

# Member Value-Added Benefits, Services, and Healthy Rewards Guide 2022



Welcome to the Humana Healthy Horizons® in Ohio 2022 Member Value-Added Benefits, Services, and Healthy Rewards Guide. As a Humana member, you get the Medicaid coverage you need and deserve, so you have time to focus on the things you love. These Value-Added Benefits, Services, and Healthy Rewards are at no cost to you. All Value-Added Benefits, Services, and Healthy Rewards are subject to change, with advance notice.

**This guide provides detailed information about each:**

- Value-Added Benefit
- Service
- Healthy Reward

**This guide also includes information about:**

- Age limits
- How you can access each Value-Added Benefit, Service, and Healthy Reward
- Value-Added Benefit, Service, and Healthy Reward details

**Humana**  
Healthy Horizons®  
in Ohio



For additional assistance with details and how to access these Value-Added Benefits, Services, and Healthy Rewards, call Member Services at **877-856-5702 (TTY: 711)**, Monday – Friday, from 7 a.m. – 8 p.m., Eastern time

Benefit	Age limit	Benefit details	How do I access the benefit
<p><b>Cell Phone Services</b></p>	<p>All</p>	<p>Free cellphone through the Federal Lifeline Program, per household. Members who are under 18 will need a parent or guardian to sign up.</p> <p><b>This benefit covers per lifetime:</b></p> <ul style="list-style-type: none"> <li>• 1 phone</li> <li>• 1 charger</li> <li>• 1 set of instructions</li> <li>• 350 minutes per month</li> <li>• 4.5 GB of data per month</li> <li>• Unlimited text messages per month</li> <li>• Training for you and your caregiver at the first care manager orientation visit</li> </ul> <p>This benefit also includes unlimited calls to Humana Member Services for health plan assistance and 911 for emergencies, even if you run out of minutes.</p> <p>You must make at least 1 phone call or send 1 text message every month in order to keep your benefit.</p> <p>Benefits are subject to change by the FCC under the Lifeline program.</p>	<p>Contact Safelink at <b>Safelink.com</b> or call Safelink at <b>877-631-2550</b> to enroll</p> <ul style="list-style-type: none"> <li>• You need to provide your Humana Healthy Horizons in Ohio member ID.</li> </ul> <p>You must be enrolled in Safelink at least 30 days to qualify for the benefit.</p> <p><b>Example:</b></p> <ul style="list-style-type: none"> <li>• You contact Safelink to enroll in the program on December 1, 2022</li> <li>• You will not have your 350 minutes per month until January 1, 2023</li> </ul> <p>If you are enrolled in care and/or disease management and enroll in this cell phone service, you may request approval to receive unlimited minutes and an additional 4GB of data by calling Member Services at <b>877-856-5702 (TTY: 711)</b>.</p> <p>Benefits are subject to change by the FCC under the Lifeline program.</p>

Benefit	Age limit	Benefit details	How do I access the benefit
<b>Dental Services - Adult</b>	21+	1 additional cleaning per year with in-network providers	<p>You may schedule 2 adult dental cleanings per calendar year with an in-network dental provider.</p> <p><b>To find a dental provider:</b></p> <ul style="list-style-type: none"> <li>• Use our online Find a Doctor Service at <b>Humana.com/FindADoctor</b> to identify and locate dentists near you <ul style="list-style-type: none"> <li>– Search for General Dentistry Oral Surgery (listed as Oral and Maxillofacial surgery)</li> <li>– Select All Dental Networks as Coverage Type</li> <li>– Select OH Medicaid Dental Network as Network</li> <li>– Do not use the dental search</li> </ul> </li> <li>• Access information through the <b>MyHumana</b> app (if you signed up for an account)</li> </ul>
<b>Employment Physical Exam</b>	18+	1 employment physical per year	<p><b>Schedule an appointment with:</b></p> <ul style="list-style-type: none"> <li>• Your primary care physician</li> <li>• Local community health center</li> <li>• Retail or urgent care center (e.g., Minute Clinic)</li> <li>• Other type of provider that performs sport physicals</li> </ul> <p>You have no out-of-pocket costs.</p> <p>Humana Healthy Horizons in Ohio will reimburse the provider, once he or she submits a claim for the sports physical.</p> <p><b>To find a provider or facility:</b></p> <ul style="list-style-type: none"> <li>• Use our online Find a Doctor Service at <b>Humana.com/FindADoctor</b> to identify and locate providers and facilities near you</li> </ul>

Benefit	Age limit	Benefit details	How do I access the benefit
GEDWorks	16+	<p>An all-inclusive online program with tools to assist students with passing the GED test.</p> <p><b>Assistance includes:</b></p> <ul style="list-style-type: none"> <li>• One-on-one bilingual advisor</li> <li>• Access to guidance and study materials</li> <li>• Unlimited use of practice tests</li> <li>• Virtual assistance (to provide the greatest flexibility for participation)</li> <li>• Test pass guarantee (our members can take the GED multiple times until they pass it)</li> </ul> <p>To be eligible for this benefit you must:</p> <ul style="list-style-type: none"> <li>• Be at least 16 years old</li> <li>• Not have a high school diploma</li> </ul> <p><b>Note:</b></p> <ul style="list-style-type: none"> <li>• Members who are 16 or 17 must: <ul style="list-style-type: none"> <li>– Submit a consent form signed by either your parent, guardian, or court official</li> <li>– Be officially withdrawn from school</li> </ul> </li> </ul>	<p>Sign up for GEDWorks at <b>GED.com/Humana</b></p> <p>For more information, call GEDWorks at <b>612-547-6889</b>, Monday – Friday, 9 a.m. to 6 p.m. Eastern time</p>

Benefit	Age limit	Benefit details	How do I access the benefit
<p><b>Member Assistance Program (MAP)</b></p>	<p>All</p>	<p>Available childcare, counseling/caregiving, and legal/financial support includes:</p> <p><b>Childcare support</b></p> <p>Support to identify childcare options, including:</p> <ul style="list-style-type: none"> <li>• Childcare centers</li> <li>• Family daycare homes</li> <li>• Nanny agencies</li> <li>• Babysitting services search tools</li> <li>• Back-up/on-demand child care</li> </ul> <p>Support to identify special needs support options, including:</p> <ul style="list-style-type: none"> <li>• Support groups</li> <li>• Advocates</li> <li>• Childcare for children with special needs</li> <li>• Socialization groups</li> <li>• Special needs services (e.g., ABA therapy)</li> </ul> <p>Reimbursement of up to \$50 per quarter, up to four quarters per year, for childcare expenses for caretakers seeking employment.</p> <p><b>Counseling and caregiving support</b></p> <p>Behavioral health counseling and support, including:</p> <ul style="list-style-type: none"> <li>• Up to three sessions per calendar year for caregivers of a child with coverage through Humana Healthy Horizons in Ohio</li> </ul>	<p>To access available childcare, counseling/caregiving, and legal/financial support from the Member Assistance Program:</p> <ul style="list-style-type: none"> <li>• Visit <a href="https://login.lifeworks.com">https://login.lifeworks.com</a></li> </ul> <p>When prompted, enter <b>HumanaOhio</b> as your username and <b>support</b> as your password.</p> <p>For additional information, call <b>877-856-5702 (TTY: 711)</b>, Monday – Friday, 7 a.m. – 8 p.m., Eastern time. Please have your Member ID card (or Member ID number) at the time of your call.</p> <p>To qualify for the reimbursement of up to \$50 per quarter, up to four quarters per year, for childcare expenses, you must:</p> <ul style="list-style-type: none"> <li>• Have a childcare provider</li> <li>• Participate in some type of workforce program</li> </ul> <p>For reimbursement, call <b>877-856-5702 (TTY: 711)</b>, Monday – Friday, 7 a.m. – 8 p.m., Eastern time</p>

Benefit	Age limit	Benefit details	How do I access the benefit
<b>Member Assistance Program (MAP) (cont.)</b>		<p><b>Legal and financial support</b></p> <p>Legal and financial support, including:</p> <ul style="list-style-type: none"> <li>• Do-it-yourself document preparation (e.g., wills/living wills)</li> <li>• Free 30-minute consultations with attorneys, mediators, certified public accountants, and financial professionals (depending on type of consultation member needs, such as for budget preparation, etc.)</li> <li>• After the free, 30-minute consultation, members get a 25% discount on additional legal services.</li> </ul>	
<b>Over-the-Counter Allowance</b>	All	Up to \$30 per calendar month for over-the-counter (OTC) medicines like pain relievers, diaper rash cream, cough and cold medicine, first aid supplies, etc.	<p>No prescription needed.</p> <p>Access the OTC catalog and order form in English or in Spanish at <a href="http://Humana.com/OhioPharmacy">Humana.com/OhioPharmacy</a>.</p> <p>Amounts not used each month do not roll over.</p>
<b>Pharmacy - Copayment</b>	All	No copayment on prescription medicine	When filling a prescription at a pharmacy, the pharmacist will not charge you a copayment.

Benefit	Age limit	Benefit details	How do I access the benefit
<b>Portable Crib</b>	Pregnant females	<p><b>Pregnant females must:</b></p> <ul style="list-style-type: none"> <li>• Enroll in the HumanaBeginnings™ care management program</li> <li>• Complete a comprehensive assessment</li> <li>• Complete 1 additional follow-up call within 56 days (or 8 weeks) of enrollment or identification of pregnancy</li> </ul> <p>Pregnant females who meet each of the above eligibility criteria will receive one portable crib per pregnancy and per baby (e.g., if you have twins, you are eligible for two portable cribs).</p> <p>Member must be enrolled in the HumanaBeginnings care management program to qualify for the benefit.</p>	<p>To enroll in the HumanaBeginnings care management program, call <b>877-856-5702 (TTY: 711)</b>, Monday – Friday, 7 a.m. – 8 p.m., Eastern time</p> <p>To request the benefit for the portable crib (available only after you meet all eligibility criteria, call:</p> <ul style="list-style-type: none"> <li>• Your HumanaBeginnings Care Manager (if you have one), <b>or</b></li> <li>• Member Services at <b>877-856-5702 (TTY: 711)</b>, Monday – Friday, 7 a.m. – 8 p.m., Eastern time</li> </ul> <p>Humana will not fulfill the benefit until:</p> <ul style="list-style-type: none"> <li>• You meet all eligibility criteria</li> <li>• You request the portable crib</li> </ul>
<b>Post-Discharge Meals</b>	All	<p>Up to 10 home-delivered meals following discharge from an inpatient or residential facility, limit 40 meals per year (up to 4 discharges)</p> <p><b>Mom’s Meals will:</b></p> <ul style="list-style-type: none"> <li>• Call members identified as discharged from an inpatient or residential facility</li> <li>• Offer the post-discharge meals benefit</li> </ul>	<p>If you have been discharged from an inpatient or residential facility <b>and</b> Mom’s Meals on behalf of Humana Healthy Horizons in Ohio has not called you:</p> <ul style="list-style-type: none"> <li>• Call Member Services at <b>877-856-5702 (TTY: 711)</b>, Monday – Friday, 7 a.m. – 8 p.m., Eastern time within 30 days of the discharge date to request the post-discharge meals benefit</li> </ul>
<b>Social Services Support</b>	18+	<p>Up to \$500 assistance allowance (such as for paying utility bills or stopping an eviction).</p> <p>Once per lifetime. At care management staff discretion.</p>	<p><b>Call:</b></p> <ul style="list-style-type: none"> <li>• Your care manager, <b>or</b></li> <li>• Member Services at <b>877-856-5702 (TTY: 711)</b>, Monday – Friday, 7 a.m. – 8 p.m., Eastern time</li> </ul>

Benefit	Age limit	Benefit details	How do I access the benefit
Transportation	All	<p>30 one-way (15 round) trips each calendar year. No approval needed. Rides are available for the following types of trips:</p> <ul style="list-style-type: none"> <li>• Baby showers</li> <li>• County Department of Job and Family Services (CDJFS) appointments</li> <li>• Dental, doctor, and vision visits</li> <li>• Food banks</li> <li>• GED classes</li> <li>• Grocery stores</li> <li>• Job interviews</li> <li>• Maternity/childbirth classes</li> <li>• Redetermination appointment</li> <li>• Social support (e.g., support group, wellness classes, etc.)</li> <li>• Supplemental Nutrition Assistance Program (SNAP) appointments</li> <li>• Women, Infants, and Children (WIC) appointments</li> </ul> <p><b>Additional transportation services</b></p> <p>Members enrolled in Humana case management can qualify for additional transportation services, such as rides for:</p> <ul style="list-style-type: none"> <li>• Outpatient and residential behavioral health services</li> <li>• Intensive outpatient treatment, when you are actively engaged in behavioral health/substance use disorder courses of treatment</li> <li>• Parents to visit their child in the neonatal intensive care unit</li> <li>• Parents to visit their child in a residential or inpatient behavioral health facility</li> </ul>	<p>Transportation provided by Access2Care. Please call Access2Care within 48 hours of needing a ride, if you think you need access to:</p> <ul style="list-style-type: none"> <li>• A car or wheelchair</li> <li>• Nonmedical transportation</li> </ul> <p>Transportation for urgent healthcare needs may be arranged with less than 48 hours' notice.</p> <p>To set up transportation: Call Access2Care at <b>855-739-5986 (TTY: 866-288-3133)</b>, Monday – Saturday, from 8 a.m. – 6 p.m. Eastern time</p> <p>To cancel a ride, call at least 24 hours in advance.</p>



Benefit	Age limit	Benefit details	How do I access the benefit
Transportation (cont.)		<p><b>Unlimited transportation services</b></p> <p>Unlimited transportation is available for members for the following services:</p> <ul style="list-style-type: none"> <li>• Chemotherapy</li> <li>• Diabetes management</li> <li>• Dialysis</li> <li>• Hospital discharge</li> <li>• Organ transplant</li> <li>• Postpartum trips (up to 12 months after delivery to doctor visits)</li> <li>• Prenatal trips</li> <li>• Radiation</li> <li>• Urgent care</li> <li>• Wound care</li> </ul>	
Vision Services – Adult	21-59	<ul style="list-style-type: none"> <li>• 1 annual eye exam</li> <li>• Up to \$200 allowance for 1 set of glasses (frames and lenses) <b>or</b> contacts during the plan year</li> </ul> <p>Members are responsible for any cost more than the \$200 allowance.</p>	<p>To find an in-network vision services provider:</p> <ul style="list-style-type: none"> <li>• Use our online Find a Doctor service at <b><a href="https://www.humana.com/FindADoctor">Humana.com/FindADoctor</a></b> <ul style="list-style-type: none"> <li>– Under Specialty, search under Medical type</li> </ul> </li> <li>• Refer to our Provider Directory (available online or via mail upon request)</li> <li>• Call Member Services at <b>877-856-5702 (TTY: 711)</b>, Monday – Friday, 7 a.m. – 8 p.m., Eastern time</li> </ul>



## Go365 for Humana Healthy Horizons

Go365 for Humana Healthy Horizons® is a wellness program that offers our members opportunities to earn rewards for taking eligible healthy actions.

Go365 for Humana Healthy Horizons is available to all members who meet the requirements of the program. To participate in this program members must:

- Download the Go365 for Humana Healthy Horizons App from iTunes/Apple Shop or Google Play on a mobile device
- Create an account to access and engage in the program
  - Members under the age of 18 must have a parent or guardian register on their behalf to participate and engage with the program. The person completing the registration process on behalf of a minor must have the minor's Medicaid Member ID.

Members who are 18 and older can register to create a Go365® account. You must have your Medicaid Member ID.

If you have a MyHumana account, you can use the same login information to access Go365 for Humana Healthy Horizons, after you download the app.

For each eligible Go365 activity completed, you can earn rewards and then redeem the rewards for gift cards in the Go365 in-app mall. Rewards earned through Go365 have no cash value and must be earned and redeemed:

- By the end of the plan year, or
- 90 days past the end of the plan year if you have been continuously enrolled during the plan year or had a gap in enrollment of less than 180 days.

## Healthy Activity Reward Chart

Go365 healthy activity	Age	Reward	Earning the reward Download the Go365 for Humana Healthy Horizons app, create an account, and:
<b>Health Risk Assessment (HRA)</b>	All	<b>\$25 in rewards</b> (1 per lifetime)	<ul style="list-style-type: none"> <li>• Complete your health risk assessment (HRA) within 90 days of enrollment with Humana Healthy Horizons</li> </ul> <p><b>You can complete your HRA in 1 of 4 ways:</b></p> <ul style="list-style-type: none"> <li>• Through the Go365 for Humana Healthy Horizons app, or</li> <li>• By filling out and sending HRA back to us in the envelope you got in your welcome kit, <b>or</b></li> <li>• <b>877-856-5702 (TTY: 711)</b>, Monday – Friday, 7 a.m. – 8 p.m., Eastern time, <b>or</b></li> <li>• By creating a <b>MyHumana</b> account and completing and submitting the HRA online (available via desktop only)</li> </ul> <p><b>Your rewards will be available in your Go365 account:</b></p> <ul style="list-style-type: none"> <li>• Once we receive your completed HRA <b>and</b></li> <li>• Verify you sent it within the first 90 days of enrollment</li> </ul>
<b>Breast Cancer Screening</b>	Female members 40 and older	<b>\$50 in rewards</b> (1 per year)	<ul style="list-style-type: none"> <li>• Get a mammogram</li> </ul> <p>Your rewards will be available in your Go365 account once we learn that you received a mammogram</p>
<b>Cervical Cancer Screening</b>	Female members 21 and older	<b>\$50 in rewards</b> (1 per year)	<ul style="list-style-type: none"> <li>• Have a cervical cancer screening (pap smear)</li> </ul> <p>Your rewards will be available in your Go365 account once we learn that you received a cervical cancer screening</p>
<b>Colorectal Cancer Screening</b>	Members 45 and older	<b>\$25 in rewards</b> (1 per year)	<ul style="list-style-type: none"> <li>• Obtain a colorectal cancer screening as recommended by your primary care physician (PCP)</li> </ul> <p>Your rewards will be available in your Go365 account once we learn that you received a colorectal cancer screening</p>

Go365 healthy activity	Age	Reward	Earning the reward Download the Go365 for Humana Healthy Horizons app, create an account, and:
COVID-19 Vaccine	Eligible ages per Centers for Disease Control and Prevention (CDC)	<b>\$25 in rewards</b> (1 per year)	<ul style="list-style-type: none"> <li>• Upload a picture/file to Go365 of your completed vaccination card within 90 days of completing the vaccination</li> </ul> <p>Members who are vaccinated prior to enrollment in Humana Healthy Horizons in Ohio still can earn this reward. Upload proof of vaccination to your Go365 for Humana Healthy Horizons account within 90 days of enrollment.</p> <p>Your rewards will be available in your Go365 account once we receive the uploaded photo of your completed vaccination card</p>
Diabetic Retinal Exam	Members with diabetes 21 and older	<b>\$25 in rewards</b> (1 per year)	<ul style="list-style-type: none"> <li>• Have a retinal eye exam</li> </ul> <p>Your rewards will be available in your Go365 account once we learn that you received a diabetic retinal exam</p>
Diabetic Screening	Members with diabetes 21 and older	<b>Up to \$50 in rewards</b> (1 per year)	<ul style="list-style-type: none"> <li>• Complete an annual screening with your PCP for HbA1c and kidney <ul style="list-style-type: none"> <li>– Earn <b>\$25 in rewards</b> for completing the HbA1c screening</li> <li>– Earn <b>\$25 in rewards</b> for completing the kidney screening</li> </ul> </li> </ul> <p>Your rewards will be available in your Go365 account once we learn that you received a diabetic screening</p>
Flu Vaccine	Members 13 and older	<b>\$25 in rewards</b> (1 per year)	<ul style="list-style-type: none"> <li>• Receive a yearly flu vaccine</li> <li>• Upload a photo of documentation you receive after getting the flu vaccine (if you get the flu vaccine from someone other than a physician or at a pharmacy)</li> </ul> <p>Your rewards will be available in your Go365 account once we learn that you received a flu vaccine</p>
Postpartum Visit	Postpartum female members	<b>\$50 in rewards</b> (1 per pregnancy)	<ul style="list-style-type: none"> <li>• Receive 1 postpartum visit within 7 and 84 days after delivery</li> </ul> <p><b>Your rewards will be available in your Go365 account:</b></p> <ul style="list-style-type: none"> <li>• Once we learn that you had a postpartum visit, <b>and</b></li> <li>• Verify that it took place within 7 and 84 days after delivery</li> </ul>

Go365 healthy activity	Age	Reward	Earning the reward Download the Go365 for Humana Healthy Horizons app, create an account, and:
<b>Prenatal Visit</b>	Pregnant female members	<b>Up to \$105 in rewards</b> (per pregnancy)	<ul style="list-style-type: none"> <li>• Receive <b>\$15 in rewards</b> per prenatal visit you have during pregnancy, up to 7 prenatal visits total</li> </ul> <p><b>Your rewards will be available in your Go365 account:</b></p> <ul style="list-style-type: none"> <li>• After learning of each prenatal visit</li> </ul>
<b>Tobacco Cessation</b>	Members who are 12 and older	<b>Up to \$50 in rewards</b> (1 per year)	<ul style="list-style-type: none"> <li>• Complete two calls within 45 days of enrollment in the tobacco-cessation program (qualifies you for <b>\$25 in rewards</b>)</li> <li>• Complete the full program (a total of up to 8 calls) within 12 months of the first call (qualifies you for <b>\$25 in rewards</b>)</li> </ul> <p>Members who are 18 and older are eligible for nicotine replacement therapy upon request.</p> <p>Your rewards will be available in your Go365 account once we verify you completed the required number of calls</p> <p>To enroll, call <b>800-955-0783 (TTY: 711)</b> (When prompted, select option 1)</p>
<b>Weight Management</b>	Members who are 12 and older	<b>Up to \$30 in rewards</b> (1 per year)	<p>This program will have two opportunities where members can earn rewards.</p> <ul style="list-style-type: none"> <li>• Enroll in the weight management program and complete an initial well-being checkup with your PCP (qualifies you for <b>\$10 in rewards</b>)</li> <li>• Complete the full program (a total of up to 6 calls) within 12 months of the first coaching session (qualifies you for <b>\$20 in rewards</b>)</li> </ul> <p>Your rewards will be available in your Go365 account once we verify you completed the required number of calls</p> <p>To enroll, call <b>800-955-0783 (TTY: 711)</b> (When prompted, select option 2)</p>

Go365 healthy activity	Age	Reward	Earning the reward Download the Go365 for Humana Healthy Horizons app, create an account, and:
Well-Child Visits	Members between 0 and 15 months old	Up to \$90 in rewards	<ul style="list-style-type: none"> <li>Complete 6 well-child visits (\$15 in rewards per well-child visit)</li> </ul> Your rewards will be available in your Go365 account once we learn that you had a well-child visit
	Members between 16 and 30 months old	Up to \$30 in rewards	<ul style="list-style-type: none"> <li>Complete 2 well-child visits (\$15 in rewards per well-child visit)</li> </ul> Your rewards will be available in your Go365 account once we learn that you had a well-child visit
	Members between the ages of 3 and 20	Up to \$50 in rewards	<ul style="list-style-type: none"> <li>Complete 1 well-child visit</li> </ul> Your rewards will be available in your Go365 account once we learn that you had a well-child visit
Wellness Visit	21+	\$25 in rewards (1 per year)	<ul style="list-style-type: none"> <li>Complete 1 annual wellness visit with PCP</li> </ul> Your rewards will be available in your Go365 account once we learn that you had a wellness visit



## How to Redeem your Rewards

After completing one or more healthy activities (as listed above):

- Your available rewards will display in your Go365 account
- You can access the Go365 in-app mall through the app
- You can redeem your rewards for e-gift cards

Rewards have no cash value. The monetary amounts listed above are reward values, not actual dollars. For some rewards, your doctor has to tell us that you completed the healthy activity. Once we get this information from your doctor, you will see in the app the option to redeem the reward. For any reward you qualify to earn during the plan year (December 1, 2022 - November 30, 2023), we must get confirmation from your doctor by no later than February 15, 2024.

Go365 for Humana Healthy Horizons is available to all members who meet the requirements of the program. Rewards are not used to direct the members to select a certain provider. Rewards may take 90 to 180 days or greater to receive. Rewards are non-transferrable to other Managed Care Plans or other programs. Members will lose access to the Go365 app to the earned incentives and rewards if they voluntarily disenroll from the Humana Healthy Horizons or lose Medicaid eligibility for more than one-hundred eighty (180) days. At the end of the plan year (December 31), members with continuous enrollment will have 90 days to redeem their rewards.

Gift cards cannot be used to purchase prescription drugs or medical services that are covered by Medicare, Medicaid, or other federal healthcare programs; alcohol; tobacco; e-cigarettes; or firearms. Gift cards must not be converted to cash. Rewards may be limited to once per year, per activity. Call Go365 at **888-225-4669 (TTY: 711)**, or visit **[Humana.com/OhioGo365](https://www.humana.com/OhioGo365)**, to learn more about the program.



## Physician Finder (Find a Doctor)

To use our online Find a Doctor service, go to **[Humana.com/FindADoctor](https://www.humana.com/FindADoctor)**. You can look for and find doctors and other healthcare facilities by location and specialty.

## MyHumana

Use your Humana plan on the go with a **MyHumana** account. With a **MyHumana** account, you can:

- Review health plan activity, including status, summary, and detailed information of services you use
- Access your Humana member ID card with a single tap
- Find and change your primary care provider
- Find an in-network provider by specialty or location (may require location sharing enabled on your mobile device)

To register for a **MyHumana** account, go to **[Humana.com/Registration](https://www.humana.com/Registration)**

To sign in to your **MyHumana** account, go to **[Humana.com/Login](https://www.humana.com/Login)**

Download the **MyHumana** app at no cost from iTunes/Apple Shop or Google Play on a mobile device

## Call If You Need Us

If you have questions or need help reading or understanding this document, call us at **877-856-5702 (TTY: 711)**. We are available Monday through Friday, from 7 a.m. to 8 p.m., Eastern time. We can help you at no cost to you. We can explain the document in English or in your preferred language. We can also help you if you need help seeing or hearing. Please refer to your Member Handbook regarding your rights.

## Important

### At Humana, it is important you are treated fairly.

Humana Inc. and its subsidiaries do not discriminate or exclude people because of their race, color, religion, gender, gender identity, sex, sexual orientation, age, disability, national origin, military status, veteran status, genetic information, ancestry, ethnicity, marital status, language, health status, or need for health services. Discrimination is against the law. Humana and its subsidiaries comply with applicable Federal Civil Rights laws. If you believe that you have been discriminated against by Humana or its subsidiaries, there are ways to get help.

- You may file a complaint, also known as a grievance:  
**Discrimination Grievances**, P.O. Box 14618, Lexington, KY 40512-4618.  
If you need help filing a grievance, call **877-856-5702** or if you use a **TTY**, call **711**
- You can also file a civil rights complaint with the:
  - **Ohio Department of Medicaid (ODM), Office of Civil Rights** by emailing [ODM\\_EEO\\_EmployeeRelations@medicaid.ohio.gov](mailto:ODM_EEO_EmployeeRelations@medicaid.ohio.gov), faxing **614-644-1434**, or mailing to P.O. Box 182709, Columbus, Ohio 43218-2709; or
  - **U.S. Department of Health and Human Services, Office for Civil Rights** electronically through their Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or at **U.S. Department of Health and Human Services**, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, DC 20201, **800-368-1019, 800-537-7697 (TDD)**. Complaint forms are available at <https://www.hhs.gov/ocr/office/file/index.html>.

### Auxiliary aids and services, free of charge, are available to you. **877-856-5702 (TTY: 711)**

Humana provides free auxiliary aids and services, such as qualified sign language interpreters, video remote interpretation, and written information in other formats to people with disabilities when such auxiliary aids and services are necessary to ensure an equal opportunity to participate.



Humana Healthy Horizons in Ohio is a Medicaid Product of Humana Health Plan of Ohio, Inc.

Language assistance services, free of charge, are available to you. **877-856-5702 (TTY: 711)**

**English:** Call the number above to receive free language assistance services.

**Español (Spanish):** Llame al número que se indica arriba para recibir servicios gratuitos de asistencia lingüística.

**नेपाली (Nepali):** निःशुल्क भाषासम्बन्धी सहयोग सेवाहरू प्राप्त गर्नका लागि माथिको नम्बरमा फोन गर्नुहोस्।

**العربية (Arabic):** اتصل برقم الهاتف أعلاه للحصول على خدمات المساعدة اللغوية المجانية.

**Soomaali (Somali):** Wac lambarka kore si aad u hesho adeegyada caawimaada luuqada oo bilaash ah.

**Русский (Russian):** Позвоните по вышеуказанному номеру, чтобы получить бесплатную языковую поддержку.

**Français (French):** Appelez le numéro ci-dessus pour recevoir des services gratuits d'assistance linguistique.

**Tiếng Việt (Vietnamese):** Gọi số điện thoại ở trên để nhận các dịch vụ hỗ trợ ngôn ngữ miễn phí.

**Kiswahili (Swahili):** Piga simu kwa nambari iliyo hapo juu ili upate huduma za usaidizi wa lugha bila malipo.

**Українська (Ukrainian):** Зателефонуйте за вказаним вище номером для отримання безкоштовної мовної підтримки.

**繁體中文 (Traditional Chinese):** 您可以撥打上面的電話號碼以獲得免費的語言協助服務。

**Ikinyarwanda (Kinyarwanda):** Hamagara numero iri haruguru uhabwe serivisi z'ubufasha bw'ururimi ku buntu.

**简体中文 (Simplified Chinese):** 您可以拨打上面的电话号码以获得免费的语言协助服务。

**دري (Dari):** برای دریافت خدمات رایگان کمک زبانی با شماره بالا تماس بگیرید.

**پشتو (Pashto):** د وړيا ژبې ملاتړ ترلاسه کولو لپاره پورته شميرې ته زنگ ووهئ.

**አማርኛ (Amharic):** ነፃ የቋንቋ ድጋፍ አገልግሎቶችን ለማግኘት ከላይ ባለው ስልክ ቁጥር ይደውሉ።

**ગુજરાતી (Gujarati):** મફત ભાષા સહાય સેવાઓ મેળવવા માટે ઉપર આપેલા નંબર પર કોલ કરો.