



We're here for you

Humana Group Medicare Customer Care

800-585-7417 (TTY: 711)

Monday – Friday, 7 a.m. – 8 p.m., Central time

Humana is a stand-alone prescription drug plan with a Medicare contract. Enrollment in this Humana plan depends on contract renewal. Call **800-585-7417 (TTY: 711)** for more information.

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Humana[®]



Welcome to a more human way to healthcare

Dear North Dakota Public Employees Retirement System (NDPERS) Member,

We're excited to let you know that **North Dakota Public Employees Retirement System (NDPERS)** has asked Humana to offer you a prescription drug plan that gives you prescription drug coverage to add to your Original Medicare plan.

Your health is more important than ever. That's why Humana has a variety of tools, programs and resources to help you stay on track. At Humana, helping you achieve lifelong well-being is our mission. During our over 30 years of experience with Medicare, we've learned how to be a better partner in health.

Get to know your plan

Review the enclosed materials. This packet includes information on your Group Medicare prescription drug plan option along with extra services Humana provides.

- If you have questions about your premium, please call **North Dakota Public Employees Retirement System (NDPERS) at 800-803-7377 or 701-328-3900 (TTY: 711)**.
- Please see your enclosed prescription drug guide (PDG) to determine if your medications have quantity limits, require a prior authorization or step therapy. You can also visit **Humana.com/Pharmacy** or call Group Medicare Customer Care for assistance.

We look forward to serving you now and for many years to come.

Sincerely,
Group Medicare Operations

What to expect after you enroll

- **Enrollment confirmation**

You'll receive a letter from Humana once the Centers for Medicare & Medicaid Services (CMS) confirms your enrollment.

- **Humana member ID card**

Your Humana member ID card will arrive in the mail shortly after you enroll.

- **Evidence of Coverage (EOC)**

You will receive information on how to view or request a copy of an Evidence of Coverage document (also known as a member contract or subscriber agreement). Please read the document to learn about the plan's coverage and services. This will also include your privacy notice.

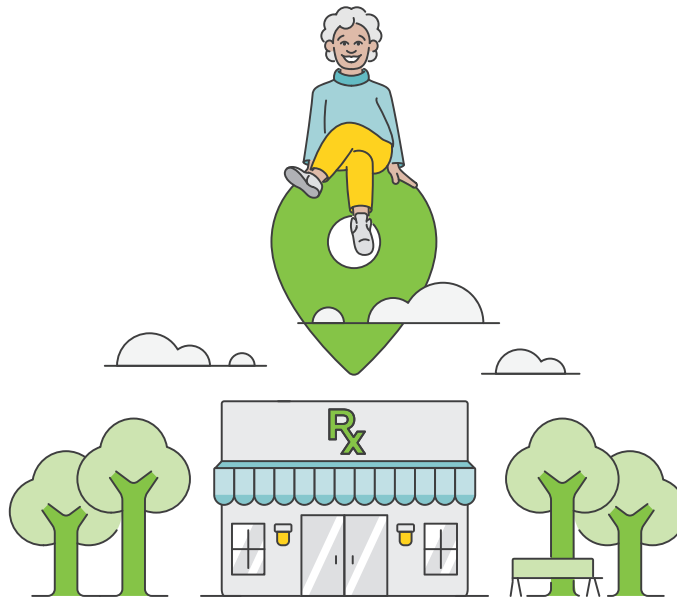
We're here for you

If you have questions or need help, call Humana Group Medicare Customer Care,

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Get the hassle-free care you deserve



Humana Prescription Drug Plan offers you:

A large network

There are more than 62,000 participating pharmacies in our network.

Almost no claims paperwork

The plan works with your pharmacist to handle claims for you.

Pharmacy finder

An online tool that helps you find in-network pharmacies. It also tells you how far they are from you, the hours they're open, if they have a drive-through available, if they offer emergency Rx, delivery options and if they have bilingual employees.

Details you need to know

North Dakota Public Employees Retirement System (NDPERS) partners with Humana Group Medicare for your prescription drug plan (PDP). If you have already enrolled, no further action is needed as your enrollment has been processed. If you would like to enroll in this plan, please contact the NDPERS office to verify eligibility and to request application materials. Enrollment in this plan will end your enrollment in any Medicare prescription drug plan or Medicare Advantage prescription drug plan that you are currently enrolled in.

Humana®

Going beyond your expectations

At Humana, what we do is more than health insurance. It's human care—care that works harder, goes farther and digs deeper. **All for you.**

Your Group Medicare prescription drug plan guide

Understanding your Medicare plan and how it works is important. Humana believes everyone should have access to the tools and support needed to have a fair and just opportunity to be as healthy as possible.

Inside this guide you'll find

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Plan specific information

- Prescription Summary of Benefits
- Prescription Drug Guide



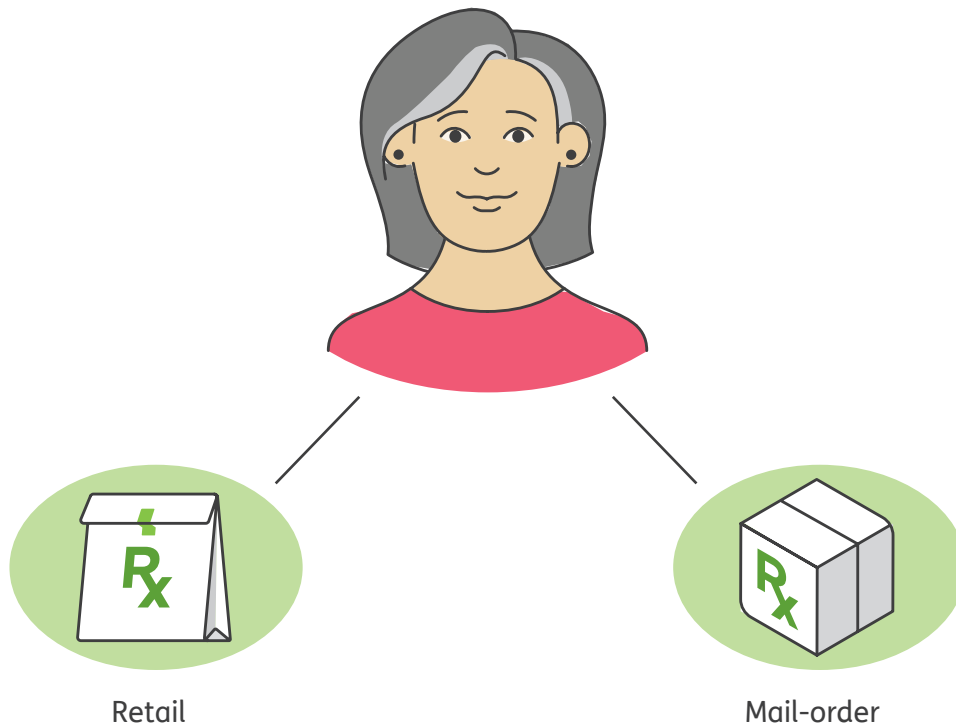
How your prescription drug plan (PDP) works

You must use network pharmacies to enjoy the benefits of our plan except in an emergency. Pharmacies in the network have agreed to work with Humana to fill prescriptions for our members. If you use a pharmacy outside the network, your costs may be higher.

Our pharmacy network includes access to mail delivery, specialty, retail, long-term care, home infusion, and Indian, tribal and urban pharmacies.

Is your pharmacy in Humana's network?

You can find a complete list of network pharmacies at MyHumana, your personal, secure online account at [Humana.com](https://www.humana.com) and the MyHumana Mobile app.* Get printable maps and directions, along with many more details to find a pharmacy that fits your needs. Other information at [Humana.com/pharmacy/medicare/tools](https://www.humana.com/pharmacy/medicare/tools) includes printable drug lists and prior authorization information.



*Standard data rates may apply.

MyHumana and MyHumana mobile app

Get your personalized health information on MyHumana

A valuable part of your Humana plan is a secure online account called MyHumana where you can keep track of your claims and benefits, find pharmacies, view important plan documents and more.

Whether you prefer using a desktop, laptop, tablet, or smartphone, you can access your account anytime by visiting [Humana.com/registration](https://www.humana.com/registration) to create your MyHumana account.*

- Review your plan benefits
- Find in-network pharmacies
- Look up and compare medication prices
- View your Humana member ID card
- Check claims
- View your SmartSummary



MyHumana mobile app

Download the MyHumana mobile app on your smartphone or tablet.* You'll have your plan details with you at all times.

Visit [Humana.com/mobile-apps](https://www.humana.com/mobile-apps) to learn about our many mobile apps, the app features and how to use them.

Have questions?

If you need help using MyHumana, call Customer Care at the number listed on the back of your Humana member ID card.

*Standard data rates may apply

Use Humana's Find care tool on the MyHumana mobile app

Once your plan begins you can use the MyHumana mobile app to find a pharmacy near you, wherever you are. Select "Find care" at the bottom of the app.

Prescription drug coverage

Some medications covered by Humana may have requirements or limits on coverage. These requirements and limits may include prior authorization, quantity limits or step therapy. You can visit [Humana.com/Pharmacy](https://www.humana.com/Pharmacy) to view your prescription drug guide, it will provide information on quantity limits, step therapy or if a prior authorization is required. If you have additional questions, please call our Customer Care number on the back of your Humana member ID card.

Prior authorization

The Humana Group Medicare Plan requires you or your provider to get prior authorization for certain medications. This means that you will need to get approval from the Humana Group Medicare Plan before you fill your prescriptions. The reason a prior authorization is required can vary depending on the medication. Humana will work with your provider when a prior authorization is required. The Centers for Medicare & Medicaid Services (CMS) requires a turnaround time of 72 hours for a prior authorization. However, an expedited review can be requested by your provider if waiting 72 hours may be harmful to you.

Quantity limits

For some medications, the Humana Group Medicare Plan limits the quantity of the medication that is covered. The Humana Group Medicare Plan might limit how many refills you can get or quantity of a medication you can get each time you fill your prescription. Specialty medications are limited to a 30-day supply regardless of tier placement.

One-time transition fill

For certain medications typically requiring prior authorization or step therapy, Humana will cover a one-time, 30-day supply of your Part D covered medication during the first 90 days of your enrollment. Once you have received the transition fill* for your prescription requiring a prior authorization or step therapy, you'll receive a letter from Humana telling you about the requirements or limits on the prescription. The letter will also advise that you will need to get approval before future refills will be covered. A prior authorization will need to be approved or other alternative medications should be tried if the medication requires step therapy.

Step therapy

In some cases, the Humana Group Medicare Plan requires that you first try certain medications to treat your medical condition before coverage is available for a more expensive medication prescribed to treat your medical condition.

*Some medications do not qualify for a transition fill, such as medications that require a Part B vs D determination, CMS Excluded medications, or those that require a diagnosis review to determine coverage.

Talk to your provider about your medications to see if they require prior authorization, have quantity limits or if step therapy is needed.

Medicare Part D prescription medication tiers

Tier 1 – Generic or preferred generic

Essentially the same medications, usually priced differently

Have the same active ingredients as brand-name medications and are prescribed for the same reasons. The Food and Drug Administration (FDA) requires generic medications to have the same quality, strength, purity and stability as brand-name medications. Your cost for generic medications is usually lower than your cost for brand-name medications.

Tier 2 – Preferred brand

A medication available to you for less than a nonpreferred

Generic or brand-name medications that Humana offers at a lower cost to you than nonpreferred medications.

Tier 3 – Nonpreferred medication

A more expensive medication than a preferred

More expensive generic or brand-name prescription medications that Humana offers at a higher cost to you than preferred medications.

Tier 4 – Specialty

Medications for specific uses

Some injectable and other high-cost medications to treat chronic or complex illnesses like rheumatoid arthritis and cancer.



Pharmacy options

Comprehensive pharmacy support for retirees.

Retail pharmacy network

With Humana plans you have a variety of retail and mail-order options to fill your prescription.

- Robust network of retail national and independent pharmacies
- Offers flexibility and convenience

CenterWell Pharmacy™

You have the choice of pharmacies for prescription retail and mail order services, CenterWell Pharmacy is one option.*

CenterWell Pharmacy offers:

- Comprehensive pharmacy services
- Convenient mail-order solutions, refill reminders and patient support
- Safe and secure delivery backed by multiple checks by pharmacists

CenterWell Specialty Pharmacy™

CenterWell Specialty Pharmacy offers a variety of specialty therapies that can help treat your condition.

CenterWell Specialty Pharmacy offers:

- Outstanding care & patient experience
- Specially-trained associates to provide patient support
- Enhanced experience for cancer, neuromuscular disorders and certain pulmonary conditions

*Other pharmacies are available in the Humana network.





Online

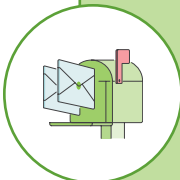
After you become a Humana member, you can sign in to **CenterWellPharmacy.com** with your MyHumana identification number and start a new prescription, order refills or check on an order.*



Phone

For maintenance medication(s), call CenterWell Pharmacy at **800-379-0092 (TTY: 711)**, Mon. – Fri., 7 a.m. – 10 p.m., and Sat., 7 a.m. – 5:30 p.m., Central time.

For specialty medication(s), call CenterWell Specialty Pharmacy at **800-486-2668 (TTY: 711)**, Mon. – Fri., 7 a.m. – 10 p.m., and Sat., 7 a.m. – 5:30 p.m., Central time.



Mail

Download the “Registration & Prescription Order Form” from **CenterWellPharmacy.com/forms** and mail your paper prescriptions to: CenterWell Pharmacy, P.O. Box 745099, Cincinnati, OH 45274-5099



Provider

Your provider can send prescriptions electronically through e-prescribe or by downloading the fax form from **CenterWellPharmacy.com/forms** and faxing the prescription to CenterWell Pharmacy at **800-379-7617** or CenterWell Specialty Pharmacy at **877-405-7940**.

*Other pharmacies are available in the network.

Where you get your vaccines may determine how they are covered

The Medicare Part D portion of your plan covers vaccines that are considered necessary to help prevent illness. Member cost share of all Part D vaccines listed on the Advisory Committee on Immunization Practices (ACIP) list¹ will be \$0.

Get vaccines like the ones listed below at a network pharmacy

You can find a complete list of network pharmacies at finder.humana.com/finder/pharmacy.

Here are some common vaccines that you should get at your pharmacy, not from your provider's office.

- **Shingles:** This vaccine protects against shingles, a virus that causes a painful rash in people who have previously had chickenpox.
- **Tdap:** This booster vaccine protects against tetanus, diphtheria and pertussis (whooping cough). (Medicare Part B coverage will apply when a tetanus shot is related to injury and administered at your provider's office.)
- **RSV:** This vaccine protects against Respiratory Syncytial Virus, a lung and lower airway infection.

Got questions?

Because vaccines are covered differently at the provider's office and the pharmacy, you may want to call first to understand how your insurance covers a specific vaccine. Call the Customer Care number on the back of your Humana member ID card or sign in to MyHumana.com.

Diabetes prescriptions and supplies covered under Part D

Part D typically covers diabetes supplies used to administer insulin. You must be enrolled in a Medicare drug plan to get the supplies Part D covers, like:

- diabetes medications
- insulin administered (or used) with syringes or pens
- syringes, pen needles or other insulin administration devices that are not durable medical equipment (e.g., Omnipod or VGO)

¹For more information regarding the Centers for Disease Control and Prevention's ACIP vaccine recommendations, please go to www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/index.html.

Important information for your pharmacist

Let your pharmacist know to use **BIN 015581** and **PCN 03200000** when filling your prescription for items covered under Part D.

Your personalized benefits statement

Humana’s SmartSummary provides a comprehensive overview of your Part D benefits and prescription drug spending. **You’ll receive this statement after each month you’ve had a prescription claim processed.** You can also sign-in to MyHumana and see your past SmartSummary statements anytime.

SmartSummary includes:

- **Numbers to watch.** SmartSummary shows your total drug costs for the month and year-to-date. It also shows how much of these costs your plan paid and how much you paid—so you can see the value of your prescription benefits.
- **Personalized messages.** SmartSummary gives you tips on saving money on the prescription drugs you take, information about changes in prescription copayments and how to plan ahead.
- **Your prescription details.** A personalized prescription section tells you more about your prescription medications, including information about dosage and the pharmacy provider. This page can be useful to take to your provider appointments or to your pharmacist.

SmartSummary
Your Part D Pharmacy claims processed in February 2023

THIS IS NOT A BILL

This summary is your "Explanation of Benefits" (EOB) and claim payments for your Medicare prescription drug coverage (Part D). Please review this summary and keep it for your records. **This is not a bill.**

OVERVIEW OF YOUR FEBRUARY CLAIMS

Part D prescription drug claims (see page 5)	
Total cost this month	\$64.46
Other payments	- \$0.00
Amount Humana paid	- \$19.13
Your share	\$45.33

Humana

FIRSTNAME A LASTNAME
Member ID: H12345678
Plan name: Humana Group Medicare PDP
Rx PCN or Rx Group number: 03200000

You are currently in **Stage One** of your Part D Drug Payment Plan. (see page 2)

CONTACT US IF YOU HAVE QUESTIONS OR NEED HELP.

Questions
Login to MyHumana at Humana.com to see your benefits, drug lists, prescriptions and claims.

Call us
Call 866-396-8810 (TTY: 711)
Monday to Friday 8 a.m.- 9 p.m. EST. Calls to these numbers are free.

For large print or another format

Frequently asked questions

Do I need to show my red, white and blue Medicare card when I visit the pharmacy?

No. You'll get a Humana member ID card. Keep your Medicare ID card in a safe place.

What should I do if I move or have a temporary address change?

If you move to another area or state, it may affect your plan. It's important to contact your group benefits administrator for details.

What should I do if I need prescriptions filled before I receive my Humana member ID card?

If you need to fill a prescription after your coverage begins but before you receive your Humana member ID card, take a copy of your temporary proof of membership to any in-network pharmacy.

How can I get help with my drug plan costs?

People with limited incomes may qualify for assistance from the Extra Help program to pay for their prescription drug costs. To see if you qualify for Extra Help, call **800-MEDICARE (800-633-4227)**, 24 hours a day, seven days a week. If you use a TTY, call **877-486-2048**. You can also call the Social Security Administration at **800-772-1213**. If you use a TTY, call **800-325-0778**. Your state's Medical Assistance (Medicaid) Office may also be able to help, or you can apply for Extra Help online at **www.ssa.gov**.

What should I do if I have to file a claim?

To request reimbursement for a charge you paid for a prescription drug, send the provider's itemized receipt and the Prescription Drug Claim Form (available at **Humana.com** or by calling Customer Care) to the claims address on the back of your Humana member ID card. Make sure the receipt includes your name and Humana member ID number. Call Humana Group Medicare Customer Care for more information and assistance.

When does my coverage begin?

Your former employer or union decides how and when you enroll. Check with your benefits administrator for the proposed effective date of your enrollment. Be sure to keep your current pharmacy coverage until your Humana Group Medicare PDP plan enrollment is confirmed.

Pharmacy terms

Deductible (if applicable)

Your cost for Part D prescription medications before the plan pays

The amount you pay for Part D prescription medications before the plan begins to pay its share.

Coinsurance

Your share of your prescription's cost

This is a percentage of the total cost of a medication you pay each time you fill a prescription.

Copayment

What you pay at the pharmacy for your prescription

The set dollar amount you pay when you fill a prescription.

Exclusions and limitations

Anything not covered

Specific conditions or circumstances that aren't covered under a plan.

Formulary

Medications covered under your plan

A list of medications approved for coverage under the plan. Also called a Drug List.

Maximum out-of-pocket

The most you'll spend before your plan pays 100% of the cost

The most you would have to pay for prescriptions covered by a health plan, including deductibles, copays and coinsurance. Once your annual out-of-pocket limit has been reached, the Humana Group Medicare plan pays 100% for most pharmacy charges.

Know your numbers

Find important numbers anytime you need them*

Humana Group Medicare Customer Care

800-585-7417 (TTY: 711),

Monday – Friday, 7 a.m. – 8 p.m., Central time

MyHumana

Sign in to or register for MyHumana to access your personal and secure plan information at **Humana.com**

MyHumana mobile app

Humana.com/mobile-apps

Pharmacies in your network

Humana.com/FindaPharmacy

CenterWell Pharmacy™

800-379-0092 (TTY: 711),

Mon. – Fri., 7 a.m. – 10 p.m., and Sat., 7 a.m. – 5:30 p.m., Central time

CenterWellPharmacy.com

CenterWell Specialty Pharmacy™

800-486-2668 (TTY: 711),

Mon. – Fri., 7 a.m. – 10 p.m., and Sat., 7 a.m. – 5:30 p.m., Central time

CenterWellSpecialtyPharmacy.com

Humana Clinical Pharmacy Review Team

800-555-2546 (TTY: 711),

Monday – Friday, 7 a.m. – 7 p.m., Central time

State health insurance program offices

800-633-4227 (TTY: 711), daily

www.cms.gov/apps/contacts/#

*You must be a Humana member to use these services.

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, ancestry, ethnicity, sex, sexual orientation, gender, gender identity, disability, age, marital status, religion, or language in their programs and activities, including in admission or access to, or treatment or employment in, their programs and activities.

- The following department has been designated to handle inquiries regarding Humana's non-discrimination policies: Discrimination Grievances, P.O. Box 14618, Lexington, KY 40512-4618. If you need help filing a grievance, call **800-585-7417 (TTY: 711)**.

Auxiliary aids and services, free of charge, are available to you.

800-585-7417 (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.

This information is available for free in other languages. Please call our customer service number at 877-320-1235 (TTY: 711). Hours of operation: 8 a.m. – 8 p.m. Eastern time.

Español (Spanish): Llame al número indicado para recibir servicios gratuitos de asistencia lingüística. **877-320-1235 (TTY: 711)**. Horas de operación: 8 a.m. a 8 p.m. hora del este.

繁體中文 (Chinese): 本資訊也有其他語言版本可供免費索取。請致電客戶服務部：**877-320-1235 (聽障專線：711)**。辦公時間：東部時間上午 8 時至晚上 8 時。

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