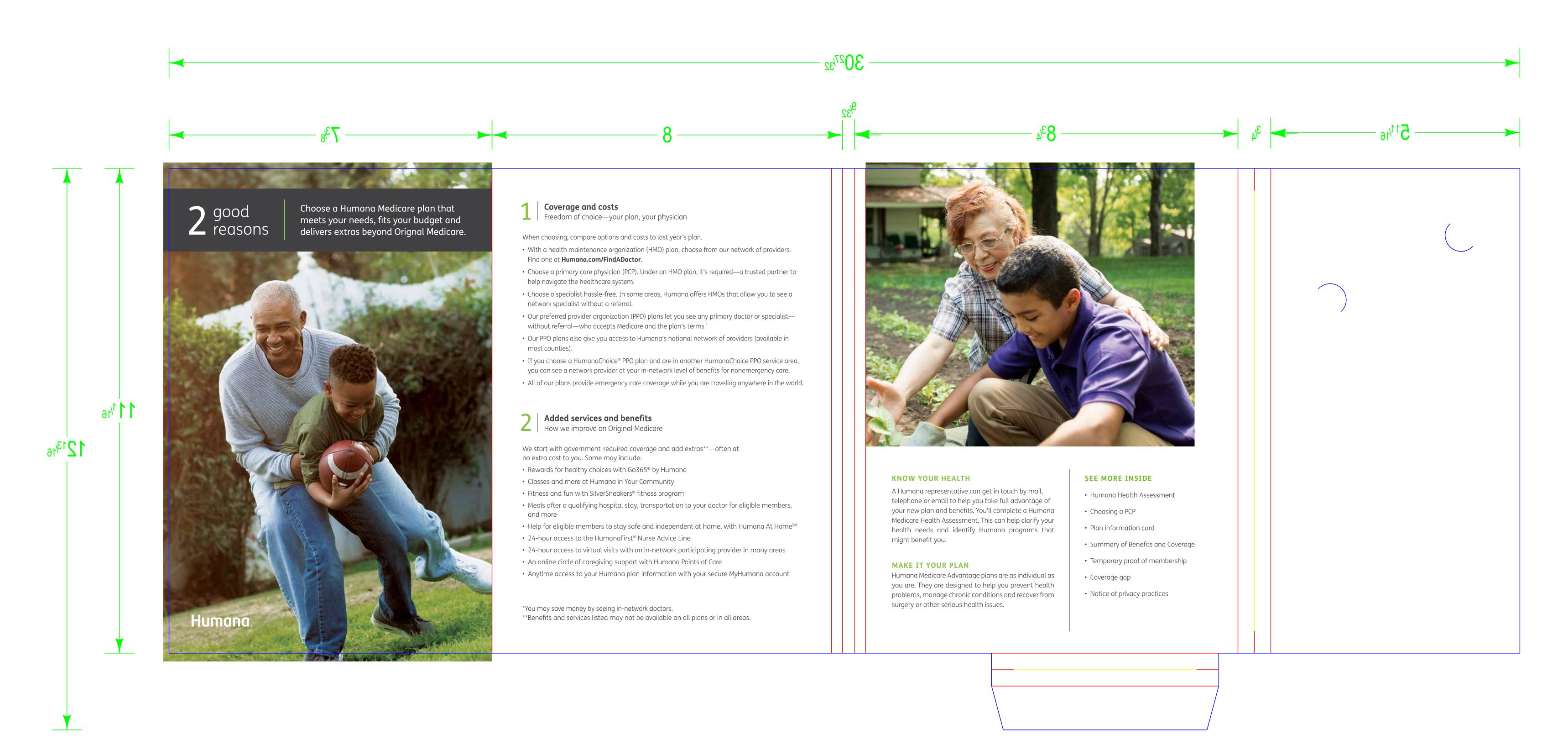


Revised 2019 AIO Cover
Book Size 8.750" x 11.064"
Pocket + Gate Cover
Revised 5-14-18



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# Your plan

DIAN NAME

We're dedicated to providing health and wellness programs and support to help you meet your unique health needs and goals.

I LAN NAME
Effective date
Premium
Deductible
AGENT NAME
Agent phone number
Agent email
PCP NAME
PCP phone number
PCP copayment
Specialist copayment
Humana online account username
Password



## Go365® by Humana

Get rewarded for making healthier choices. You can earn rewards for completing eligible healthy activities—many of which you may already be doing, like exercising and getting preventive screenings and exams. Visit Go365.com.



# HumanaFirst® Nurse Advice Line\*

Get advice from a registered nurse on how—and where to go—to help you feel better. Call 1-800-622-9529 (TTY: 711), 24 hours a day, seven days a week.



### Humana At Home<sup>SM</sup>

If you have health challenges, you may need support to help you feel better and safer—at home. Care management services may help eligible members find resources for meals, transportation and more. Visit **Humana.com/AtHome**.



## **Humana in your community\***

Members and nonmembers can find walking groups, cooking demonstrations, social events and more. Visit **Humana.com/about/Humana-in-your-community**.

# Here to help

To find out more about programs and services your plan offers, visit **Humana.com** or call Customer Care at **1-800-457-4708 (TTY: 711)**, Monday – Friday, <8 a.m. – 8 p.m.>, Eastern time.



## SilverSneakers® fitness program

Get moving, have fun and work toward being healthier when you attend classes at a local fitness club, gym or rec center. Want to start working out at home or can't get to a fitness location? You can request an in-home kit. Kits are available to members who want to work out at home or who can't get to a fitness location due to injury or illness. Call **1-888-423-4632 (TTY: 711)**, Monday – Friday, <8 a.m. – 8 p.m.>, Eastern time.



### Virtual visits\*

Where available, you may be able to speak to a U.S. board-certified telemedicine provider to treat certain nonemergency conditions on the phone and/or video technology. Always open and in-network.

#### MEDICAL VIRTUAL VISITS

Access to doctors and other providers via phone and/or video technology for diagnosis and treatment of certain nonemergency medical issues where available.

#### MENTAL AND BEHAVIORAL HEALTH VIRTUAL VISITS

Access to doctors and other mental health professionals via phone and/or video technology for diagnosis and treatment of certain nonemergency mental or behavioral issues where available.

\*Not available with all plans.

#### **GO DIGITAL**

Choosing our online option is a great way to stay organized. You'll be asked on your enrollment application how you want to receive the listed plan materials. If you choose digital, we'll send you an email when your documents are available so that you can view them online in your secure, MyHumana account. Activating your account is easy. Visit **Humana.com** to get started or take a tour of MyHumana by visiting **Humana.com/TourMyHumana**.

- Verification of Enrollment
- Plan Coverage Package (Evidence of Coverage, Summary of Benefits, Plan Stars Rating and Value-Added Services)
- Annual Notice of Change (ANOC)
- SmartSummary® Explanation of Benefits (EOB)
- Plan messages and notifications



Stage

1

Stage

2

Stage

3

## **Deductible stage** | You pay 100%

- The amount you pay of your medication costs before your plan pays its share
- Some plans do not have a deductible

## **Initial coverage stage** | Shared costs with insurance company

- Both you and your insurance plan pay medication costs until the shared total equals \$3,820
- You're generally responsible for copays and coinsurance during this stage

## Coverage gap stage | Donut hole

- The coverage gap begins after you and your plan have spent \$3,820 for covered drugs and ends when you have spent \$5,100 for them. During this gap in prescription drug coverage, you'll generally pay more for your drugs.
- In this stage, you pay a maximum of 25 percent of the plan's cost of brand-name drugs. You also receive some coverage for generic drugs that we do not cover in the coverage gap. You pay no more than 37 percent of the cost of generic drugs and the plan pays the rest.
- Any medication-related deductible, discounts you receive on covered brand-name drugs, coinsurance, copayments and the amounts you pay in the coverage gap count toward the \$5,100 limit.

## Catastrophic coverage stage | Follows the coverage gap

- Begins when you reach the \$5,100 coverage gap limit
- In this stage, you pay \$8.50 for brand-name or \$3.40 for generic drugs, or 5 percent of your medication's cost, whichever is greater

Stage