

# Important Enrollment Information

The Pension Boards-United Church of Christ, Inc is enrolling you in the UCC Group Medicare preferred provider organization (PPO) plan. You do not need to do anything to be automatically enrolled in this Medicare health plan. If you do not want to join this plan, you can follow the instructions included below. You must do this before the date set by your benefit administrator. **Enrollment in this plan will end your enrollment in any Medicare Advantage plan that you are currently enrolled in.**

## **What do I need to know as a member of the Humana Group Medicare PPO plan?**

This mailing includes important information about this plan and what it covers, including a Summary of Benefits document. Please review this information carefully.

Once enrolled, you will receive an Evidence of Coverage document (also known as a member contract or subscriber agreement) from the UCC Medicare Advantage Plan w/Rx. Please read the document to learn about the plan's coverage and services. As a member of the UCC Medicare Advantage Plan w/Rx, you can appeal plan decisions about payment or services if you disagree. Enrollment in this plan is generally for the entire year.

When your UCC Medicare Advantage Plan w/Rx begins, Humana will cover all medically necessary items and services, even if you get the services out of network. However, your member cost share may be lower if you use in-network providers. "In-network" means that your doctor or provider is on our list of participating providers. "Out-of-network" means that you are using someone who isn't on this list. The exception is for emergency care, out of area dialysis services, or urgently needed services. For the plan being offered, your "Out-of-network" benefits are the same as your "In-network" benefits.

You must use network pharmacies to access Humana benefits, except under limited, non-routine circumstances when you can't reasonably use network pharmacies.

You must keep Medicare Parts A and B as the Humana Group Medicare plan is a Medicare Advantage plan. **You must also continue to pay your Part B premium. If you are assessed a Part D-Income Related Monthly Adjustment Amount (Part D-IRMAA), you will be notified by the Social Security Administration. You will be responsible for paying this extra amount in addition to your plan premium.**

You can enroll in only one Medicare Advantage plan at a time. You must let us know if you think you might be enrolled in a different Medicare Advantage plan or a Medicare prescription drug plan and inform us of any prescription drug coverage that you may get in the future.

## **What happens if I don't join the Humana Group Medicare PPO plan?**

You aren't required to be enrolled in this plan.

If you don't want to enroll or have enrollment questions, **please call Member Services 800-642-6543 from 8:30 a.m. to 4:30 p.m., Eastern Time.**

If you choose to join a different Medicare plan, you can contact **1-800-MEDICARE** anytime, 24 hours a day, 7 days a week, for help in learning how. TTY users can call **1-877-486-2048**. Your state may have counseling services through the State Health Insurance Assistance Program (SHIP). They can provide you with personalized counseling and assistance when selecting a plan, including Medicare Supplement plans, Medicare Advantage plans and prescription drug plans. They can also help you

find medical assistance through your state Medicaid program and the Medicare Savings Program.

**What if I want to leave the Humana Group Medicare PPO plan?**

You can change or cancel your Humana coverage at any time and return to Original Medicare or another Medicare Advantage plan by using a special election. **Please call Member Services 800-642-6543 from 8:30 a.m. to 4:30 p.m., Eastern Time** or call **1-800-MEDICARE**.

**What happens if I move?**

The Humana Group Medicare PPO plan serves a specific service area. **If you move to another area or state, it may affect your plan.** It's important to contact your group benefits administrator, **please call Member Services 800-642-6543 from 8:30 a.m. to 4:30 p.m., Eastern Time** and call to notify Humana of the new address and phone number. You can call Humana Group Medicare Customer Care at **1-866-733-1872 (TTY: 711)**, Monday – Friday, 8 a.m. – 9 p.m., Eastern time. Although you are required to call for moving service areas, your “Out-of-network” benefits are the same as your “In-network” benefits, for the plan being offered.

Remember that if you leave this plan and don't have creditable prescription drug coverage (as good as Medicare's prescription drug coverage), you may have to pay a late enrollment penalty if you enroll in Medicare prescription drug coverage in the future.

**Release of Information**

By joining this Medicare Advantage plan, you give us permission to share your information with Medicare and other plans when needed for treatment, payment and health care operations. We do this to make sure you get the best treatment and to make sure that it is covered by the plan. Medicare may also use this information for research and other reasons allowed by Federal law.

