



Dear Member,

Here are two documents with important information for you.

1. Please start by reading the **Annual Notice of Changes for 2012**. It gives you a summary of changes to your benefits and costs for plan year 7/1/2012 - 6/30/2013. These changes will take effect at the start of your plan year.
  - Please take a moment *very soon* to look through this summary and see how the changes might affect you.
  - If you decide to stay with Humana Medicare Employer PPO for the plan year - you do not have to tell us or fill out any paperwork. You will automatically remain enrolled as a member of Humana Medicare Employer PPO.
2. We're including a copy of the **Evidence of Coverage**. It's the legal, detailed description of your benefits costs for the plan's contract year if you stay enrolled as a member of Humana Medicare Employer PPO. It also explains your rights and rules you need to follow when using your coverage for medical care. Please look through this document so you know what's in it, then keep it handy for reference.

If you have questions, we're here to help. Please call our Customer Care Team at 1-800-783-4599 (TTY only, call 711). You can call seven days a week from 8 a.m. to 8 p.m. Calls to these numbers are free. You may also go to our Plan Website at [Humana.com](http://Humana.com).

We value your membership and hope to continue to serve you next year.

### **Humana Medicare Employer PPO Annual Notice of Changes for 2012**

This booklet tells you how your benefits and costs as a member of Humana Medicare Employer PPO will change next year from your current benefits. The changes take effect on the first day of your coverage year.

To decide what's best for you, compare this information we're sending with the benefits and costs of other Medicare Advantage plans in your area, as well as the benefits and costs of Original Medicare.

**Humana Medicare Employer PPO Customer Care Team:**

For help or information, please call the Customer Care Team (1-800-783-4599) or go to our plan website at **Humana.com**. Calls to these numbers are free.

Hours of Operation: 8 a.m. to 8 p.m., Monday - Friday.

Your call may be handled by our automated phone system on Saturdays, Sundays, and some Public Holidays. When leaving a message, simply select the reason for your call from the automated list and a knowledgeable representative will return your call by the end of the next working day.

This Plan is offered by Humana Insurance Company / Humana Health Insurance Company of Florida, Inc. / Humana Insurance Company of New York / Humana Insurance of Puerto Rico, Inc. / Humana Medicare Employer PPO, referred throughout the Annual Notice of Change (ANOC) and Evidence of Coverage (EOC) as "we", "us" or "our." Humana is referred to as "Plan" or "our Plan." Our organization contracts with the Federal government.

Our plan is a health plan with a Medicare contract.

This information is available in a different format, including Spanish, large print, and audio tapes. Please call the Customer Care Team (1-800-783-4599) if you need plan information in another format or language.

Esta informacion puede estar disponible en otro formato, incluyendo en ingles, en letra grande o en cintas de audio. Si necesita informacion del plan en otro idioma o en otro formato, llame al Servicio al Cliente al numero que aparece anteriormente.

**If you remain enrolled in Humana Medicare Employer PPO for 2012, there will be some changes to your benefits and what you pay.**

You are currently enrolled as a member of Humana Medicare Employer PPO. This plan is a Medicare Advantage PPO. (PPO stands for Preferred Provider Organization.) Like all Medicare Advantage plans, this Medicare PPO is approved by Medicare and run by a private company. We are pleased to be providing your Medicare health care coverage including your prescription drug coverage. This notice describes changes in benefits from Humana Medicare Employer PPO to Humana Medicare Employer PPO next year.

We're sending you this *Annual Notice of Changes* to tell you how your benefits and costs as a member of Humana Medicare Employer PPO will change next year from your current benefits. The changes take effect on the first day of your coverage year. Medicare has approved these changes.

**What should you do?**

We want you to know what's ahead for the plan year, so **please read this document very soon to see how the changes in benefits and costs will affect you if you stay enrolled in Humana Medicare Employer PPO for 2012.**

We hope to keep you as a member of Humana Medicare Employer PPO. But if you want to make a change for 2012, see "*When can you change*" in Section 6 for time periods when you can make a change.

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**Section 1. Important things to know**

**This *Annual Notice of Changes* is only a summary (see your *Evidence of Coverage* for the details)**

This *Annual Notice of Changes* gives you a summary of the changes in your benefits and what you will pay for these services the plan's contract year.

- To get the details, you can look in the plan's contract year *Evidence of Coverage* for Humana Medicare Employer PPO. The *Evidence of Coverage* is the legal, detailed description of your benefits and costs for the plan's contract year. It explains your rights and the rules you need to follow to get your covered services and prescription drugs. (We have included a copy of the *Evidence of Coverage* in the same booklet with this *Annual Notice of Changes*. If you do not have this copy, call the Customer Care Team.)
- If you have questions or need more information, you can always call the Customer Care Team (1-800-783-4599) Hours are 8 a.m. to 8 p.m., seven days a week and calls to these numbers are free.

**Section 2. Changes to your monthly premium**

You are receiving a subsidy from your current or former employer or union to pay for some or all of your plan's premium. Please contact your employer or union's group benefit plan administrator for information about your plan premium (See Section 1 of the EOC for more information).

**Section 3. Medical services: Changes to your benefits and what you pay**

**Changes to your benefits**

As shown below, Humana Medicare Employer PPO is adding a new benefit or ending a benefit or changing our covered benefits for next year. For details, see Chapters 3 and 4 in your *Evidence of Coverage*.

	<b>7/1/2011 - 6/30/2012 (last year)</b>	<b>7/1/2012 - 6/30-2013 (this year)</b>
<b>Fitness Program</b>		
<b>Silver &amp; Fit</b>	Covered in Arizona, Nevada, and Pennsylvania	Covered in Nevada, and Pennsylvania
<b>SilverSneakers</b>	Covered in all states except Arizona, Nevada, and Pennsylvania	Covered in all states except Nevada and Pennsylvania

**Changes to what you pay**

The chart below summarizes changes to what you will pay as your share of the cost of covered medical services. For details, see Chapter 4, *Medical benefits chart (what is covered and what you pay)*, in your *Evidence of Coverage*.

	<b>7/1/2011 - 6/30/2012 (last year)</b>	<b>7/1/2012 - 6/30-2013 (this year)</b>
<b>Pap Test, Pelvic Exam, and Clinical Breast Exam</b>		
Primary Care Physician's Office - IN	\$10 copay	You pay nothing
Specialist's Office - IN	\$20 copay	You pay nothing
Primary Care Physician's Office - OON	\$10 copay	You pay nothing
Specialist's Office - OON	\$20 copay	You pay nothing

Annual Notice of Changes in Humana Medicare  
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**Prostate Cancer Screening Exams**

Primary Care Physician's Office - IN	\$10 copay	You pay nothing
Specialist's Office - IN	\$20 copay	You pay nothing
Primary Care Physician's Office - OON	\$10 copay	You pay nothing
Specialist's Office - OON	\$20 copay	You pay nothing

**Kidney Disease Education Services**

Primary Care Physician's Office - IN	\$10 copay	You pay nothing
Primary Care Physician's Office - OON	\$10 copay	You pay nothing

Beginning July 1, 2012 Humana will be providing prescription drug coverage to PEIA retirees. Refer to Chapter 6 in the attached Evidence of Coverage for coverage details.

**Section 4. What about changes to the plan's network of providers?**

**Will your doctors and other providers still be in the plan's network next year?**

There are a few changes to the network of providers for 2012. In addition, it's possible for the network of plan providers to change at any time during the year.

- **Please check with your doctors and other providers you currently use** to make sure they will continue to be part of the provider network for Humana Medicare Employer PPO in 2012.
- For the most up-to-date information on the network of providers, check our website **Humana.com** or call the Customer Care Team (1-800-783-4599).

**Section 5. Do you want to stay in the plan or make a change?**

**Do you want to stay with Humana Medicare Employer PPO?**

If you want to keep your membership in Humana Medicare Employer PPO for the plan year, it's easy. You don't need to tell us or fill out any paperwork. **You will automatically remain enrolled as a member.**

### **Do you want to make a change?**

If you decide to leave Humana Medicare Employer PPO, please contact your Benefits Administrator for other plan options that may be available to you. Of course, you can always switch to an Individual Medicare Advantage plan or to Original Medicare (either with or without a separate Medicare prescription drug plan).

*When can you change?*

Because you are currently on an Employer or Retiree Group Plan, you may choose to leave the plan at any time during the plan year. Please contact your Benefits Administrator to understand the consequences of leaving your Employer or Retiree Group Plan.

*How do you make a change?*

See Chapter 10 of the enclosed Evidence of Coverage document. It outlines what you need to do to make a change from Humana Medicare Employer PPO to another plan.

*Something to remember before you make a change*

Because you are a member of an Employer or Retiree Group, please contact your Benefits Administrator to understand the consequences of leaving your plan.

### **Section 6. Do you need some help? Would you like more information?**

#### **We have information and answers for you**

To learn more, read the information we sent in the same package with this *Annual Notice of Changes*. This includes a copy of the *Evidence of Coverage*.

If you have any questions, we are here to help. Please call the Humana Medicare Employer PPO Customer Care Team (1-800-783-4599). We are available for phone calls 8 a.m. to 8 p.m., Monday - Friday. Calls to these numbers are free.

#### **You can get help and information from your State Health Insurance Assistance Program**

The State Health Insurance Assistance Program (SHIP) is a government program with trained counselors in every state.

Your state's SHIP is independent (not connected with any insurance company or health plan). Your state's SHIP counselors can help you with your Medicare questions or problems. They can help you understand your Medicare plan choices and answer questions about switching plans. You may find contact information for the SHIP in your state in the state specific data sheets at the end of this Evidence of Coverage.

### **You can get help and information from Medicare**

Here are three ways to get information directly from Medicare:

- **Call 1-800-MEDICARE (1-800-633-4227)** 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.
- **Visit the Medicare website** (<http://www.medicare.gov>).
- **Read *Medicare & You 2012*.** Every year in October, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. If you don't have a copy of this booklet, you can get it at the Medicare website (<http://www.medicare.gov>) or by calling 1-800-MEDICARE (1-800-633-4227).