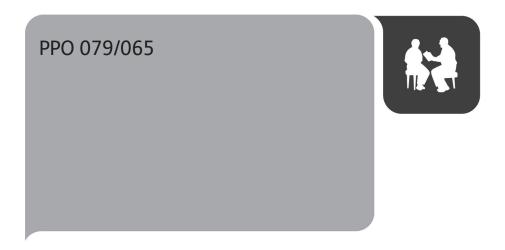
# Summary of Benefits Humana Medicare Employer PPO Plan





# 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

- Non-Union members should call toll-free 1-866-396-8810 for questions (TTY/TDD 711). Union 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, Sedqwick, 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, Piscataguis, 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, Lvon. Mahnomen, 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, Chevenne, Colfax, Cumina, 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, Torrance, Valencia; **New York**: Albany, Allegany, Broome, Cattaraugus, Cayuga, Chautaugua, 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, Seguoyah, 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, Seguatchie, 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, Fauguier, 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 Yes. Like all Medicare health plans, our plan protects you by my covered services? 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 \$3,000 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 • \$3,000 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: \$200 copay per day for days 1-5 • Out-of-network: \$200 copay per day for days 1-5 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: **\$5** copayment Out-of-network: **\$5** copayment

	<ul><li>Specialist visit:</li><li>In-network: \$20 copayment</li><li>Out-of-network: \$20 copayment</li></ul>
	<ul> <li>Allergy injections and serum:</li> <li>In-network: \$0 copayment</li> <li>Out-of-network: \$0 copayment</li> </ul>
PREVENTIVE CARE	<ul> <li>In-network: \$0 copayment</li> <li>Out-of-network: \$0 copayment for Medicare-covered preventive services</li> <li>Out-of-network: \$0 copayment for a supplemental annual physical exam</li> </ul>
	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  Pecal occult blood test  Flexible sigmoidoscopy  HIV 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)
	Any additional preventive services approved by Medicare during the contract year will be covered. Frequency limitations apply to certain preventive services.

#### **Emergency Care**

• \$65 copayment for Medicare-covered emergency room visit(s)

If you are admitted to the hospital within 24 hours for the same condition, you do not have to pay your share of the cost for emergency care. See the "Inpatient Hospital Care" section of this booklet for other costs.

	Worldwide coverage.	
Urgently Needed Services	<ul> <li>In-network: \$5 to \$25 copayment</li> <li>Out-of-network: \$5 to \$25 copayment</li> </ul>	
Diagnostic Tests, Lab and Radiology Services, and X-Rays	Diagnostic radiology services (such as MRIs, CT scans): • In-network: <b>\$0</b> copayment or <b>0%</b> to <b>10%</b> of the cost • Out-of-network: <b>\$0</b> copayment or <b>0%</b> to <b>10%</b> of the cost	
	Diagnostic tests and procedures: In-network: \$0 to \$25 copayment or 0% to 10% of the cost Out-of-network: \$0 to \$25 copayment or 0% to 10% of the cost	
	Lab services: • In-network: <b>\$0</b> copayment or <b>0%</b> of the cost • Out-of-network: <b>\$0</b> copayment or <b>0%</b> of the cost	
	Outpatient x-rays: • In-network: \$0 to \$25 copayment or 0% to 10% of the cost • Out-of-network: \$0 to \$25 copayment or 0% to 10% of the cost	
	Therapeutic radiology services (such as radiation treatment for cancer):  • In-network: \$20 copayment or 0% to 10% of the cost  • Out-of-network: \$20 copayment or 0% to 10% of the cost	
Hearing Services	Exam to diagnose and treat hearing and balance issues: In-network: <b>\$20</b> copayment Out-of-network: <b>\$20</b> copayment	
Dental Services	Limited dental services (this does not include services in connection with care, treatment, filling, removal, or replacement of teeth):  • In-network: \$20 copayment  • Out-of-network: \$20 copayment	
Vision Services	Exam to diagnose and treat diseases and conditions of the eye (including yearly glaucoma screening):  In-network: \$0 to \$20 copayment  Out-of-network: \$0 to \$20 copayment	
	Medicare-covered eyeglasses (lenses and frames) or contact lense after cataract surgery: In-network: \$0 copayment Out-of-network: \$0 copayment	

# **SECTION II** (continued)

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.
	<ul> <li>In-network: \$200 copay per day for days 1-5</li> <li>Out-of-network: \$200 copay per day for days 1-5</li> </ul>
	• 190 day lifetime limit in a psychiatric facility
	Outpatient therapy visit: <ul> <li>In-network: \$5 to \$40 copayment</li> <li>Out-of-network: \$5 to \$40 copayment</li> </ul>
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 1-6 \$20 copay per day for days 7-20 \$110 copay per day for days 21-100  Out-of-network: \$0 copay per day for days 1-6 \$20 copay per day for days 7-20 \$110 copay per day for days 21-100
	Plan pays \$0 after 100 days
Outpatient Rehabilitation	Medically necessary physical therapy, occupational therapy, and speech and language pathology services are covered:
	<ul> <li>Medicare-covered therapies:</li> <li>In-network: \$20 copayment or 10% of the cost</li> <li>Out-of-network: \$20 copayment or 10% of the cost</li> </ul>
	Cardiac (heart) rehabilitation services: <ul> <li>In-network: \$20 copayment or 10% of the cost</li> <li>Out-of-network: \$20 copayment or 10% of the cost</li> </ul>
	<ul> <li>Pulmonary rehabilitation services:</li> <li>In-network: \$20 copayment or 10% of the cost</li> <li>Out-of-network: \$20 copayment or 10% of the cost</li> </ul>
Ambulance	Medically necessary ambulance services
	<ul> <li>In-network: \$100 copayment for Medicare-covered ambulance benefits</li> <li>Out-of-network: \$100 copayment for Medicare-covered ambulance benefits</li> </ul>

## **SECTION II** (continued)

Foot Care (podiatry services)	Foot care, including appliances, devices, or shoes for correction or relief of minor ailments and diabetes-related nerve damage and certain conditions:	
	<ul> <li>Medicare-covered podiatry visit(s)</li> <li>In-network: \$20 copayment</li> <li>Out-of-network: \$20 copayment</li> </ul>	
<b>Durable Medical Equipment</b> (wheel chairs, oxygen, etc.)	<ul><li>In-network: 15% of the cost</li><li>Out-of-network: 15% of the cost</li></ul>	
<b>Prosthetic Devices</b> (braces, artificial limbs, etc.)	Prosthetic devices: • In-network: <b>15%</b> of the cost • Out-of-network: <b>15%</b> of the cost	
	Related medical supplies: In-network: <b>15%</b> of the cost Out-of-network: <b>15%</b> of the cost	
Diabetes Supplies and Services	Diabetes monitoring supplies: • In-network: <b>0%</b> of the cost • Out-of-network: <b>0%</b> of the cost	
	Diabetes self-management training: • In-network: <b>\$0</b> copayment • Out-of-network: <b>\$0</b> copayment	
Part B Prescription Drugs	<ul><li>In-network: 20% of the cost</li><li>Out-of-network: 20% of the cost</li></ul>	
Chiropractic Care	Manipulation of the spine to correct a subluxation (when 1 or more of the bones of your spine move out of position):	
	<ul> <li>Medicare-covered chiropractic visit(s)</li> <li>In-network: \$20 copayment</li> <li>Out-of-network: \$20 copayment</li> </ul>	
Home Health Care	<ul><li>In-network: \$0 copayment</li><li>Out-of-network: \$0 copayment</li></ul>	
Outpatient Substance Abuse	Outpatient substance abuse treatment visit: • In-network: \$5 to \$40 copayment • Out-of-network: \$5 to \$40 copayment	
Outpatient Services	Ambulatory surgical center: In-network: <b>10%</b> of the cost Out-of-network: <b>10%</b> of the cost	
	Outpatient hospital visits: • In-network: <b>0%</b> to <b>10%</b> of the cost • Out-of-network: <b>0%</b> to <b>10%</b> of the cost	

## **SECTION II** (continued)

Renal Dialysis	Renal dialysis: • In-network: <b>\$0</b> copayment or <b>10%</b> of the cost • Out-of-network: <b>\$0</b> copayment or <b>10%</b> of the cost
	<ul><li>Kidney disease education services:</li><li>In-network: \$0 copayment</li><li>Out-of-network: \$0 copayment</li></ul>
HOSPICE	<ul> <li>You must get care from a Medicare-certified hospice. You must consult with your plan before you select hospice.</li> </ul>

# Discrimination is Against the Law

CHA HMO, INC., HUMANA MEDICAL PLAN, INC, HUMANA HEALTH PLAN, INC., HUMANA BENEFIT PLAN OF ILLINOIS, INC., HUMANA INSURANCE COMPANY, HUMANA HEALTH BENEFIT PLAN OF LOUISIANA, INC., HUMANA INSURANCE OF PUERTO RICO, INC., HUMANA MEDICAL PLAN OF UTAH, INC., HUMANA HEALTH COMPANY OF NEW YORK, INC., HUMANA HEALTH PLANS OF PUERTO RICO, INC., HUMANA EMPLOYERS HEALTH PLAN OF GEORGIA, INC., HUMANA REGIONAL HEALTH PLAN, INC. CARITEN HEALTH PLAN INC., HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC., ARCADIAN HEALTH PLAN, INC., HUMANA INSURANCE COMPANY OF NEW YORK, HUMANA MEDICAL PLAN OF PENNSYLVANIA, INC., HUMANA MEDICAL PLAN OF MICHIGAN, INC., HUMANA WISCONSIN HEALTH ORGANIZATION INSURANCE CORP. ("Humana") complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

#### Humana:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - 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:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact Dr. Michelle Griffin, PhD.

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:

Dr. Michelle M. Griffin, PhD (FACHE)

Civil Rights/LEP/ADA/Section 1557 Compliance Officer: 500 W. Main Street -10th floor Louisville, Kentucky 40202 Phone: 1-877-320-1235 Fax: 877-320-1269

Email: Mgriffin5@humana.com or Accessibility@humana.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Dr. Michelle Griffin PHD, Civil Rights/LEP/ADA/Section 1557 Compliance Officer is available to help you at the contact information listed above.

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 speak English, language assistance services, free of charge, are available to you. Call 1-866-396-8810(TTY: 711).

**Español (Spanish):** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-396-8810(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 1-866-396-8810(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 1-866-396-8810(TTY: 711).

한국어 (Korean): 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-396-8810(TTY: 711번으로 전화해 주십시오.

**Tagalog (Tagalog – Filipino):** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawagsa 1-866-396-8810(TTY: 711).

**Русский (Russian):** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-396-8810(телетайп: 711).

**Kreyòl Ayisyen (French Creole):** ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-866-396-8810(TTY: 711).

**Français (French):** ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-396-8810(ATS : 711).

**Polski (Polish):** UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-866-396-8810(TTY: 711).

**Português (Portuguese):** ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-866-396-8810(TTY: 711).

**Italiano (Italian):** ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-866-396-8810(TTY: 711).

**Deutsch (German):** ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-866-396-8810 (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。 1-866-396-8810(TTY: 711) まで、お電話にてご連絡ください。

:(Farsi) فارسى

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 8810-866-396-1(رقم هاتف الصم والبكم: 711).

**Diné Bizaad (Navajo):** Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hóló, koji' hódíílnih 1-866-396-8810(TTY: 711)

:(Arabic) العربية

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 8810-866-396-1(رقم هاتف الصم والبكم: 711).

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