

2017 MarketPoint Extract

Note: This content is confidential for Humana agent/agency planning only and should not be used for consumer marketing purposes. It was spot-check audited for accuracy.

Plan ID	State(s)	Plan Geographic	Plan Name	Product Type	Premium	Maximum Out of Pocket IN	Maximum Out of Pocket IN/OON	PCP IN	PCP OON	Specialist IN	Specialist OON	Inpatient IN	Inpatient OON	Rx Copay Tiers
S5884-002-000	CT,MA,RI,VT	States of CT, MA, RI, VT	Humana Enhanced (PDP)	PDP	\$62.10									\$3/\$7/\$42/44%/33%
S5884-102-000	CT,MA,RI,VT	States of CT, MA, RI, VT	Humana Preferred Rx Plan (PDP)	PDP	\$28.90									\$0/\$1/20%/35%/25%
S5884-149-000	CT,MA,RI,VT	States of CT, MA, RI, VT	Humana Walmart Rx Plan (PDP)	PDP	\$17.00									\$1/\$4/20%/35%/25%

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