

## Take me to your doctor or provider!

### Give this flyer to your doctor to confirm you are covered.

Don't forget to bring your Humana member ID card to your first appointment as well. 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 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.



The in-network and out-of network benefits are the same for any member of this plan if you are a Medicare provider.

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

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 do 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

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