

What is Creditable Coverage?

Prescription drug coverage is creditable if the actuarial value of the coverage equals or exceeds the actuarial value of defined standard prescription drug coverage under Medicare Part D, and demonstrated through the use of generally accepted actuarial principles and in accordance with CMS guidelines. Humana has performed a bulk testing of Humana Rx plans and verified that the plans listed on this document either PASS or FAILED the gross actuarial value test for creditable coverage. This is indicated by a “YES” or “NO” under the Creditable Coverage column. However, according to CMS guidelines, the employers are responsible for assessing that the plan(s) they’ve selected and implemented actually provides creditable coverage.

User Instruction

This document was created to assist a user in determining whether a Humana Rx plan is considered creditable coverage for 2022.

Step 1: Review your Summary of Benefit and Coverage and make note of the following plan design elements:

- Rx type (e.g. RX3 and RX4)
- In-Network Rx Deductible
- In-Network Rx copay and/or coinsurance
- In-Network Maximum Out-of-Pocket (MOOP)
- Maximum Allowable Benefit (MAB) and coinsurance after MAB

Step 2: Review the "List of Available Tables" below and determine which table most resembles the plan design defined in Summary of Benefit and Coverage.

List of Available Tables

- RX2
- RX3 (No Specialty Tier)
- RX3 + Specialty
- RX4
- RX5
- Generic Only

Step 3: Refer to the appropriate table and locate your plan design.

Example #1

Rx Plan Design: RX3 5/10/20% min 15

Rx Deductible: \$0 MOOP: \$6350 MAB: \$1200 Coinsurance after MAB: 90%

It is the first plan on the RX3 (No Specialty Tier) Table and is NOT creditable for 2022.

Example #2

Rx Plan Design: RX5 3/8/15/25/35% min 200

Rx Deductible: \$0 MOOP: \$6350 MAB: None

It is the first plan on the RX5 Table and is considered as creditable coverage for 2022.

RX2						
Pharmacy Plans	Rx Only Deductible	Maximum Out-of-Pocket	Max Allowable Benefit (MAB)	Mail Order	90-Day Retail	Creditable Coverage
RX2 2.5/5	0	6350	NONE	10/10	3x	YES
RX2 5/10	0	6350	NONE	2x or 3x	3x	YES
RX2 5/10	0	6350	NONE	NONE	3x	YES
RX2 5/10	0	NO MOOP	NONE	2x or 3x	3x	YES
RX2 5/15	0	6350	NONE	2x or 3x	3x	YES
RX2 5/15	0	NO MOOP	NONE	10/30	3x	YES
RX2 5/15	0	NO MOOP	NONE	2x or 3x	3x	YES
RX2 5/20%	0	NO MOOP	50% after 2000 MAB	2x or 3x	3x	NO
RX2 5/20%	0	NO MOOP	50% after 2500 MAB	2x or 3x	3x	NO
RX2 5/20%	0	NO MOOP	75% after 1200 MAB	2x or 3x	3x	NO
RX2 5/20%	0	NO MOOP	75% after 1500 MAB	2x or 3x	3x	NO
RX2 5/20%	0	NO MOOP	75% after 2000 MAB	2x or 3x	3x	NO
RX2 5/20%	0	NO MOOP	75% after 2500 MAB	2x or 3x	3x	NO
RX2 5/20%	0	NO MOOP	95% after 1200 MAB	2x or 3x	3x	NO
RX2 5/20%	0	NO MOOP	NONE	2x or 3x	3x	YES
RX2 10/25	0	2000	NONE	20/50	3x	YES
RX2 10/25	0	6350	NONE	20/50	3x	YES
RX2 10/25%	0	NO MOOP	95% after 1200 MAB	2x or 3x	3x	NO
RX2 20% min 3/20% min 7	0	6750	NONE	15% MIN \$7.00/15% MIN \$15.00	3x	YES
RX2 20% min 3/20% min 7	0	7350	NONE	15% MIN \$7.00/15% MIN \$15.00	3x	YES
RX2 20% min 5/20% min 10	0	500	NONE	15/15	3x	YES
RX2 20% min 5/20% min 10	0	700	NONE	15/15	3x	YES
RX2 95%/100%	0	NO MOOP	NONE	2x or 3x	3x	NO

RX3 (No Specialty Tier)						
Pharmacy Plans	Rx Only Deductible	Maximum Out-of-Pocket	Max Allowable Benefit (MAB)	Mail Order	90-Day Retail	Creditable Coverage
RX3 5/10/20% min 15	0	6350	90% after 1200 MAB	2x or 3x	3x	NO
RX3 5/15/15	0	6350	NONE	2x or 3x	3x	YES
RX3 5/15/20%	0	6350	95% after 1200 MAB	2x or 3x	3x	NO
RX3 5/15/20% max 200	0	6350	NONE	2x or 3x	3x	YES
RX3 5/15/25%	0	6350	NONE	2x or 3x	3x	YES
RX3 5/20%/20%	0	6350	75% after 2500 MAB	2x or 3x	3x	NO
RX3 5/20/30%	0	6350	95% after 1200 MAB	2x or 3x	3x	NO
RX3 5/20/30%	0	6350	NONE	2x or 3x	3x	YES
RX3 5/25% min 20/35% min 30	0	6350	NONE	2x or 3x	3x	YES
RX3 5/25/30	0	6350	NONE	10/25/30	3x	YES
RX3 8/15/20%	0	6350	NONE	2x or 3x	3x	YES
RX3 10/15/20% max 200	0	6350	NONE	2x or 3x	3x	YES
RX3 10/15/30%	0	6350	95% after 1000 MAB	2x or 3x	3x	NO
RX3 10/20% min 20/30% min 30	0	6350	NONE	30/20% MIN \$60.00/30% MIN \$90.00	3x	YES
RX3 10/25% min 25/35% min 35	0	6350	NONE	2x or 3x	3x	YES
RX3 10/25/20%	0	6350	75% after 1500 MAB	2x or 3x	3x	NO
RX3 10/25/20%	0	6350	NONE	2x or 3x	3x	YES
RX3 10/30% min 30/30% min 30	0	6350	75% after 1000 MAB	2x or 3x	3x	NO
RX3 15/25/45	0	6350	NONE	2x or 3x	3x	YES
RX3 10% min 5/20% min 10/20% min 10	0	6350	NONE	5/35/35	3x	YES
RX3 10% min 5/25% min 10/30% min 15	0	6350	95% after 2500 MAB	10/20/20	3x	NO
RX3 20% min 5/20% min 5/20% min 5	0	900	NONE	2x or 3x	3x	YES
RX3 20%/20%/20%	0	6350	NONE	2x or 3x	3x	YES
RX3 95%/95%/95%	0	6350	NONE	2x or 3x	3x	NO

RX3+Specialty							
Pharmacy Plans	Rx Only Deductible	Maximum Out-of-Pocket	Max Allowable Benefit (MAB)	Mail Order	90-Day Retail	Creditable Coverage	
RX3S 0/15/15/30% max 200	0	6350	NONE	2x or 3x	3x	YES	
RX3S 2/8/8/30% max 200	0	6350	NONE	2x or 3x	3x	YES	
RX3S 3/10/10/25% min 15	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/10/10/10	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/10/10/10	0	6350	NONE	NONE	3x	YES	
RX3S 5/10/10/25% min 50	0	6350	NONE	13/25/25	3x	YES	
RX3S 5/10/10/30%	0	6350	NONE	10/25/25	3x	YES	
RX3S 5/10/25/25	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/10/30%/40%	0	6350	50% after 3500 MAB	2x or 3x	3x	YES	
RX3S 5/15% min 15/30% min 30/30% min 30	0	6350	95% after 1000 MAB	2x or 3x	3x	NO	
RX3S 5/15/15/20% max 200	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/15/25	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/15/25%	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/15/30%	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/15/30% max 200	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/20% max 200/20% max 200	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/20% max 250/20% max 250	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/20% min 20/20% min 20	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/20%/20%	0	6350	50% after 5000 MAB	10/30/10%	3x	YES	
RX3S 5/15/20%/20%	0	6350	95% after 1200 MAB	2x or 3x	3x	NO	
RX3S 5/15/20%/20%	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/25/25	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/30% max 100/30% max 100	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/30/25%	0	6350	70% after 3000 MAB	2x or 3x	3x	YES	
RX3S 5/15/30/25%	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/15/30/25% max 300	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20% min 10/20% min 10/20% max 500	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20% min 10/20% min 10/200	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20% min 10/20% min 10/30% max 200	0	6350	NONE	10/30/30	3x	YES	
RX3S 5/20% min 10/25% min 15/25% min 15	0	6350	NONE	10/20% MIN 30/25% MIN 15	3x	YES	
RX3S 5/20% min 15/20% min 15/20%	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20% min 15/20% min 15/30%	0	3000	NONE	10/30/30	3x	YES	
RX3S 5/20% min 15/30% min 20/30%	0	6350	80% after 3000 MAB	2x or 3x	3x	NO	
RX3S 5/20% min 20/20% min 20/30%	0	6350	NONE	10/15% MIN 40/15% MIN 40	3x	YES	
RX3S 5/20%/20%/20%	0	6350	95% after 1200 MAB	2x or 3x	3x	NO	
RX3S 5/20%/20%/20%	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20/20/100%	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20/20/25%	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20/20/30%	0	6350	50% after 2500 MAB	2x or 3x	3x	YES	
RX3S 5/20/20/30% max 200	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20/20/30% max 500	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20/25%/40%	0	6350	50% after 4500 MAB	2x or 3x	3x	YES	
RX3S 5/20/30% max 100/30%	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20/30% max 100/30% max 100	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20/30% max 300/30% max 300	0	6350	NONE	2x or 3x	3x	YES	
RX3S 5/20/30%/30%	0	6350	NONE	2x or 3x	3x	YES	

RX3+Specialty						
Pharmacy Plans	Rx Only Deductible	Maximum Out-of-Pocket	Max Allowable Benefit (MAB)	Mail Order	90-Day Retail	Creditable Coverage
RX3S 5/20/30%/40%	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/20/35/30% max 200	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/20/35/30% max 400	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/25% min 15/25% min 10/30%	0	6350	NONE	10/35/35	3x	YES
RX3S 5/25% min 15/25% min 15/30%	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/25% min 15/25% min 15/45%	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/25% min 15/25% min 20/30%	0	6350	60% after 1500 MAB	2x or 3x	3x	NO
RX3S 5/25% min 20/25% min 20/25% max 250	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/25% min 25/30% min 30/30%	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/25% min 30/25% min 30/30%	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/25/25%/35%	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/25/25/30% max 500	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/25/25/35% max 200	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/25/30% min 20/40%	0	6350	NONE	2x or 3x	3x	YES
RX3S 5/95%/95%/95%	0	6350	95% after 1200 MAB	2x or 3x	3x	NO
RX3S 5/95%/95%/95%	0	6350	NONE	2x or 3x	3x	NO
RX3S 7/10/25% min 15/40% min 50	0	6350	60% after 3500 MAB	2x or 3x	3x	YES
RX3S 7/20/25% min 30/40%	0	6350	50% after 5000 MAB	2x or 3x	3x	YES
RX3S 7/20/35/30%	0	6350	50% after 3000 MAB	2x or 3x	3x	YES
RX3S 7/20/35/30%	0	6350	NONE	2x or 3x	3x	YES
RX3S 7/25% min 20/25% min 40/30%	0	6350	75% after 2000 MAB	14/40/80	3x	NO
RX3S 7/25% min 20/30% min 25/30%	0	6350	80% after 6000 MAB	2x or 3x	3x	YES
RX3S 7/25/30/30	0	6350	NONE	14/60/75	3x	YES
RX3S 7/30% max 30/30% max 30/40%	0	6350	50% after 3000 MAB	14/20%/20%	3x	YES
RX3S 7/30% min 20/30% min 20/30%	0	6350	75% after 2500 MAB	2x or 3x	3x	NO
RX3S 7/30/30/30% min 200	0	6350	NONE	14/30/60	3x	YES
RX3S 7/35/20%/30% max 300	0	6350	NONE	2x or 3x	3x	YES
RX3S 8/20% min 20/25% min 25/30% max 300	0	6350	NONE	16/20% MIN 20/25% MIN 25	3x	YES
RX3S 8/25% min 30/25% max 30/30%	0	6350	75% after 2000 MAB	16/19%/19%	3x	NO
RX3S 10/15/20%/20%	0	6350	75% after 1500 MAB	2x or 3x	3x	NO
RX3S 10/15/20/30% max 200	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/20% min 15/20% min 30/35%	0	6350	95% after 1250 MAB	2x or 3x	3x	NO
RX3S 10/20% min 20/25% min 25/25%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/20% min 20/25%/25%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/20/20% max 200/30%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/20/20/30% max 200	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/20/30/30	0	6350	NONE	NONE	3x	YES
RX3S 10/20/35/25%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/20/35/30%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/20/35/30% max 200	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/20/40%/40%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/25% min 20/25% min 20/30% max 200	0	6350	NONE	20/40/40	3x	YES
RX3S 10/25% min 25/25% min 25/30%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/25% min 30/35% min 40/20%	100	6350	NONE	2x or 3x	3x	YES
RX3S 10/25/20%/20%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/25/35/10%	0	6350	NONE	2x or 3x	3x	YES

RX3+Specialty						
Pharmacy Plans	Rx Only Deductible	Maximum Out-of-Pocket	Max Allowable Benefit (MAB)	Mail Order	90-Day Retail	Creditable Coverage
RX3S 10/30% min 20/30% min 20/30%	0	6350	70% after 1000 MAB	2x or 3x	3x	NO
RX3S 10/30% min 30/30% min 30/30% min 30	0	6350	NONE	NONE	3x	YES
RX3S 10/30% min 30/30% min 30/35%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/30/30/30% max 250	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/30/30/30% max 350	0	6350	NONE	2x or 3x	3x	YES
RX3S 10/35% min 35/40% min 40/40%	100	6350	NONE	2x or 3x	3x	NO
RX3S 10/35%/35%/40% min 25	0	6350	NONE	30/60/60	30/60/60	YES
RX3S 12/25% min 20/30% min 25/25%	0	6350	50% after 3000 MAB	25/20% MIN 60/25% MIN 75	3x	YES
RX3S 12/25% min 25/30% min 30/40%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10% min 10/20% min 20/20% min 30/30%	25	6350	NONE	2x or 3x	3x	YES
RX3S 10% min 10/20% min 25/30% min 35/40%	0	6350	80% after 3000 MAB	2x or 3x	3x	NO
RX3S 10% min 5/25% min 15/25% min 15/30%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10%/20% min 25/20% min 25/20% min 25	0	6350	75% after 2000 MAB	10%/20% MIN 50/20% MIN 50	3x	NO
RX3S 10%/20% min 25/20% min 25/20% min 25	0	6350	75% after 4000 MAB	10%/20% MIN 50/20% MIN 50	3x	YES
RX3S 10%/20% min 25/20% min 25/20% min 25	0	6350	75% after 6000 MAB	10%/20% MIN 50/20% MIN 50	3x	YES
RX3S 10%/20%/20%/30%	25	6350	50% after 2000 MAB	2x or 3x	3x	YES
RX3S 10%/25%/25%/45%	0	6350	NONE	2x or 3x	3x	YES
RX3S 10%/30%/35%/45%	0	6350	NONE	2x or 3x	3x	YES
RX3S 20%/20%/20%/20%	0	6350	NONE	2x or 3x	3x	YES
RX3S 75%/80%/85%/85%	0	6350	NONE	2x or 3x	3x	NO
RX3S 80%/80%/80%/80%	0	6350	NONE	2x or 3x	3x	NO

RX4							
Pharmacy Plans	Rx Only Deductible	Maximum Out-of-Pocket	Max Allowable Benefit (MAB)	Mail Order	90-Day Retail	90-Day Retail	Creditable Coverage
RX4 0/10/25/25%	0	6350	NONE	2x or 3x	3x	3x	YES
RX4 5/15/15/15	0	6350	NONE	2x or 3x	3x	3x	YES
RX4 5/15/20/25%	0	2500	NONE	2x or 3x	3x	3x	YES
RX4 5/15/20/25%	0	4000	NONE	2x or 3x	3x	3x	YES
RX4 5/15/30/25%	0	6350	50% after 3000 MAB	2x or 3x	3x	3x	YES
RX4 5/15/30/25%	0	6350	NONE	2x or 3x	3x	3x	YES
RX4 5/15/30/25%	0	NO MOOP	NONE	2x or 3x	3x	3x	YES
RX4 5/20% min 20/25% min 25/30% max 30	0	6350	NONE	10/20% MIN 20/25% MIN 25/30% MAX 300	3x	3x	YES
RX4 5/20/30/25%	0	6350	NONE	2x or 3x	3x	3x	YES
RX4 5/20/35/25%	0	6350	NONE	2x or 3x	3x	3x	YES
RX4 7/20% min 25/20% min 25/30%	0	6350	50% after 5000 MAB	2x or 3x	3x	3x	YES
RX4 8/20/40/30%	0	6350	75% after 2000 MAB	2x or 3x	3x	3x	NO
RX4 10/15/30/25%	0	6350	NONE	2x or 3x	3x	3x	YES
RX4 10/15/30/30%	0	6350	NONE	2x or 3x	3x	3x	YES
RX4 10/20/35/25%	0	3000	NONE	2x or 3x	3x	3x	YES
RX4 10/20/35/25%	0	6350	50% after 2000 MAB	2x or 3x	3x	3x	YES
RX4 10/20/35/25%	0	6350	NONE	20/40/35/25%	3x	3x	YES
RX4 10/20/35/25%	0	6350	NONE	20/50/70/25%	3x	3x	YES
RX4 10/20/35/25%	0	6350	NONE	2x or 3x	3x	3x	YES
RX4 10/20/35/25%	0	NO MOOP	NONE	2x or 3x	3x	3x	YES
RX4 10/25/35/25%	0	6350	NONE	2x or 3x	3x	3x	YES
RX4 10/25/35/30%	0	6350	NONE	2x or 3x	3x	3x	YES
RX4 10/35% min 35/40% min 40/35%	0	6350	95% after 1500 MAB	2x or 3x	3x	3x	NO
RX4 10/35/35/35%	0	6350	75% after 4000 MAB	2x or 3x	3x	3x	YES

RX5						
Pharmacy Plans	Rx Only Deductible	Maximum Out-of-Pocket	Max Allowable Benefit (MAB)	Mail Order	90-Day Retail	Creditable Coverage
RX5 3/8/15/25/35% min 200	0	6350	NONE	2x or 3x	3x	YES
RX5 5/10% min 10/20% min 20/25% min 25/35% min 35	0	6350	75% after 1500 MAB	2x or 3x	3x	NO
RX5 5/10% min 10/25% min 25/30% min 30/40% min 40	0	6350	NONE	2x or 3x	3x	YES
RX5 5/10/10% min 10/20% min 20/50%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/10/20% min 20/25% min 25/30%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/10/20/20%/25%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/10/25%/30%/30%	0	6350	95% after 1200 MAB	2x or 3x	3x	NO
RX5 5/10/25/20% min 20/30% min 30	0	6350	NONE	2x or 3x	3x	YES
RX5 5/10/25/25%/25%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/10/25/25%/30%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/10/25/25%/35%	0	3000	NONE	2x or 3x	3x	YES
RX5 5/10/25/25%/35%	0	6350	50% after 2000 MAB	2x or 3x	3x	YES
RX5 5/10/25/25%/35%	0	6350	50% after 3500 MAB	2x or 3x	3x	YES
RX5 5/10/25/25%/35%	0	6350	60% after 2000 MAB	2x or 3x	3x	NO
RX5 5/10/25/25%/35%	0	6350	75% after 2500 MAB	2x or 3x	3x	NO
RX5 5/10/25/25%/35%	0	6350	75% after 3000 MAB	10/20/25/25%/35%	3x	NO
RX5 5/10/25/25%/35%	0	6350	95% after 2000 MAB	2x or 3x	3x	NO
RX5 5/10/25/25%/35%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/10/25/35%/40%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/10/30/25%/35%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/10/50%/80%/85%	0	6350	NONE	2x or 3x	3x	NO
RX5 5/10/95%/95%/95%	0	6350	NONE	2x or 3x	3x	NO
RX5 5/15% min 15/25% min 25/40%/40%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/15/15/30%/30%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/15/20% min 20/30% min 30/35%	0	6350	95% after 2000 MAB	2x or 3x	3x	NO
RX5 5/15/20%/25%/30%	0	6350	75% after 2000 MAB	2x or 3x	3x	NO
RX5 5/15/20%/25%/30% min 30	0	6350	NONE	2x or 3x	3x	YES
RX5 5/15/20/25%/30%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/15/25/25%/35%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/15/30/25%/30%	0	6350	75% after 2500 MAB	2x or 3x	3x	NO
RX5 5/15/35/35%/35%	0	6350	90% after 1700 MAB	2x or 3x	3x	NO
RX5 5/15/35/35%/35%	0	6350	90% after 2500 MAB	2x or 3x	3x	NO
RX5 5/20/25/30%/35%	0	6350	75% after 2500 MAB	2x or 3x	3x	NO
RX5 5/20/30%/35%/35%	0	6350	NONE	2x or 3x	3x	YES
RX5 5/20/30%/35%/90%	0	6350	NONE	2x or 3x	3x	NO
RX5 5/7/20% min 20/25% min 25/30%	0	6350	95% after 1500 MAB	10/14/20% MIN 40/25%/30%	3x	NO
RX5 5/7/20% min 35/25% min 35/30% min 350	75	6350	NONE	2x or 3x	3x	YES
RX5 7/12/20% min 30/25% min 35/30%	0	6350	80% after 5000 MAB	2x or 3x	3x	NO
RX5 7/20/35%/50%/50%	0	6350	95% after 100 MAB	2x or 3x	3x	NO
RX5 8/15/25/30%/40%	0	6350	95% after 1000 MAB	2x or 3x	3x	NO
RX5 8/15/40/35% min 35/30% max 300	250	6350	NONE	16/30/80/35% MIN 35/30% MAX 300	3x	YES
RX5 10/10/20/25% min 25/50% max 500	0	6350	NONE	2x or 3x	3x	YES
RX5 10/15% min 15/20% min 20/25% min 25/45%	0	6350	95% after 1500 MAB	2x or 3x	3x	NO
RX5 10/15% min 15/20% min 20/30% min 30/45%	0	6350	85% after 1200 MAB	2x or 3x	3x	NO
RX5 10/15% min 15/20% min 20/30%/35%	0	6350	NONE	20/15% MIN 15/20% MIN 20/30%/35%	3x	YES

RX5						
Pharmacy Plans	Rx Only Deductible	Maximum Out-of-Pocket	Max Allowable Benefit (MAB)	Mail Order	90-Day Retail	Creditable Coverage
RX5 10/15/20% min 20/25% min 25/30%	0	6350	NONE	2x or 3x	3x	YES
RX5 10/15/25% min 20/25% min 20/30% max 200	0	6350	NONE	2x or 3x	3x	YES
RX5 10/15/25% min 25/30% min 30/35% min 35	0	6350	75% after 2500 MAB	2x or 3x	3x	NO
RX5 10/15/30/25%/35%	0	6350	NONE	2x or 3x	3x	YES
RX5 10/20% min 20/30% min 30/40% min 40/60%	0	6350	95% after 2500 MAB	2x or 3x	3x	NO
RX5 10/20/20/30%/30%	0	6350	NONE	20/50/80/30%/30%	3x	YES
RX5 10/20/20/30%/30%	0	6350	NONE	2x or 3x	3x	YES
RX5 10/20/25% min 25/30% min 30/35% min 35	0	6350	50% after 2000 MAB	2x or 3x	3x	NO
RX5 10/20/25/25%/35%	0	6350	90% after 3000 MAB	2x or 3x	3x	NO
RX5 10/20/25/25%/35%	5	6350	NONE	2x or 3x	3x	YES
RX5 10/20/45%/95%/95%	0	6350	95% after 2500 MAB	2x or 3x	3x	NO
RX5 10/25% min 15/30% min 25/40%/40%	0	6350	NONE	2x or 3x	3x	YES
RX5 10/25% min 25/25% min 35/40%/45%	0	6350	NONE	2x or 3x	3x	YES
RX5 10/30/40/35% min 200/35% min 200	0	6350	NONE	2x or 3x	3x	YES
RX5 10/35/35%/40%/50%	0	6350	75% after 2000 MAB	2x or 3x	3x	NO
RX5 15% min 15/25% min 25/25% min 25/25% min 25/25% min 25/25%	0	6350	50% after 4500 MAB	2x or 3x	3x	YES
RX5 25%/25%/25%/25%/25%	200	6350	NONE	2x or 3x	3x	YES
RX5 35%/35%/35%/35%/35%	150	6350	NONE	2x or 3x	3x	NO
RX5 95%/95%/95%/95%/95%	0	6350	NONE	2x or 3x	3x	NO

Generic Only						
Pharmacy Plans	Rx Only Deductible	Maximum Out-of-Pocket	Max Allowable Benefit (MAB)	Mail Order	90-Day Retail	Creditable Coverage
Generic Only 95%	0	NO MOOP	NONE	95%	3x	NO

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Humana

Humana Plans are offered by the Humana Family of Insurance and Health Plan Companies.

Please refer to your Benefit Plan Document (Certificate of Coverage/Insurance) for more information on the company providing your benefits.

Our health benefit plans have Limitations and Exclusions.