

What is Smart EOB?

Smart EOB was designed so you can see all your medical and prescription data from the traditional EOB, but in a way that's easy to read and understand. Your Smart EOB combines the detail of the traditional EOB with SmartSummary's personalized health messaging and budgeting information. Use your Smart EOB as a record of your healthcare and to talk to your doctor about your health screenings and medicines. You can save it for tax purposes. You also can use it to compare with your doctor bills to make sure your doctor charged the correct amount.

Smart EOBSM

When will I receive Smart EOB?

You will receive a Smart EOB statement every 21 days when you have a medical claim. Every 100 days, you will receive a Special Edition Smart EOB statement even if you haven't had a claim in the last month. This Special Edition Smart EOB will include your Personal Health Record, Spending Account information, and occasionally a full page component containing personalized health and well-being information.

What's in Smart EOB?

- Statement period total dollars you've spent
- Plan year-to-date total dollars you've spent this year
- Deductibles and Maximum Out of Pocket information
- Detailed list of medical claims
- Detailed list of prescriptions you filled
- Portable Health Record
- Highly personalized, actionable messaging

Detailed list of medical claims

SmartSummarySM Smart EOBSM Your personal explanation of benefits statement

HUMANA
Guidance when you need it most
John Doe
Page 3 of 4

Medical Claims (January 1, 2011 to January 21, 2011)

This section lists new medical claims that were processed this period or previously processed claims that were adjusted this period. If you believe a claim was processed incorrectly, you will need to submit a written grievance and appeal. The plan exclusions column represents the items or partial amounts that are not covered by your plan, or amounts from a non-participating provider which you may be responsible for paying to the doctor or hospital. If you suspect fraud, please contact Humana Inc., 1100 Employers Blvd., Green Bay, WI 54344 (1-800-641-4126).

Service Date (Process Date), Claim Number, Provider, Description (Service Code), Diagnosis	Total Charge	Amount (Humana Paid)		Amount You Paid		Co-insurance	Total Amount You Paid
		Plan Discount	Plan Payment	Plan Exclusions	Copay		
1/18/11-1/20/11 (1/22/11) 200609306589675 Smith B MD -Level IV- Surgical Pathology Nihic tem conserisimus ¹ In-network (12345). Diagnosis: 405.91	200.00	50.00	50.00	--	100.00	--	100.00
-Lipid Panel ¹ Out-of-network (12345). Diagnosis: 123.45	200.00	50.00	50.00	--	100.00	--	100.00
1/22/11 (1/26/11) 200609306512345 Jones B MD -Thyroid Stimulating Hormone ¹ , In-network (12345). Diagnosis: 225.88	200.00	50.00	50.00	--	100.00	--	100.00
Statement Period Total:	600.00	150.00	150.00	--	300.00	--	300.00

Smart Summary Limit the amount of salt you eat by taking the salt shaker off of the table during meals. Visit www.sleepapnea.org/awake/index.html to find a local support group. Sleep apnea troubles are just a click away. Visit www.sleepapnea.org/awake/index.html to find a local support group. Sleep apnea troubles are just a click away. Visit www.sleepapnea.org/awake/index.html to find a local support group.

Portable Health Record

YOUR Portable Health Record

Marge B Doe, April 1, 2009 to March 31, 2010

Your prescriptions at a glance

The pictures displayed below should match the drugs you are currently taking. However, in some instances, your actual drug may look different. Contact your doctor or pharmacist for more information or if you have questions about the information displayed below.

Prescription Refill Information	2009					2010	
	Apr	May	Jun	Jul	Aug	Sep	Oct
 Diovan 160MG 90 TABLET 90 days supply Smith MD	•	•					
 Astelin 137MCG 30 SPRAY/PUMP 25 days supply	•						

What's on each page

HUMANA

SmartSummary

SmartEOB

Your personal explanation of benefits statement

HUMANA

John Doe

Member ID: 123456789 10
Medical Plan: Coverage First
Group ID: 123456
Your Network: Humana Choicecare

Coverage First Allowance
Allowance Amount \$500.00
Used Amount \$500.00
Remaining Amount \$0.00

Spending Accounts

Account
Flexible Spending Account: \$600.00
Dependent Care FSA: \$0.00

Remaining Balance
\$0.00

Health Bit

Did you know you may save time and money by using RightSourceRx?
Humana's prescription mail-order service for your maintenance medication? Visit RightSourceRx.com for more information.

This Statement Period
January 1, 2009 to January 21, 2009

"Humana discounts" shown in this statement are for costs and charges Humana negotiated for you with doctors, pharmacists, and hospitals. "Excluded costs" represent the items or partial amounts that are not covered by your plan, which you may be responsible for paying to the doctor or hospital.

Who paid for your healthcare this statement period

Total Billed Charges \$491.97

Amount Humana Paid \$35.00

Medical Costs \$12.50
Prescription Costs \$12.50

Humana Discounts \$115.52

Amount You Paid \$341.45

Medical Costs \$200.00
Prescription Costs \$141.45
Excluded Costs \$0.00

COMMUNICAS120738070820060000502
JOHN DOE
123 ANY STREET
ANYWHERE, OK 12345-6789

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Questions about your plan or this statement call 1-800-833-6917 or visit Humana.com
Urgent medical questions call HumanaFirst Nurse Advice Line at 1-800-822-9529

SmartSummary

SmartEOB

Your personal explanation of benefits statement

HUMANA

Jan Doe
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Plan Year-to-Date
January 26, 2008 to January 26, 2009

Enrollment Opportunities
☒ HumanaBenefits
☐ Disease Mgt
☐ Disease Mgt
The items checked here are programs and opportunities in which you are enrolled. To find out about the unchecked opportunities which are also available to you, log in to MyHumana at Humana.com

Who paid for your healthcare this plan year

Total Billed Charges \$491.97

Amount Humana Paid \$35.00

Medical Costs \$12.50
Prescription Costs \$12.50

Humana Discounts \$115.52

Amount You Paid \$341.45

Medical Costs \$200.00
Prescription Costs \$141.45
Excluded Costs \$0.00

Who paid for your healthcare this plan year

Total Billed Charges \$491.97

Amount Humana Paid \$35.00

Medical Costs \$12.50
Prescription Costs \$12.50

Humana Discounts \$115.52

Amount You Paid \$341.45

Medical Costs \$200.00
Prescription Costs \$141.45
Excluded Costs \$0.00

Deductibles and Maximum Out-of-Pocket
You have a plan with tiered deductibles. This section displays the amount you paid out-of-pocket for medical and prescription claims in each tier. For more information about your tiered deductibles, go to Humana.com and log in to MyHumana, choose the "My Plans and Coverage" tab, then click the plan details button and choose the "Plan Benefits Details" tab and then click the "Health Benefits Plan Coverage" link.

	Maximum Amount	In-Network Amount You Spent	Amount Remaining	Out-of-Network Maximum Amount	Amount You Spent	Amount Remaining
Deductibles						
Level 1	\$2,000.00	\$830.62	\$1,169.38	\$2,000.00	\$675.00	\$1,325.00
Level 2	\$2,000.00	\$138.04	\$1,861.96	\$2,000.00	\$138.04	\$1,861.96
Level 3	\$2,000.00	\$82.21	\$1,917.79	\$2,000.00	\$82.21	\$1,917.79
Level 4	\$2,000.00	\$830.63	\$1,169.37	\$2,000.00	\$830.63	\$1,169.37
Level 5	\$2,000.00	\$10.50	\$1,989.50	\$2,000.00	\$10.50	\$1,989.50
Maximum Out-of-Pocket						
Level 1	\$2,000.00	\$830.62	\$1,169.38	\$2,000.00	\$675.00	\$1,325.00
Level 2	\$2,000.00	\$138.04	\$1,861.96	\$2,000.00	\$138.04	\$1,861.96
Level 3	\$2,000.00	\$82.21	\$1,917.79	\$2,000.00	\$82.21	\$1,917.79
Level 4	\$2,000.00	\$830.63	\$1,169.37	\$2,000.00	\$830.63	\$1,169.37
Level 5	\$2,000.00	\$10.50	\$1,989.50	\$2,000.00	\$10.50	\$1,989.50

SmartSummary

SmartEOB

Your personal explanation of benefits statement

HUMANA

John Doe
Page 3 of 4

Medical Claims (January 1, 2009 to January 21, 2009)

This section lists new medical claims that were processed this period or previously processed claims that were adjusted this period. If you believe a claim was processed incorrectly, you will need to submit a written grievance and appeal. The plan exclusions column represents the items or partial amounts that are not covered by your plan, or amounts from a non-participating provider which you may be responsible for paying to the doctor or hospital. If you suspect fraud, please contact Humana Inc., 1100 Employees Blvd., Green Bay, WI 54304 (1-800-641-4126).

Service Date (Process Date), Claim Number, Provider, Description (Service Code), Diagnosis	Total Charge	Amount Humana Paid	Plan Payment	Plan Exclusions	Copay	Deductible	Co-Insurance	Total Amount You Paid
1/21/09 1122610102006091005409675 Smith R MD Level IV - Surgical Pathology Nhic tem current control - In-network (12345) Diagnosis: 402.91 "Cigna Panel" - Out-of-network (12345) Diagnosis: 123.45	200.00	50.00	50.00	--	100.00	--	--	100.00
1/21/09 1122610102006091005409675 Smith R MD "Thyroid Stimulating Hormone" - In-network (12345) Diagnosis: 272.88	200.00	50.00	50.00	--	100.00	--	--	100.00
Statement Period Total:	600.00	150.00	150.00	--	300.00	--	--	300.00

Prescription Claims (January 1, 2009 to January 21, 2009)

This list shows all of your prescription claims and total costs your plan covered this period. Adjusted claims may not be reflected in this list or may show an amount that is different than what was listed prior to the adjustment. The prescription cost displayed is the average retail price at the pharmacy at the time of purchase and does not take into account other reimbursements. Retail prices on prescriptions can vary by pharmacy, quantity, strength and/or dosage.

Prescription Name	Prescription Cost	Amount Humana Paid	Amount You Paid	Total Amount You Paid
1/21/09 ABC Pharmacy Pulmicort 0.25Mg ZMI, 60.0 Ampul-Neb.	200.00	100.00	100.00	100.00
1/21/09 ABC Pharmacy Pulmicort 0.25Mg ZMI, 60.0 Ampul-Neb.	200.00	158.55	41.45	41.45
Statement Period Total:	400.00	258.55	100.00	141.45

Message Zone for medical claims. Ed mes adignm sapms convesma maipam apellandm exosae sam vidit, teacat necte lantist, quam quas vulputa pore venestor magnis aut est remporibus, sinsectem. Interdum isenat.

Message Zone for medical claims. Ed mes adignm sapms convesma maipam apellandm exosae sam vidit, teacat necte lantist, quam quas vulputa pore venestor magnis aut est remporibus, sinsectem. Interdum isenat.

Message Zone for prescription claims. It laene do ent autput, it te min velento dis conset tat in venis non ent in vel dal or laue mod magnit adri erci lae ad et, venibz esto consete ditiendm ex emiaeq uatton herisat ducit ligui nrm.

Message Zone for prescription claims. It laene do ent autput, it te min velento dis conset tat in venis non ent in vel dal or laue mod magnit adri erci lae ad et, venibz esto consete ditiendm ex emiaeq uatton herisat ducit ligui nrm.

Questions about your plan or this statement call 1-800-833-6917 or visit Humana.com
Urgent medical questions call HumanaFirst Nurse Advice Line at 1-800-822-9529

Cover

Two dynamic message zones to give you plan and health information specific to you.

Clear view of who paid what: You can easily see what you paid and what Humana paid for the current statement period (last 21 days).

Plan page

Plan Understanding: You can learn how your plan works and what you have spent toward your deductible.

Clear view of who paid what for the entire plan year.

Special Edition statements will display current Healthcare Spending Account balances as well as transaction details.

Claims Pages

Medical Services Detail

- Claim number, service and process dates, provider, description, service and diagnosis codes to help you understand exactly what services were billed.
- The Total Amount You Paid column represents your responsibility for the claim after plan discounts and payments.
- The Statement Period Totals section shows the cumulative totals for all claims for the statement period.

Prescription Claims

- Detailed list of all prescriptions you filled during the statement period.
- Discounted cost that Humana negotiated for each prescription.
- Helpful messages about lower costs and resources available to you.

YOUR

Portable Health Record

HUMANA

John Doe
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John Doe, April 1, 2009 to March 31, 2010

This list is compiled from claims information submitted to your insurance plan. If this list does not include information you received from your doctor concerning a surgery or procedure, for example, please check with your doctor for the correct information. This list is not intended to be a substitute for a medical record. Use this list to help manage your interactions with your doctors and pharmacists. It may be helpful to take this with you to your next visit doctor, hospital or pharmacist to give them a broader view of your healthcare interactions.

Name of provider, specialty	Procedure	Name of drug, dosage, quantity
ABC Pharmacy		Cloven 160Mg, 90 Tablet
ABC Pharmacy		Oxycontin-Acetaminophen 5-325Mg, 30 Tablet
ABC Pharmacy		Cloven 160Mg, 90 Tablet
ABC Pharmacy		Aspirin 101 ABC, 20 SprayPump
ABC Pharmacy		Amox Tri-Potassium Clevastane 875-125Mg, 20 Tablet
ABC Pharmacy		Prednisone 10Mg, 18 Tablet
ABC Pharmacy		Cloven 320Mg, 90 Tablet
ABC Pharmacy		Prednisone 10Mg, 18 Tablet
Smith MD	Off-Outlet Visit EBM (Est Mop-H)	
Smith MD	Liquid Panel	
Smith MD	General Health Panel	
Smith MD	Collection Of Venous Blood By	
ABC Pharmacy		Amox Tri-Potassium Clevastane 875-125Mg, 20 Tablet
ABC Pharmacy		Aspirin 101 ABC, 20 SprayPump
ABC Pharmacy		Tricox 90
ABC Pharmacy	Office Outlet New 20 Minutes	
ABC Pharmacy	Comp Audit Threshold Evaluations	
ABC Pharmacy	Thymography	
ABC Pharmacy	Cx Stress Test W/Tranmili-Pha	
ABC Pharmacy	Office Outlet New 45 Min	
ABC Pharmacy		Prednisone 10Mg, 18 Tablet
ABC Pharmacy		Cloven 320Mg, 90 Tablet

Did you know that your Humana plan gives you the option to talk with a health coach by phone and enroll in online support? Your personal health coach will guide you and support you as you take charge of your life in areas like tobacco cessation, weight management, physical activity, stress management, nutrition, or back care. You can enroll in Health Coaching today by logging in to MyHumana or Humana.com, choosing "Wellness" from the Health & Wellness tab at the top, and then clicking on "Health Coaching".

Confound ad coisurance? Coisurance is the percentage of healthcare costs you are responsible for. For example, you might pay for 20 percent of the cost of a service, which would be your coisurance, and your insurance might pay the remaining part.

Fun fact! Men will spend about five months of their lives shaving.

Portable Health Record

The Portable Health Record (PHR), which appears on Special Edition statements, lets you carry your medical and prescription information with you to various places, like doctor visits or vacations. In the PHR, Prescription medicines are highlighted in an easy to understand way that includes pictures of each medicine you're taking.

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