Humana

Puerto Rico Highlights

Benefit Highlights



- · Plans includes Dental, Hearing, & Vision benefits
- 4 star plans on our HMO plans
- Over the Counter (OTC) Benefits on our HMO products
- Transportation benefits available in some plans
- Blood pressure monitor and bath chair available in some plans
- SilverSneakers free fitness and gym membership
- \$0 Tier 1 & 2 Rx Benefits if member uses Humana Mail order for 90 day supply

Network Highlights

- Capitated Groups Island Wide
- More than 3,200 contracted primary care physicians
- Strong Relationships with Providers
- Tele medicine services available on our non-dual plans

Competitive Advantages

- 45,000 Members Strong and Growing
- Strong Brand Recognition In Market
- Local Market office and Support Team.
- Regional offices in Caguas, Humacao, Ponce and Mayaguez.
- Year Round Selling opportunities: 2 Platino plans





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НМО

Humana Gold Plus DSNP Platino H4007-016

\$0 Premium \$15 Give back MOOP: \$3,400 PCP/SPEC: \$0 / \$0 Inpatient: \$0

Rx: \$0 /\$0 /\$0 /\$2 /\$3 **Contract/PBP**: H4007-016

Group ID: To be provided between

late Sept. & 10/1

BSN: To be provided between late

Sept. & 10/1

Serving: P.R., All Municipalities

НМО

Humana Gold Plus DSNP Platino H4007-018

\$0 Premium \$46 Give back MOOP: \$3,400 PCP/SPEC: \$0 / \$0 Inpatient: \$0

Rx: \$0 /\$1 /\$0 /\$3 /\$3 **Contract/PBP**: H4007-018

Group ID: *To be provided between*

late Sept. & 10/1

BSN: To be provided between late

Sept. & 10/1

Serving: P.R., All Municipalities

HMO

Humana Gold Plus H4007-012

\$0 Premium MOOP: \$5,000 PCP/SPEC: \$0/ \$15 Inpatient: \$75 per stay Rx: \$2/ \$9/ \$34/ \$65/ 33%;

\$0 Deductible

Contract/PBP: H0007-012

Group ID: *To be provided between*

late Sept. & 10/1

BSN: To be provided between late

Sept. & 10/1

Serving: P.R., All Municipalities

НМО

Humana Gold Plus H4007-013

\$0 Premium \$68 Give back MOOP: \$6,700 PCP/SPEC: \$10/ \$25

Inpatient: \$273 days 1 to 7 Rx: \$1/\$4/\$35/\$40/33% Contract/PBP: H0007-013

Group ID: To be provided between

late Sept. & 10/1

BSN: To be provided between late

Sept. & 10/1

Serving Counties: P.R., All

Municipalities

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Local PPO

Humana Choice Value H2029-001

\$43 **Premium**

MOOP: \$6,700

PCP: \$5 IN/ 50% OUT **SPEC**: \$20 IN / 50% OUT

Inpatient: IN: \$50, days 1 to 5/

OUT: 50% per admit

Rx: IN & OUT:\$3/\$10/\$47 & Tier IV -\$99/ Tier V -25% after \$360

deductible

Contract/PBP: H2029-001

Group ID: To be provided between

late Sept. & 10/1

BSN: To be provided between late

Sept. & 10/1

Serving: P.R., All Municipalities

PDP

Humana Enhanced Plan S2874-001

S-- Premium

Deductible & Applicable Tiers:

Mail Order Rx Tier Copay:

Preferred Rx Tier Copay:

PDP

Humana Preferred Rx Plan S2874-004

S-- Premium

Deductible & Applicable Tiers:

Mail Order Rx Tier Copay:

Preferred Rx Tier Copay:

PDP PLACEHOLDER. 2018 DATA NOT AVAILABLE UNTIL JULY AUBUST.

1. P. R. AVAILABLE UNTIL JULY AV This material is confidential and for contracted, licensed, and appointed age marketing and is not to be provided to a prospect, an applicant, member, group, or the general public. Benefits are subject to CMS approval and may change. For proposed benchmark and ensured accuracy of plan benefit data please refer to the 2018 Summary of Benefits.



Click the link below for the 2018 National Plan Grid. Viewable on all devices but the filter function is only usable with Microsoft Excel compatible devices.



Click here to open the 2018 National Plan Grid