



2018 Humana MAPD and PDP Plan Summary

ALABAMA

Delegated Agent Version



Please note: The information included in this document is for training purposes only and is not approved for public distribution. The following pages are summaries of the 2018 MAPD and PDP plan highlights. For more complete benefit information, please refer to the appropriate Summary of Benefits and/or Evidence of Coverage.



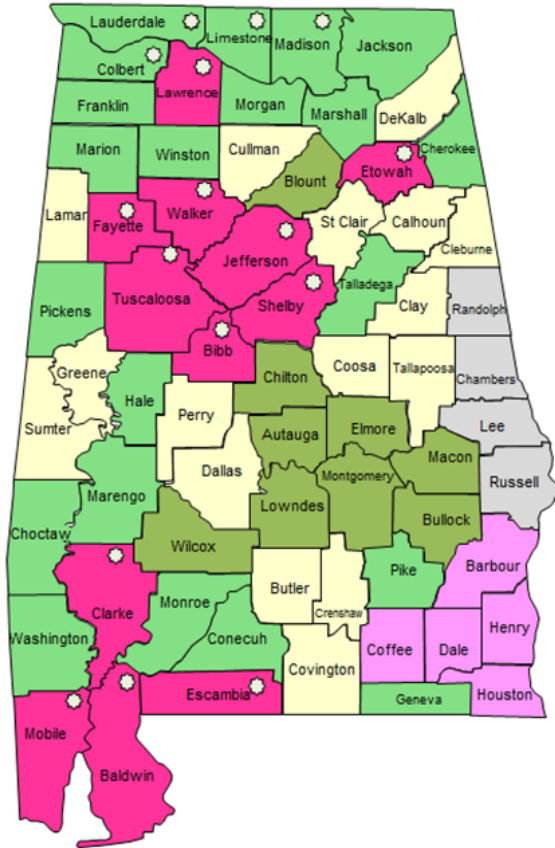
2018 Plan Summary Outline

Please refer to plan Summary of Benefits and EOC for full explanation of benefits

2018 Value Proposition Footprint

2018
Alabama
Lead Product Map

HMO SNP	☆	\$0.00
LPPO (AL)		\$49.00
HMO Huntsville		\$45.00
HMO Birmingham		\$0.00
LPPO Bham/Montg.		\$49.00
LPPO Columbus		\$47.00
LPPO Dothan		\$47.00
HMO Mobile		\$0.00
RPPO MAPD (AL)		\$89.00
RPPO MA ONLY (AL)		\$0.00



County

Highest Value Proposition

Baldwin, Bibb, Clarke, Escambia, Etowah, Fayette, Jefferson, Lawrence, Mobile, Shelby, Tuscaloosa, Walker	HMO
Autauga, Barbour, Blount, Bullock, Chambers, Cherokee, Chilton, Choctaw, Coffee, Colbert, Conecuh, Dale, Elmore, Franklin, Geneva, Hale, Henry, Houston, Jackson, Lauderdale, Lee, Limestone, Lowndes, Macon, Madison, Marengo, Marion, Marshall, Monroe, Montgomery, Morgan, Pickens, Pike, Randolph, Russell, Washington, Wilcox, Winston	LPPO
Butler, Calhoun, Clay, Cleburne, Coosa, Covington, Crenshaw, Cullman, Dallas, DeKalb, Greene, Lamar, Perry, St. Clair, Sumter, Tallapoosa	RPPO



2018 Plan Summary Outline

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Alabama Sales Manager Territory & Contact Information

Field Sales Manager

Contact Number

Email Address

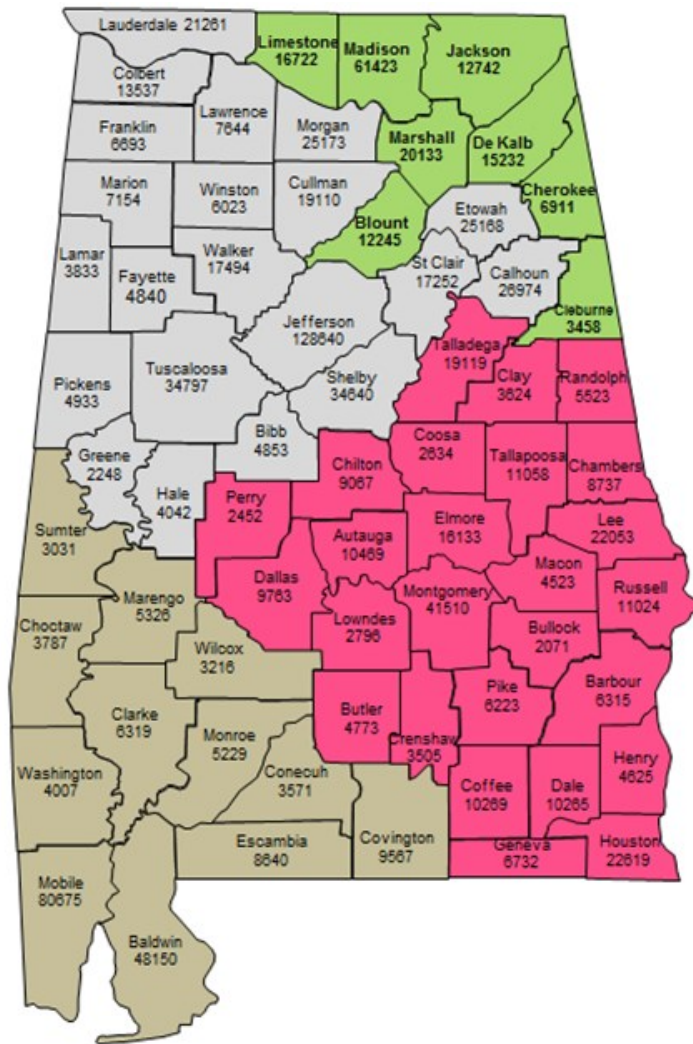
Tim Merritt
Josh Lawford
Debbie Milner
Gerald Stroh

205.201.8971
205.492.9936
205.213.1331
706.527.2680

tmerritt1@humana.com
jlawford@humana.com
dmilner1@humana.com
gstroh@humana.com

2018 Alabama Territorial Map

- Northeast - Tim Merritt
- Central - Josh Lawford
- Southeast - Gerald Stroh
- Southwest - Debbie Milner





Plan Year 2018—ALABAMA

HMO

Birmingham

\$0 Premium

Contract: H5619-088

Serving: Bibb,
Etowah, Fayette,
Jefferson, Shelby,
Tuscaloosa, Walker

Mobile

\$0 Premium

Contract: H5619-089

Serving: Baldwin,
Clarke, Escambia,
Mobile

Huntsville

\$45 Premium

Contract: H5619-094

Serving: Colbert,
Lauderdale, Lawrence,
Limestone, Madison

PFFS

Select Counties

\$97 Premium

Contract: H8145-075

Serving: Autauga,
Baldwin, Clay, Fayette,
Limestone, Madison,
Mobile, Montgomery,
Randolph, Shelby,
Talladega

Dual Eligible SNP HMO

\$26.90 Premium Contract: H5619-093

**HSV—Colbert, Lauderdale, Lawrence, Limestone,
Madison**

**BHM—Bibb, Etowah, Fayette, Jefferson, Shelby,
Tuscaloosa, Walker**

MOB—Baldwin, Clarke, Escambia, Mobile

Regional PPO

(MAPD)

\$89 Premium

Contract: R7315-002

Serving: All Alabama
Counties

(MA Only/ No Drug)

\$0 Premium

Contract: R7315-001

Serving: All Alabama
Counties

LPPO

Mobile

\$68 Premium

Contract: H5525-020

Serving: Baldwin,
Clarke, Escambia,
Mobile

Columbus

\$47 Premium

Contract: H5216-056

Serving: Chambers, Lee,
Randolph, Russell

Birmingham/Montgomery

\$49 Premium

Contract: H5216-095

Serving: Autauga, Bullock, Elmore,
Lowndes, Macon, Montgomery,
Wilcox

**Bibb, Blount, Chilton, Fayette,
Jefferson, Shelby, Walker**

Dothan

\$47 Premium

Contract: H5216-096

Serving: Barbour,
Coffee, Dale, Henry,
Houston

LPPO

Alabama LPPO—Select Counties

\$49 Premium / Contract: H5216-094

**Cherokee, Choctaw, Colbert, Conecuh, Etowah, Franklin, Geneva,
Hale, Jackson, Lauderdale, Limestone, Madison, Marengo,**

**Marion, Marshall, Monroe, Morgan, Pickens, Pike, Talladega,
Tuscaloosa, Washington, Winston**

PDP

Statewide

**Walmart - \$17.00
Contract # S5884-158**

**Enhanced - \$64.10
Contract # S5884-001**

**Preferred RX - \$26.80
Contract # S5884-106**

*** NOTE — GR/BN Numbers will be released between late September and October 1st

*Plans are subject to approval by CMS



Plan Year 2018 (Delegated Agent Version)

Humana MarketPOINT Sales Offices

Madison Office

ASCs—Dramundra Collier/Stacey Smart

8213 Highway 72, Ste. C, Madison, AL 35758

Phone: 256.755.3282 • Toll Free: 1.800.942.0605

Delegated Agent Support

AgentSupport@humana.com

1-800-309-3163

Opt. 1 - Medicare Advantage/PDP

- Opt. 1: Agent Info (Contracting, SAN, License, AHIP, Certification, etc.)
- Opt. 2: Product Questions
- Opt. 3: Enrollment
 - Opt. 1- Eligibility, MAPA, Status Checks
 - Opt. 2- Dual Eligibility SNP Verification
- Opt. 4: Current Member Questions

Opt. 2 - Medicare Supplement

Opt. 3 - Individual Major Medical

- Opt. 1: Existing member policy questions (such as billing or claims)
- Opt. 2: Status checks, quoting, billing and product questions

Opt. 4 - FSB (Dental and Vision)

- Opt. 1: Dental and Vision

Opt. 5 - MarketPOINT Technology (CORE, CART, iPhone, etc.)



Medicare Applications

***Must be sent to Humana within 24 hrs. of member signature via MAPA upload, fax for paper app or overnight mail.**

For Paper Applications:

Fax (preferred):

1-877-889-9936

Overnight Mail (not preferred):
Humana Medicare Enrollment

P.O. Box 14309

Lexington, KY 40512

Helpful Numbers

IVR (Scope of Appt.)

1-866-945-4471

Customer Service

1-800-457-4708

CSS (Computer Help)

IT Support

1-888-224-2700

CMS

1-800-633-4227

Social Security Administration

1-800-772-1213

Disenrollment Fax

1-800-633-8188

Humana Pharmacy

1-800-379-0092



Scope of Appointment

SOA is required before conducting a MAPD or PDP appointment.

TELEPHONIC IVR: Establish a 3-way call with a member and call the IVR line. Write down the confirmation # and include it on the application.

TELEPHONIC IVR #: 1-800-903-5493

PAPER: Submit completed form to Humana. Humana will handle 10-year retention requirement.

Include the barcode # from the paper SOA on your enrollment application so they can be linked. Also include the barcode from the enrollment application on your paper SOA if possible.

SOA TYPE to be used on the Enrollment Application:

INH= In Home

OTH= Other Company's Form

F2F= Face to Face

WAL= Wal-Mart

Affinity Codes

Did you sell a Humana Medicare Plan to a Veteran?

If so, please place the applicable code from below in the "Affinity Partner" section of the app.

Type of Sale	Affinity Partner Code:
Veterans	VTRN

Clinical Utilization Assistance for Alabama

Phone — 800.253.0333

Email — SRProductsMidSouthRegionCMReferral@humana.com

Key Dental Contacts for Alabama

In Network—www.humana.com/provider/dentist

Inquiries—dentalservice@humana.com

Request to be contracted with Humana—dentalrecruitment@humana.com

Disclaimer: Delegated Agents may contact the Market Office for supplies

External Agents: Agent RSOS Customer Service Support 2.0



[Solution for PHI Issues](#)



[Relay Information to Members](#)



[Customer Service SOS](#)

Agent Retail Sales Operations Support (ARSOS) partners with agents and internal teams within Humana to coordinate customer service (CS) needs for members. ARSOS should be contacted for all **post-sale** customer service needs. (Reminder: all **pre-sale** questions (including [AOR requests](#)) should be directed to Agent Support Unit at agentsupport@humana.com or 1-800-309-3163).



The member makes phone call to complete request.

Solution for PHI Issues - Member Self-Service

Because changes to the billing method, PCP, and demographics are changes to the plan, agents cannot take care of these issues on behalf of the member. However, members can easily make these changes on their own.

- Instruct members to call the number on the back of their ID card and follow the prompts
- The member may talk to customer service or they can use options in the customer service IVR to automate these changes on their own

Relay Information to Members - Email CS Request

Agents must use [secure email](#) for Agent RSOS support (AgentRSOS@humana.com) for member issues regardless of policy type (including H1). Agents must NEVER give the Agent RSOS email address to the member; instead, the agent relays information between Agent RSOS and the member.

- The agent explains the issue and gives all information necessary for resolution
- The agent passes on resolution measures from Agent RSOS to the member – DO NOT forward the Agent RSOS email response to the member
- Agent RSOS will NOT contact the member directly
- DO NOT send Medicare and Individual concerns in the same email
- Use [secure email](#) when using this option
- Email AgentRSOS@humana.com using these conventions:

Subject line: [member last name] [member first name] [Medicare or HumanaOne]

Body of email: agent name, agent SAN, member ID, member name, zip code and DOB, Reference # (if applicable), Summary of issue



Email a Request for information (emailed directly to the agent).

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Agent RSOS Customer Service Support 2.0

Customer Service SOS - Escalated Direct Customer Service Call

This line allows the agent to by-pass IVR and place frustrated members with ESCALATED issues directly with customer service. Calls using this line go to the front of the call queue and will be answered by the first available Customer Care Specialist.



Escalated Direct Customer Service Line: 3-way call with CS, agent, & member

This line is ONLY to be used when the member has called customer service several times and is frustrated because issues have not been resolved and the AGENT makes the call and is on the line with the member. Use this number from your phone only with the member on a 3-way call or in the room with you. Please note that this line is to Customer Service only. Agent RSOS is not involved when this option is used.

This number (866-464-7932) is tracked and should NEVER be given to members or to any external entity.

Use this line with the member for these types of issues:

- The member has a current clinical need
- The member can't obtain clinical access (such as picking up a prescription)
- The member has an active medical plan
- The member reports they have an active plan, but they have been termed in error

If agents have exhausted all options for resolving a customer service issue, escalate to your sales representative, sales manager or account executive.



Additional Training Available: Humana MarketPoint University has detailed information on Agent RSOS. Search for the course named: *Providing Perfect Service with Agent Retail Service Operations Support*

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2

NOTE: On paper applications, enrolling a Veteran, Spouse, or a Veteran Referral is captured by writing "Veteran" in the Campaign Code space on the application.

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Find a Doctor JOB AID

- Go to **www.humana.com** and click the search button under **Find a Doctor** bubble in the middle of the screen or scroll to the very bottom and in small print under Membership Benefits, click **Find a Doctor**.

Find a doctor

Quickly locate a doctor, hospital, dentist, vision provider or pharmacy. [→ Search](#)


- Under Search Type, select **Medical**.
- If you **do not** have a Humana ID:
 - Click **Just Looking** tab.
 - Select **Coverage**.
 - Click in white space box under **Zip Code** and enter zip code.
 - Choose a **Network**.
- If you **do** have a Humana ID:
 - Click **Member ID** tab.
 - Click in white space box under **Member ID** and enter Member ID.
- Under **Search**, choose an option in drop down box. Click in white space box to the right of choice to type specialty.
NOTE: If choosing a specialty, instead of typing in specific specialty, you may click the [blue link](#) that says **Specialty** and choose from the list.
- Click **Search**.
NOTE: You can refine your search on left side of the screen.
- If you want to pull up a list of PCPs in a network:
 - Choose **Specialty** from the drop down list and type **All Primary Care Physician Specialties**.

* Search ?

Specialty ▼ All Primary Care Physician Specialties

Enter a [Specialty](#)

- If a provider is a PCP, the **PCP #** will be located in the following location of the search window.

Name	Distance ▲	Details
All Star Medical LLC <input type="checkbox"/> Add to compare	2407 Memorial Pkwy SW Ste 1 Huntsville, AL 35801 Madison (256) 534 - 5252 5.1 miles Get directions  Send contact information Report updated information	✓ Accepting new patients Specialties Durable Medical Equipment Languages spoken English

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2018 Plan Summary Outline

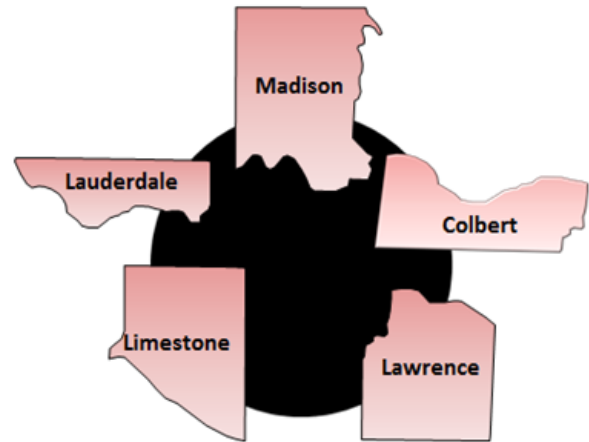
Please refer to plan Summary of Benefits and EOC for full explanation of benefits

Humana Gold Plus HMO
H5619-094
Huntsville HMO

STAR RATING—4

Service Area:

Colbert, Lauderdale, Lawrence, Limestone, Madison



Key Selling Points: Both Huntsville Hospital and Crestwood Hospital are In-Network, Outpatient labs at PCP/SPEC \$0 copay, no referrals required, Pref mail order 90 days is \$0 for T1 & T2

Premium

\$45

MOOP:	\$6700
Plan Deductible:	\$0
Inpatient Cost Share	\$280 (Days 1-7)
SNF	\$0 (Days 1-20), \$167(Days 21-100)
PCP Copay	\$15
Spec Copay	\$45
Outpatient Surgery	\$15-\$275
Advanced Imaging	\$280
Part D Benefit	\$360 Deductible (Tiers 4&5) \$7, \$17, \$47, \$97, 25% Preferred Retail

Other Benefits: Silver Sneakers, Well Dine Meal Benefit, Nurse Hotline, GO365 by Humana Incentive Program, Worldwide Coverage, Vision Services-VIS734

Option Supplemental Benefits:	Yes
DENTAL:	\$15.60
VISION:	No
Combined Dental & Vision	No

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2018 Plan Summary Outline

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Humana Gold Plus HMO
H5619-088
Birmingham HMO

STAR RATING—4

Service Area:

Bibb, Etowah, Fayette, Jefferson, Shelby,
Tuscaloosa, Walker



Key Selling Points: Lowest price plan in most counties, no referrals required, great network

Premium

\$0

MOOP:	\$6,300
Plan Deductible:	\$0
Inpatient Cost Share	\$275 (Days 1-7)
SNF	\$0 (Days 1-20), \$167 (Days 21-100)
PCP Copay	\$0
Spec Copay	\$45
Outpatient Surgery	\$275
Advanced Imaging	\$275
Part D Benefit	\$150 Deductible (Tiers 3,4 & 5) \$5, \$15, \$47, \$97, 30% Preferred Retail

Other Benefits: Silver Sneakers, Well Dine Meal Benefit, Nurse Hotline, OTC of \$30 Qtly, Worldwide Coverage, Dental Services-DEN769, Vision Services-VIS768, GO365 by Humana Incentive Program

Option Supplemental Benefits:	N/A
DENTAL:	N/A
VISION:	N/A
Combined Dental & Vision	N/A

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2018 Plan Summary Outline

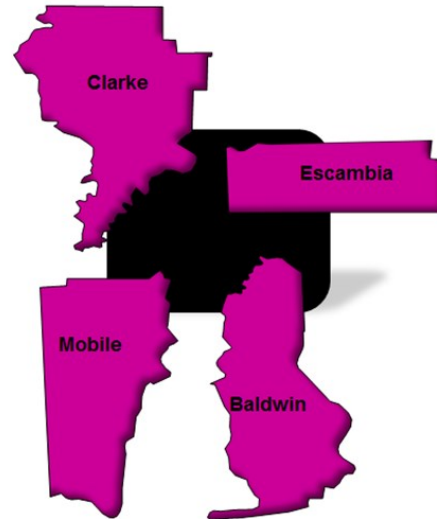
Please refer to plan Summary of Benefits and EOC for full explanation of benefits

Humana Gold Plus HMO
H5619-089
Mobile HMO

STAR RATING—4

Service Area:

Baldwin, Clarke, Escambia, Mobile



Key Selling Points: No referrals, Humana Brand, Network, \$0 Premium, \$0 PCP, GO365

Premium

\$0

MOOP:	\$6,300
Plan Deductible:	N/A
Inpatient Cost Share	\$285 (Days 1-7)
SNF	\$0 (Days 1-20), \$167 (Days 21-100)
PCP Copay	\$0
Spec Copay	\$45
Outpatient Surgery	\$285
Advanced Imaging	\$285
Part D Benefit	Deductible \$360 (Tier 4 & 5), \$7, \$17, \$47, \$97, 25%

Other Benefits: OTC of \$30 Qtly, Well Dine Meal Benefit, Silver Sneakers, Nurse Hotline, GO365 by Humana Incentive Program, Worldwide Coverage, Dental Services-DEN766, Vision Services-VIS734

Option Supplemental Benefits:	No
DENTAL:	\$20.60
VISION:	No
Combined Dental & Vision	No

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2018 Plan Summary Outline

Please refer to plan Summary of Benefits and EOC for full explanation of benefits

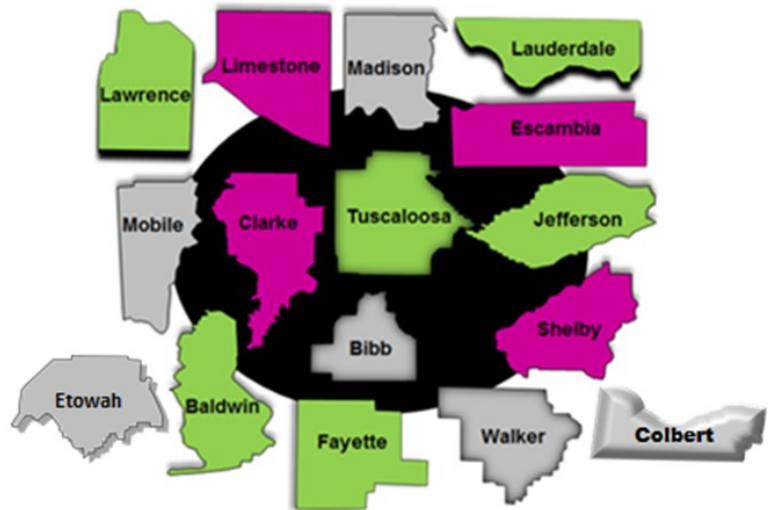
Humana Gold Plus HMO
H5619-093
Greater Alabama SNP-DE HMO

STAR RATING—4

Service Area: Colbert, Lauderdale, Lawrence,
Limestone, Madison

Service Area: Bibb, Etowah, Fayette, Jefferson,
Shelby, Tuscaloosa, Walker

Service Area: Baldwin, Clarke, Escambia, Mobile



Key Selling Points: Excellent plan for certain Dual Eligibles, Preferred Mail Order Rx \$0
Co-pay, \$50 per month OTC

Premium **\$26.90**

MOOP:	\$0
Plan Deductible:	\$0
Inpatient Cost Share	\$0
SNF	\$0
PCP Copay	\$0
Spec Copay	\$0
Outpatient Surgery	\$0
Advanced Imaging	\$0
Part D Benefit	\$0 Deductible (\$3.35—\$8.35 for all medications)

Other Benefits: Transportation 24 One Wat Trips, OTC benefit of \$50 Mthly, Silver Sneakers, Well Dine Meal Benefit, Nurse Hotline, WebMD Live, GO365 by Humana Incentive Program, Smoking Cessation, Wig Benefit For Chemo, Nutrition Therapy, Worldwide Coverage, Dental-DEN772, Vision Services-VIS734, Hearing Ser-vices-HER814

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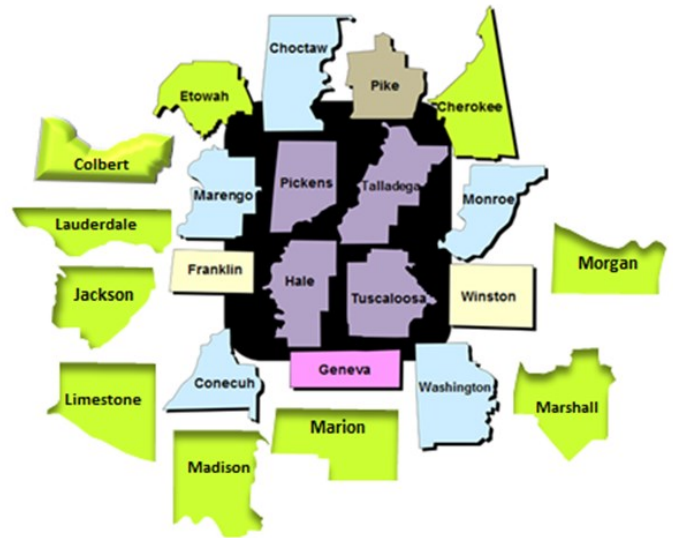
2018 Plan Summary Outline

Please refer to plan Summary of Benefits and EOC for full explanation of benefits

Humana Choice LPPO
H5216-094
Alabama LPPO—Select Counties

STAR RATING—4

Service Area: Cherokee, Choctaw, Colbert, Conecuh, Etowah, Franklin, Geneva, Hale, Jackson, Lauderdale, Limestone, Madison, Marengo, Marion, Marshall, Monroe, Morgan, Pickens, Pike, Talladega, Tuscaloosa, Washington, Winston



Key Selling Points: Portability and strong PPO networks, Preferred Mail Order, Rx \$0 co-pay for Tiers 1 & 2

Premium

\$49

MOOP:	\$6700
Plan Deductible:	\$1,000 OON
Inpatient Cost Share	\$260 (Days 1-7)
SNF	\$0 (Days 1-20), \$167 (Days 21-100)
PCP Copay	\$15
Spec Copay	\$45
Outpatient Surgery	\$15-\$250
Advanced Imaging	\$225
Part D Benefit	\$150 Deductible (Tiers 3,4 & 5) \$5, \$15, \$47, \$100, 30% Preferred Retail

Other Benefits: Silver Sneakers, Well Dine Meal Benefit, Nurse Hotline, GO365 by Humana Incentive Program, OTC of \$25 Qtly, Worldwide Coverage, US Travel Benefit, Vision Services-VIS775, Enhanced Nutrition Therapy

Option Supplemental Benefits:	Yes
DENTAL:	\$17.80
VISION:	No
Combined Dental & Vision	No

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2018 Plan Summary Outline

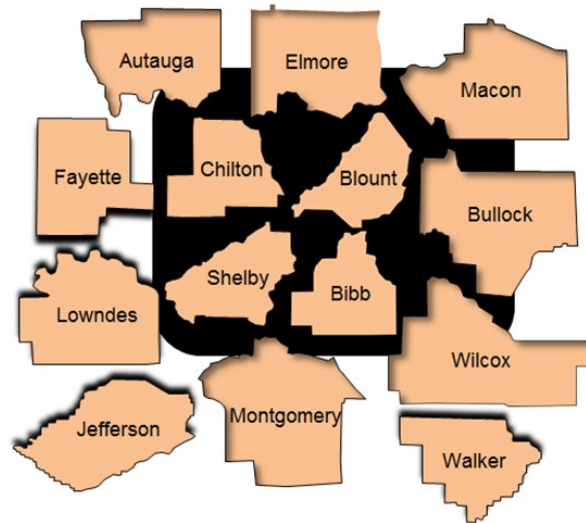
Please refer to plan Summary of Benefits and EOC for full explanation of benefits

**Humana Choice LPPO
H5216-095
Select Counties—Bham/Montg.**

STAR RATING—4

Service Area:

Autauga, Bullock, Elmore, Lowndes, Macon,
Montgomery, Wilcox, Bibb, Blount, Chilton, Fayette,
Jefferson, Shelby, Walker



Key Selling Points: Network Flexibility, Preferred Mail Order Rx \$0 copay for Tiers 1 & 2

Premium

\$49

MOOP:	\$6,700/\$10,000
Plan Deductible:	\$750 OON
Inpatient Cost Share	\$275 (Days 1-7)
SNF	\$0 (Days 1-20), \$167 (Days 21-100)
PCP Copay	\$10
Spec Copay	\$40
Outpatient Surgery	\$250
Advanced Imaging	\$250
Part D Benefit	\$150 Deductible (Tiers 3,4 & 5) \$5, \$15, 100 Co-Ins, Retail after Ded.

Other Benefits: Built in Dental \$0 for 1 Filling, Cleaning, X-Ray, OTC of \$30 Qtly, Silver Sneakers, Well Dine Meal Benefit, Nurse Hotline, GO365 by Humana Incentive Program, Worldwide Coverage, US Travel Benefit, Dental Services-DEN767, Vision Services-VIS775

Option Supplemental Benefits:	Yes
DENTAL:	No
VISION:	\$15.30
Combined Dental & Vision	No

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2018 Plan Summary Outline

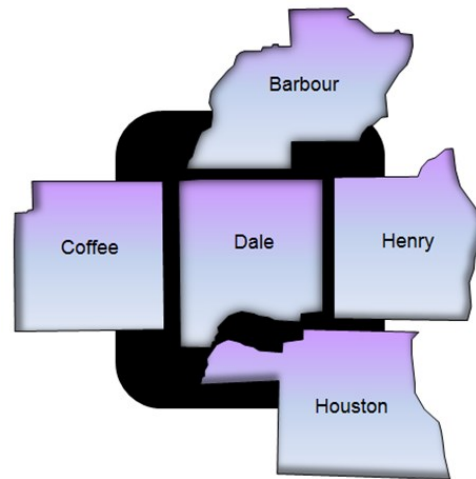
Please refer to plan Summary of Benefits and EOC for full explanation of benefits

Humana Choice LPPO
H5216-096
Dothan LPPO

STAR RATING—4

Service Area:

Barbour, Coffee, Dale, Henry, Houston



**Key Selling Points: Stable Premium, Strong Network, Humana Brand, Preferred Mail Order
Rx \$0 copays Tiers 1 & 2**

Premium

\$47

MOOP:	\$6,700
Plan Deductible:	\$500 OON
Inpatient Cost Share	\$250 (Days 1-7)
SNF	\$0 (Days 1-20), \$167 (Days 21-100)
PCP Copay	\$5
Spec Copay	\$40
Outpatient Surgery	\$250
Advanced Imaging	\$175
Part D Benefit	\$150 Deductible (Tiers 3, 4 & 5) \$5/\$15/\$47/\$97/30% coinsurance

Other Benefits: Silver Sneakers, Well Dine Meal Benefit, Life Synch, Nurse Hotline, OTC of \$30 Qtly, World-wide Coverage, US Travel Benefit, Vision Services-VIS776, GO365 by Humana Incentive Program

Option Supplemental Benefits:	Yes
DENTAL:	\$15.60
VISION:	\$15.30
Combined Dental & Vision	\$17.90

Humana®

2018 Plan Summary Outline

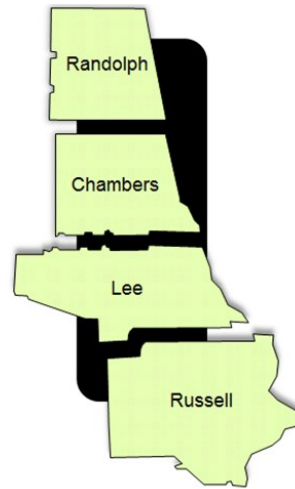
Please refer to plan Summary of Benefits and EOC for full explanation of benefits

Humana Choice LPPO
H5216-056
Columbus LPPO

STAR RATING—4

Service Area:

Chambers, Lee, Randolph, Russell



Key Selling Points: Stable Premium, Strong Network, Humana Brand Preferred Mail Order

Premium

\$47

MOOP:	\$6,700
Plan Deductible:	\$500 OON
Inpatient Cost Share	\$325 (Days 1-5)
PCP Copay	\$15
Spec Copay	\$50
Outpatient Surgery	\$275 in ASC \$325 Outpatient Hospital 30% OON
Advanced Imaging	\$755 in FSF \$325 Outpatient Hospital 30% OON
Part D Benefit	\$250 Deductible (3,4,5) \$4/\$12/\$47/\$100/28% coinsurance

Other Benefits: OTC of \$25 Qtly, Silver Sneakers Fitness, Humana First, Worldwide Coverage, US Travel Benefit, Vision Services-VIS742, Hearing Services, Well Dine Meal Benefit, Nurse Hotline, GO365 by Humana Incentive Program

Option Supplemental Benefits:	Yes
DENTAL:	\$20.10
VISION:	Yes

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2018 Plan Summary Outline

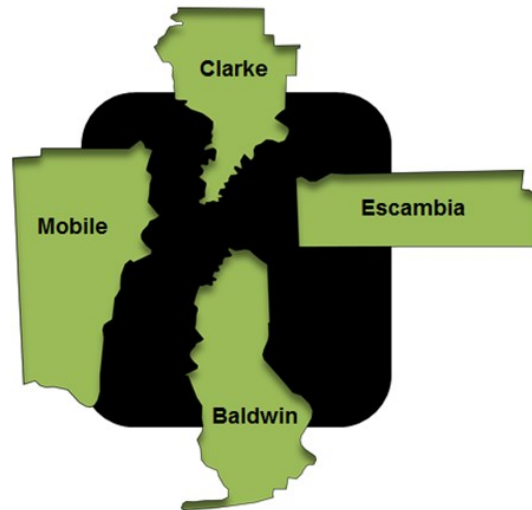
Please refer to plan Summary of Benefits and EOC for full explanation of benefits

Humana Choice LPPO
H5525-020
Mobile LPPO

STAR RATING—3.5

Service Area:

Baldwin, Clarke, Escambia, Mobile



Key Selling Points: National network, travels well, no referrals, Humana brand, Preferred Mail Order Rx \$0 copays Tiers 1 & 2

Premium

\$68

MOOP:	\$6,700/\$10,000
Plan Deductible:	\$750 OON
Inpatient Cost Share	\$295 (Days 1-6)
SNF	\$0 (Days 1-20), \$167 (Days 21-100)
PCP Copay	\$10
Spec Copay	\$40
Outpatient Surgery	\$10-\$275
Advanced Imaging	\$275
Part D Benefit	\$360 Ded, (Tiers 4 & 5,) \$7, \$17, \$47, \$97, 25%

Other Benefits: OTC of \$30 Qtly, Well Dine Meal Benefit, Silver Sneakers, Nurse Hotline, GO365 by Humana Incentive Program, Worldwide Coverage, US Travel Benefit, Vision Services-VIS776

Option Supplemental Benefits:	Yes
DENTAL:	\$15.60
VISION:	\$15.30
Combined Dental & Vision	\$17.90

Humana®

2018 Plan Summary Outline

Please refer to plan Summary of Benefits and EOC for full explanation of benefits

**Humana Choice RPPO
R7315-002 (MAPD)
State of Alabama & Tennessee**

STAR RATING — Too new to rate

Service Area:
All Alabama Counties



Key Selling Points: Portability and strong PPO networks in counties with no other plan, Outpatient Labs at PCP/SPEC \$0 copay, Preferred Mail Order, Rx \$0 copays tiers 1 & 2

Premium

\$89

MOOP:	\$6,700/\$10,000
Plan Deductible:	\$1,000 OON
Inpatient Cost Share	\$325 (Days 1-5)
SNF	\$0 (Days 1-20), \$167 (Days 21-100)
PCP Copay	\$20
Spec Copay	\$45
Outpatient Surgery	\$20-\$325
Advanced Imaging	\$325
Part D Benefit	\$220 Deductible \$7, \$17, \$47, \$95, 28% Preferred Retail after Deductible

Other Benefits: Silver Sneakers, Well Dine Meal Benefit, Nurse Hotline, GO365 by Humana Incentive Program, OTC of \$30 Qtly, Worldwide Coverage, US Travel Benefit, Dental Services-DEN767, Vision Services-VIS742

Option Supplemental Benefits:	Yes
DENTAL:	\$17.00
VISION:	N/A
Combined Dental & Vision	N/A

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2018 Plan Summary Outline

Please refer to plan Summary of Benefits and EOC for full explanation of benefits

**Humana Choice RPPO
R7315-001 (MA ONLY)
State of Alabama & Tennessee**

STAR RATING—Too new to rate

Service Area:
All Alabama Counties



Key Selling Points: Excellent plan for veterans that utilize VA for medications, imbedded routine vision and dental, Outpatient Labs at PCP/SPEC \$0 copay

Premium	\$0
MOOP:	\$3,400/\$5,100
Plan Deductible:	\$500 OON
Inpatient Cost Share	\$550 per admit
SNF	\$0, (Days 1-7), \$20 (Days 8-20), \$100 (Days 21-100)
PCP Copay	\$10
Spec Copay	\$30
Outpatient Surgery	\$10-\$95
Advanced Imaging	\$150
Part D Benefit	N/A

Other Benefits: OTC of \$25 Qtly, Silver Sneakers, Well Dine Meal Benefit, Nurse Hotline, GO365 by Humana Incentive Program, Worldwide Coverage, US Travel Benefit, Vision Services-VIS751

Option Supplemental Benefits:	N/A
DENTAL:	N/A
VISION:	N/A
	N/A

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2018 Plan Summary Outline

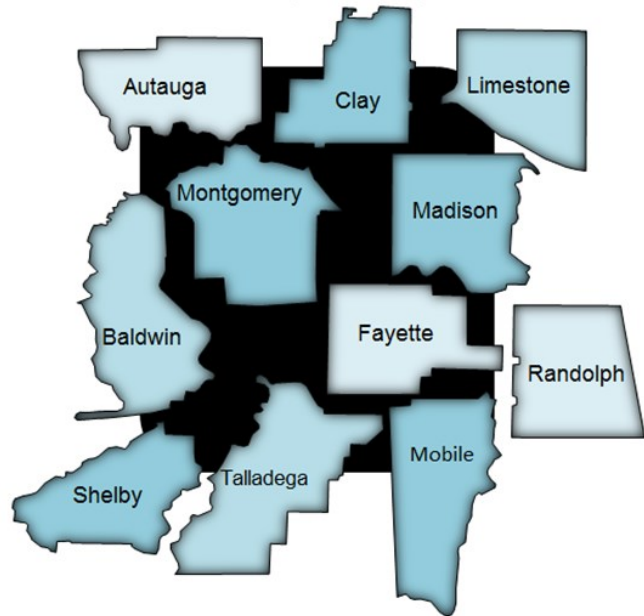
Please refer to plan Summary of Benefits and EOC for full explanation of benefits

**Humana Gold Choice PFFS
H8145-075
Select Counties in Alabama**

STAR RATING—3.5

Service Area:

Autauga, Baldwin, Clay, Fayette,
Limestone, Madison, Mobile, Montgomery,
Randolph, Shelby, Talladega



Premium

\$97

MOOP:	\$6,700
Plan Deductible:	\$1000 OON
Inpatient Cost Share	\$345 (Days 1-5)
SNF	\$0 (Days 1-20), \$167 (Days 21-100)
PCP Copay	\$15
Spec Copay	\$40
Outpatient Surgery	20%-25%
Advanced Imaging	\$345
Part D Benefit	\$200 Ded., \$5, \$15, \$47, \$100, 28% Preferred Retail after Ded.

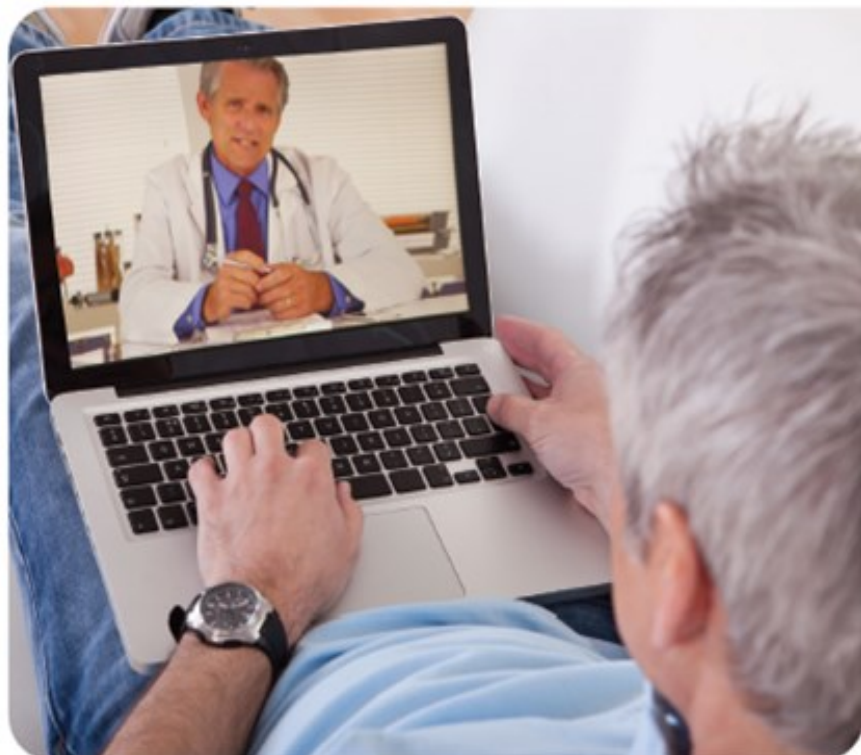
Other Benefits: Silver Sneakers, Well Dine Meal Benefit, Nurse Hotline, GO365 by Humana Incentive Program, OTC of \$10 Mthly, Worldwide Coverage, Vision Services-VIS775, Hearing Services-HER724

Option Supplemental Benefits:	Yes
DENTAL:	\$15.60
VISION:	\$15.30
Combined Dental & Vision	\$17.90

See a doctor anytime or anywhere you need one, 24 hours a day, 7 days a week



Skip the waiting room. Get convenient care for minor illnesses like a cold, sinus infections, allergies and other non-emergency medical conditions — without having to leave your couch.



Doctor visits are easier than ever with MDLIVE

Three ways to talk to a doctor:

- MDLIVE.com/Humanamedicare
- 1-888-673-1992 (TTY: 711)
- Download the MDLIVE mobile app from the App Store® or Google Play™
Internet access required.
Data fees may apply.

Not offered on all plans. Check your Summary of Benefits and Coverage for more information.



A convenient option when you can't see your regular doctor

- Talk with a doctor from the comfort of your home, office or while traveling, 24 hours a day
- No appointment needed and you can connect to a doctor within minutes¹
- Visits with a doctor are just a **\$10 or less** copay
- Prescriptions sent to your preferred pharmacy, if medically necessary

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MDLIVE® MDLIVE.com/humanamedicare

What is telemedicine?

Telemedicine is a virtual doctor's appointment for non-emergency medical conditions such as bronchitis, sinus infections and rashes. Telemedicine should not replace your primary care doctor but can be used in non-emergency situations when your primary care doctor's office is not available or convenient.

When should I use it?

- For a non-emergency issue, instead of going to the ER or an urgent care center
- During or after normal business hours, nights, weekends and even holidays
- If you're traveling and in need of medical care

You'll even have the option to share the records from your telemedicine visit with your primary care doctor.

What kinds of illnesses can be treated?

Doctors are available to treat a variety of conditions, including:

- Allergies
- Cold and flu
- Constipation
- Diarrhea
- Fever
- Insect bites
- Sinus infection
- Sore throat

Who are our doctors?

Humana has teamed up with MDLIVE, a group of in-network doctors, to provide non-emergency medical care. On average, MDLIVE doctors have 15 years of experience practicing medicine and are all U.S. based and U.S. board-certified. MDLIVE doctors are committed to providing convenient, quality care and are always ready to visit with you.

How much does it cost?

Online medical visits with a doctor are just a \$10 or less copay. And you can pay with your credit or debit card.



Remember: When you have a life-threatening injury or major trauma, call 911.

Limitations on healthcare and prescription services delivered via telemedicine vary by state. Telemedicine is not a substitute for emergency care and not intended to replace your primary care doctor or other doctors in your network. This material is provided for informational use only and should not be considered medical advice or used in place of consulting a licensed medical professional.

Humana is a Medicare Advantage HMO, PPO and PFFS organization with a Medicare contract. Enrollment in any Humana plan depends on contract renewal.

Other providers are available in our network. The provider network may change at any time. You will receive notice when necessary. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments and restrictions may apply. Benefits and/or member cost share may change each year.

This information is available for free in other languages. This information is available for free in other languages. Please call Customer Care at the number on the back of your Humana member ID card.

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English: ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call **1-800-281-6918 (TTY: 711)**.

Español (Spanish): ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-281-6918 (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 **1-800-281-6918 (TTY : 711)**。

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MDLIVE

MDLIVE.com/humanamedicare

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2018 Plan Summary Outline

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PDP—Enhanced Rx
S5884-001

Service Area:
All Alabama Counties



Key Selling Points

Premium	\$64.10
Rx Deductible	\$0
Initial Coverage Limit	\$3750
True Out of Pocket	\$5000
Tier 1	\$3
Tier 2	\$7
Tier 3	\$42
Tier 4	44%
Tier 5	33%
*copays listed at a preferred retail pharmacy	
Humana Pharmacy Extra Help	\$0 T1 & T2

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2018 Plan Summary Outline

Please refer to plan Summary of Benefits and EOC for full explanation of benefits

PDP—Preferred Rx
S5884-106

Service Area:
All Alabama Counties



Key Selling Points: Plan to utilize for LIS Enrollments

Premium		\$26.80
Rx Deductible		\$405
Initial Coverage Limit		\$3750
True Out of Pocket		\$5000
Tier 1		\$0
Tier 2		\$1
Tier 3		20%
Tier 4		35%
Tier 5		25%
*copays listed are after ded./has been met at a pref. retail pharm.		
Humana Pharmacy Extra Help		\$0 T1, \$0 T2 on 90 Day Supply

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2018 Plan Summary Outline

Please refer to plan Summary of Benefits and EOC for full explanation of benefits

PDP—Walmart Rx
S5884-158

Service Area:
All Alabama Counties



Key Selling Points: Lowest statewide premium

Premium **\$17.00**

Rx Deductible:	\$405
Initial Coverage Limit	\$3750
True Out of Pocket	\$5000
Tier 1	\$1
Tier 2	\$4
Tier 3	100%
Tier 4	100%
Tier 5	100%

*copays listed are after ded./has been met at a pref. retail pharm.

Humana Pharmacy \$0 T1 & \$8 T2 on 90 day supply
Extra Help



2018 Plan Summary Outline

*****Please refer to plan Summary of Benefits and EOC for full explanation of benefits*****

Value Added Services for all Alabama Medicare Advantage Plans

Biggest Loser Resort

Complimentary and Alternative Medicine

Dental Discount

Healthy Food Discount

Hearing Discount

Jenny Craig

Life Fitness

LifeCard Plans

Lifeline Program

Nutrisystem Discount

Rock and Roll Marathon Series

Rx Discount

Seattle Sutton Healthy Eating

For Agent Training Use Only



2018 Plan Summary Outline

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Humana Medicare Supplement Options

Traditional Medicare Supplement

Offering Plans A, B, C, F, High Deductible F, K, L, and N

Healthy Living Medicare Supplement

Offering Plans with Dental and Vision A, F, High Deductible F, K, and N

Both Plan Types Offer:

\$2 Monthly Premium Reduction for electronic bank withdrawals

5% Monthly Household Premium Discount

Full Underwriting Review :

Applicant may still be accepted even with "Yes" answer on application.

***Refer to Sales Agent Field Guide for all Underwriting requirements.**



2018 Plan Summary Outline

Please refer to plan Summary of Benefits and EOC for full explanation of benefits

Traditional Medicare Supplement — Additional Services

SilverSneakers

QuitNet

Well Dine

Vision Care

RX Discount

Hearing Aids and Services

Lifeline

HumanaFirst Nurse Advice Line

MyHumana

Healthy Living Medicare Supplement — Additional Benefits and Services

SilverSneakers

Well Dine

Vision Care

RX Discount

Hearing Aids and Services

Lifeline

HumanaFirst

MyHumana

	H5619-088 Bham HMO	H5216-095 Bham /Mont LPP0	H5619-089 Mabil e HMO	H552 5-020 Mabil e LPP0	H5619-093 HMO DE- SNP	H5619-094 Hunt ville HMO	H5216-094 Alaba ma LPP0	H5216-096 Calu mbur LPP0	H5216-096 Datha n LPP0	H8145-075 PFFS	R582 6-001 RPP0 AL	R582 6-065 RPP0 MA only
Mandatory Supplemental Benefits (MSB)												
Worldwide Coverage	X	X	X	X	X	X	X	X	X	X	X	X
US Travel Benefit - Member receives in-network benefit when services are received		X		X			X	X	X		X	X
Transportation Benefit - LogitCare - TRN066: \$0 copayment for plan approved location, fitness centers up to 24 one-way					X							
Dental - DEN772: \$0 copayment for bitewing x-rays up to 1 set(s) per year. \$0 copayment for amalgam filling, composite filling, denture reline, extractions,					X							
Dental Services - DEN767: 0% coinsurance for bitewing xrays up to 1 set(s) per year. 0% coinsurance for amalgam filling, periodic oral exam or		X									X	
Dental Services - DEN766: 0% coinsurance for panoramic film or diagnostic x-rays up to 1 every 5 years. 0% coinsurance for bitewing xrays up to 1 set(s) per year. 0% coinsurance for extraoral xrays, intraoral x-rays up to 1 per year. 0% coinsurance for emergency			X									
Dental Services - DEN763 - 0% coinsurance for bitewing x-rays up to 2 set(s) per year. 0% coinsurance for periodontal exam, periodic oral exam, and/or comprehensive oral evaluation, prophylaxis (cleaning) up to 2 per year. 20% coinsurance for amalgam and/or	X											
Vision Services - VIS768: \$0 copayment	X											
Vision Services - VIS775 - \$0 copayment for refraction, routine exam up to 1 per year. \$40 combined maximum benefit coverage		X					X		X			
Vision Services - VIS734 - \$0 copayment for routine exam, refraction up to 1 per year. \$100 maximum benefit coverage amount per year for contact lenses or			X		X	X						
Vision Services - VIS742: \$40 maximum benefit coverage amount per year for routine exam, refraction up to 1 per year. \$100 maximum benefit coverage amount								X			X	

5619-089
Mobile
MO

X

MSB's Continued

[illegible]