



## What's inside

Understanding your Medicare plan and how it works is important to you.

Humana is here to help. We give you information each step of the way to help you feel more confident about managing your costs – and your health.

You'll find information inside about the key features of **the Humana Medicare Employer Preferred Provider Organization (PPO) plan**. You'll see how this plan can give you the value and flexibility you deserve from your healthcare coverage.

- Introduction to Medicare
- About the Humana Medicare Employer PPO plan
- Humana Medicare PPO Provider Network
- Tools and programs to manage your health
- Insurance terms made easy
- Frequently asked questions
- Medical Summary of Benefits
- Rx Summary of Benefits
- Humana Pharmacy mail-delivery guide

Other mail-delivery pharmacies are available in our network.

The following information tells you some great things about the plan. It doesn't list every service the plan covers, every limitation or every exclusion. After you enroll, you'll get a full list of benefits in an Evidence of Coverage booklet.



# Introduction to Medicare



## What is Medicare?

Medicare is a federal health insurance program for U.S. citizens and legal residents. You can receive your Medicare benefits through the federal government or a private insurance company. Medicare is divided into parts A, B, C and D. Parts A and B are called Original Medicare. Medicare covers Americans 65 and older and those who qualify due to a disability.

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**Medicare Part A** is hospital insurance. It helps pay for inpatient care in a hospital or skilled nursing facility. It also helps pay for some home healthcare and hospice care.

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**Medicare Part B** is medical insurance. It helps cover medically necessary doctors' services, outpatient care and other medical services. Part B also covers some preventive services.

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**Medicare Part C (Medicare Advantage plan)** Private insurance companies offer Medicare Advantage plans. Medicare Part C covers everything parts A and B cover, including hospital and medical services. Some Medicare Advantage plans include Medicare prescription drug coverage.

The Humana Medicare PPO plan is a Medicare Advantage plan that offers:

- All the benefits of Original Medicare plus extra coverage
  - Maximum out-of-pocket protections
  - Worldwide emergency coverage
  - Programs to improve health and well-being
  - Medicare prescription drug coverage
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**Medicare Part D** Private companies also offer Medicare Part D. Part D helps pay for the medications your doctor prescribes.

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# Humana Medicare Employer Preferred Provider Organization (PPO) plan

We are here to help you



## Protect your health – and your finances

At the core of our company are solid insurance products that help you protect your health – and your financial security – all provided by a Fortune 75 company.



## Maximize your well-being

Our health and well-being tools and resources make it easier to set health goals, chart your progress, strengthen your mind and body and build connections with others. The power to live a full, vibrant life is in your hands, and we're here to help.



## Manage your health

Members with complex or chronic health conditions need personal attention. We'll meet you where you are: in your home, at your hospital bedside, on the phone or via email – to help you manage your condition and avoid complications.

## Key features of your Humana Medicare Employer PPO plan:

- Your benefit levels are structured the same for in-network and out-of-network providers
- You don't need a referral to see any healthcare provider
- You're covered for office visits, including routine physical exams
- Almost no claim forms to fill out or mail – we take care of that for you
- Dedicated Customer Care specialists who only serve our group Medicare customers
- Emergency coverage anywhere in the world



## Humana Medicare PPO Provider Network

Having a doctor you're comfortable with is an important part of living a healthy life.

With the Humana Medicare Employer PPO plan, you can use any provider who accepts Medicare and agrees to bill Humana. Unlike traditional PPO plans, most of the benefits covered under this plan will not cost you more if you decide to see an out-of-network provider.

If you do use an out-of-network provider, he or she may charge at or above the Original Medicare rate. Your share of the costs may be higher if the benefit is a coinsurance amount instead of a copayment. Refer to your Summary of Benefits, located in this packet, for more information.

### Why choose a Humana network provider?

1. Humana Medicare PPO network providers must take payment from Humana for treating plan members.
2. They're dedicated to giving you great care. Network providers work with Humana's systems, which makes it easier to share information. Patients can have better outcomes when providers share information this way.
3. They meet Humana standards. We only accept providers with the right education, licensing and experience.
4. Humana supplies in-network providers with information about services and programs available to patients with chronic conditions.

### Is your doctor in Humana's provider network?

Humana respects your relationship with your doctor. We want you to be able to select a doctor who's close to home who can focus on your specific needs. If you need help finding a provider, call our Group Medicare Customer Care team or use our online directory. Humana's online provider lookup is the easiest way to find doctors, hospitals and other healthcare providers in Humana's network:

- Go to **Humana.com** and click on "Find a doctor"
- Get provider phone numbers, addresses and directions
- Customize your search by specialty, location and name



## SmartSummary<sup>®</sup>

Humana believes Medicare members deserve a better way to understand, track, manage and save money on their healthcare.

### **What is SmartSummary?**

SmartSummary is your comprehensive and personalized health benefits statement. You can use it as a portable health record. You'll receive these statements after each month in which you've had a claim. You also can sign in to MyHumana and see your past SmartSummary statements anytime.

### **SmartSummary helps you:**

- Understand your total healthcare picture
- Manage your monthly and yearly healthcare costs
- Engage with your providers about healthcare services you receive
- Learn about preventive care, health conditions, treatment options and ways to reduce health expenses

# MyHumana



As soon as you receive your Humana member ID card, go to **Humana.com** and register for MyHumana. This is your personal, secure online account and allows you to access your specific plan details from your computer or smartphone.



## Get plan details on the go with MyHumana Mobile

If you have an iPhone or Android, download the MyHumana Mobile app. You'll have your plan details with you at all times. Visit **Humana.com** and search for "MyHumana Mobile" for a demo of our many mobile app features and how to use them.



## With MyHumana and MyHumana Mobile app, you can:

- Review your plan benefits and claims
- Find providers in your network
- Access digital ID cards
- Sign up for text alerts

## Choose a family member or friend to help you

Many people trust a family member or close friend to help them with their healthcare needs. For instance, a spouse, sibling, grown child or close friend may help you talk with us about your insurance plan, keep track of your benefits and claims, or answer healthcare questions.

We'll need your permission to share your personal information with someone else. To give your permission, you'll need to read and sign a consent form. You can complete this form by doing **one** of the following:

1. Fill out the form online once you have registered on MyHumana.
2. Print the form from **Humana.com/PHI**.
3. Give us a call and we'll mail the form to you.

A signed consent form allows insurers to share health plan information and personal health information. It's different from granting medical power of attorney, which allows someone to make decisions about your care.

Humana also offers a helpful resource for members and their caregivers – Humana Points of Care. Humana Points of Care offers useful articles, the ability to connect with your family and friends, health and education tools and much more. We also provide support and education for those caring for members so they can improve the health and quality of life for their loved ones.

**HumanaPointsofCare.com**

## HumanaFirst<sup>®</sup> Nurse Advice Line

The HumanaFirst Nurse Advice Line is available 24 hours a day, seven days a week.

Members can talk to a registered nurse who will help address your health concerns and answer questions about medical conditions.

This service is not for use in an emergency. If you have a medical emergency, go to the emergency room or dial 911.

**1-800-622-9529 (TTY: 711)**  
**24 hours day, seven days a week**

**Humana.com/medicare-support/  
benefits/health-programs/  
humanafirst**





## SilverSneakers® Fitness

SilverSneakers can help you get fit the way you want by providing you access to fitness locations nationwide where you can:

- **Workout indoors** – You receive a basic fitness membership and SilverSneakers group exercise classes (where available).
- **Go outside with FLEX™** – Try tai chi, yoga, walking groups and more. Available at local parks and recreation centers (where available).
- **Get SilverSneakers Steps®** for at home or on the go – Receive your choice of a kit for general fitness, strength, walking or yoga.
- **Connect online** – Get support from the SilverSneakers community or get meal plans and healthy recipes.

[silversneakers.com](http://silversneakers.com)

## Humana At Home<sup>SM</sup>

Humana At Home supports qualifying members with both short term and long term services that can help them remain independent at home. Humana At Home Care Managers support members by educating about chronic conditions and medication adherence, helping with discharge instructions, accessing community resources, finding social support and more, all at no additional cost.

[Humana.com/caremgmt](http://Humana.com/caremgmt)

**1-800-432-4803 (TTY: 711)**

Monday – Friday, 8:30 a.m. – 5:30 p.m., Eastern time



## Humana Well Dine® meal program

After your inpatient stay in a hospital or nursing facility, you're eligible for 10 healthy, precooked frozen meals delivered to your door at no additional cost to you.

**1-866-96MEALS  
(1-866-966-3257) (TTY: 711)**

Monday – Friday, 8 a.m. – 9 p.m.  
Saturday, 9 a.m. – 5 p.m.,  
Eastern time



## QuitNet®

Humana's tobacco cessation program can help you meet your goal of quitting tobacco for good. With QuitNet, you get phone counseling, online support and two treatments of nicotine replacement therapy at no additional cost.

[quitnet.com/humana](http://quitnet.com/humana)

**1-888-572-4074**

Monday – Friday, 8 a.m. – midnight  
Saturday, 9 a.m. – 5 p.m.,  
Eastern time





## Insurance terms made easy

**Deductible:** The amount you pay for healthcare before your plan begins to pay for your benefits.

**Coinsurance:** A percentage of your medical and drug costs that you may pay out of your pocket for services after you pay any plan deductible.

**Copayment:** The set dollar amount you pay when you receive medical services or have a prescription filled.

**Out of pocket:** Amount you may have to pay for most plans including deductibles, copays and coinsurance. Once you reach your annual out-of-pocket limit, the Humana Medicare Employer Plan pays 100 percent of the Medicare-approved amount for most covered charges.

**Premium:** The amount you and/or your employer regularly pay for Medicare or Medicare Advantage coverage.

**Network:** A group of healthcare providers contracted to provide medical services at discounted rates. The providers include doctors, hospitals, and other healthcare professionals and facilities.

**Exclusions and limitations:** Specific conditions or circumstances that aren't covered under a plan.



## Frequently asked questions



### Do I need to show my red, white and blue Medicare card when I visit the doctor?

No. You'll get a Humana member ID card that will take its place. Keep your Medicare ID card in a safe place – or use it only when it's needed for discounts and other offers from retailers.

### What should I do if I have to file a claim?

To request reimbursement for a charge you paid for a service, just send the provider's itemized receipt and the Health Benefits Claim Form to the claims address on the back of the member ID card. Make sure the receipt includes your name and Humana member ID number. Call Humana Group Medicare Customer Care for more information.

### What if I have other health insurance coverage?

If you have other health insurance, show your Humana member ID card and your other insurance cards when you see a healthcare provider. The Humana Medicare Employer Plan may be used in combination with other types of health insurance coverage you may have. This is called coordination of benefits.

### When does my coverage begin?

Your former employer or union decides how and when you enroll. Check with your benefits administrator for the proposed effective date of your enrollment. Be sure to keep your current healthcare coverage until your Medicare plan enrollment is confirmed.

### What should I do if I move?

If you move to another area or state, it may affect your plan. Please contact your group benefits administrator for details.