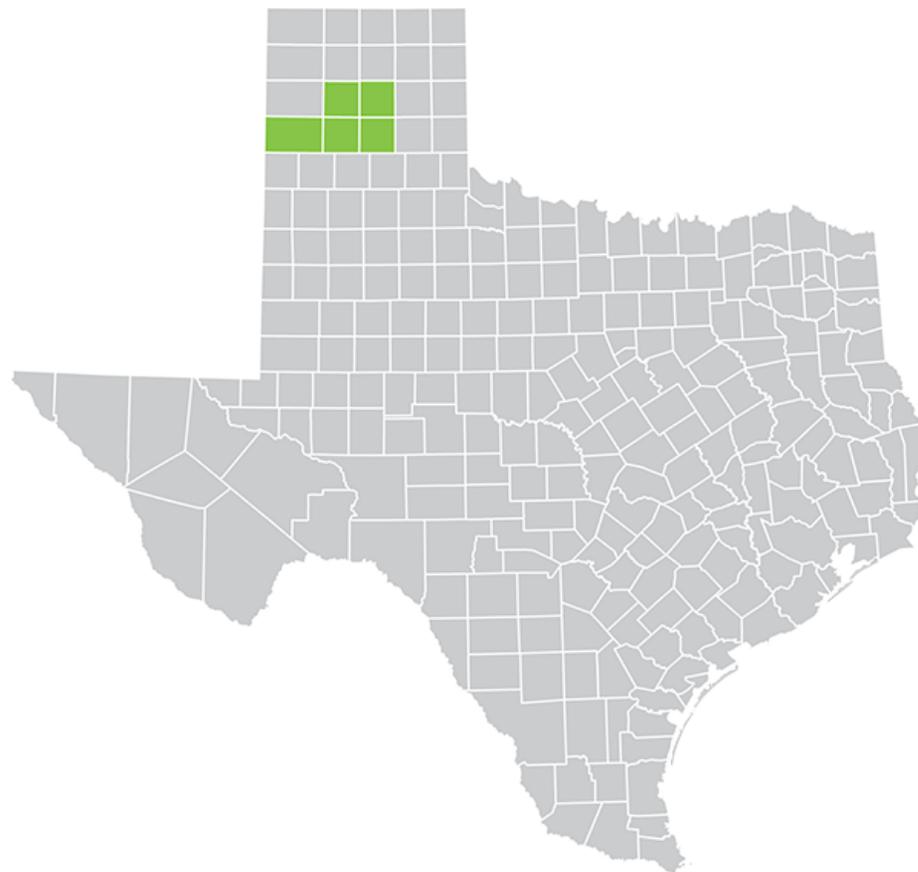


Market Highlights

- Many Plans include Dental, Vision, Hearing, and SilverSneakers Fitness Benefits.
- Plan available with Part B premium giveback.
- No referrals needed on PPO Plans.
- Centerwell Pharmacy provides value, experience, safety, accuracy, convenience and service to your clients
- \$0 copay for 90-day or 100-day supply, depending on which extended day supply is available under the plan, of tier 1 and tier 2 drugs when using mail order through CenterWell Pharmacy.
- Go365@ by Humana is a wellness program that rewards your clients for completing activities that may help them make healthy choices. Many Humana Medicare Advantage plans include Go365.
- Many Humana plans include a Well Dine benefit, which can provide packaged, precooked frozen meals right to member's doors during recovery.
- Local Market office and Support Team to help with all of your needs.

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.
- For a complete list of in-network providers, visit www.Humana.com/PhysicianFinder.
- Baptist St Anthony's Health System, Northwest Texas Healthcare System.
- Amarillo Family Physicians, BSA Physician Group, Texas Tech Health Science Center.



Market Service Area

Armstrong, Carson, Deaf Smith, Potter, Randall

MA / MAPD

Top Consumer Priority for their Medicare Plan	Just the right amount of coverage for me	It's affordable and I can get the support I need	
Plan Name	HumanaChoice Giveback (PPO)	HumanaChoice (PPO)	HumanaChoice (PPO)
Plan Number	H5216-358-000	H5216-360-000	H0473-004-000
Premium	\$0.00	\$0.00	\$0.00
Deductible	\$450 Combined In and Out-of-Network	N/A	\$230 Combined In and Out-of-Network
Part B Deductible Info	N/A	N/A	N/A
Part B Giveback	\$85	\$2	\$3
PCP	\$0 copayment	\$0 copayment	\$0 copayment
Specialist	\$55 copayment	\$30 copayment	\$45 copayment
Referrals Required	No	No	No
Inpatient Hospital	\$310 per day, Days(1-7);	\$310 per day, Days(1-6);	\$345 per day, Days(1-6);
Max Out-of-Pocket	\$8300 IN	\$5750 IN	\$8800 IN
Rx Deductible	\$590 Deductible for Tiers 3,4,5	\$250 Deductible for Tiers 3,4,5	\$350 Deductible for Tiers 3,4,5
Rx - Retail 30-day Supply	\$0/\$9/\$47/42%/25%	\$0/\$9/\$45/36%/30%	\$0/\$9/\$47/40%/28%
Dental	\$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.	\$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.	\$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.
Key Extra Benefits	Dental, Vision, Hearing, Fitness	Dental, Vision, Hearing, Fitness, OTC \$50/Quarter for select health and wellness products	Dental, Vision, Hearing, Fitness
Market Service Area	Potter, Randall	Armstrong, Carson	Potter, Randall



Top Consumer Priority for their Medicare Plan	Gives me the most benefits and the best value		Works with my VA coverage
Plan Name	HumanaChoice (PPO)	HumanaChoice (Regional PPO)	Humana USAA Honor Giveback (PPO)
Plan Number	H5216-043-001	R4182-004-000	H5216-348-000
Premium	\$11.00	\$83.00	\$0.00
Deductible	N/A	N/A	N/A
Part B Deductible Info	N/A	N/A	N/A
Part B Giveback	N/A	N/A	\$130
PCP	\$0 copayment	\$20 copayment	\$0 copayment
Specialist	\$40 copayment	\$50 copayment	\$45 copayment
Referrals Required	No	No	No
Inpatient Hospital	\$345 per day, Days(1-6);	\$380 per day, Days(1-6);	\$345 per day, Days(1-6);
Max Out-of-Pocket	\$7700 IN	\$7400 IN	\$7900 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/\$9/\$47/43%/30%	\$6/\$13/\$47/48%/28%	No Coverage
Dental	\$0 copayment covers: exams, x-rays, cleanings. OON coverage available.	\$0 copayment covers: exams, x-rays, cleanings. OON coverage available.	\$1000 annually; \$0 copayment covers: exams, x-rays, cleanings; \$25 copayment for fillings. OON coverage available.
Key Extra Benefits	Dental, Vision, Hearing, Fitness	Dental, Vision, Hearing	Dental, Vision, Hearing, Fitness
Market Service Area	Amarillo Market-wide	Amarillo Market-wide	Amarillo Market-wide

Humana Honor Plan



Top Consumer Priority for their Medicare Plan	Works with my VA coverage		
Plan Name	Humana USAA Honor Giveback (PPO)	HumanaChoice (Regional PPO)	Humana Gold Choice (PFFS)
Plan Number	H5216-128-000	R4182-001-000	H8145-126-000
Premium	\$0.00	\$0.00	\$0.00
Deductible	N/A	N/A	N/A
Part B Deductible Info	N/A	N/A	N/A
Part B Giveback	\$50	N/A	N/A
PCP	\$5 copayment	\$5 copayment	\$5 copayment
Specialist	\$40 copayment	\$40 copayment	\$40 copayment
Referrals Required	No	No	No
Inpatient Hospital	\$315 per day, Days(1-6);	\$345 per day, Days(1-5);	\$360 per day, Days(1-5);
Max Out-of-Pocket	\$6750 IN	\$6750 IN	\$6700 IN/OON
Rx Deductible	No Deductible	No Deductible	No Deductible
Rx - Retail 30-day Supply	No Coverage	No Coverage	No Coverage
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.	\$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.	\$3000 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	Dental, Vision, Hearing, Fitness, OTC \$45/Quarter for select health and wellness products	Dental, Vision, Hearing, OTC \$75/Quarter for select health and wellness products
Market Service Area	Amarillo Market-wide	Amarillo Market-wide	Potter, Randall

Prescription Drug Plans

Plan Name	Humana Value Rx Plan (PDP)	Humana Premier Rx Plan (PDP)	Humana Basic 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
HumanaChoice (PPO)	H5216-042-000	MA-PD
Humana Gold Choice (PFFS)	H8145-084-000	MA-PD
HumanaChoice (Regional PPO)	R4182-003-000	MA-PD

Local Support

Local Support - Texas



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