

Humana®

TRS-CARE MEDICARE ADVANTAGE HUMANA GROUP MEDICARE EMPLOYERS
PREFERRED PROVIDER ORGANIZATION (PPO) PLAN

TRS-Care Medicare Advantage

TRS is working with Humana to offer a plan for your future

Humana®

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Start here

In this booklet, you will find how a TRS-Care Medicare Advantage PPO plan may give you the value you deserve. After you enroll, Humana will mail you an Evidence of Coverage booklet that will have all the plan information and details, including a full list of benefits.

What is Medicare?

Medicare is a federal health insurance program for U.S. citizens and legal residents who are 65 and older or qualify due to a disability. You can receive your Medicare Part A and Part B benefits through the federal government or a private insurance company.

TRS is working with Humana to offer you a Medicare Advantage PPO plan specifically designed for TRS retirees and their eligible dependents

A PPO offers

- **All the benefits of Original Medicare, plus extra benefits**
- Maximum out-of-pocket protections
- Worldwide emergency coverage
- Programs to help improve health and well-being (See page 5 for additional explanation)

TRS-dedicated Customer Care team and more

- **Your benefit levels are the same for in-network and out-of-network providers**
- Large network of doctors, specialists and hospitals to pick from
- You don't need a referral to see any healthcare provider
- Coverage for office visits, including routine physical exams
- Almost no claim forms to fill out or mail—we take care of that for you
- Dedicated Customer Care specialists who serve only our Group Medicare members

Total well-being starts with a holistic approach to health

Support your health and your finances

TRS, in partnership with Humana, offers solid insurance products that help you support your healthcare needs, all provided by a Fortune 100 company with over 30 years of experience providing Medicare member plans.

Maximize your well-being

Our health and well-being tools and resources make it easy to set health goals, chart your progress, strengthen your mind and body, and build connections with others. The power to help you live a full, vibrant life is in your hands.

Manage your health

Complex or chronic health conditions often demand personal attention. A Humana nurse can meet you at home, in the hospital, by phone or email to help you manage your condition and minimize complications.

Once you apply for Medicare and receive your Medicare ID number, fill out the enclosed form and send it back to TRS in the enclosed envelope so they can verify your Medicare status.

Parts of Medicare

Medicare Part A

HOSPITAL INSURANCE

It helps cover medically necessary inpatient care in a hospital or skilled nursing facility. It also helps cover some home healthcare and hospice care.

Medicare Part B

MEDICAL INSURANCE

It helps cover medically necessary doctors' services, outpatient care and other medical services and supplies. Part B also helps cover some preventive services.

Medicare Part C

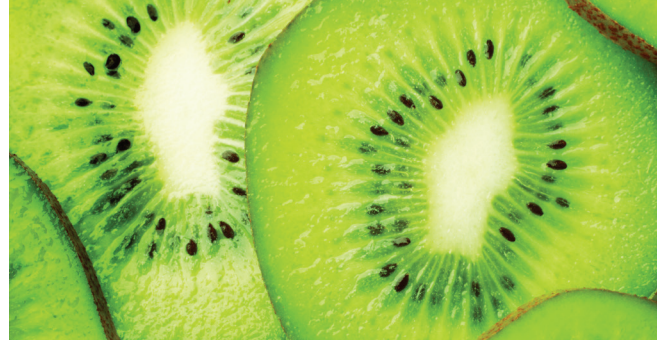
MEDICARE ADVANTAGE PLANS

This coverage is available through private insurance companies, such as Humana. Medicare Part C helps cover everything medically necessary that Parts A and B cover, including hospital and medical services. You still have Medicare if you elect Medicare Part C coverage. You must be entitled to Medicare Part A and enrolled in Part B to be eligible for a Medicare Part C plan.

Medicare Part D

PRESCRIPTION DRUG COVERAGE

Like Part C Medicare Advantage plans, Part D is only available through private companies. Many Part C Medicare Advantage plans include Medicare Part D prescription drug coverage. Part D helps pay for the medications your doctor prescribes.



Build healthy provider relationships

Your relationship with your medical provider is important in helping you protect and manage your health. With the TRS-Care Medicare Advantage PPO plan, you can use any provider who accepts Medicare and agrees to bill Humana. Your benefit plan coverage remains the same, even if you receive care from an out-of-network provider.

If you decide to seek care from an out-of-network provider, your share of the costs may be higher if the benefit is a coinsurance amount instead of a copayment. Refer to your Summary of Benefits in this packet for more information.

Why choose a Humana network provider?

- Humana Medicare PPO network providers must take payment from Humana for treating plan members.
- Network providers coordinate with Humana, which makes it easier to share information. Patients may have a better experience when providers share information this way.
- Humana supplies in-network providers with information about services and programs available to patients with chronic conditions.

Is your provider in Humana's provider network?

Humana respects your relationship with your provider. We want you to be able to select a provider who's close to home and who can focus on your specific needs. If you need help finding a provider, call our Group Medicare Customer Care team or use our online directory. Humana's online provider lookup is an easy way to find doctors, hospitals and other healthcare providers in Humana's network:

- Go to **Humana.com/TRSCareMedicareAdvantage** and select "Find a doctor"
- Get provider phone numbers, addresses and directions
- Customize your search by specialty, location and name



Medical preauthorization

For certain services and procedures, your doctor or hospital may need to get advance approval from Humana before your plan will cover any costs. This is called prior authorization or preauthorization.

Doctors or hospitals will submit the preauthorization request to Humana. If your doctor hasn't done this, please call our Customer Care team, as Humana may not be able to pay for these services.

Knowing how your coverage works can save you from paying out of your pocket for vaccinations

At your provider's office

The Medicare Part B portion of your plan pays for the following vaccines at your provider's office and at the pharmacy:

- Influenza (flu) vaccine—once per season
- Pneumococcal vaccines
- Hepatitis B vaccines for persons at increased risk of hepatitis
- Vaccines directly related to the treatment of an injury or direct exposure to a disease or condition, such as rabies and tetanus

Understanding your diabetes coverage

At Humana, we are here to help. We want you to have a smooth experience when getting your diabetic supplies and prescriptions.

Medicare Part B helps cover diabetic testing supplies, insulin pumps and insulin administered (or used) in insulin pumps. Medicare Part D helps cover diabetes medications, insulin administered (or used) with syringes or pens and syringes, pen needles or other insulin administration devices that are not durable medical equipment (e.g. Omnipods or VGO).

Go to MyDiabetesPath.com to learn more about managing your diabetes. MyDiabetesPath offers a complete guide to living with diabetes and gives you the information and resources to help you stay healthy.

Your TRS-Care Medicare Advantage Plan helps cover a variety of diabetic glucose testing supplies. Humana Pharmacy® is the preferred durable medical equipment (DME) vendor for the products, and offers the meters listed below and their test strips and lancets: Roche Accu-Chek Nano®, Roche Accu-Chek Guide, Roche Accu-Chek Aviva Plus® and HP® True Metrix® AIR by Trividia. To order a meter and supplies from Humana Pharmacy, call **1-877-222-5084 (TTY: 711)**, Monday – Friday, 8 a.m. – 8 p.m., Eastern time.

Your doctor can also send prescriptions for meters and other testing supplies by fax or e-prescribe.

You can also request one of these meters at no cost from the manufacturer by calling Roche at **1-888-355-4242 (TTY: 711)**, or Trividia Health at **1-866-788-9618 (TTY: 711)**, Monday – Friday, 8 a.m. – 8 p.m., Eastern time.

Extra benefits

SilverSneakers fitness*

This program gives you access to fitness locations nationwide where you can:

Work out indoors

You receive a basic fitness membership and SilverSneakers® group exercise classes (where available).

Go outside with SilverSneakers FLEX®

Try tai chi, yoga, walking groups and more. Available at local parks and recreation centers (where available).

Get SilverSneakers Steps®

At home or on the go—receive your choice of a kit for general fitness, strength, walking or yoga (one per member per year).

Visit www.SilverSneakers.com to find a convenient location near you at no additional cost.

Call **1-888-423-4632 (TTY: 711)**, Monday – Friday, 8 a.m. – 8 p.m., Eastern time.

*Equipment and classes may vary by location.

Humana At HomeSM

Supports qualifying members with both short-term and long-term services that can help them remain independent at home. Humana At Home care managers support members by providing education about chronic conditions and medication adherence, helping with discharge instructions, accessing community resources, finding social support and more, all included in the plan at no additional cost.

Humana.com/caremgmt


1-800-432-4803 (TTY: 711)


Monday – Friday, 8:30 a.m. – 5:30 p.m., Eastern time

Humana Well Dine® meal program

After your inpatient stay in a hospital or nursing facility, you're eligible for 10 nutritious meals delivered to your door at no additional cost to you.

For more information, please contact the number on the back of your Humana member ID card, as shown below.

Humana. HUMANA MEDICARE (EMPLOYER PPO) A Medicare Health Plan	
CARD ISSUED: MM/DD/YYYY	
MEMBER NAME Member ID: HXXXXXXXXX Plan (80840) 9140461101	
TRS-CARE MEDICARE ADV	Copayments
Group: XXXXX	OFFICE VISIT: \$XX
	SPECIALIST: \$XX
	HOSPITAL EMERGENCY: \$XX
CMS XXXXX XXX	

	
Member/Provider Service:	1-800-320-9566
If you use a TTY, call 711	
Claims – TRS, PO Box 14678, Lexington, KY 40512-4601	
Medicare limiting charges apply	
Please visit us at Humana.com/TRScaremedicareadvantage	
Additional Benefits: DENXXX VISXXX HERXXX	

Communication counts

As soon as you receive your Humana member ID card, go to **Humana.com/TRSCareMedicareAdvantage** and register for MyHumana. This is your personal, secure online account that allows you to access your specific plan details from your computer or smartphone.

MyHumana Mobile app

If you have an iPhone or Android, download the MyHumana Mobile app.* You'll have your plan details with you at all times.

Visit **Humana.com/mobile-apps** to learn about our many mobile apps, the app features and how to use them.

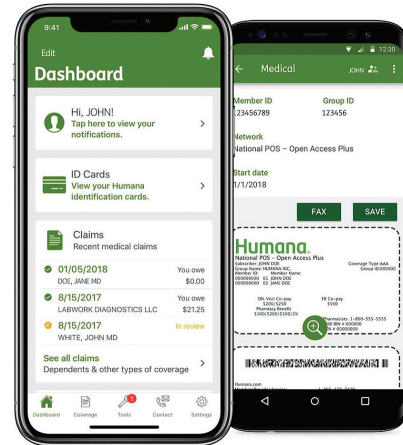
With MyHumana and the MyHumana Mobile app, you can:

- Review your plan benefits and claims
- Find providers in your network
- Access digital ID cards

Connect with us on Facebook

Find healthcare educational information for Medicare members and caregivers to help in your pursuit of lifelong well-being at **facebook.com/Humana**.

*Standard data rates may apply.



“
Humana helps make technology a user-friendly tool, and that helps make using your coverage easier. Your plan information is right there, online, available at the touch of your finger.
”





SmartSummary is your personalized benefits statement

Humana believes TRS-Care Medicare Advantage participants deserve a better way to understand, track, manage and possibly save money on their healthcare. SmartSummary® serves as your personalized health benefits statement. You can use your SmartSummary as a portable health record. You'll receive these statements after each month in which you've had a claim. You also can sign in to MyHumana and see your past SmartSummary statements anytime.

SmartSummary helps you:

- Understand your total healthcare picture
- Manage your monthly and yearly healthcare costs
- Engage with your providers by having a list of the healthcare services you receive
- Learn about preventive care, health conditions, treatment options and ways to help reduce health expenses



Allies in well-being

Consent forms

Everyone needs a little help now and then. We're happy to work with you and whomever you designate as a helper. Many people trust a family member or close friend to help them with their healthcare—someone who may help you talk with us about your insurance plan, keep track of your benefits and claims, or answer healthcare questions.

We need your permission to share your personal information with someone else. To give your permission, you'll need to read and sign a consent form.

Here are the ways you can do that:

- Fill out and submit the form online once you have registered on MyHumana
- Print the form from **Humana.com/PHI** and return it by following the instructions on the form
- Call us and we'll mail the form to you to complete and return

A signed consent form allows insurers to share health plan information and protected health information with your designated helper. It's different from granting medical power of attorney, which allows someone to make decisions about your care.



“
Humana focuses on meeting your changing needs and smoothing your move to Medicare, so you can focus on work and play and living your life.
”

Do I need to show my red, white and blue Medicare card when I visit the doctor?

No. You'll get a TRS-Care Medicare Advantage participant ID card that will take its place. Keep your Medicare ID card in a safe place—or use it only when it's needed for discounts and other offers from retailers.

What should I do if I move or have a temporary address change?

Make sure you call TRS to provide your new address. As long as you live in the continental U.S. or certain ZIP codes in Puerto Rico, you can continue to use your TRS-Care Medicare Advantage benefits. You can see any provider who accepts Medicare and is willing to bill Humana.

What should I do if I have to file a claim?

Call TRS-Care Medicare Advantage Customer Care for more information and assistance. To request reimbursement for a charge you paid for a service, send the provider's itemized receipt and the Health Benefits Claim Form (also available at **Humana.com**) to the claims address on the back of your TRS-Care Medicare Advantage participant ID card. Make sure the receipt includes your name and Humana participant ID number.

What if I have other health insurance coverage?

If you have other health insurance, show your TRS-Care Medicare Advantage participant ID card and your other insurance cards when you see a healthcare provider. The TRS-Care Medicare Advantage plan may be used in combination with other types of health insurance coverage you may have. This is called coordination of benefits. However, you cannot have more than one Medicare Advantage plan. If you enroll in another such plan, you will be terminated from the TRS-Care Medicare Advantage plan.

When does my coverage begin?

Check with TRS for the effective date of your enrollment if you're unsure.

What if my service needs a prior authorization?

If your medical service or medication requires a prior authorization, your provider can contact Humana to request it. You can consult your benefits summary or call TRS-Care Medicare Advantage Customer Care if you have questions regarding what medical services and medications require prior authorization.

What if my provider says they will not accept my plan?

If your provider says they will not accept your PPO plan, you can give your provider the "Group Medicare Provider Information" flyer, located in the pocket of this booklet. It explains how your PPO plan works. You can also call TRS-Care Medicare Advantage Customer Care and have a Humana representative contact your provider and explain how your PPO plan works.

How do I enroll in the TRS-Care Medicare Advantage Plan?

You must enroll in Medicare before the first day of the month you turn 65 to enroll in the TRS-Care Medicare Advantage PPO plan.

Approximately three months before your 65th birthday, you'll receive a TRS-Care Age 65 enrollment packet in the mail. The packet will detail the benefits available to you, including Medicare. Learn more about all the opportunities, cost savings and benefits that may be available to you, such as the TRS-Care Medicare Advantage Plan. You can learn more about these opportunities by visiting our website: www.trs.texas.gov/Pages/healthcare_turning_65.aspx

In other words

All those insurance terms can be a little confusing.
Here are a few of the most common terms and definitions.

Your deductible

You will pay a \$500 deductible up front

Your copay or coinsurance

Once you have paid your \$500 deductible, you may pay a copay or coinsurance depending on the service provided.

Humana insurance pays

The most you'll spend out of pocket before your plan pays 100% of the cost is \$3,500.

Coinsurance

Your share of the cost after deductible

A percentage of your medical and drug costs that you may pay out of your pocket for services after you pay any plan deductible.

Copayment

What you pay at the provider's office for medical services

The set dollar amount you pay when you receive medical services or have a prescription filled.

Deductible

What you pay up front

The amount you pay for healthcare before your plan begins to pay for your benefits. If you are transferring from the TRS-Care Standard plan, your deductible and maximum out-of-pocket will carry over to the TRS-Care Medicare Advantage plan.

Exclusions and limitations

Anything not covered or covered under limited situations or conditions

Specific conditions or circumstances when services or items aren't covered under a plan.

Maximum out-of-pocket

The most you'll spend before your plan pays 100% of the cost

The most you would have to pay for services covered by a health plan, including deductibles, copays and coinsurance. If and when you reach your annual out-of-pocket limit, the TRS-Care Medicare Advantage plan pays 100% of the Medicare-approved amount for most covered medical charges. If you are transferring from the TRS-Care Standard plan, your deductible and maximum out-of-pocket will carry over to the TRS-Care Medicare Advantage plan.

Network

Your plan's contracted medical providers

A group of healthcare providers contracted to provide medical services at discounted rates. The providers include doctors, hospitals and other healthcare professionals and facilities.

Plan discount

A way Humana helps you save money

Amount you are not responsible for due to Humana's negotiated rate with provider.

Premium

The regular monthly payment for your plan

The amount you pay for Medicare or Medicare Advantage coverage.

Humana®