RetireeFirst

Frequently Asked Questions

To be eligible for the Humana Group Medicare PPO plan, you must have Medicare Part A and be enrolled in Medicare Part B, as this plan is a Group Medicare Advantage plan.

How do I enroll or opt out?

All Medicare-eligible retirees and/or dependents will be automatically enrolled in the plan.

All Medicare-eligible retirees and/or dependents must change over to this plan. Your current plan will no longer be available.

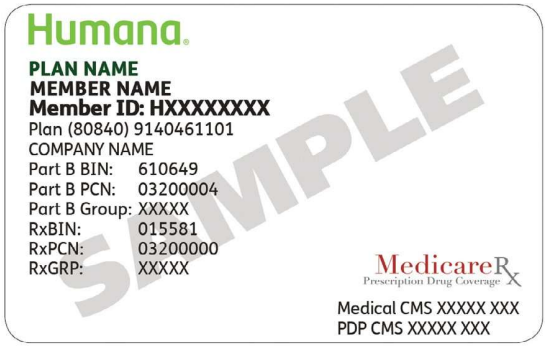
When will I receive my ID card?

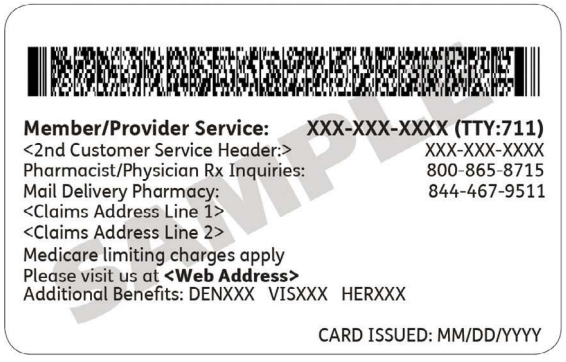
ID Cards should be received middle to end of the month prior to your start date. Retirees and Medicare-eligible dependents will each receive their own card. Please note that each enrollee may not receive their plan information on the same day; this is normal.

Is your provider in-network or out-of-network?

You can find a doctor in your network by using Humana's Find Care tool, visit **FindCare.Humana.com.** Your benefit levels are the same for in-network and out-of-network providers, as long as the provider is eligible to participate in Medicare and agrees to bill Humana.

You must use network pharmacies to enjoy the benefits of your Humana plan, except in an emergency. Pharmacies in the network have agreed to work with Humana to fill prescriptions for their members. If you use a pharmacy outside the network, your costs may be higher. Humana's network includes over 61,000 in-network pharmacies, nationwide.





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Frequently Asked Questions continued...

Are there any plan benefit changes?
This is a comprehensive plan that includes medical and prescription benefits. To better understand your benefits, please refer to the quick-reference Benefit Chart included in this mailing.

Do I need to show my red, white and blue Medicare ID card when I visit the doctor?
No. You'll get a Humana member ID card that will take its place. Keep your Medicare ID card in a safe place—or use it only when it's needed for discounts and other offers from retailers.

If for some reason you lose your Humana member ID card, you can call RetireeFirst at the phone number below and they can obtain a new one on your behalf, mail you a temporary card, and call your pharmacy and/or providers if needed.

What if my provider says they will not accept my plan?
If your provider says they will not accept your PPO plan, you can give your provider the "Member to Provider" information page located in the Humana enrollment packet. It explains how your PPO plan works. You can also call Humana Customer Care to have a Humana representative contact your provider and explain how your PPO plan works.

Will my prescriptions transfer from the old plan?
If you use the retail pharmacy, and have refills remaining, you do NOT need to obtain new prescriptions. If you use mail order, you WILL need to call Centerwell to confirm your prescriptions and set up an account.

Can I continue to use Veterans Affairs (VA) for retail prescriptions?
You may continue to receive any prescriptions you currently get through the Veterans Affairs (VA).

How do I learn more about my copays, coinsurance, pre-authorizations, pre-certifications and referrals?
You can refer to the simplified Benefit Chart included in this mailing for any questions you still have. In addition, you can contact RetireeFirst at the number below.

Please call RetireeFirst at **(619) 613-8558 (TTY: 711)** or toll-free **(877) 206-4880 (TTY: 711)**, Monday – Friday, 8 a.m. – 5 p.m., Pacific time if you have any questions about this new plan including but not limited premiums and plan benefits.

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