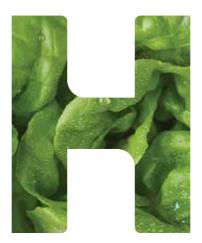




A guided tour and introduction to Medicare







Human care means going farther, digging deeper and working harder. All for you.

Good care is a warm voice on the phone, a clear answer and help navigating a network. But human care means going beyond what's good in order to find what's best for you.

Finding new ways to be there for you before you even realize you need them—that's human care. And that's what we're excited to share with you.





If it's good for your health, then that's just how it should be done

We'll start right in with:

- Medicare eligibility
- What Medicare is
- Your Medicare options
- Important dates
- Costs and more

Are you eligible for Medicare?

If you are within three months of turning 65, you are eligible for the Medicare Initial Enrollment Period (IEP) and can enroll in a Medicare plan.

It's time to explore Medicare.





Make your move to Medicare

- At age 65 you may be eligible for Medicare Parts A and B, even if you still work
- You may be eligible for premium-free Medicare Part A through your spouse, although you still must qualify by age or disability
- You may also be eligible for Medicare Part
 A and Part B if you're under 65 and have a
 disability, or end-stage renal disease (ESRD)



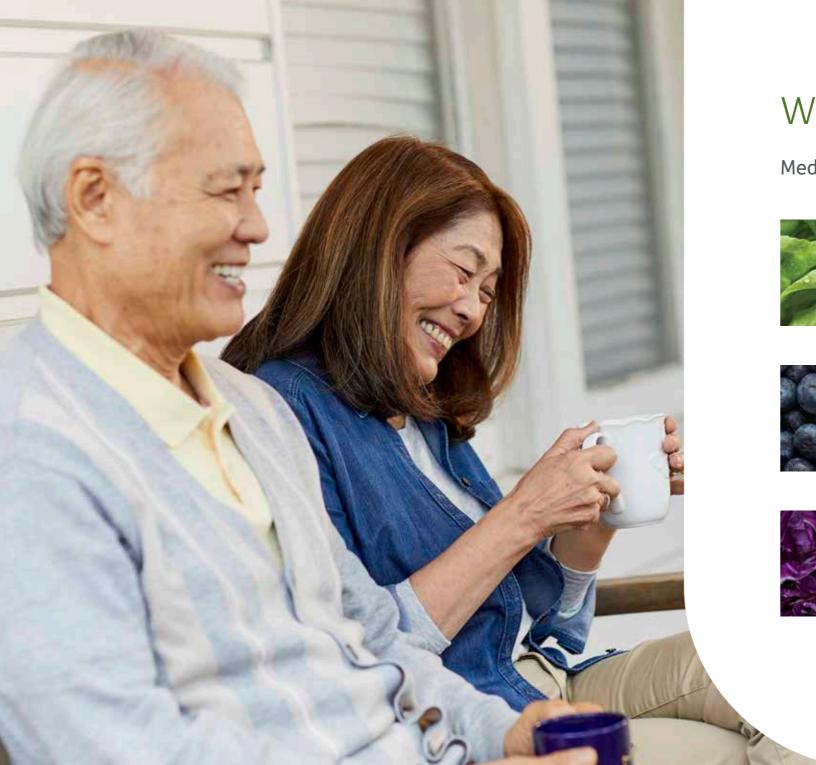


What is Medicare?

Medicare is the U.S. government's largest health insurance program, serving more than 62 million people.¹

It's run by the Centers for Medicare & Medicaid Services (CMS), part of the U.S. Department of Health and Human Services.

¹Centers for Medicare & Medicaid Services. Retrieved from www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Dashboard/Medicare-Enrollment/Enrollment%20Dashboard. html. Accessed April 20, 2020.



What is Medicare?

Medicare is divided into parts:



ORIGINAL MEDICARE Medicare Parts A and B



MEDICARE ADVANTAGE Medicare Part C



PRESCRIPTION DRUG COVERAGE Medicare Part D

ORIGINAL MEDICARE

Medicare Parts A and B

Offered by the federal government, Original Medicare covers much, but not all, of your care and generally has a deductible and coinsurance.

Part A helps cover

- Hospitalization
- Skilled nursing facilities
- Hospice care
- Home health

Part B helps cover

- Doctor appointments
- Outpatient care
- Preventive services

- Occupational/ physical therapies
- Home health

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Medicare Part C

Medicare Advantage—Part C—may include extra benefits, including prescription coverage.

Part C helps cover

- Everything that Medicare Part A and Part B cover
- Some plans include additional services, like dental, vision and wellness programs



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When choosing Medicare Advantage instead of staying with Original Medicare

- You must have both Medicare Parts A and B coverage
- You usually have to pay an additional monthly plan premium
- You remain a Medicare member as long as you keep paying your Part B premium, if applicable
- Along with a Medicare Advantage plan, you may have an opportunity to purchase optional supplemental benefits, like dental and vision coverage, for an additional premium



Types of Medicare Advantage plans



Health maintenance organization

In most cases, a primary care provider arranges your healthcare within the plan's network.



Preferred provider organization

Choose any provider that accepts Medicare, but you may pay less for in-network services.



Private-fee-for-service*

Generally, there is more freedom to choose providers, but a network arrangement may still apply.

Special Needs Plans (SNPs)

SNPs are tailored for those with a chronic condition, such as diabetes or a heart condition, or who are eligible for Medicare and also receive Medicaid assistance from the state. Institutional SNPs are available for those in long-term care or skilled nursing facilities.

*Private fee-for-service plans are not Medicare Supplement insurance plans. Providers that do not contract with a PFFS plan are not required to see plan members except in emergencies.



Medicare Advantage: More benefits

Medicare Advantage plans may include benefits and services beyond what Original Medicare offers. For example, some Medicare Advantage plans may include:



Fitness and rewards program



Access to mail-delivery pharmacy



Vision coverage



An over-the-counter allowance



Dental coverage

Medicare Part D

These are offered by private companies.

Part D helps cover

• Prescription drugs



Medicare Part D

Prescription drug coverage

- Part D coverage is available only from private companies contracted by the federal government
- Part D plans are required by federal law to offer the basic benefits offered by Medicare
- Each Part D plan has its own list of covered drugs; choose the one that includes medicines you take regularly

Medicare Part D

You usually choose Part D in one of two ways:

- A stand-alone insurance plan you buy to help cover medicines (PDP)*
- As part of a Medicare Advantage plan that includes Part D (MAPD)

If you enroll in a Medicare Advantage plan with prescription drug coverage, you don't need to sign up for a stand-alone prescription drug plan.

*If you decide not to join a Medicare prescription drug plan or a Medicare Advantage plan with prescription drug coverage when you're first eligible, and you don't have other creditable coverage or get Extra Help, you'll likely pay a late enrollment penalty if you join later.

Medicare Part D

The coverage gap

Medicare Part D has a coverage gap, also known as the "donut hole," when you may have to pay a higher percentage of your prescription drug costs.

You move into and out of the coverage gap when your total costs reach a specified dollar amount. These amounts are adjusted annually by CMS.

Your Medicare options

Most people get their Medicare coverage in one of four broad ways:

Option one: Original Medicare, Part A and Part B

ORIGINAL MEDICARE

Part A helps cover hospital and other inpatient costs. Part B helps cover doctor and other outpatient costs. Together, they are Original Medicare, available from the federal government.

Option two: Original Medicare—plus

ORIGINAL MEDICARE + MEDICARE SUPPLEMENT + PRESCRIPTION DRUG COVERAGE

Original Medicare, plus a Medicare Supplement insurance plan, plus a prescription drug plan



Your Medicare options

Most people get their Medicare coverage in one of four broad ways:

Option three: Medicare Advantage (MA) plan

MEDICARE ADVANTAGE

=

ORIGINAL MEDICARE

+

PRESCRIPTION DRUG COVERAGE

- Includes Medicare Part A and Part B (requires maintaining Part B premium along with the MA premium)
- Frequently includes extra benefits and services
- May include prescription drug coverage (Part D)
- Medicare Advantage plans are available through private companies, such as Humana

Option four: Original Medicare plus a prescription drug plan

ORIGINAL MEDICARE

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PRESCRIPTION DRUG COVERAGE

Prescription drug plans are available through private companies, such as Humana.

Special Needs Plans

Medicare SNPs generally offer benefits, more focused and specialized healthcare, and Drug Lists designed to meet specific needs.

To join a Medicare-approved SNP, you must have Medicare Parts A and B and at least one of the following:

- A chronic condition, like diabetes or a heart condition
- Medicaid assistance from the state
- Residence in certain types of institutions—such as a nursing home—or a need for home nursing care. SNPs include all Medicare Part A, Part B and Part D benefits.

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Medicare Supplement insurance plans

These plans, often called "Medigap plans," work with Original Medicare.

They are designed to help pay some of the costs Original Medicare doesn't pay, such as copayments, coinsurance and deductibles.

Each Medicare Supplement insurance plan has a unique blend of benefits. These may be attractive because they are not limited to a specific network of providers.

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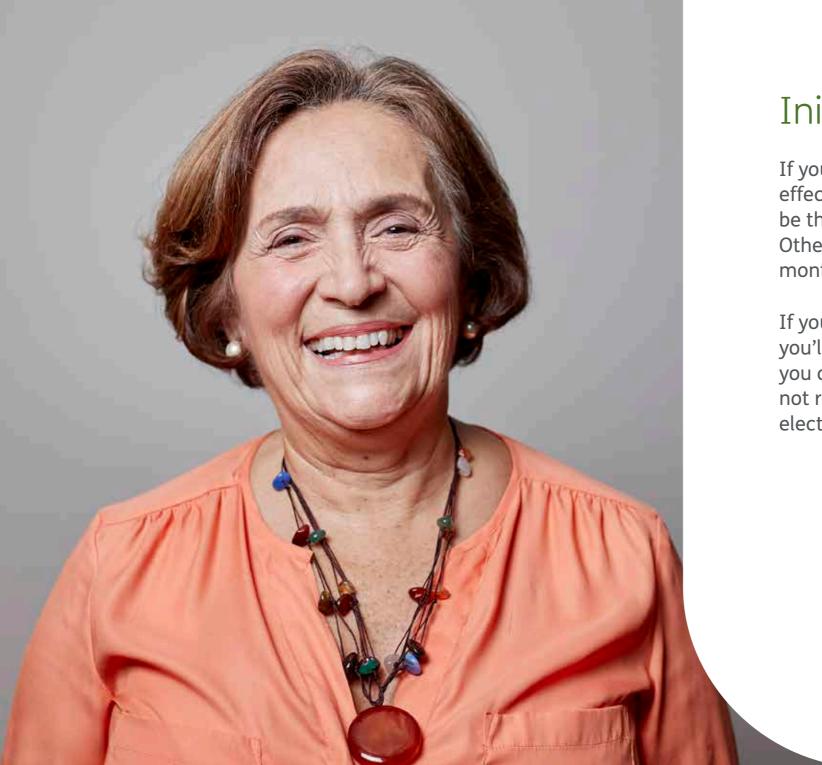




Enrolling in Medicare

If you're already a Medicare member and you're enrolling in Medicare Advantage, changing your Medicare Advantage plan or renewing it, you would typically do that during the Medicare Advantage and Prescription Drug Plan Annual Election Period (AEP), October 15–December 7.

But if you're enrolling in Medicare for the first time, you have an Initial Enrollment Period.



Initial Enrollment Period (IEP)

If you enroll in the three months before your Medicare effective date at age 65, your plan effective date will be the first day of the month that Medicare is effective. Otherwise, the plan effective date will be the first of the month of your 65th birthday and only 3 months after.

If you have Medicare before age 65 due to a disability, you'll have a second seven-month IEP at age 65 when you can change or enroll in an MAPD or PDP plan. You're not required to have used the first IEP to use the second election at age 65.



Important dates

Oct. 15 - Dec. 7

Annual Election Period (AEP) for Medicare Advantage plans and prescription drug plans for the next calendar year.

Special Enrollment Period (SEP)

Generally, outside of the AEP, you can only make changes to your plan due to special conditions, like moving out of your plan's service area, leaving an employer group plan, or having Medicare and Medicaid.

Medicare Advantage Open Enrollment Period (OEP)

- The Medicare Advantage OEP offers current MA and MAPD members a chance to change plans if they feel a more suitable option is available after January 1
- Members can choose a different Medicare Advantage plan or disenroll from their Medicare Advantage Plan
- OEP runs for three months: January 1 March 31 each year

If it's time to make your Medicare choice, consider these factors:



Cost

How much will you pay for premiums, deductibles, coinsurance and copayments?



Needs

Have you needed care in the past few years? Do you anticipate your medicine needs will increase?



Benefits

Are additional benefits included, such as prescription drug coverage?



Providers

Do your doctors and preferred healthcare facilities accept the plan?



Convenience

Are the plan's in-network providers conveniently located?





Think about your needs over time

Your healthcare history

- Do you have a chronic condition?
- Will your healthcare needs grow in the near future?

Your prescription drugs

If your prescription drug spending increases in the future, Medicare Part D may help cover the cost.

Need more coverage than Medicare Part A and Part B?

A Medicare Supplement insurance plan or Medicare Advantage plan may help cover some unexpected healthcare costs.

Helpful resources



Available at www.medicare.gov

- The "Medicare & You" handbook, published by the Centers for Medicare & Medicaid Services, released each fall
- "Choosing a Medigap Policy: A guide to health insurance for people with Medicare," a publication developed jointly by CMS and National Association of Insurance Commissioners

Available at www.shiptacenter.org

• View your State Health Insurance Program (SHIP)



To see if you qualify, contact:

- Your state Medicaid office
- The Social Security Administration

You may be able to get Extra Help to pay for your prescription drug premiums and costs.



A few words about costs and choices to help you decide what's right for you

Medicare Part D, Medicare Advantage and Medicare Supplement insurance plans have separate premiums from Original Medicare. If you want more coverage than Original Medicare provides, you can choose Medicare Advantage or a prescription drug plan or a Medicare Supplement insurance plan. Select the coverage you want for the price that works for you.

Your costs depend on the coverage you choose. Medicare Advantage costs depend on whether the plan charges a monthly premium, pays any of your monthly Part B premium and/or includes copayments, coinsurance or deductibles.

Original Medicare, Medicare Supplement and Medicare Advantage plans cover certain preventive services. Medicare Advantage plans are required to cover everything Original Medicare does.



Medicare means important decisions These takeaways may help you make them

Fitting budgets

Money matters, and you have some control over what you'll spend with the coverage choices you make. Will you add an optional supplemental benefit to cover vision or dental care?

Offering additional benefits

Not everything is about paying claims. There are other things to consider. Here are a few:

- Fitness and rewards program
- Over-the-counter allowance
- Neighborhood centers, with classes and information in many areas

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Medicare means important decisions These takeaways may help you make them

Meeting needs

As your understanding of Medicare grows, you see how different plans match up with your life, which ones provide the coverage you're looking for and which is the best for you.

Original Medicare, Part A and Part B, from the federal government, may be enough. Or maybe you want more than they offer. Medicare Advantage plans, from such companies as Humana, have all the benefits Original Medicare does—and, usually, more.

You have plenty of options. For example, Medicare Advantage (MA)—or Medicare Advantage with a Prescription Drug plan (MAPD). Maybe you'd like a plan with a network of providers that helps you manage costs, or one that lets you choose any doctor you want.



Thank you for your time and attention today.

We hope this helps you as you consider your Medicare coverage choices. We've covered a lot of information today and will be glad to answer any questions you have. We're committed to providing you with everything you need to live your very best.





Important! _____

At Humana, it is important you are treated fairly.

Humana Inc. and its subsidiaries comply with applicable Federal Civil Rights laws and do not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, gender, gender identity, ancestry, marital status or religion. 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 the number on your ID card or if you use a **TTY**, call **711**.
- You can also file a civil rights complaint with the **U.S. Department of Health and Human Services**, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at **https://ocrportal.hhs.gov/ocr/portal/lobby.jsf**, or by mail or phone at **U.S. Department of Health and Human Services**, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, DC 20201, **1-800-368-1019**, **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. Call the number on your ID card (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.



Language assistance services, free of charge, are available to you. Call the number on your ID card (TTY: 711)

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call the number on your ID card (TTY: 711)... ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al número que figura en su tarjeta de identificación (TTY: 711)... 注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電會員卡上的電話號碼 (TTY: 711)... CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số điện thoại ghi trên thẻ ID của quý vị (TTY: 711)... 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. ID 카드에 적혀 있는 번호로 전화해 주십시오 (TTY: 711)... PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tawagan ang numero na nasa iyong ID card (TTY: 711)... ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Наберите номер, указанный на вашей карточке-удостоверении (телетайл: 711)... АТАNSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele nimewo ki sou kat idantite manm ou (TTY: 711)... АТТЕNTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le numéro figurant sur votre carte de membre (ATS: 711)... UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Proszę zadzwonić pod numer podany na karcie identyfikacyjnej (TTY: 711)... ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para o número presente em seu cartão de identificação (TTY: 711)... ATENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero che appare sulla tessera identificativa (TTY: 711)... ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Wählen Sie die Nummer, die sich auf Ihrer Versicherungskarte befindet (TTY: 711)... 注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。お手持ちの ID カードに記載されている電話を見るといて、TTY: 711)...

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با شماره تلفن روی کارت شناسایی تان تماس بگیرید (**TTY: 711**)...

Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hóló, námboo ninaaltsoos yézhí, bee néé ho'dólzin bikáá'ígíí bee hólne' (TTY: 711)...

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم الهاتف الموجود على بطاقة الهوية الخاصة بك (TTY: 711).

