

Market Highlights

- Healthy Options allowance available on Dual Eligible plan H5216-388-000 with a monthly allowance of \$175 with rollover. The allowance can be used for items such as rent, utilities, groceries and OTC.
- Non-Cost Share Protected DSNP Plans available in most counties with \$100 monthly Healthy Options Allowance with rollover.
- Humana USAA Honor MA-Only plan with Comprehensive Dental and a \$100 Part B giveback for members that get their drug coverage elsewhere, such as Veterans.
- MAPD PPO available with a Part B give back up to \$102.
- Select plans with \$0 Tier 1 and lower Tier 2 copay through the Rx gap coverage.
- Centerwell Pharmacy provides value, experience, safety, accuracy, convenience and service to your clients.
- Go365 by Humana is a wellness program that rewards your clients up to \$345 per plan year in redeemable gift cards from popular retailers for competing healthy activities. Most Humana Medicare Advantage plans include Go365.

Network Highlights

- Humana PPO Plans have National Network Reciprocity, allowing members to travel with the comfort of knowing they can use any Humana ChoiceCare PPO Network Provider across the country for in-network services.
- Multiple plans with similar In and Out of network copays.
- For a complete list of in-network providers, visit www.Humana.com/PhysicianFinder.



Market Service Area

Alcona, Alger, Alpena, Antrim, Baraga, Benzie, Charlevoix, Cheboygan, Chippewa, Crawford, Delta, Dickinson, Emmet, Gogebic, Grand Traverse, Houghton, Iosco, Iron, Kalkaska, Keweenaw, Leelanau, Luce, Mackinac, Manistee, Marquette, Menominee, Missaukee, Montmorency, Ogemaw, Ontonagon, Oscoda, Otsego, Presque Isle, Roscommon, Schoolcraft, Wexford

MA / MAPD

		Humana Honor Plan 	
Top Consumer Priority for their Medicare Plan	Gives me freedom and flexibility	Works with my VA coverage	Gives me freedom and flexibility
Plan Name	Humana Full Access (PPO)	Humana USAA Honor Giveback with Rx (PPO)	Humana Full Access Giveback (PPO)
Plan Number	H5216-384-000	H5216-305-000	H5216-306-000
Premium	\$0.00	\$0.00	\$0.00
Deductible	\$110 Combined In and Out-of-Network	N/A	\$500 Combined In and Out-of-Network
Part B Deductible Info	N/A	N/A	N/A
Part B Giveback	\$2	\$66	\$102
PCP	\$0 copayment	\$0 copayment	\$0 copayment
Specialist	\$40 copayment	\$50 copayment	\$40 copayment
Referrals Required	No	No	No
Inpatient Hospital	\$440 per day, Days(1-6);	\$450 per day, Days(1-5);	\$400 per day, Days(1-5);
Max Out-of-Pocket	\$5900 IN	\$8850 IN	\$9350 IN
Rx Deductible	\$250 Deductible for Tiers 3,4,5	\$350 Deductible for Tiers 3,4,5	No Deductible
Rx - Retail 30-day Supply	\$0/\$5/\$47/46%/30%	\$0/\$10/\$47/45%/28%	\$0/\$0/\$34/45%/33%
Dental	\$2000 annually; \$0 copayment covers: exams, x-rays, cleanings, fillings, recementation, scaling and root planing, scaling for moderate inflammation, root canals. OON coverage available.	\$1000 annually; \$0 copayment covers: exams, x-rays, cleanings, fillings, crowns, recementation, scaling and root planing, scaling for moderate inflammation, root canals. OON coverage available.	\$2000 annually; \$0 copayment covers: exams, x-rays, cleanings, fillings, scaling and root planing, scaling for moderate inflammation. OON coverage available.
Key Extra Benefits	Dental, Vision, Hearing, Fitness, OTC Debit Card \$60/Quarter for select health and wellness products at participating retailers	Dental, Vision, Hearing, Fitness	Dental, Vision, Hearing, Fitness, OTC Debit Card \$50/Quarter for select health and wellness products at participating retailers

Market Service Area	Alpena, Antrim, Benzie, Charlevoix, Cheboygan, Chippewa, Crawford, Dickinson, Emmet, Gogebic, Grand Traverse, Kalkaska, Leelanau, Marquette, Menominee, Missaukee, Montmorency, Ogemaw, Oscoda, Otsego, Presque Isle, Roscommon, Wexford	Northern and UP Michigan Market-wide	Alcona, Alger, Alpena, Antrim, Benzie, Charlevoix, Cheboygan, Chippewa, Crawford, Dickinson, Emmet, Gogebic, Grand Traverse, Houghton, Iron, Kalkaska, Keweenaw, Leelanau, Marquette, Menominee, Missaukee, Montmorency, Ogemaw, Oscoda, Otsego, Presque Isle, Roscommon, Wexford
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Humana Honor Plan



Top Consumer Priority for their Medicare Plan	Works with my VA coverage
Plan Name	Humana USAA Honor Giveback (PPO)
Plan Number	H5216-190-000
Premium	\$0.00
Deductible	N/A
Part B Deductible Info	N/A
Part B Giveback	\$100
PCP	\$10 copayment
Specialist	\$45 copayment
Referrals Required	No
Inpatient Hospital	\$295 per day, Days(1-7);
Max Out-of-Pocket	\$6750 IN
Rx Deductible	No Deductible
Rx - Retail 30-day Supply	No Coverage
Dental	\$2500 annually; \$0 copayment covers: exams, x-rays, cleanings, fillings, crowns, recementation, scaling and root planing, scaling for moderate inflammation, root canals. OON coverage available.
Key Extra Benefits	Dental, Vision, Hearing, Fitness, OTC Debit Card \$50/Quarter for select health and wellness products at participating retailers
Market Service Area	Alcona, Alger, Alpena, Antrim, Baraga, Benzie, Charlevoix, Cheboygan, Chippewa, Crawford, Delta, Dickinson, Emmet, Gogebic, Grand Traverse,

Houghton, Iosco, Iron, Kalkaska,
Leelanau, Luce, Mackinac, Manistee,
Marquette, Menominee, Missaukee,
Montmorency, Ogemaw, Ontonagon,
Oscoda, Otsego, Presque Isle,
Roscommon, Wexford

DSNP

Top Consumer Priority for their Medicare Plan	Works with my Medicaid coverage	Works with my Medicaid coverage
Plan Name	Humana Dual Select (PPO D-SNP)	HumanaChoice SNP-DE (PPO D-SNP)
Plan Number	H5216-385-000	H5216-388-000
Medicaid Levels	FBDE, QDWI, QI, QMB, QMB+, SLMB, SLMB+	FBDE, QMB+, SLMB+
Dental	\$2000 annually; \$0 copayment covers: exams, x-rays, cleanings, fillings, crowns, recementation, scaling and root planing, scaling for moderate inflammation, root canals. OON coverage available.	\$1500 annually; \$0 copayment covers: exams, x-rays, cleanings, fillings, crowns, recementation, scaling and root planing, scaling for moderate inflammation, root canals. OON coverage available.
Healthy Options Allowance	\$100 monthly allowance on a prepaid card to use for essentials you need to support your health. This allowance can be used to buy approved products from participating retail locations (like groceries, over-the-counter health and wellness items, personal care items, home supplies, etc.) or pay for approved services (monthly living expenses like rent, non-medical transportation costs like a taxi, Uber, Lyft, etc.). Allowance amount cannot be combined with other allowances which may be on the Card. Unused funds will roll over to the next month and expire at the end of the plan year.	\$175 monthly allowance on a prepaid card to use for essentials you need to support your health. This allowance can be used to buy approved products from participating retail locations (like groceries, over-the-counter health and wellness items, personal care items, home supplies, etc.) or pay for approved services (monthly living expenses like rent, non-medical transportation costs like a taxi, Uber, Lyft, etc.). Allowance amount cannot be combined with other allowances which may be on the Card. Unused funds will roll over to the next month and expire at the end of the plan year.
Vision	\$40 allowance for annual exam and \$300 allowance per year for eyewear	\$75 allowance for annual exam and \$100 allowance per year for eyewear

	or contact lenses including fittings at PLUS Provider. OON coverage available.	or contact lenses including fittings at PLUS Provider. OON coverage available.
Hearing	\$0 copay for annual exam, fitting and \$0 copayment for Advanced level hearing aid per ear every 3 years plus 80 batteries per aid.	\$0 copay for annual exam, fitting and \$0 copayment for Advanced level hearing aid per ear every 3 years plus 80 batteries per aid.
Transportation	\$0 copayment for plan approved location up to 100 one-way trip(s) per year by car, rideshare services, van, wheelchair access vehicle. This benefit is not to exceed 75 miles per trip.	N/A
Current Service Area	Alcona, Alger, Alpena, Antrim, Benzie, Charlevoix, Cheboygan, Chippewa, Crawford, Dickinson, Emmet, Gogebic, Grand Traverse, Houghton, Kalkaska, Keweenaw, Leelanau, Marquette, Menominee, Missaukee, Montmorency, Ogemaw, Ontonagon, Oscoda, Otsego, Presque Isle, Roscommon, Wexford	Northern and UP Michigan Market-wide

Prescription Drug Plans

Plan Name	Humana Basic Rx Plan (PDP)	Humana Premier Rx Plan (PDP)	Humana Value Rx Plan (PDP)
Plan Number	Coming Soon	Coming Soon	Coming Soon
Pairs Well With			
Premium			
Rx Deductible			
Preferred Retail 30-day Supply			
Standard Retail 30-day Supply			
Preferred Mail 90-day Supply			
Market Service Area			

Other Plans

Plan Name	Plan Number	Plan Category
Humana Full Access (PPO)	H5216-380-000	MA-PD
Humana Value Plus (PPO)	H5216-382-000	MA-PD
Humana Gold Choice (PFFS)	H8145-006-000	MA-PD
Humana Full Access (Regional PPO)	R0110-014-000	MA-PD
HumanaChoice (Regional PPO)	R0110-013-000	MA

Local Support

Local Support - Michigan



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