

# Humana Group Medicare Employer Plan

Bringing Humana to You

May 2023

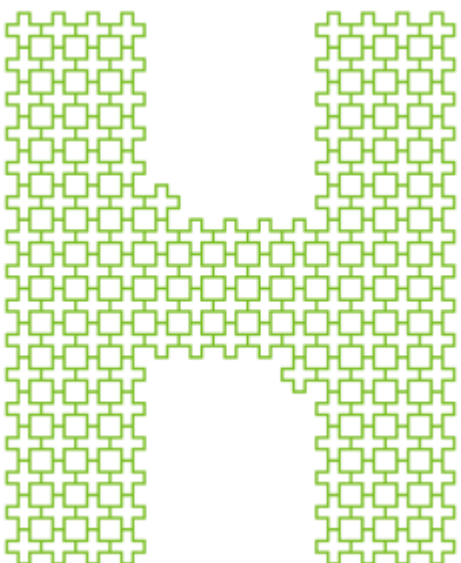
Humana®





# What you need to know

Your Humana plan and the extra benefits and services available to you

- 
- 1 Medicare**
  - 2 Your plan**
  - 3 Extra benefits**
  - 4 Value-added items and services**

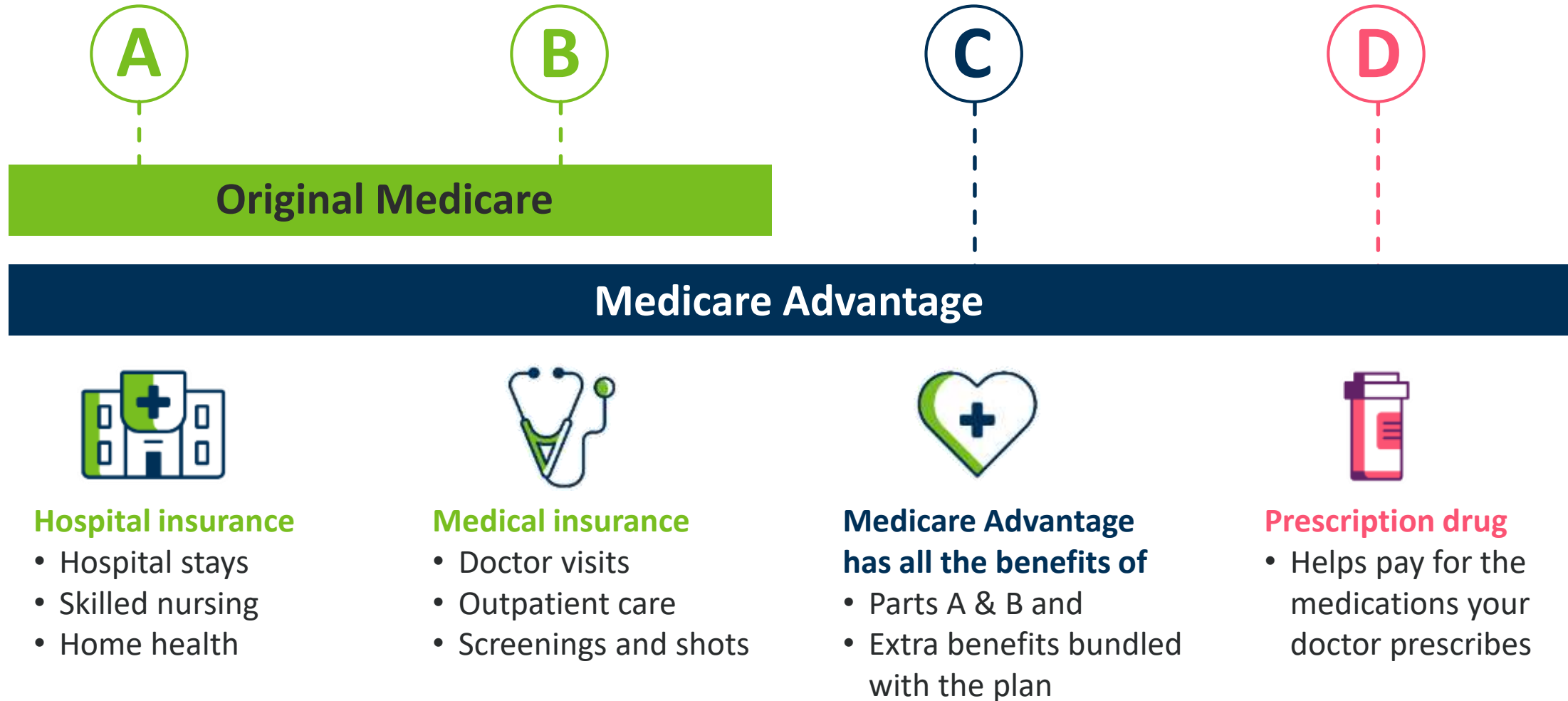


# Medicare

How does Medicare work, and how is it different from Medicare Advantage?

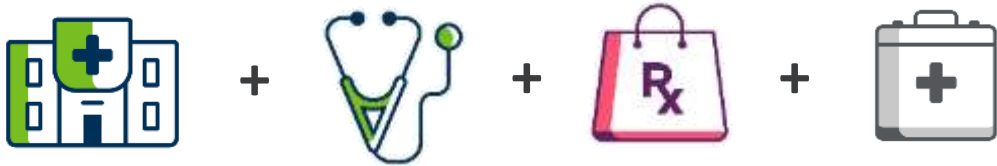


# Original Medicare vs. Medicare Advantage



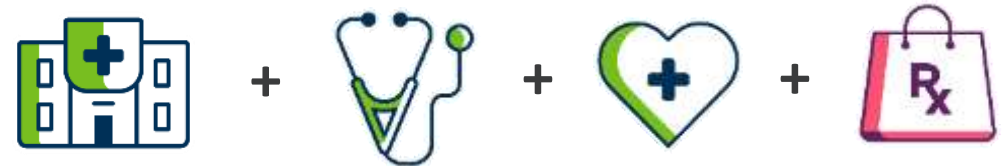
# Your Medicare options

## Original Medicare



- Members with Original Medicare (Parts A and B) often choose to add a stand-alone prescription drug plan (Part D) and a Medicare Supplement plan to get additional coverage
- Possible to have up to 3 different cards

## Medicare Advantage Plan



- Includes Original Medicare Parts A and B (must continue to pay Part B premium) and extra benefits bundled with the plan
- 1 card and 1 place to call with questions
- **Part D prescription coverage is not included on all Medicare Advantage plans**



## Your plan

What is my plan, and how does it work for me?





# Medicare Part C

## Medicare Advantage plan types

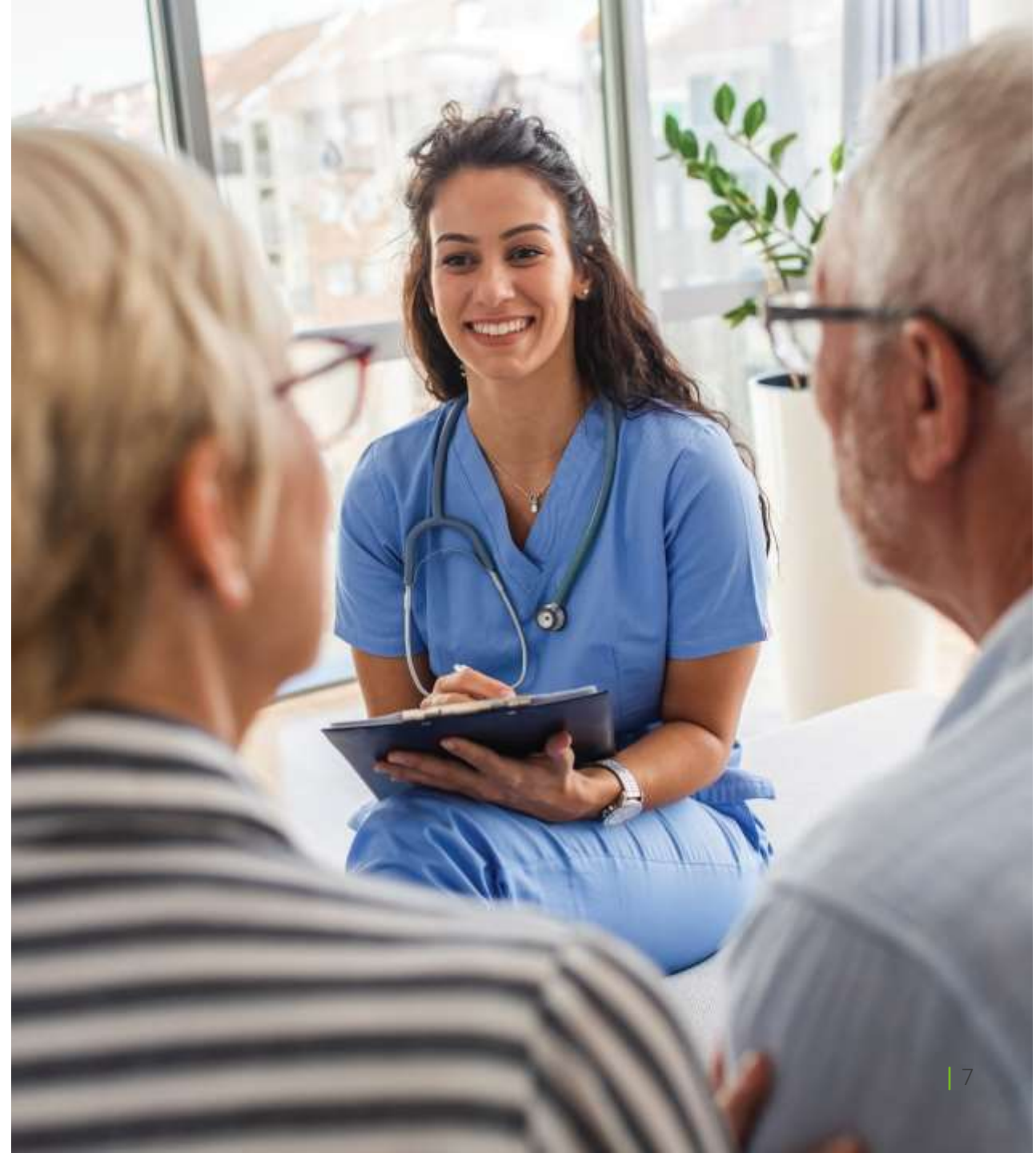
PPO



### Preferred Provider Organization

Choose any provider that accepts Medicare and agrees to bill the plan. With your PPO plan, your cost share will be the same for both in- and out-of-network services.

- No copay for certain preventive care
- Out-of-pocket maximum
- Worldwide emergency coverage



# Your PPO benefits

With your PPO plan, your cost share will be the same for in- and out-of-network services.

<b>Your PPO plan</b>	
Annual deductible	<b>\$183</b>
Annual maximum out-of-pocket	<b>\$1,000</b>
<b>Hospital care</b>	
Outpatient hospital visits	<b>\$0 copay</b>
Inpatient hospital	<b>\$0 per admit</b>
<b>Physician and facility services</b>	
Primary care provider	<b>\$0 copay</b>
Specialist	<b>\$0 copay</b>
Outpatient ambulatory surgical center	<b>\$0 copay</b>
Durable medical equipment	<b>0% of the cost</b>
<b>Emergency services</b>	
Emergency room care	<b>\$0 copay</b>
Urgent care	<b>\$0 copay</b>



# Medicare Part D

## Prescription drug plan

**PDP**

### **Prescription Drug Plan**

Prescription drug coverage is available as part of your Medicare Advantage plan with prescription drug coverage (MAPD).

- Generic, brand and specialty drug coverage
- List of covered drugs may vary by plan
- Access to mail-order pharmacies



## Your Part D benefits

Humana's Part D coverage is spread among four groupings based on the drug type—also called “tiers”.

Tiers	Standard retail copay/coinsurance cost sharing (30-day supply)	Standard mail order copay/coinsurance cost sharing (90-day supply)	Common medications that fall into each tier
<b>Tier 1</b> Generic/preferred generic	<b>\$2 copay</b>	<b>\$0 copay</b>	Levothyroxine Sodium Simvastatin Omeprazole
<b>Tier 2</b> Preferred brand	<b>\$36 copay</b>	<b>\$93 copay</b>	Synthroid, Eliquis, Xarelto
<b>Tier 3</b> Nonpreferred drug	<b>40% of the cost</b>	<b>40% of the cost</b>	Zocor, Prilosec
<b>Tier 4</b> Specialty	<b>33% of the cost</b>	<b>N/A</b>	Enbrel, Humira

# 2023 enhanced vaccine and insulin coverage

At Humana, we strive to help our members achieve total health so that they may live their best lives, which includes efforts to provide our members with access to more affordable prescription drugs. Helping to further support these initiatives, President Biden signed the Inflation Reduction Act into law on August 16, 2022.

This means that this Humana Group Medicare Advantage prescription drug plan may have additional benefits that are not currently described, including reduced out-of-pocket costs for Part D vaccines and this plan's covered insulin.

Benefits include:



## **\$0 vaccines**

Beginning January 1, 2023, member cost share of all Part D vaccines listed on the Advisory Committee on Immunization Practices (ACIP) list<sup>1</sup> will be **\$0**.



## **Part B drugs**

Beginning April 1, 2023, member cost share of some Part B drugs will have a lower cost share than your standard Part B drug cost share to help avoid increased cost for your Part B drugs.



## **\$35 insulin copay**

Beginning July 1, 2023, member cost share of this plan's covered insulin products covered under Part B and Part D will be **no more than \$35** for every one-month (up to a 30-day) supply and if your plan has a deductible, it does not apply to Part B Insulin.

<sup>1</sup>For more information regarding the Centers for Disease Control and Prevention's ACIP vaccine recommendations, please go to [www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/index.html](https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/index.html).



### **Rx mail delivery**

Your plan includes access to a network of pharmacies, including mail order pharmacies. CenterWell Pharmacy™ is one option.

### **Accuracy and safety**

Free standard shipping in discreet, temperature-controlled packaging.

### **Convenience**

No driving to the pharmacy or waiting in line.

### **Reminders**

Refill reminders by email, text or phone—you decide.

### **Learn more**

Learn more by visiting **CenterWellPharmacy.com** or by calling **888-538-3518 (TTY: 711)**, Monday – Friday, 8 a.m. – 11 p.m., and Saturday, 8 a.m. – 6:30 p.m., Eastern time.



# Part B vs. Part D prescription drug coverage

Humana's Part D coverage is designed to help you manage your out-of-pocket costs.



## Part B

- **Injectable/IV drugs given in provider's office.**
- **Diabetic testing supplies, insulin pumps, insulin for insulin pump and CGMs.**
- **Vaccines covered under Part B:**
  - Influenza (flu) vaccine
  - Pneumococcal (pneumonia) vaccines
  - Hepatitis B vaccines for persons at increased risk of hepatitis
  - Vaccines directly related to the treatment of an injury (rabies and tetanus)



## Part D

- **Diabetes medications**
- **Insulin administered (or used) with syringes or pens**
- **Syringes, pen needles or other insulin administration devices that are not durable medical equipment (e.g., Omnipod or VGO)**
- **Covers most medications**
- **Vaccines like the examples below:**
  - Shingles
  - Tdap
  - Hepatitis A



## Continuous glucose monitors and supplies

Medicare-covered therapeutic continuous glucose monitors (CGMs) and supplies are covered under your Humana Group Medicare Part B medical benefit.

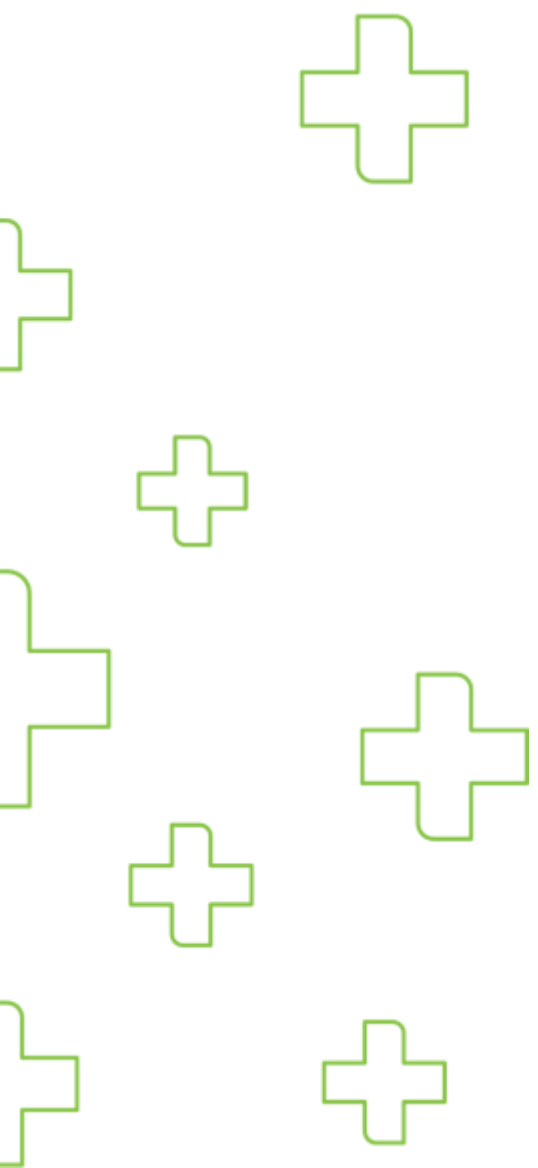
- CGMs and supplies should be obtained from a durable medical equipment (DME) provider that accepts Medicare and will bill your insurance.
- CGMs and supplies will not be covered through your pharmacy benefit at the pharmacy.

### Humana preferred DME providers

**CCS Medical, 877-531-7959**

**Edwards Healthcare, 888-344-3434**

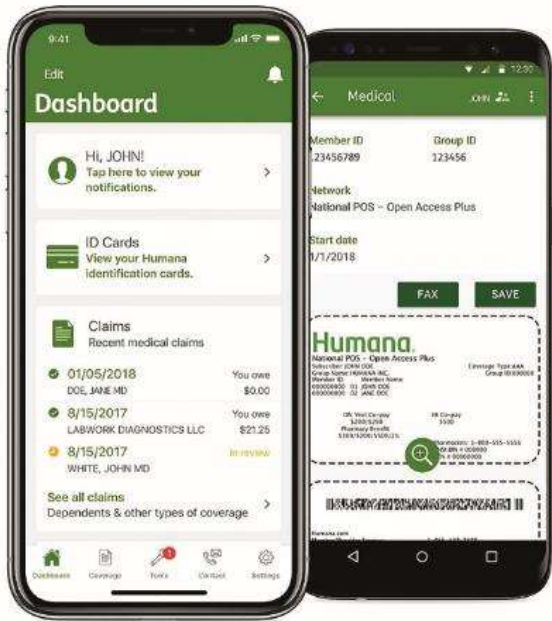




## **Extra benefits and services**

# MyHumana and MyHumana mobile app

Get your personalized health information on MyHumana



A valuable part of your Humana plan is a secure online account called MyHumana where you can keep track of your claims and benefits, find providers, view important plan documents and more.

## 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](https://www.humana.com/mobile-apps) to learn about our many mobile apps, the app features and how to use them.

## With MyHumana and the MyHumana mobile app, you can:

- Review your plan benefits and claims
- Find pharmacies in your network
- Find providers in your network
- Compare drug prices
- View or print your Humana member ID card
- Select your communication preferences

\*Standard data rates may apply.



# Building healthy provider relationships

## Benefits of having a primary care provider (PCP)

- Your PCP can get to know your overall health history
- You can build a trusting, long-term relationship
- Your PCP will help take care of you when you're sick and help you to maintain your health with preventive care



# SmartSummary

## Your personalized benefits statement

**SmartSummary** Humana.

Your Pharmacy, Medical, and Hospital claims processed in March 2022

**THIS IS NOT A BILL**

This summary is your "Explanation of Benefits" (EOB) and claim payments for your medical, hospital and your Medicare prescription drug coverage (Part D). Please review this summary and keep it for your records. **This is not a bill.**

**JOHN DOE**  
Member ID: XXXXXXXX  
Plan name: Humana Group Medicare LPPD  
Rx PCN or Rx Group number: 03200000

**OVERVIEW OF YOUR MARCH CLAIMS**

Medical, hospital and Part B pharmacy (see page 3)	
Total billed charges this month	\$1,143.24
Humana discounts	- \$537.54
Benefit exclusions	- \$231.67
Other Insurance	- \$0.00
Amount Humana Paid	- \$329.03
<b>Your Share</b>	<b>\$375.60</b>

**Part D prescription drug claims (see page 10)**

Total cost this month	\$4.55
Other Payments	- \$0.00
Amount Humana Paid	- \$0.00
<b>Your Share</b>	<b>\$4.55</b>

YOU ARE CURRENTLY IN PART D DRUG PAYMENT STAGE: 1 2 3

CONTACT US IF YOU HAVE QUESTIONS OR NEED HELP.

**SmartSummary**

Your personal prescription and medical benefits statement

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**Medical and hospital deductible and yearly limits**

**YEARLY LIMITS - THESE LIMITS GIVE YOU FINANCIAL PROTECTION**

These limits tell the most you will have to pay in 2022 in "out-of-pocket" costs (copays, coinsurance, and your deductible) for medical and hospital services covered by the plan.

These yearly limits are called your "out-of-pocket maximums." They put a limit on how much you have to pay, but they do not put a limit on how much care you can get. This means:

- Once you have reached a limit in out-of-pocket costs, you stop paying medical claims costs.
- You keep getting your covered services as usual, and the plan will pay the full cost for the rest of the year.

**2022 Individual In-network Out-of-pocket**  
In 2022, \$2,500.00 is the most you will have to pay for covered services from providers.

Your **Individual In-network Out-of-pocket** is: **\$2,500.00**

As of March 31, 2022 you have paid: **\$23.00**

Your remaining amount is: **\$2,477.00**

**2022 Individual Out-of-network Out-of-pocket**  
In 2022, \$7,500.00 is the most you will have to pay for covered services from providers.

**SmartSummary**

Your personal prescription and medical benefits statement

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**Details for Medical and Hospital Claims processed in March 2022**

**MEDICAL AND HOSPITAL CLAIMS**

Service Date: 02/28/2022 Claim # XXXXXXXXXX000000	Amount the provider billed the plan	\$342.00
<b>MD SMITH</b> New patient office or other outpatient visit, typically 30 minutes	Humana Discounts	- \$0.00
<b>Out-of-network</b> (billing code 99203), 1, 2, 3	Benefit Exclusions	- \$231.67
	Other Insurance	- \$0.00
	Total Cost (amount the plan approved)	\$108.33
	<b>Amount Humana Paid</b>	<b>- \$83.33</b>
	<b>Your Share</b>	<b>\$25.00</b>

1. You pay a \$25.00 copayment for New patient office or other outpatient visit, typically 30 minutes from an out-of-network provider.

2. **EXPLANATION OF MEMBER RESPONSIBILITY** - The estimated member's responsibility amount is based upon information available at the time of claim processing. This amount represents any applicable deductibles, coinsurance, copayments, and non-covered services as outlined in your benefit plan document. It includes any amounts that the member may have previously paid to the provider of service. Also, any amounts denied for additional information may be re-evaluated.

3. You may be responsible for paying some or all of the excluded charges to your provider.

Service Date: 02/28/2022 Claim # XXXXXXXXXX000000	Amount the provider billed the plan	\$325.00
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**SmartSummary**

Your personal prescription and medical benefits statement

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**MEDICAL AND HOSPITAL CLAIMS**

Service Date: 02/26/2022 Claim # XXXXXXXXXX000000	Amount the provider billed the plan	\$325.00
<b>ABC HOSPITAL</b> Radiology-Diagnostic-General	Humana Discounts	- \$323.00
<b>Out-of-network</b> (billing code 320)	Benefit Exclusions	- \$0.00
	Other Insurance	- \$0.00
	Total Cost (amount the plan approved)	\$0.00
	<b>Amount Humana Paid</b>	<b>- \$0.00</b>
	<b>Your Share</b>	<b>\$0.00</b>

Service Date: 02/28/2022 Claim # XXXXXXXXXX000000

<b>ABC HOSPITAL</b> Professional Fees (Extension of 0660-Radiology-Diagnostic)	Humana Discounts	- \$28.00
<b>Out-of-network</b> (billing code 972)	Benefit Exclusions	- \$0.00
	Other Insurance	- \$0.00
	Total Cost (amount the plan approved)	\$0.00
	<b>Amount Humana Paid</b>	<b>- \$0.00</b>
	<b>Your Share</b>	<b>\$28.00</b>

Service Date: 02/28/2022 Claim # XXXXXXXXXX000000

<b>HOSPITAL</b>	Amount the provider billed the plan	\$28.00
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Humana's SmartSummary provides a comprehensive overview of your health benefits and healthcare spending.

**You'll receive this statement after each month you've had a claim processed.**

You can sign in to your MyHumana account and see your SmartSummary statements anytime.

**Go Green**—update your member preferences to receive your SmartSummary statement electronically.





## SilverSneakers®

A total health and physical activity program included in your plan at no extra cost

- SilverSneakers gives you access to exercise equipment, group fitness classes and social events.
- Work towards improving muscle strength, bone density, flexibility and balance.
- Use thousands of fitness locations nationwide, with weights, swimming, classes and cardio equipment (equipment and classes vary by location).
- Enjoy group fitness classes outside of traditional gyms.
- Start workout programs tailored to your level with the SilverSneakers GO™ app.
- Learn more at **SilverSneakers.com**.
- Included in your plan at no extra cost.



## Go365 by Humana®

Your wellness program that rewards you for completing eligible activities that help you make healthy choices, at not extra cost to you

### **Your health can be rewarding**

Go365 by Humana makes wellness fun and easy. We can help you reach your physical and emotional health goals. Track your activity and redeem rewards:

- online, at **MyHumana.com**
- by filling out and mailing in paper forms

### **Earn rewards you can redeem for gift cards**

Complete eligible healthy activities like walking, getting your Annual Wellness Visit or volunteering and you can earn rewards to redeem for gift cards. Once you've earned at least \$10 in rewards, choose your gift cards in the Go365 Mall.

### **Now it's time to get going with Go365**

If you have a MyHumana account, you can use the same information to log in to **Go365.com**. If not, activate your profile at MyHumana.com.







*My*Directives®

## MyDirectives®

### Advance care planning

MyDirectives, an online advance care plan platform, ensures your wishes are met in case unexpected medical emergencies happen or as illnesses progress. With MyDirectives, you can make your exact wishes known and identify the people you trust to speak for you as well.

Sign in to **MyHumana.com**, go to MyHealth tab, in the drop down select MyHealth Overview and then select MyDirectives under Resources.





## Humana Well Dine<sup>®</sup>

After your overnight inpatient stay in a hospital or skilled nursing facility, you're eligible for up to 28 nutritious meals (2 meals per day for 14 days). The meals will be shipped to your door at no additional cost to you.

### Humana Well Dine meal plans include:

- General wellness
- Renal friendly
- Heart friendly
- Diabetes friendly
- Cancer support
- Vegetarian
- Gluten-free
- Lower sodium
- Pureed

For more information, please contact the number on the back of your Humana member ID card or visit [Humana.com/home-care/well-dine](https://www.humana.com/home-care/well-dine).

# Humana Care Management

## Post-discharge Transportation

- 12 one-way trips by car, van or wheelchair access vehicle, up to 50 miles per trip.
- Transportation services must be utilized within 60 days of discharge event.

## Post-discharge Personal Home Care

- \$0 copayment for a minimum of 4 hours per day, up to a maximum of 8 hours total per discharge, for certain in-home support services following a discharge from a skilled nursing facility or from an inpatient hospitalization.
- Qualified aides can offer assistance performing activities of daily living (ADLs) within the home and instrumental activities of daily living (IADLs) related to personal care.
- ADL activities may include bathing or showering, dressing, getting in and out of bed or a chair, walking, toileting, and eating.
- IADL activities may include preparing meals, shopping on behalf of the member for groceries or personal items, performing light housework, laundry, dishes, and/or using a telephone.
- A member must be receiving assistance with a minimum of one ADL to receive assistance with any IADL.
- Personal home care services must be initiated within 30 days of discharge event and utilized within 60 days of discharge.

# Health resources

There are other clinical programs/health resources available to eligible members

## Case Management

- Assess members' current medical conditions, procedures, and discharge plans
- Educate members on the health condition(s),
- Refer members to appropriate websites, community resources, and health programs,
- Assist with hospital discharge plans and care throughout treatment

## Disease Management

- Humana offers a wide variety of Disease Management (DM) programs to assist members who experience chronic or acute health conditions. Programs for Heart Failure, Asthma, Cancer, Diabetes and many more

## Transplant Management

- Guide members through transplants by providing information and resources which allow members to make informed decisions
- Provide the member with a single point of contact during the duration of the organ or bone marrow transplant process
- Provide benefit guidance
- Coordination of services
- Personal support and counseling

## Health Planning and Support nurses

- Offer clinical interventions guidance, Case Management, and Disease Management
- Offer in network provider guidance.
- Provide a link between members and specially trained clinical staff who can address the member's unique health-related needs





## Humana Health Coaching

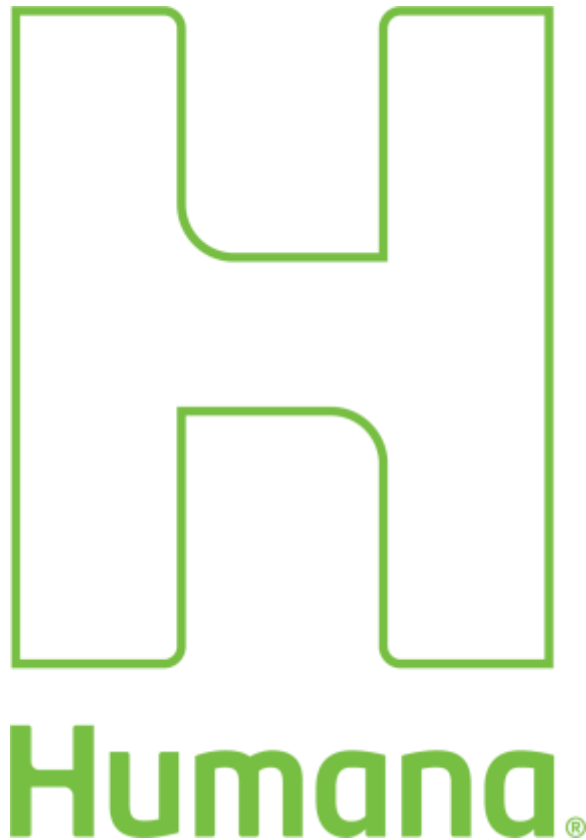
Support and guidance from a professional

### Ready to get started on your path to better health?

Available to all Humana Group Medicare members, our health coaching program provides guidance to help you develop a plan of action that supports your health and well-being goals.

A health coach works with you to create a personal vision for your health and well-being, brings clarity to your goals and priorities and provides accountability and support.

Get started by calling **877-567-6450 (TTY: 711)**, 8 a.m. – 6 p.m., Eastern time.



## Thanks for your time and attention, stay connected with Humana

For more information:

- Refer to your informational kit
- Use MyHumana, a secure online account to access your plan information. Visit **Humana.com/registration** to get started.
- Call Humana Group Medicare Customer Care team for anything related to your Humana plan at **866-396-8810 (TTY: 711)**, Monday – Friday, 8 a.m. – 9 p.m., Eastern time





Humana is a Medicare Advantage HMO, PPO organization and a stand-alone prescription drug plan with a Medicare contract. Enrollment in any Humana plan depends on contract renewal. Call **866-396-8810 (TTY: 711)** for more information.

Out-of-network/non-contracted providers are under no obligation to treat plan members, except in emergency situations. 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.

Limitations on telehealth services, also referred to as virtual visits or telemedicine, vary by state. These services are not a substitute for emergency care and are not intended to replace your primary care provider or other providers in your network. Any descriptions of when to use telehealth services is for informational purposes only and should not be construed as medical advice. Please refer to your evidence of coverage for additional details on what your plan may cover or other rules that may apply.

Other providers are available in our network. The provider network may change at any time. We will provide you with advance notice when necessary.

**Humana.**

## Important

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### At Humana, it is important you are treated fairly.

Humana Inc. and its subsidiaries comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, ancestry, ethnicity, sex, sexual orientation, gender, gender identity, disability, age, marital status, religion, or language in their programs and activities, including in admission or access to, or treatment or employment in, their programs and activities.

- The following department has been designated to handle inquiries regarding Humana's non-discrimination policies:  
Discrimination Grievances, P.O. Box 14618, Lexington, KY 40512-4618, **866-396-8810 (TTY: 711)**

### Auxiliary aids and services, free of charge, are available to you. 866-396-8810 (TTY: 711)

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.

This information is available for free in other languages. Please call our customer service number at 866-396-8810 (TTY: 711). Hours of operation: 8 a.m. – 8 p.m. Eastern time.

**Español (Spanish):** Llame al número indicado para recibir servicios gratuitos de asistencia lingüística. **866-396-8810 (TTY: 711).**

Horas de operación: 8 a.m. a 8 p.m. hora del este.

**繁體中文 (Chinese):** 本資訊也有其他語言版本可供免費索取。請致電客戶服務部：**866-396-8810 (聽障專線：711)**。辦公時間：東部時間上午 8 時至晚上 8 時。