ave. El Paso, TX 79905 (915) 544-1200

Floresville

Connally Medical Center 499 10th St. Floresville, TX 78114 (830) 393-1300

Franklin

St. Joseph Franklin Family Medicine Clinic 305 Gay St. Franklin, TX 77856 (979) 828-4540

Harlingen

Harlingen Medical Center 5501 S. Expwy. 77 Harlingen, TX 78550 (956) 365-1000

Hearne

St. Joseph Hearne Family Medicine Clinic 709 Barton St. Hearne, TX 77859 (979) 279-3451

Houston

Apex Hospital TMC 2001 Hermann Dr. Houston, TX 77004 (281) 921-5300

Doctors Hospital of Tidwell 509 W. Tidwell Rd. Houston, TX 77091 (281) 618-8589

Riverside General Hospital 3204 Ennis St. Houston, TX 77004 (713) 526-2441

St. Joseph Medical Center 1401 St. Joseph Pkwy. Houston, TX 77002 (713) 757-1000

Jacksonville

East Texas Medical Center – Jacksonville 501 S. Ragsdale St. Jacksonville, TX 75766 (903) 541-5000

Mother Frances Hospital – Jacksonville 2026 S. Jackson Jacksonville, TX 75766 (903) 586-5678

Jasper

CHRISTUS Jasper Memorial Hospital 1275 Marvin Hancock Dr. Jasper, TX 75951 (409) 384-5461

Katy

CHRISTUS St. Catherine Health & Wellness Center 701 S. Fry Rd. Katy, TX 77450 (281) 599-5700

Kermit

Winkler County Memorial Hospital 821 Jeffee Dr. Kermit, TX 79745 (432) 586-5860

Kilgore

Allegiance Specialty Hospital of Kilgore 1612 S. Henderson Blvd. Kilgore, TX 75662 (903) 984-3505

Kingsville

CHRISTUS Spohn Hospital Kleberg 1300 General Cavazos Blvd. Kingsville, TX 78363 (361) 595-1661

Knox City

Knox County Hospital District 701 SE 5th St. Knox City, TX 79529 (940) 657-3535

Lexington

St. Joseph Lexington Family Medicine Clinic 8465 Hwy. 77 Lexington, TX 78947 (979) 773-9000

Littlefield

Lamb Healthcare Center 1500 S. Sunset Ave. Littlefield, TX 79339 (806) 385-6411

Livingston

Memorial Medical Center – Livingston 1717 Old U.S. Hwy. 59 Livingston, TX 77351 (936) 329-8700

Longview

Longview Regional Medical Center 2901 N. 4th St. Longview, TX 75605 (903) 758-1818

Lubbock

University Medical Center 602 Indiana Ave. Lubbock, TX 79415 (806) 743-3111

Lufkin

Memorial Medical Center of East Texas 1201 W. Frank Ave. Lufkin, TX 75904 (936) 639-9675

Memorial Specialty Hospital 1201 W. Frank Ave., 5th Floor Lufkin, TX 75904 (936) 639-7975

Madisonville

Madison St. Joseph Health Center 100 W. Cross St. Madisonville, TX 77864 (936) 348-2631

St. Joseph J.B. Heath Family Medicine Clinic 100 W. Cross St. Madisonville, TX 77864 (936) 348-3418

McAllen

McAllen Medical Center 301 W. Expwy. 83 McAllen, TX 78503 (956) 632-4000

Monahans

Ward Memorial Hospital 406 S. Gary Ave. Monahans, TX 79756 (432) 943-3063

Morton

Cochran Memorial Hospital 201 E. Grant Ave. Morton, TX 79346 (806) 266-5565

Nacogdoches

Nacogdoches Medical Center 4920 NE Stallings Dr. Nacogdoches, TX 75965 (936) 569-9481

Nassau Bay

CHRISTUS St. John Hospital 18300 St. John Dr. Nassau Bay, TX 77058 (281) 333-5503

Navasota

Grimes St. Joseph Health Center 210 S. Judson St. Navasota, TX 77868 (936) 825-6585

Normangee

St. Joseph Normangee Family Health Center Main and 9th Streets Normangee, TX 77871 (936) 396-2806

Orange

Memorial Hermann Baptist Orange Hospital 608 Strickland Orange, TX 77630 (409) 883-9361

Palacios

Palacios Community Medical Center 311 Green Ave. Palacios, TX 77465 (361) 972-2511

Palestine

Palestine Regional Medical Center – East 2900 S. Loop 256 Palestine, TX 75801 (903) 731-1000

Palestine Rehabilitation Hospital – West 4000 S. Loop 256 Palestine, TX 75801 (903) 731-5181

Pittsburg

East Texas Medical Center – Pittsburg 2701 U.S. Hwy. 271 North Pittsburg, TX 75686 (903) 856-6663

Port Arthur

CHRISTUS Hospital St. Mary 3600 Gates Blvd. Port Arthur, TX 77642 (409) 985-7431

CHRISTUS Outpatient Center 3701 Hwy. 73 Port Arthur, TX 77642 (409) 983-1621

Quitman

East Texas Medical Center Wood County 117 N. Winnsboro St. Quitman, TX 75783 (903) 763-6300

Rio Grande

Starr County Memorial Hospital Farm Rd. 3167 Rio Grande, TX 78582 (956) 487-5561

Rockdale

Richards Memorial Hospital 1700 Brazos Ave. Rockdale, TX 76567 (512) 446-2513

San Angelo

San Angelo Community Medical Center 3501 Knickerbocker Rd. San Angelo, TX 76904 (325) 949-9511

San Antonio

CHRISTUS Santa Rosa Hospital 519 W. Houston St. San Antonio, TX 78207 (210) 704-2011

CHRISTUS Santa Rosa Medical Center 2827 Babcock Rd. San Antonio, TX 78229 (210) 705-6300

CHRISTUS Santa Rosa Rehabilitation Hospital 2827 Babcock Rd., 1st Floor San Antonio, TX 78229 (210) 705-6100

CHRISTUS Santa Rosa Hospital Westover Hills 11212 State Hwy. 151 San Antonio, TX 78251 (210) 703-8000

Texsan Heart Hospital 6700 IH-10 West San Antonio, TX 78201 (210) 736-6700

Seminole

Memorial Hospital 209 NW 8th St. Seminole, TX 79360 (432) 758-5811

Somerville

St. Joseph Somerville Family Medicine Clinic 600 Memory Lane Somerville, TX 77879 (979) 596-1441

Sugar Land

Sugar Land Rehabilitation Hospital 1325 Hwy. 6 Sugar Land, TX 77478 (281) 276-7587

Sweeny

Sweeny Community Hospital 305 N. McKinney St. Sweeny, TX 77480 (979) 548-1500

Tahoka

Lynn County Hospital District 2600 Lockwood St. Tahoka, TX 79373 (806) 998-4533

Texarkana

CHRISTUS St. Michael Health System 2600 Saint Michael Dr. Texarkana, TX 75503 (903) 614-1000

Tyler

East Texas Medical Center – Tyler 1000 S. Beckham Ave. Tyler, TX 75701 (903) 597-0351

Trinity Mother Frances Health System 800 E. Dawson Tyler, TX 75701 (903) 593-8441

Tyler ContinueCARE Hospital at Mother Frances Hospital 800 E. Dawson, 4th Floor Tyler, TX 75701 (903) 531-4080

University of Texas Health Center at Tyler 11937 U.S. Hwy. 271 Tyler, TX 75708 (903) 877-3451

Van Horn

Culberson Hospital District Eisenhower Rd. FM 2185 Van Horn, TX 79855 (432) 283-2581

Waco

Providence Health Center 6901 Medical Pkwy. Waco, TX 76712 (254) 751-4000

Whitney

Lake Whitney Medical Center 200 N. San Jacinto St. Whitney, TX 76692 (254) 694-3165

UTAH

Salt Lake City

Huntsman Cancer Hospital 1950 Circle of Hope Dr. Salt Lake City, UT 84112 (801) 585-0100

Old Mill Medical Center 6360 S. 3000 East, Ste. 200 Salt Lake City, UT 84121 (801) 585-3937

University of Utah Hospitals and Clinics 50 N. Medical Dr. Salt Lake City, UT 84132 (801) 581-2121

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