



The coverage you need,
the extras you deserve

Important plan information

Group Medicare PPO
IBEW Local 38

Humana.



Why should I choose Humana?

We've earned the trust of millions of members since we offered our first Medicare plan in 1987. To date, nearly 7.8 million¹ Medicare customers have chosen us to be their healthcare partner, making us one of the largest Medicare providers in the country.

Lifelong well-being . . .
Humana's goal for every member

↓ What's inside

- How to enroll
- Summary of Benefits
- Introduction to Medicare
- Details about your plan
- Tools and programs to manage your health
- Frequently asked questions

¹Humana Inc. Fourth Quarter 2015 Earnings Release, February 2016



We're here
for you

Humana Group Medicare Customer Care
1-800-733-9064 (TTY: 711)

Monday - Friday, 8 a.m. - 9 p.m., Eastern time

Humana's Medicare Employer Plan

The difference is clear

Dear Group Medicare Beneficiary,

At Humana, helping you achieve lifelong well-being is our mission. During our nearly 30 years of experience with Medicare, we've learned how to be a better partner in health.

We're excited to let you know that IBEW Local 38 has asked Humana to offer you a Medicare Advantage and Prescription Drug Plan that gives you more benefits than Original Medicare.

Learn more about the Humana Medicare Employer Plan

- Review the enclosed materials. This packet includes information on your personalized healthcare coverage along with extra services provided by Humana.
- If you have questions about your premium or need help, please call our dedicated Group Medicare Customer Care representatives.

How to enroll

- To learn how to enroll, please refer to the document titled "Important Enrollment Information," located in this packet.

We look forward to serving you now and for many years to come.

Sincerely,

Group Medicare Operations

We're here for you

Humana Group Medicare
Customer Care
1-800-733-9064 (TTY: 711)
Monday - Friday
8 a.m. - 9 p.m., Eastern time.

Our automated phone system may answer your call on weekends and some public holidays. Please leave your name and telephone number and we'll call you back by the end of the next business day.



Important enrollment information

IBEW Local 38 is enrolling you in the Humana Medicare Employer preferred provider organization (PPO) plan. You do not need to do anything to be automatically enrolled in this Medicare health plan. If you do not want to join this plan, you can follow the instructions below. You must do this before the date set by your sponsor. Enrollment in this plan will end your enrollment in a different Medicare Advantage plan.

What do I need to know as a member of the Humana Medicare Employer PPO Plan?

This mailing includes important information about this plan and what it covers, including a Summary of Benefits document. Please review this information carefully.

Once enrolled, you will receive an Evidence of Coverage document (also known as a member contract or subscriber agreement) from the Humana Medicare Employer PPO Plan. Please read the document to learn about the plan's coverage and services. As a member of the Humana Medicare Employer PPO Plan, you can appeal plan decisions about payment or services if you disagree. Enrollment in this plan is generally for the entire year.

When your Humana Medicare Employer PPO Plan begins, Humana will cover all medically necessary items and services, even if you get the services out of network. However, your member cost share may be lower if you use in-network providers. "In-network" means that your doctor or provider is on our list of participating providers. "Out-of-network" means that you are using someone who isn't on this list. The exception is for emergency care or urgently needed services. This includes dialysis services.

You must use network pharmacies to access Humana benefits, except under limited, non-

routine circumstances when you can't reasonably use network pharmacies.

You will need to keep Medicare Parts A and B as the Humana Medicare Employer PPO Plan is a Medicare Advantage Plan. You must also continue to pay your Part B premium. You can be in only one Medicare Advantage Plan at a time. You must let us know if you think you might be enrolled in a different Medicare Advantage plan or a Medicare Prescription Drug plan and inform us of any prescription drug coverage that you may get in the future.

What happens if I don't join the Humana Medicare Employer PPO Plan?

You aren't required to be enrolled in this plan.

You may want to join a different Medicare plan. Call 1-800-MEDICARE anytime, 24 hours a day, 7 days a week, for help in learning how. TTY users can call 1-877-486-2048. Your state may have counseling services through the State Health Insurance Assistance Program (SHIP). They can provide you with personalized counseling and assistance when selecting a plan, including Medicare Supplement plans, Medicare Advantage plans and Prescription Drug Plans. They can also help you find medical assistance through your state Medicaid program and the Medicare Savings Program.

If you don't want to enroll, Please contact Ed Fox at 216-431-7738.

What if I want to leave the Humana Medicare Employer PPO Plan?

You can change or cancel your Humana coverage at any time and return to Original Medicare or another Medicare Advantage plan by using a special election. You can send a request to the Humana Medicare Employer PPO Plan or call 1-800-MEDICARE

The Humana Medicare Employer PPO Plan serves a specific service area. If you move out of the area that the Humana Medicare Employer PPO Plan serves, you need to notify Humana. Please call Humana Group Medicare Customer Care at 1-800-733-9064 (TTY: 711), Monday – Friday from 8 a.m. – 9 p.m., Eastern time.

Remember that if you leave this plan and don't have creditable prescription drug coverage (as good as Medicare's prescription drug coverage), you may have to pay a late enrollment penalty if you enroll in Medicare prescription drug coverage in the future.

Release of Information

By joining this Medicare Advantage Plan, you give us permission to share your information with Medicare and other plans when needed for treatment, payment and health care operations. We do this to make sure you get the best treatment and to make sure that it is covered by the plan. Medicare may also use this information for research and other reasons allowed by Federal law.

2017

Summary of Benefits Humana Medicare Employer PPO Plan

PPO 079/369
IBEW Local 38 Health and Welfare
Fund



Humana.

SECTION I – INTRODUCTION TO SUMMARY OF BENEFITS

This booklet gives you a summary of what we cover and what you pay. It doesn't list every service that we cover or list every limitation or exclusion. **To get a complete list of our benefits, please reference your "Evidence of Coverage".**

You have choices about how to get your Medicare benefits

- One choice is to get your Medicare benefits through Original Medicare (fee-for-service Medicare). Original Medicare is run directly by the Federal government.
- Another choice is to get your Medicare benefits by joining a Medicare health plan (such as **Humana Medicare Employer PPO Plan**).

Tips for comparing your Medicare choices

This Summary of Benefits booklet gives you a summary of what **Humana Medicare Employer PPO** covers and what you pay.

- If you want to compare our plan with other Medicare health plans, you can call your employer or union sponsoring this plan to find out if you have other options through them.
- If you want to know more about the coverage and costs of Original Medicare, look in your current "Medicare & You" handbook. View it online at <http://www.medicare.gov> or get a copy by calling **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day, 7 days a week. TTY users should call **1-877-486-2048**.

Sections in this booklet

- Things to Know About **Humana Medicare Employer PPO**
- Maximum Out-of-Pocket, and Limits on How Much You Pay for Covered Services
- Covered Medical and Hospital Benefits

This document is available in other formats such as Braille and large print.

This document may be available in a non-English language. For additional information, call customer service at the phone number listed below.

Es posible que este documento esté disponible en otros idiomas aparte de inglés. Para obtener información adicional, llame al Servicio al Cliente al número de teléfono que se indica a continuación.

Things to Know About Humana Medicare Employer PPO

Hours of Operation

- Group Medicare Customer Care Hours are Monday - Friday 8:00 a.m. to 9:00 p.m. Eastern time.

Humana Medicare Employer PPO Phone Numbers and Website

- Members should call toll-free **1-800-733-9064** for questions (TTY/TDD **711**)
- Our website: **Humana.com**

Who can join?

To join **Humana Medicare Employer PPO**, you must be entitled to Medicare Part A, be enrolled in Medicare Part B, and live in our service area. The following counties are covered in the Humana network. However, **if your county is not listed, you may still have coverage with this plan. If you don't live in one of these areas, please contact the plan to see if you are eligible.**

SECTION I (continued)

Our service area includes the following: **Alabama:** Autauga, Baldwin, Barbour, Bibb, Blount, Bullock, Chambers, Cherokee, Chilton, Choctaw, Clarke, Coffee, Colbert, Conecuh, Dale, Elmore, Escambia, Etowah, Fayette, Franklin, Geneva, Hale, Henry, Houston, Jackson, Jefferson, Lauderdale, Lee, Limestone, Lowndes, Macon, Madison, Marengo, Marion, Marshall, Mobile, Monroe, Montgomery, Morgan, Pickens, Pike, Randolph, Russell, Shelby, Talladega, Tuscaloosa, Walker, Washington, Wilcox, Winston; **Arizona:** La Paz, Maricopa, Mohave, Pima, Pinal, Santa Cruz, Yavapai; **Arkansas:** Baxter, Benton, Boone, Carroll, Clark, Cleburne, Conway, Craighead, Crawford, Crittenden, Dallas, Faulkner, Franklin, Fulton, Garland, Grant, Greene, Hot Spring, Izard, Jefferson, Johnson, Lee, Logan, Lonoke, Madison, Marion, Montgomery, Newton, Perry, Phillips, Poinsett, Polk, Pope, Pulaski, Randolph, Saline, Scott, Searcy, Sebastian, Sharp, St. Francis, Van Buren, Washington, Yell; **Colorado:** Adams, Alamosa, Arapahoe, Archuleta, Boulder, Broomfield, Chaffee, Clear Creek, Conejos, Costilla, Crowley, Custer, Delta, Denver, Douglas, El Paso, Elbert, Fremont, Gilpin, Grand, Huerfano, Jefferson, Larimer, Las Animas, Logan, Mesa, Montrose, Morgan, Otero, Park, Pueblo, Teller, Weld; **Delaware:** Kent, New Castle; **Florida:** Alachua, Baker, Bay, Bradford, Brevard, Broward, Calhoun, Charlotte, Citrus, Clay, Collier, Columbia, DeSoto, Dixie, Duval, Escambia, Flagler, Gadsden, Gilchrist, Glades, Gulf, Hamilton, Hardee, Hendry, Hernando, Highlands, Hillsborough, Holmes, Indian River, Jefferson, Lafayette, Lake, Lee, Levy, Liberty, Madison, Manatee, Marion, Martin, Miami-Dade, Okaloosa, Okeechobee, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, Putnam, Santa Rosa, Sarasota, Seminole, St. Johns, St. Lucie, Sumter, Suwannee, Union, Volusia, Walton, Washington, Georgia: Appling, Atkinson, Bacon, Barrow, Bartow, Berrien, Bibb, Bleckley, Brantley, Bryan, Bulloch, Burke, Butts, Camden, Carroll, Charlton, Chatham, Chattahoochee, Cherokee, Clarke, Clayton, Clinch, Cobb, Coffee, Columbia, Coweta, Crawford, Dawson, DeKalb, Dodge, Douglas, Effingham, Elbert, Evans, Fannin, Fayette, Floyd, Forsyth, Franklin, Fulton, Gilmer, Glascock, Glynn, Greene, Gwinnett, Habersham, Hancock, Haralson, Harris, Hart, Heard, Henry, Houston, Jackson, Jasper, Jefferson, Jenkins, Johnson, Jones, Lamar, Laurens, Lincoln, Lumpkin, Macon, Madison, Marion, McDuffie, McIntosh, Meriwether, Monroe, Montgomery, Morgan, Muscogee, Newton, Oconee, Oglethorpe, Paulding, Peach, Pickens, Pike, Polk, Putnam, Rabun, Randolph, Richmond, Rockdale, Screven, Spalding, Stephens, Stewart, Talbot, Taliaferro, Tattnall, Towns, Twiggs, Union, Walton, Warren, Washington, Wayne, Webster, Wheeler, Wilkes; **Hawaii:** Honolulu, Kauai, Maui; **Idaho:** Ada, Bannock, Boise, Bonneville, Canyon, Gem, Kootenai, Payette; **Illinois:** Adams, Boone, Brown, Cass, Christian, Clark, Cook, DeKalb, DuPage, Edgar, Fulton, Hancock, Henderson, Henry, Jasper, Kane, Kankakee, Kendall, Knox, La Salle, Lake, Lee, Livingston, Madison, Marshall, McDonough, McHenry, McLean, Menard, Mercer, Monroe, Morgan, Moultrie, Ogle, Peoria, Pike, Putnam, Richland, Rock Island, Sangamon, Schuyler, Scott, St. Clair, Stark, Stephenson, Tazewell, Vermilion, Warren, Will, Winnebago, Woodford; **Indiana:** Adams, Allen, Bartholomew, Blackford, Boone, Brown, Carroll, Cass, Clark, Clinton, De Kalb, Dearborn, Decatur, Delaware, Dubois, Elkhart, Floyd, Fountain, Franklin, Fulton, Gibson, Grant, Greene, Hamilton, Hancock, Harrison, Hendricks, Howard, Huntington, Jackson, Jasper, Jefferson, Jennings, Johnson, Knox, Kosciusko, La Porte, Lagrange, Lake, Lawrence, Madison, Marion, Marshall, Miami, Monroe, Montgomery, Morgan, Newton, Noble, Ohio, Orange, Owen, Perry, Porter, Posey, Putnam, Randolph, Ripley, Scott, Shelby, Spencer, St. Joseph, Steuben, Switzerland, Tippecanoe, Tipton, Vanderburgh, Vermillion, Vigo, Wabash, Warren, Warrick, Washington, Wells, White, Whitley; **Iowa:** Adair, Allamakee, Appanoose, Audubon, Benton, Black Hawk, Boone, Buchanan, Buena Vista, Butler, Calhoun, Carroll, Cass, Cedar, Cerro Gordo, Cherokee, Clayton, Clinton, Crawford, Dallas, Davis, Decatur, Delaware, Dickinson, Emmet, Floyd, Franklin, Fremont, Grundy, Hamilton, Hancock, Hardin, Harrison, Henry, Humboldt, Ida, Iowa, Jackson, Jasper, Jefferson, Johnson, Jones, Keokuk, Kossuth, Lee, Linn, Lucas, Lyon, Madison, Mahaska, Marion, Marshall, Mills, Monona, Monroe, Muscatine, O'Brien, Osceola, Page, Palo Alto, Plymouth, Pocahontas, Polk, Pottawattamie, Poweshiek, Ringgold, Sac, Scott, Sioux, Story, Tama, Union, Van Buren, Wapello, Warren, Washington, Wayne, Webster, Winnebago, Winneshiek, Woodbury, Worth, Wright; **Kansas:** Bourbon, Butler, Cherokee, Cowley, Crawford, Dickinson, Douglas, Franklin, Harvey, Jefferson, Johnson, Labette, Leavenworth, Linn, Miami, Ottawa, Pottawatomie, Reno, Sedgwick, Shawnee, Sumner, Wyandotte; **Kentucky:** Adair, Allen, Anderson, Barren, Bath, Boone, Bourbon, Boyd, Boyle, Bracken, Bullitt, Butler, Campbell, Carroll, Carter, Casey, Clark, Clay, Clinton, Crittenden, Cumberland, Edmonson, Fayette, Floyd, Franklin, Fulton, Gallatin, Garrard, Grant, Green, Greenup, Hardin, Harlan, Harrison, Henderson, Henry, Hickman, Jackson, Jefferson, Jessamine, Johnson, Kenton, Knott, Leslie, Letcher, Lincoln, Livingston, Logan, Madison, Magoffin, Marion, Martin, McCracken, Meade, Menifee, Mercer, Metcalfe, Monroe, Montgomery, Morgan, Nelson, Oldham, Owen, Owsley, Pendleton, Perry, Pike, Powell,

SECTION I (continued)

Scott, Shelby, Simpson, Spencer, Trimble, Union, Warren, Washington, Webster, Whitley, Woodford; **Louisiana:** Bienville, Calcasieu, Caldwell, Cameron, Claiborne, De Soto, Lafayette, LaSalle, Morehouse, Natchitoches, Ouachita, Red River, Sabine, St. Landry, St. Martin, St. Mary, Washington, Winn; **Maine:** Androscoggin, Cumberland, Kennebec, Knox, Oxford, Piscataquis, Sagadahoc, Somerset, Waldo, York; **Maryland:** Anne Arundel, Garrett, Washington; **Michigan:** Allegan, Barry, Berrien, Branch, Calhoun, Cass, Clare, Clinton, Eaton, Gladwin, Gratiot, Hillsdale, Ingham, Isabella, Kalamazoo, Kent, Lenawee, Livingston, Macomb, Midland, Monroe, Montcalm, Muskegon, Oakland, Oceana, Ottawa, Saginaw, St. Joseph, Van Buren, Washtenaw, Wayne; **Minnesota:** Aitkin, Anoka, Becker, Beltrami, Benton, Big Stone, Blue Earth, Brown, Carlton, Carver, Cass, Chippewa, Chisago, Clay, Clearwater, Cottonwood, Crow Wing, Dakota, Dodge, Douglas, Faribault, Fillmore, Freeborn, Goodhue, Grant, Hennepin, Houston, Hubbard, Isanti, Itasca, Jackson, Kanabec, Kandiyohi, Kittson, Lac qui Parle, Lake, Lake of the Woods, Le Sueur, Lincoln, Lyon, Mahanomen, Marshall, Martin, McLeod, Meeker, Mille Lacs, Morrison, Mower, Murray, Nicollet, Nobles, Norman, Olmsted, Otter Tail, Pennington, Pine, Pipestone, Polk, Pope, Ramsey, Red Lake, Redwood, Renville, Rice, Rock, Roseau, Scott, Sherburne, Sibley, St. Louis, Stearns, Steele, Swift, Todd, Wabasha, Wadena, Waseca, Washington, Watonwan, Wilkin, Winona, Wright; **Mississippi:** Attala, Benton, Claiborne, Copiah, DeSoto, George, Hancock, Harrison, Hinds, Jackson, Leake, Madison, Marshall, Pearl River, Rankin, Scott, Stone, Tate, Tunica, Wilkinson, Yazoo; **Missouri:** Audrain, Barry, Bates, Benton, Boone, Callaway, Cass, Cedar, Christian, Clay, Cole, Cooper, Dade, Dallas, Douglas, Franklin, Greene, Harrison, Henry, Hickory, Howard, Howell, Jackson, Jasper, Jefferson, Johnson, Laclede, Lafayette, Lawrence, Lincoln, Livingston, McDonald, Miller, Moniteau, Morgan, Newton, Oregon, Osage, Ozark, Pemiscot, Pettis, Phelps, Platte, Polk, Pulaski, Ray, Saline, Shelby, St. Charles, St. Clair, St. Francois, St. Louis, St. Louis City, Stone, Taney, Texas, Vernon, Warren, Washington, Webster, Wright; **Montana:** Beaverhead, Broadwater, Carbon, Cascade, Chouteau, Deer Lodge, Fergus, Flathead, Granite, Jefferson, Judith Basin, Lake, Lewis and Clark, Liberty, Lincoln, Madison, Meagher, Mineral, Missoula, Pondera, Powell, Ravalli, Sanders, Silver Bow, Stillwater, Teton, Yellowstone; **Nebraska:** Banner, Burt, Butler, Cass, Cheyenne, Colfax, Cuming, Dodge, Douglas, Kimball, Lancaster, Otoe, Sarpy, Saunders, Seward, Washington; **Nevada:** Clark, Washoe; **New Hampshire:** Carroll, Hillsborough, Rockingham; **New Jersey:** Gloucester; **New Mexico:** Bernalillo, Catron, Cibola, Colfax, Curry, Dona Ana, Grant, Guadalupe, Lincoln, Los Alamos, Luna, McKinley, Otero, Rio Arriba, San Miguel, Sandoval, Santa Fe, Sierra, Socorro, Taos, Tarrant, Valencia; **New York:** Albany, Allegany, Broome, Cattaraugus, Cayuga, Chautauqua, Chemung, Chenango, Columbia, Cortland, Delaware, Greene, Hamilton, Herkimer, Jefferson, Kings, Lewis, Madison, Montgomery, New York, Oneida, Onondaga, Oswego, Otsego, Rensselaer, Rockland, Saratoga, Schenectady, Schoharie, Schuyler, Seneca, Steuben, Tioga, Tompkins, Warren, Washington, Yates; **North Carolina:** Alamance, Anson, Avery, Bladen, Buncombe, Burke, Cabarrus, Caldwell, Camden, Caswell, Catawba, Chatham, Cherokee, Clay, Cleveland, Columbus, Cumberland, Davidson, Davie, Forsyth, Franklin, Gaston, Gates, Graham, Guilford, Haywood, Henderson, Iredell, Jackson, Johnston, Lee, Macon, Madison, McDowell, Mecklenburg, Mitchell, Montgomery, Moore, New Hanover, Northampton, Orange, Pender, Person, Polk, Randolph, Richmond, Rockingham, Rowan, Rutherford, Scotland, Stanly, Stokes, Swain, Transylvania, Vance, Wake, Warren, Washington, Watauga, Yadkin, Yancey; **North Dakota:** Barnes, Burleigh, Cass, Grand Forks, Kidder, Morton, Richland, Stutsman, Traill; **Ohio:** Adams, Allen, Ashland, Athens, Auglaize, Belmont, Brown, Butler, Carroll, Champaign, Clark, Clermont, Clinton, Columbiana, Coshocton, Crawford, Cuyahoga, Darke, Defiance, Delaware, Erie, Fairfield, Fayette, Franklin, Fulton, Gallia, Geauga, Greene, Guernsey, Hamilton, Hancock, Hardin, Harrison, Henry, Highland, Hocking, Holmes, Huron, Jackson, Jefferson, Knox, Lake, Lawrence, Licking, Logan, Lorain, Lucas, Madison, Mahoning, Marion, Medina, Meigs, Mercer, Miami, Monroe, Montgomery, Morgan, Morrow, Muskingum, Noble, Ottawa, Paulding, Perry, Pickaway, Pike, Portage, Preble, Putnam, Richland, Ross, Sandusky, Scioto, Seneca, Shelby, Stark, Summit, Trumbull, Tuscarawas, Union, Van Wert, Vinton, Warren, Washington, Wayne, Williams, Wood, Wyandot; **Oklahoma:** Canadian, Cherokee, Cleveland, Comanche, Craig, Custer, Delaware, Dewey, Grady, Haskell, Hughes, Kay, Kiowa, Le Flore, Lincoln, Logan, Mayes, McClain, Muskogee, Noble, Nowata, Oklahoma, Okmulgee, Osage, Ottawa, Pawnee, Pittsburg, Pottawatomie, Rogers, Seminole, Sequoyah, Stephens, Tulsa, Wagoner; **Oregon:** Benton, Clackamas, Columbia, Crook, Deschutes, Hood River, Jefferson, Lincoln, Linn, Malheur, Multnomah, Washington, Pennsylvania: Adams, Allegheny, Beaver, Berks, Bradford, Bucks, Butler, Carbon, Centre, Chester, Clinton, Columbia, Crawford, Cumberland, Dauphin, Delaware, Erie, Huntingdon, Juniata, Lackawanna, Lancaster, Lawrence, Lebanon, Lehigh, Luzerne, Lycoming, McKean, Mercer, Mifflin, Monroe, Montgomery, Montour,

SECTION I (continued)

Northampton, Perry, Philadelphia, Potter, Schuylkill, Snyder, Sullivan, Susquehanna, Tioga, Union, Warren, Washington, Wayne, Westmoreland, Wyoming, York; **Puerto Rico:** Island Wide; **South Carolina:** Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Berkeley, Calhoun, Charleston, Cherokee, Colleton, Dorchester, Fairfield, Georgetown, Greenville, Hampton, Kershaw, Laurens, Lee, Newberry, Oconee, Orangeburg, Pickens, Spartanburg, Union, York; **South Dakota:** Bon Homme, Brookings, Butte, Clark, Clay, Codington, Custer, Davison, Day, Deuel, Fall River, Grant, Hamlin, Hanson, Hutchinson, Kingsbury, Lake, Lawrence, Lincoln, Marshall, McCook, Meade, Miner, Minnehaha, Moody, Pennington, Roberts, Sanborn, Spink, Turner, Union, Yankton; **Tennessee:** Anderson, Bedford, Bledsoe, Blount, Bradley, Campbell, Cheatham, Claiborne, Cocke, Cumberland, Davidson, DeKalb, Dickson, Fayette, Fentress, Franklin, Grainger, Grundy, Hamblen, Hamilton, Hardin, Hickman, Jackson, Jefferson, Knox, Lewis, Loudon, Macon, Madison, Marion, Marshall, Maury, Meigs, Monroe, Montgomery, Morgan, Overton, Polk, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Sumner, Trousdale, Union, Warren, Wayne, White, Williamson; **Texas:** Anderson, Aransas, Armstrong, Atascosa, Austin, Bandera, Bastrop, Bee, Bexar, Caldwell, Callahan, Camp, Carson, Chambers, Cherokee, Coleman, Collin, Colorado, Comal, Comanche, Cooke, Dallas, Dawson, Deaf Smith, Delta, Denton, Dimmit, Eastland, Ector, Edwards, El Paso, Ellis, Erath, Fannin, Fort Bend, Franklin, Frio, Gray, Grayson, Gregg, Guadalupe, Hardin, Harris, Harrison, Hays, Henderson, Hood, Howard, Jefferson, Jim Wells, Johnson, Jones, Kaufman, Kendall, Kinney, Kleberg, Liberty, Marion, Martin, Matagorda, Maverick, McLennan, Medina, Midland, Montgomery, Morris, Navarro, Newton, Nueces, Orange, Palo Pinto, Panola, Polk, Potter, Randall, Real, Rockwall, Rusk, San Jacinto, San Patricio, Shackelford, Shelby, Smith, Tarrant, Taylor, Tom Green, Travis, Tyler, Upshur, Uvalde, Van Zandt, Victoria, Walker, Waller, Washington, Webb, Wharton, Williamson, Wilson, Wise, Wood, Zavala; **Utah:** Daggett, Davis, Salt Lake, Uintah, Utah, Weber; **Virginia:** Accomack, Albemarle, Alexandria City, Alleghany, Amelia, Amherst, Appomattox, Arlington, Bedford, Bedford City, Bland, Botetourt, Bristol City, Buchanan, Buckingham, Buena Vista City, Caroline, Charlotte, Charlottesville City, Chesapeake City, Chesterfield, Clarke, Colonial Heights City, Covington City, Craig, Culpeper, Cumberland, Dickenson, Dinwiddie, Essex, Falls Church City, Fauquier, Floyd, Fluvanna, Franklin, Franklin City, Fredericksburg City, Giles, Gloucester, Goochland, Grayson, Greene, Halifax, Hampton City, Hanover, Henrico, Hopewell City, Isle of Wight, James City, King and Queen, King George, Lancaster, Lee, Loudoun, Louisa, Lunenburg, Madison, Manassas City, Manassas Park City, Mecklenburg, Middlesex, Montgomery, Nelson, New Kent, Newport News City, Norfolk City, Northampton, Northumberland, Norton City, Nottoway, Orange, Page, Petersburg City, Poquoson City, Portsmouth City, Powhatan, Prince George, Prince William, Pulaski, Radford City, Rappahannock, Richmond, Richmond City, Roanoke, Roanoke City, Russell, Salem City, Scott, Shenandoah, Smyth, Southampton, Spotsylvania, Stafford, Suffolk City, Surry, Sussex, Tazewell, Virginia Beach City, Warren, Washington, Westmoreland, Williamsburg City, Winchester City, Wise, Wythe, York; **Washington:** Clark, Cowlitz, Island, King, Kitsap, Kittitas, Pierce, Skagit, Snohomish, Spokane, Walla Walla; **West Virginia:** Berkeley, Boone, Braxton, Brooke, Cabell, Calhoun, Clay, Doddridge, Fayette, Gilmer, Grant, Hampshire, Hancock, Hardy, Harrison, Jackson, Jefferson, Kanawha, Lewis, Lincoln, Logan, Marshall, Mercer, Mineral, Mingo, Monroe, Morgan, Nicholas, Ohio, Pendleton, Pleasants, Pocahontas, Putnam, Raleigh, Ritchie, Roane, Taylor, Tucker, Tyler, Upshur, Wayne, Webster, Wetzel, Wirt, Wood, Wyoming; **Wisconsin:** Brown, Calumet, Columbia, Crawford, Dane, Dodge, Door, Fond du Lac, Forest, Green, Green Lake, Iowa, Jefferson, Kenosha, Kewaunee, Lafayette, Manitowoc, Marathon, Marinette, Marquette, Menominee, Milwaukee, Oconto, Outagamie, Ozaukee, Portage, Racine, Richland, Rock, Sauk, Sheboygan, Washington, Waukesha, Waupaca, Waushara, Winnebago.

The employer, union or trust determines where they are going to offer the plan.

Which doctors and hospitals can I use?

Humana Medicare Employer PPO has a network of doctors, hospitals, and other providers. If you use the providers in our network, you may pay less for your covered services. But if you want to, you can also use providers that are not in our network. You may have to pay more for the services you receive outside the network, and you may have to follow special rules prior to getting services in and/or out of network. For more information, please call Group Medicare Customer Care.

You can access a list of covered providers by using **Humana.com** or calling Group Medicare Customer Care.

What do we cover?

Like all Medicare health plans, we cover everything that Original Medicare covers - and *more*.

Some outpatient prescription drugs may be covered under Medicare Part B. These may include, but are not limited to, the following types of drugs. Contact the Humana Medicare Employer PPO Plan for more details.

- **Some Antigens:** If they are prepared by a doctor and administered by a properly instructed person (who could be the patient) under doctor supervision.
- **Osteoporosis Drugs:** Injectable osteoporosis drugs for some women.
- **Erythropoietin:** By injection if you have end-stage renal disease (permanent kidney failure requiring either dialysis or transplantation) and need this drug to treat anemia.
- **Hemophilia Clotting Factors:** Self-administered clotting factors if you have hemophilia.
- **Injectable Drugs:** Most injectable drugs administered incident to a physician's service.
- **Immunosuppressive Drugs:** Immunosuppressive drug therapy for transplant patients if the transplant took place in a Medicare-certified facility and was paid for by Medicare or by a private insurance company that was the primary payer for Medicare Part A coverage.
- **Some Oral Cancer Drugs:** If the same drug is available in injectable form.
- **Oral Anti-Nausea Drugs:** If you are part of an anti-cancer chemotherapeutic regimen.
- **Inhalation and Infusion Drugs administered through Durable Medical Equipment.**

SECTION II – SUMMARY OF BENEFITS

Maximum Out of Pocket and Limits on How Much You Pay for Covered Services

Does this plan have a Premium?

For information concerning the actual premiums you will pay, please contact Humana, your employer/union group, or your employer group benefits plan administrator.

Is there a maximum out-of-pocket for my covered services?

Yes. Like all Medicare health plans, our plan protects you by having yearly limits on your out-of-pocket costs for medical and hospital care.

Your yearly limit(s) in this plan:

In-Network Maximum Out-of-Pocket

- **\$1,000** out-of-pocket limit for Medicare-covered services. The following services do not apply to the maximum out-of-pocket: Part D Pharmacy, Counseling Services ; Fitness Program ; Health Education Services ; Meal Benefit ; Nursing Hotline ; Smoking Cessation (Additional) and the Plan Premium.

If you reach the limit on out-of-pocket costs, you keep getting covered hospital and medical services and we will pay the full cost for the rest of the year.

Combined In and Out-of-Network Maximum Out-of-Pocket

- **\$1,000** out-of-pocket limit for Medicare-covered services.
- In-Network Exclusions: Part D Pharmacy, Counseling Services ; Fitness Program ; Health Education Services ; Meal Benefit ; Nursing Hotline ; Smoking Cessation (Additional) and the Plan Premium do not apply to the combined maximum out-of-pocket.
- Out-of-Network Exclusions: Part D Pharmacy, Worldwide Coverage and the Plan Premium do not apply to the combined maximum out-of-pocket.

Your limit for services received from in-network providers will count toward this limit.

If you reach the limit on out-of-pocket costs, you keep getting covered hospital and medical services and we will pay the full cost for the rest of the year.

Covered Medical and Hospital Benefits

Inpatient Hospital Care

- In-network: **\$0** per admit
- Out-of-network: **\$0** per admit

Our plan covers an unlimited number of days for an inpatient hospital stay. Except in an emergency, your doctor must tell the plan that you are going to be admitted to the hospital.

Doctor's Office Visits

Primary care physician visit:

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Specialist visit:

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Allergy injections and serum:

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

PREVENTIVE CARE

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment for Medicare-covered preventive services
- Out-of-network: **\$0** copayment for a supplemental annual physical exam

Our plan covers many preventive services, including:

- Abdominal aortic aneurysm screening
- Alcohol misuse counseling
- Bone mass measurement
- Breast cancer screening (mammogram)
- Cardiovascular disease (behavioral therapy)
- Cardiovascular screenings
- Cervical and vaginal cancer screening
- Colonoscopy
- Colorectal cancer screenings
- Depression screening
- Diabetes screenings
- Fecal occult blood test
- Flexible sigmoidoscopy
- HIV screening
- Lung cancer screening
- Medical nutrition therapy services
- Obesity screening and counseling
- Prostate cancer screenings (PSA)
- Sexually transmitted infections screening and counseling
- Tobacco use cessation counseling (counseling for people with no sign of tobacco-related disease)
- Vaccines, including Flu shots, Hepatitis B shots, Pneumococcal shots
- "Welcome to Medicare" preventive visit (one-time)
- Yearly "Wellness" visit

Any additional preventive services approved by Medicare during the contract year will be covered. Frequency limitations apply to certain preventive services.

Emergency Care

- **\$0** copayment for Medicare-covered emergency room visit(s)

Worldwide coverage.

Urgently Needed Services

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

SECTION II (continued)

Diagnostic Tests, Lab and Radiology Services, and X-Rays

Diagnostic radiology services (such as MRIs, CT scans):

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Diagnostic tests and procedures:

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Lab services:

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Outpatient x-rays:

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Therapeutic radiology services (such as radiation treatment for cancer):

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Hearing Services

Exam to diagnose and treat hearing and balance issues:

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Routine hearing:

- In-network: **\$500 maximum benefit coverage amount every 5 years for hearing aids (all types).**
- Out-of-network: **\$500 maximum benefit coverage amount every 5 years for hearing aids (all types). Benefits received out-of-network are subject to any in-network benefit maximums, limitations, and/or exclusions**

Dental Services

Limited dental services (this does not include services in connection with care, treatment, filling, removal, or replacement of teeth):

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Vision Services

Exam to diagnose and treat diseases and conditions of the eye (including yearly glaucoma screening):

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Medicare-covered eyeglasses (lenses and frames) or contact lenses after cataract surgery:

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Routine vision:

- In-network: **\$30 copayment for Routine Exam up to 1 per year. \$75 maximum benefit coverage amount every 2 years for Contact Lenses, Eyeglasses - Lenses and Frames.**
 - Out-of-network: **\$30 copayment for Routine Exam up to 1 per year. \$75 maximum benefit coverage amount every 2 years for Contact Lenses, Eyeglasses - Lenses and Frames. Benefits received out-of-network are subject to any in-network benefit maximums, limitations, and/or exclusions.**
-

Mental Health Care

Inpatient visit:

The inpatient hospital care limit applies to inpatient mental services provided in a general hospital.

Except in an emergency, your doctor must tell the plan that you are going to be admitted to the hospital.

- In-network: **\$0** per admit
- Out-of-network: **\$0** per admit
- 190 day lifetime limit in a psychiatric facility

Outpatient therapy visit:

- In-network: **\$0** copayment
 - Out-of-network: **\$0** copayment
-

Skilled Nursing Facility (SNF)

Our plan covers up to 100 days in a SNF. No 3-day hospital stay is required.

- In-network: **\$0** copay per day for days 1-100
 - Out-of-network: **\$0** copay per day for days 1-100
 - Plan pays \$0 after 100 days
-

Outpatient Rehabilitation

Medically necessary physical therapy, occupational therapy, and speech and language pathology services are covered:

Medicare-covered therapies:

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Cardiac (heart) rehabilitation services:

- In-network: **\$0** copayment
- Out-of-network: **\$0** copayment

Pulmonary rehabilitation services:

- In-network: **\$0** copayment
 - Out-of-network: **\$0** copayment
-

SECTION II (continued)

Ambulance	Medically necessary ambulance services <ul style="list-style-type: none">• In-network: \$0 copayment for Medicare-covered ambulance benefits• Out-of-network: \$0 copayment for Medicare-covered ambulance benefits
Foot Care (<i>podiatry services</i>)	Foot care, including appliances, devices, or shoes for correction or relief of minor ailments and diabetes-related nerve damage and certain conditions: Medicare-covered podiatry visit(s) <ul style="list-style-type: none">• In-network: \$0 copayment• Out-of-network: \$0 copayment
Durable Medical Equipment (<i>wheel chairs, oxygen, etc.</i>)	<ul style="list-style-type: none">• In-network: 0% of the cost• Out-of-network: 0% of the cost
Prosthetic Devices (<i>braces, artificial limbs, etc.</i>)	Prosthetic devices: <ul style="list-style-type: none">• In-network: 0% of the cost• Out-of-network: 0% of the cost Related medical supplies: <ul style="list-style-type: none">• In-network: 0% of the cost• Out-of-network: 0% of the cost
Diabetes Supplies and Services	Diabetes monitoring supplies: <ul style="list-style-type: none">• In-network: \$0 copayment• Out-of-network: \$0 copayment Diabetes self-management training: <ul style="list-style-type: none">• In-network: \$0 copayment• Out-of-network: \$0 copayment
Part B Prescription Drugs	<ul style="list-style-type: none">• In-network: \$0 copayment or 0% of the cost• Out-of-network: \$0 copayment or 0% of the cost
Chiropractic Care	Manipulation of the spine to correct a subluxation (when 1 or more of the bones of your spine move out of position): Medicare-covered chiropractic visit(s) <ul style="list-style-type: none">• In-network: \$0 copayment• Out-of-network: \$0 copayment Routine chiropractic visit(s) <ul style="list-style-type: none">• In-network: 20% of the cost• Out-of-network: 20% of the cost
Home Health Care	<ul style="list-style-type: none">• In-network: \$0 copayment• Out-of-network: \$0 copayment
Outpatient Substance Abuse	Outpatient substance abuse treatment visit: <ul style="list-style-type: none">• In-network: \$0 copayment• Out-of-network: \$0 copayment

SECTION II (continued)

Outpatient Services

- Ambulatory surgical center:
- In-network: **\$0** copayment
 - Out-of-network: **\$0** copayment

- Outpatient hospital visits:
- In-network: **\$0** copayment
 - Out-of-network: **\$0** copayment

Private Duty Nursing

- In-network: **20%** of the cost
- Out-of-network: **20%** of the cost

Renal Dialysis

- Renal dialysis:
- In-network: **\$0** copayment
 - Out-of-network: **\$0** copayment

- Kidney disease education services:
- In-network: **\$0** copayment
 - Out-of-network: **\$0** copayment

HOSPICE

- You must get care from a Medicare-certified hospice. You must consult with your plan before you select hospice.
-

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 - Written information in other formats
- Provides free language services to people whose primary language is not English when those services are necessary to provide meaningful access, such as:
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U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, D.C. 20201

1-800-368-1019 800-537-7697 (TDD)

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العربية (Arabic):

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Humana is a Medicare Advantage organization with a Medicare contract. You must continue to pay your Medicare Part B premiums. This is an advertisement. The benefit information provided is a brief summary, not a comprehensive description of benefits. For more information contact the plan. Limitations, copayments and restrictions may apply. Benefits, premium and/or copayments/coinsurance may change each year.

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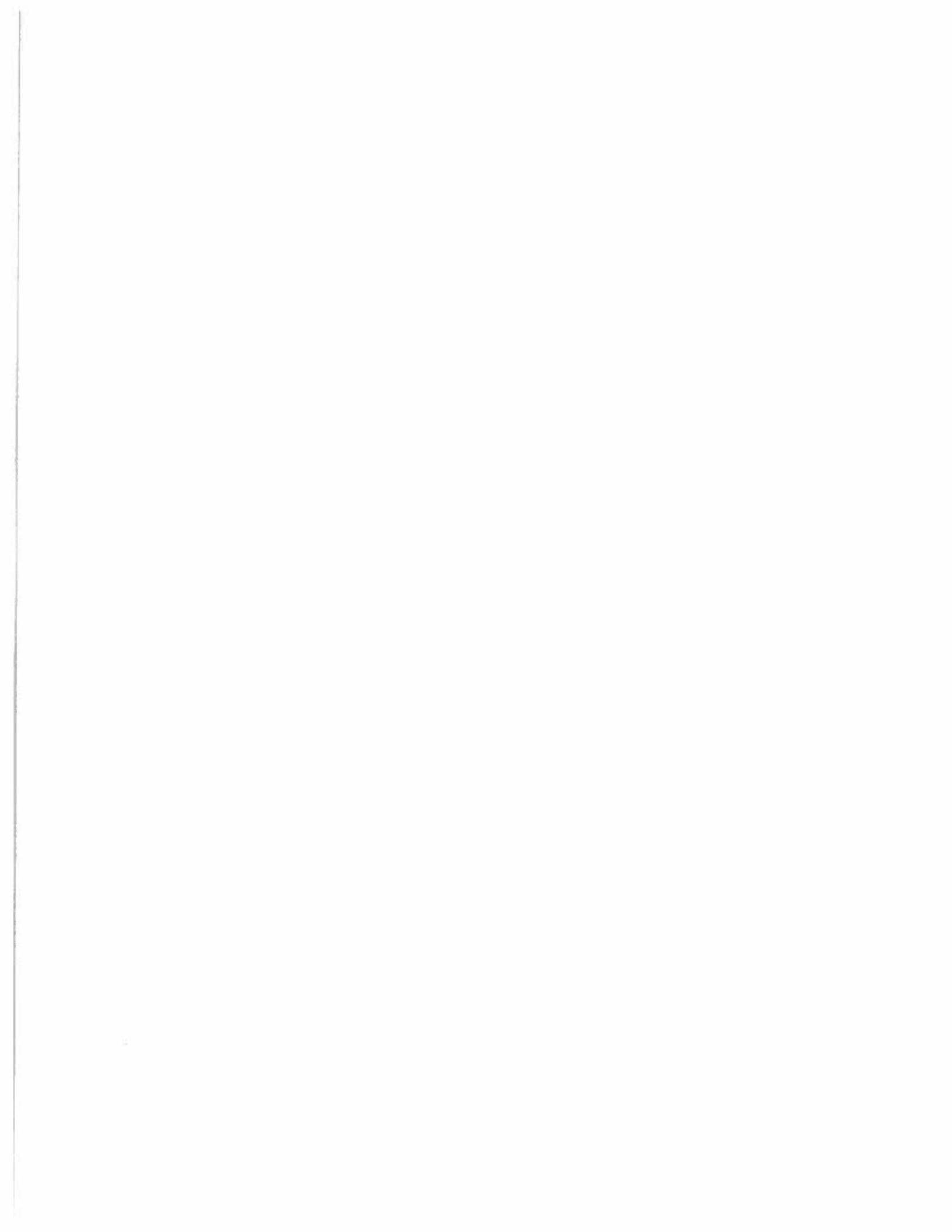
2017

Prescription Drug Schedule Humana Medicare Employer Plan

Rx 230
IBEW Local 38 Health and Welfare
Fund



Humana.



SECTION I – INTRODUCTION TO SUMMARY OF BENEFITS

This booklet gives you a summary of what we cover and what you pay. It doesn't list every service that we cover or list every limitation or exclusion. **To get a complete list of our benefits, please reference your "Evidence of Coverage".**

You have choices about how to get your Medicare prescription drug benefits

- One choice is to get prescription drug coverage through a Medicare Prescription Drug Plan, like the **Humana Rx Plan**.

Tips for comparing your Medicare choices

This Summary of Benefits booklet gives you a summary of what **Humana Medicare Employer Rx** covers and what you pay.

Sections in this booklet

- Things to Know About **Humana Medicare Employer Rx**
- Limits on How Much You Pay for Covered Services
- Prescription Drug Benefits

This document is available in other formats such as Braille and large print.

This document may be available in a non-English language. For additional information, call customer service at the number on the back of your ID card.

Es posible que este documento esté disponible en otros idiomas aparte de inglés. Para obtener información adicional, llame al Servicio al Cliente al número de en el reverso de su tarjeta de identificación.

Things to Know About Humana Medicare Employer Rx

Which drugs are covered?

You can see the complete plan formulary (list of Part D prescription drugs) and any restrictions on our website http://www.humana.com/medicare/medicare_prescription_drugs/medicare_drug_tools/medicare_drug_list. Or, call Group Medicare Customer Care and we will send you a copy of the formulary.

How will I determine my drug costs?

Our plan groups each medication into "tiers." You will need to use your formulary to locate what tier your drug is on to determine how much it will cost you. The amount you pay depends on the drug's tier and what stage of the benefit you have reached. Later in this document we discuss the benefit stages that occur: Initial Coverage, Coverage Gap, and Catastrophic Coverage.

Which pharmacies can I use?

We have a network of pharmacies and you must generally use these pharmacies to fill your prescriptions for covered Part D drugs.

- You can see our plan's pharmacy directory at our website www.humana.com/Medicare/medicare_prescription_drugs.
- Or, call Group Medicare Customer Care and we will send you a copy of the pharmacy directory.

SECTION II – SUMMARY OF BENEFITS

Prescription Drug Benefits

INITIAL COVERAGE

You pay the following until your total yearly drug costs reach **\$3,700**. Total yearly drug costs are the total drug costs paid by both you and our Part D plan.

Standard Retail Cost-Sharing

Tier	One-month supply	Three-month supply
Tier 1 – Generic or Preferred Generic	\$10	\$30
Tier 2 – Preferred Brand	\$25	\$75
Tier 3 – Non-Preferred Drug	\$40	\$120
Tier 4 – Specialty Tier	\$50	N/A

Standard Mail Order Cost-Sharing

Tier	One-month supply	Three-month supply
Tier 1 – Generic or Preferred Generic	\$10	\$20
Tier 2 – Preferred Brand	\$25	\$50
Tier 3 – Non-Preferred Drug	\$40	\$80
Tier 4 – Specialty Tier	\$50	N/A

There may be generic and brand-name drugs, as well as Medicare-covered drugs, in each of the tiers. See the Prescription Drug Guide to identify commonly prescribed prescription drugs in each tier.

If you reside in a long-term facility, you pay the same as at a retail pharmacy.

You may get drugs from an out-of-network pharmacy, but may pay more than you pay at an in-network pharmacy.

COVERAGE GAP

Most Medicare drug plans have a coverage gap (also called the "donut hole"). This means that there's a temporary change in what you will pay for your drugs. The coverage gap begins after the total yearly drug cost (including what our plan has paid and what you have paid) reaches **\$3,700**.

You will continue to pay the same amount as when you were in the initial coverage stage.

SECTION II (continued)

CATASTROPHIC COVERAGE

After your yearly out-of-pocket drug costs (including drugs purchased through your retail pharmacy and through mail order) reach **\$4,950**, you pay the greater of:

- **\$3.30** for generic (including brand drugs treated as generic) and a **\$8.25** copay for all other drugs, or
- **5%** coinsurance (**\$50.00** maximum out-of-pocket per prescription for a one-month supply) regardless of tier.

ORIGINAL MEDICARE EXCLUDED DRUGS

Certain drugs excluded by Original Medicare are covered under this plan. You pay the cost share associated with the tier level for certain Cough and Cold Drugs, Erectile Dysfunction Drugs, Vitamin and Mineral Drugs, Weight Loss Drugs. The amount you pay when you fill a prescription for these drugs does not count towards qualifying you for the Catastrophic Coverage stage.

Contact Humana Group Medicare Customer Care at the phone number on the back of your membership card for more details.

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U.S. Department of Health and Human Services

200 Independence Avenue, SW

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العربية (Arabic):

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Humana is a Medicare Advantage organization and a stand-alone prescription drug plan with a Medicare contract. You must continue to pay your Medicare Part B premiums. Enrollment in this Humana plan depends on contract renewal. This is an advertisement. The benefit information provided is a brief summary, not a comprehensive description of benefits. For more information contact the plan. Limitations, copayments and restrictions may apply. Benefits and/or copayments/coinsurance may change each year.

Humana[®]

[Humana.com](https://www.humana.com)



Great things are ahead of you when your health is ready for them

We're here to help you get ready. We'll assist you each step of the way to help you feel confident about managing your costs — and your well-being.

This guidebook covers the **Humana Medicare Employer preferred provider organization (PPO) plan**.

Although it doesn't list every service, limitation and exclusion in the plan, you'll get all that information and a full list of benefits in an Evidence of Coverage booklet after you enroll.

Are you ready?

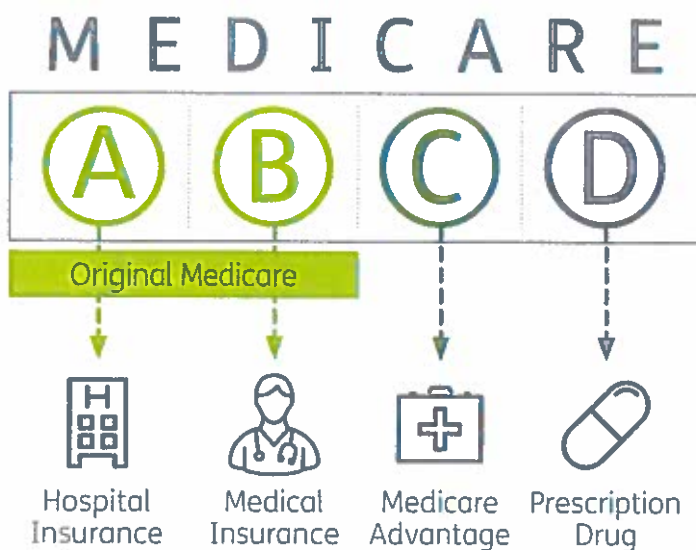
Let's begin at the beginning

What is Medicare?

Medicare is a federal health insurance program for U.S. citizens and legal residents who are 65 and older or qualify due to a disability. You can receive your Medicare benefits through the federal government or a private insurance company.

How does it work?

Medicare is divided into parts A, B, C and D. Parts A and B are called Original Medicare.



- A 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.
- B Medicare Part B is medical insurance**
It helps cover medically necessary doctors' services, outpatient care and other medical services and supplies. Part B also covers some preventive services.
- C Medicare Part C (Medicare Advantage plans)**
is available through private insurance companies. Medicare Part C covers everything parts A and B cover, including hospital and medical services. You still have Medicare if you elect Medicare part C coverage.
- D Some Medicare Advantage plans include Medicare prescription drug coverage (Part D)**
Part D helps pay for the medications your doctor prescribes.

Humana offers you a Medicare Employer preferred provider organization plan

This is a PPO plan with:

- All the benefits of Original Medicare plus extra benefits
- Maximum out-of-pocket protections
- Worldwide emergency coverage
- Programs to improve health and well-being

Dedicated Customer Care team — and even more to love:

- Your benefits levels are 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



Total well-being starts with a complete approach to health

Support your health — and your finances

Humana has solid insurance products that help you support your health — and your financial security — all provided by a Fortune 500 company.

Maximize your well-being

Our health and well-being tools and resources make it easy 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.

Manage your health

Complex or chronic health conditions often demand personal attention. We'll meet you at home or in the hospital, on the phone or via email, to help you manage your condition and minimize complications.

Build healthy relationships



Your relationship with your provider is an important step in protecting and managing your health.

With the Humana Medicare Employer PPO plan, you can use any provider who accepts Medicare and agrees to bill Humana. Unlike traditional PPO plans, your benefit coverage remains the same, even if you decide to see an out-of-network provider.

If you do decide to seek care from an out-of-network provider, 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 coordinate with Humana, which makes it easier to share information. Patients may have a better experience when providers share information this way.
3. 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 provider. We want you to be able to select a provider who's close to home and 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 an easy 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

Communication counts

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

Your SmartSummary™ helps you do just that.

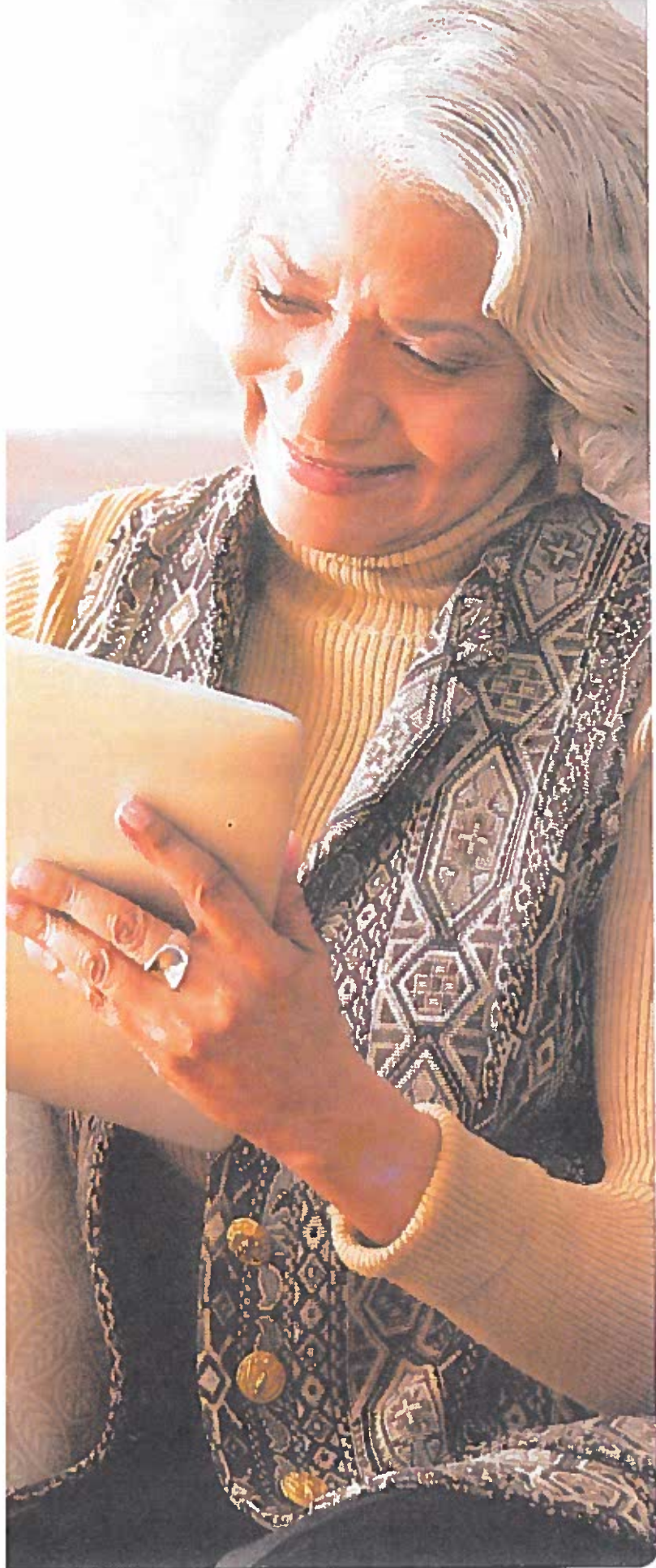
SmartSummary is your comprehensive and personalized health benefits statement. You can use it as a portable health record.

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 It's just for you

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 that allows you to access your specific plan details from your computer or smartphone.

The MyHumana Mobile app

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/mobile-apps** to learn about our many mobile apps, the 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

*Standard data rates may apply.



**You can also connect
with us on Facebook.**

Find healthcare information for Medicare members and caregivers to help in the pursuit of lifelong well-being.

facebook.com/Humanamedicare

Healthways SilverSneakers® Fitness program

This program gets you
into fitness locations
nationwide where you can:



Work out 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



Allies in well-being



We all need a little help now and then. These programs and services are there when you need them, connecting you with care, advice and support wherever you are in your well-being journey.

Many people trust a family member or close friend to help them with their healthcare — someone who may help you talk with us about your insurance plan, keep track of your benefits and claims or answer healthcare questions.

We 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. Here are the ways you can do that:

1. Fill out and submit the form online once you have registered on MyHumana.
2. Print the form from [Humana.com/PHI](https://www.humana.com/PHI) and return it by following the instructions on the form.
3. Give us a call and we'll mail the form to you to complete and return.

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 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® Nurse Advice Line

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

1-800-622-9529 (TTY: 711)

24 hours a day, seven days a week

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

Humana At HomeSM

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 providing education 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

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

In other words...

All those insurance terms can be a little confusing. Here are a few of the most common terms and definitions.

Deductible:

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



What you pay up front

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.



Your share after deductible

Copayment:

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



What amount you pay for medical services

Maximum out-of-pocket:

Amount you may have to pay for most plans including deductibles, copays and coinsurance. If and when 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.



The most you'll spend before your plan pays 100 percent

Premium:

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



The regular payment for your plan

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.



Your plan's healthcare team

Exclusions and limitations:

Specific conditions or circumstances that aren't covered under a plan.



Anything not covered

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 move?

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

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

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

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.



Humana Pharmacy[®] mail delivery



More and more Humana members are finding Humana Pharmacy to be their choice for value, experience, safety, accuracy, convenience and service.

Why choose Humana Pharmacy?

Savings. Many Humana plans provide cost savings if you fill a 90-day supply of your maintenance medicines through a mail-delivery pharmacy, instead of a retail pharmacy. Plus, our pharmacy team works with you and your doctor to find medicines that cost less.

Experienced pharmacy team. Pharmacists are available to answer questions about your medicines and our services.

Safe and accurate. Two pharmacists check your new prescriptions to make sure they are safe to take with your other medicines. The dispensing equipment and heat-sealed bottles with tamper-resistant foil help ensure quality and safety. And your order comes in plain packaging for additional security.

Timely reminders. To help make sure you have the medicines and supplies you need when you need them, we can remind you when it's time to refill your medicines. Just set your preferences when you sign up at HumanaPharmacy.com.

Time-saving mail delivery. No driving to the pharmacy and waiting in line. You may be able to order just four times a year and have more time to do the things you enjoy.

Visit HumanaPharmacy.com

After you become a Humana member, you can sign in with your MyHumana identification or register to get started. You also can sign up by calling **1-800-833-1315 (TTY: 711)** Monday - Friday, 8 a.m. - 11 p.m., and Saturday, 8 a.m. - 6:30 p.m., Eastern time.

Your health is important to us. Humana Pharmacy can deliver the value and service you expect from your pharmacy.

Make Humana Pharmacy your one source

Maintenance medicines: Medicines you take all the time for conditions like high cholesterol, high blood pressure and asthma.

Specialty medicines: Specialized therapies to treat chronic or complex illnesses like rheumatoid arthritis and cancer.



Humana.

GCHJHYEN 0516



Humana Pharmacy recognized as
**"Highest in Customer Satisfaction
with Mail-Order Pharmacies"**

— J.D. Power 2015

Flexible ordering options

Online

HumanaPharmacy.com. Start a new prescription, order refills, check on your order and get information about how to get started.

Doctor

Let your healthcare provider know you would like to use our pharmacy, and he or she can send prescriptions through ePrescribe. Healthcare providers can also fill out the form and fax the prescription to **1-800-379-7617**.

Phone

For maintenance medications, you can call **1-800-833-1315 (TTY: 711)**, Monday – Friday, 8 a.m. – 11 p.m., and Saturday, 8 a.m. – 6:30 p.m., Eastern time.

For specialty medications, you can call Humana Specialty Pharmacy® directly at **1-800-833-1642 (TTY: 711)**, Monday – Friday, 8 a.m. – 8 p.m., and Saturday, 8 a.m. – 6 p.m., Eastern time.

Mail

Mail your paper prescriptions with an order form to:
Humana Pharmacy
P.O. Box 745099
Cincinnati, OH 45274-5099

Humana Pharmacy Mobile App

Place new orders and refills for your medicines, check order status and gain access to a secure site, 24 hours a day. Text “HPAPP” to 239355 (Be Well) to download. Message and data rates apply. Reply STOP to cancel, HELP for help.

The life of a prescription



1. Humana Pharmacy gets your prescription order. Your healthcare provider can send us your new prescriptions by fax, phone or electronically. Or you can send new prescriptions by mail with an order form. Order forms can be downloaded at **HumanaPharmacy.com**.



2. Our pharmacy checks your Humana pharmacy benefits coverage, puts in your order and creates a unique shipment number.



3. A pharmacist checks your prescription order for accuracy and possible drug interactions.



4. Approved orders go through the payment process. If your health benefits don't cover the medicine, we will check the claim and fix the problem. If we cannot fill your prescription, we'll return it to you and tell you why.



5. An automated system fills your medicine, and a pharmacist makes sure it matches the label before it's sealed.



6. Humana Pharmacy mails the order to you with important information about your medicine.

You should get your new prescription by mail in 7 – 10 days after Humana Pharmacy has all the necessary information. Your refill should arrive within five days. It may take longer if we have to call you or your healthcare provider with questions about the order.

Humana®

Discrimination is Against the Law

Humana Inc. and its subsidiaries (“Humana”) comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex. Humana does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Humana provides:

- Free auxiliary aids and services, such as qualified sign language interpreters, video remote interpretation, and written information in other formats to people with disabilities when such auxiliary aids and services are necessary to ensure an equal opportunity to participate.
- Free language services to people whose primary language is not English when those services are necessary to provide meaningful access, such as translated documents or oral interpretation.

If you need these services, call 1-877-320-1235 or send an email to accessibility@humana.com, or if you use a TTY, call 711.

If you believe that Humana has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Discrimination Grievances
P.O. Box 14618
Lexington, KY 40512 - 4618

If you need help filing a grievance, call 1-877-320-1235 or if you use a TTY, call 711.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)
Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

Multi-Language Interpreter Services

English: ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 1-800-733-9064(TTY: 711).

Español (Spanish): ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-733-9064(TTY: 711).

繁體中文 (Chinese): 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-733-9064 (TTY: 711)。

Tiếng Việt (Vietnamese): CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-733-9064 (TTY: 711).

한국어 (Korean): 주의 : 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-733-9064 (TTY: 711) 번으로 전화해 주십시오.

Tagalog (Tagalog – Filipino): PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-733-9064 (TTY: 711).

Русский (Russian): ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-733-9064 (телетайп: 711).

Kreyòl Ayisyen (French Creole): ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-800-733-9064 (TTY: 711).

Français (French): ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-733-9064 (ATS : 711).

Polski (Polish): UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-733-9064(TTY: 711).

Português (Portuguese): ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-733-9064 (TTY: 711).

Italiano (Italian): ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-733-9064 (TTY: 711).

Deutsch (German): ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-733-9064 (TTY: 711).

日本語 (Japanese): 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-733-9064 (TTY : 711) まで、お電話にてご連絡ください。

فارسی (Farsi):

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-800-733-9064 (TTY: 711) تماس بگیرید.

Diné Bizaad (Navajo): Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiiik'eh, éí ná hóló, kojí' hódíílnih 1-800-733-9064 (TTY: 711).

العربية (Arabic):

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-733-9064 (رقم هاتف الصم والبكم: 711).



Give this to your provider

Confirm you are covered by giving your provider this flyer and your Humana member ID card at your first appointment.

Once you are a member of the Humana Medicare Employer preferred provider organization (PPO) plan, sharing this information can help keep you connected with your preferred provider.

A message for your provider

Humana will provide coverage for this retiree under a group (or an employer-sponsored) Medicare employer preferred provider organization (PPO) plan.

This retiree's in-network and out-of network benefits are the same. This means you can provide services to this retiree or any member of this plan if you are a Medicare provider.

Contracted healthcare providers

If you're a Humana Medicare Employer PPO-contracted healthcare provider, **you'll receive your contracted rate.**

Out-of-network healthcare providers

Humana is dedicated to an easy transition. If you're a contracted Medicare provider, you can treat and receive payment for your Humana-covered patients who have this plan. Humana pays providers according to the Original Medicare fee schedule less any member plan responsibility.



Healthcare providers who want information

about our claims processes or about becoming a Humana Medicare Employer PPO-contracted provider can

call Provider Relations at 1-800-626-2741.



NOTE: This number is not for patient use.

Patients, please call the Group Medicare Customer Care number on the back of your Humana member ID card.

Humana.

Humana is a Medicare Advantage PPO plan with a Medicare contract. Enrollment in a Humana plan depends on contract renewal.

The provider network may change at any time. You will receive notice when necessary. Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. For a decision about whether we will cover an out-of-network service, we encourage you or your provider to ask us for a pre-service organization determination before you receive the service. Please call our Customer Care number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

Discrimination is against the law

Humana Inc. and its subsidiaries (“Humana”) comply with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

English: ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Please call our Customer Care number on the back of your Humana member ID card.

Español (Spanish): ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Póngase en contacto con nuestro Departamento de Atención al Cliente llamando al número que aparece al dorso de su tarjeta de identificación de afiliado de Humana.

繁體中文 (Chinese): 注意：如果您使用繁體中文，請致電 Humana 會員卡背面的電話號碼與客戶服務部聯絡。

Humana.

HEALTHY CHOICES GET REWARDED

Improve your well-being and earn Bucks in the process

Start with the decision to engage with Go365™ by Humana.

Go365 is a program designed to help you make healthier choices. Along the way, as you complete activities, you'll get rewarded.



Learn... About your health. Through our Go365 Health Assessment, a confidential lifestyle questionnaire, you'll gain an understanding of your current health. You'll get a personalized report with steps you can take to boost wellness. And you'll discover your Go365 Age — which tells you if your body is living older or younger than your actual years.



Burn... Calories through activities we suggest. Or get vaccinations and preventive screenings. We'll help you establish goals based on your Go365 Health Assessment results and guide you in completing activities to achieve them.



Earn... Bucks* you can spend at the Go365 Mall. As you complete certain activities, you earn Bucks — Bucks are good for the purchase of movie tickets and gift cards, pedometers and wearable fitness devices, apparel and more. Great gifts for your family, for your friends and, of course, for yourself. After all, you earned them.

You'll receive more information about Go365 after you enroll in a Humana Medicare plan.

Humana is a Medicare Advantage HMO, PPO and PFFS organization with a Medicare contract. Enrollment in any Humana plan depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments and restrictions may apply. Benefits may change each year.

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Humana Inc. and its subsidiaries ("Humana") comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability or sex.

continued on back

*Bucks have no cash value and can only be spent at the Go365 Mall. Bucks must be earned and redeemed within the same plan year.



English: ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Please call our Customer Care number on the back of your Humana member ID card.

Español (Spanish): ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Póngase en contacto con nuestro Departamento de Atención al Cliente llamando al número que aparece al dorso de su tarjeta de identificación de afiliado de Humana.

繁體中文 (Chinese): 注意：如果您使用繁體中文，請致電 Humana 會員卡背面的電話號碼與客戶服務部聯絡。

Humana.

Medicare Employer plan

Your dedicated Customer Care phone number:



1-800-733-9064 (TTY: 711)

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

What to expect after you enroll



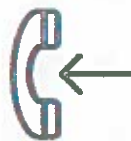
Enrollment confirmation

You'll receive a letter from Humana once the Centers for Medicare & Medicaid Services (CMS) confirms your enrollment.



Humana member ID card

Your Humana member ID card will arrive in the mail shortly after you enroll.



Health assessment call

Shortly after your membership is confirmed, a Humana representative will call you to talk about ways we can help you achieve lifelong well-being. A nurse or Humana At Home™ Care Manager may also call to learn about challenges impacting your wellness.



Evidence of Coverage (EOC)

Detailed booklet about your healthcare coverage for your plan will arrive in the mail. This will also include your privacy notice.

Humana is a Medicare Advantage PPO plan with a Medicare contract. Enrollment in this Humana plan depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments and restrictions may apply. Benefits, premium and/or member cost-share may change each year. You must continue to pay your Part B premium.

The provider and pharmacy network may change at any time. You will receive notice when necessary.

Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. For a decision about whether we will cover an out-of-network service, we encourage you or your provider to ask us for a pre-service organization determination before you receive the service. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

This information is available for free in other languages. Please contact a licensed Humana sales agent at **1-800-733-9064 (TTY: 711)**.

Esta información está disponible gratuitamente en otros idiomas. Póngase en contacto con un agente de ventas certificado de Humana al **1-800-733-9064 (TTY: 711)**.

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