

SERFF Tracking Number: HUMA-127361094 State: Arkansas
 Filing Company: Humana Insurance Company State Tracking Number: 49514
 Company Tracking Number: AR-10-2011
 TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.012 Multi-Plan 2010
 Standard Plans 2010
 Product Name: 2010 Individual Medicare Supplement Plans
 Project Name/Number: 2011 Sales Brochure/AR-10-2011

Filing at a Glance

Company: Humana Insurance Company
 Product Name: 2010 Individual Medicare Supplement Plans SERFF Tr Num: HUMA-127361094 State: Arkansas
 TOI: MS08I Individual Medicare Supplement - Standard Plans 2010 SERFF Status: Closed-Filed-Closed State Tr Num: 49514
 Sub-TOI: MS08I.012 Multi-Plan 2010 Co Tr Num: AR-10-2011 State Status: Filed-Closed
 Filing Type: Advertisement Reviewer(s): Stephanie Fowler
 Author: Bettina Ponds Disposition Date: 08/31/2011
 Date Submitted: 08/10/2011 Disposition Status: Filed-Closed
 Implementation Date Requested: On Approval Implementation Date:
 State Filing Description:

General Information

Project Name: 2011 Sales Brochure Status of Filing in Domicile: Not Filed
 Project Number: AR-10-2011 Date Approved in Domicile:
 Requested Filing Mode: Review & Approval Domicile Status Comments:
 Explanation for Combination/Other: Market Type: Individual
 Submission Type: New Submission Individual Market Type:
 Overall Rate Impact: Filing Status Changed: 08/31/2011
 State Status Changed: 08/31/2011
 Deemer Date: Created By: Bettina Ponds
 Submitted By: Bettina Ponds Corresponding Filing Tracking Number:
 Filing Description:
 Re: Humana Insurance Company, NAIC: 119, 73288, FEIN: 39-1263473
 GNA0B40HH – Humana Medicare Supplement Plans - Sales Brochure

Humana Insurance Company is submitting the attached marketing material for your review and approval. We intend to utilize this brochure to market our individual Humana Medicare Supplement Plans.

Form: GNA0B40HH (Sales Brochure)

Policy forms: ARMESM10A, ARMESM10B, ARMESM10C, ARMESM10F ARMESM10F(HD), ARMESM10K,

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ARMESM10L
 and ARMESM10N.

Please contact me via SERFF, at bponds@humana.com, or at (502)580-0964 if you have any questions or require further information relative to this filing.

Company and Contact

Filing Contact Information

Bettina Ponds, Medicare Supplement Product bponds@humana.com
 Compliance Analyst
 500 W. Main St. 502-580-0964 [Phone]
 Louisville, KY 40202

Filing Company Information

Humana Insurance Company	CoCode: 73288	State of Domicile: Wisconsin
1100 Employers Boulevard	Group Code: 119	Company Type: Life & Health
Green Bay, WI 54344	Group Name:	State ID Number:
(800) 558-4444 ext. [Phone]	FEIN Number: 39-1263473	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	\$50 per form
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Humana Insurance Company	\$50.00	08/10/2011	50513501

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	08/31/2011	08/31/2011

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Disposition

Disposition Date: 08/31/2011

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	SOV	Filed-Closed	Yes
Form	Sales Brochure	Filed-Closed	Yes

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Form Schedule

Lead Form Number:

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed-Closed 08/31/2011	GNA0B40H	Advertising	Sales Brochure	Initial			GNA0B40HH (filing version).pdf

Humana Medicare Supplement Insurance Plans



Insured by Humana Insurance Company. **Not connected with or endorsed by the U.S. government or the federal Medicare program.** The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent/producer or insurance company.

GNA0B40HH

HUMANA®

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You have Medicare Parts A and B,
but they don't pay all of your healthcare costs. That's where a Medicare Supplement plan comes in.

Overview



Medicare Supplement insurance plans – like those offered by Humana – help cover some of the costs not covered by Medicare Parts A and B such as deductibles and coinsurance. Unlike Medicare Advantage plans, Medicare Supplement plans are purchased in addition to your Medicare Parts A and B benefits. When you choose a Medicare Supplement plan, you can keep the same doctors, are still in the Medicare program, and have all of your Medicare rights and protections.

Humana Medicare Supplement insurance plans deliver value

Our Medicare Supplement plans provide you with a range of plan choices, ease of use, and extra services. Plus, they're backed by Humana – a company with almost [50 years] in the healthcare business.

Plan choices

Humana offers several Medicare Supplement plans - so you can pick one that best fits your lifestyle, your coverage needs, and your budget.

Ease of use

- Freedom to choose any healthcare provider that accepts Medicare patients even if you're traveling
- Guaranteed renewable as long as you pay your monthly premiums
- More predictable costs

Extra services

As a Humana Medicare Supplement policyholder, you also receive these services – at no extra cost:

- **Humana Active Outlook® Program**
Lifestyle enrichment exclusively for Humana members! Enjoy one-on-one healthy living guidance and Medicare news through regular educational mailings, online content, seminars, and classes, plus valuable discounts and coupons. Inspire yourself to embrace optimal living, good health, and personal well-being.]
- **HAO Magazine**
Mailed to your home [four] times a year, this magazine includes custom-written, in-depth articles about healthy living and tips on getting more from your health plan.]
- **QuitNet® Comprehensive**
QuitNet is an evidence-based smoking cessation program that offers expert advice, personalized support, unlimited social support from fellow quitters, practical quit tips, and celebration of milestones reached, all designed to help tobacco users quit – and stay tobacco-free.
 - Online or telephone tips and advice from expert counselors
 - A personalized tobacco cessation plan and stop-smoking guide
 - 24-hour Web support
 - Phone coaching – a five-call protocol
 - Printed **QuitNet QuitGuide**
 - Over-the-counter tobacco cessation medicines (Nicotine Replacement Therapy)]

- **SilverSneakers® Fitness Program**

Looking good and feeling fit are important at any age. As a Humana Medicare Supplement policyholder a membership is available in the SilverSneakers Fitness Program – at no extra cost to you! With SilverSneakers, you receive a basic fitness center membership that lets you use any equipment at any participating SilverSneakers fitness center. You can take part in friendly group exercise classes and work with trained advisors to develop your own exercise plan. For members without easy access to a participating center, SilverSneakers® Steps, a walking program, is available.]

- **Vision Discount Program**

Get discounts through EyeMed at more than [18,000] national providers – including optometrists, ophthalmologists, and opticians – at more than [9,000] locations. You can view available discounts and providers by visiting the EyeMed website at eyemedvisioncare.com. You can also call EyeMed’s provider locator service at [1-866-392-6056].]

- **Rx Discount Program**

Save an average of 20 percent or more on prescription drugs just by showing your Humana ID card at participating pharmacies. You can use this discount program for weight loss, impotence, hair loss, smoking cessation and many other prescriptions that are not covered by Medicare. Most major pharmacy chains participate.]

- **WellDine™ Meal Program**

After an overnight stay in the hospital or nursing facility, members are eligible for 10 nutritious, precooked frozen meals delivered to their door at no cost. To arrange for this service, members simply call 1-866-96MEALS (1-866-966-3257) after discharge and provide their Humana member ID number, and other basic information. A Humana representative will assist in scheduling delivery. Not available to members who reside in Alaska and Hawaii.]

- **Hearing Aids and Services**

Discounts are available through TruHearing and Beltone®.]

- **HumanaFirst®**

Nurse advice line offering 24-hour health information, guidance, and support. Whether the concern is immediate or longer-term, members can call for expert advice to find out how Humana can help them lead a healthier life and get the most out of their health plan.]

- **MyHumana**

Log on to [Humana.com] and register for MyHumana, your secure website. You can review details of your claims, use health and pharmacy tools, and find health information and resources. You also can find Medicare information at [Humana-Medicare.com].]

The programs and services described in this section are not insurance and are neither contractually offered nor guaranteed under our Medicare Supplement insurance policies.



Choosing a Plan

Finding the best plan for you

To see which Medicare Supplement plan fits your needs, review your healthcare costs for the past few years. You will also want to consider what costs you may face in the coming years. Compare this list to the information provided below and on the next page to find a plan that is right for you.

For example, if you think you won't use the healthcare system much, you may want to consider a basic plan. If your past or future needs are high, you may want to consider a plan with more coverage.

Basic Coverage

Medicare Supplement Plan A provides basic coverage, which covers:

- **Hospitalization:** pays Part A coinsurance plus coverage for 365 additional days after Medicare benefits end
- **Medical Expenses:** pays Part B coinsurance – generally 20 percent of Medicare-approved expenses – or copayments for hospital outpatient services
- **Blood:** pays for the first three pints of blood each year
- **Hospice:** pays Part A Hospice Care coinsurance or copayment
- **Preventative Care:** pays Part B coinsurance for preventative care



[Sample Photo]



Is a Medicare Supplement plan for you?

If you have Medicare Parts A and B, you may be eligible for a Medicare Supplement plan. Because Medicare doesn't pay all of your healthcare costs, a Medicare Supplement plan can provide additional coverage.

Humana offers several Medicare Supplement plans: A, B, C, F, High Deductible F, K, L, and N. Plans offered may vary by state.

Additional Coverage

For greater security, these plans cover everything under basic coverage, plus one or more of the areas listed below. Check what's most important to you and review the plans that address it.

- ❑ Skilled nursing facility care – available with Plans C, F, High Deductible Plan F, K, L, and N
- ❑ Medicare Part A deductible for hospitalization – available with Plans B, C, F, High Deductible Plan F, K, L, and N
- ❑ Medicare Part B deductibles for medical and hospital outpatient expenses – available with Plans C, F, and High Deductible Plan F

- ❑ Medicare Part B excess charges – available with Plans F and High Deductible Plan F
- ❑ Foreign travel medical emergency help – available with Plans C, F, High Deductible Plan F, and N
- ❑ High-deductible plan option – available with Plan F
- ❑ Out-of-pocket limits – available with Plans K and L

These policies may not fully cover all your medical costs. However, by law, you can only have one Medicare Supplement plan. If you need help with prescription drug costs, consider Humana (Part D) prescription drug coverage. For additional information about Medicare Supplement benefit coverage, please refer to your Outline of Coverage.





Which plan meets your needs?

The tables below can help you figure out which plan is right for you.

	A	B	C	F¹
Basic Benefits	✓	✓	✓	✓
Skilled Nursing Facility Coinsurance			✓	✓
Part A Deductible		✓	✓	✓
Part B Deductible			✓	✓
Part B Excess (100%)				✓
Foreign Travel Emergency			✓	✓
Out Of Pocket Annual Limit³				

For details or to request an Outline of Coverage, **please contact your agent/producer or call Humana at [1-888-310-8482].**

Coverage is limited to Medicare-eligible expenses.

1 Plan F has an option called a High Deductible Plan F, which pays the same benefits as Plan F after you have paid a calendar year deductible. Deductible may increase annually. Benefits from this High Deductible Plan F will not begin until out-of-pocket expenses exceed the annual deductible. Out-of-pocket expenses for this deductible are expenses that would ordinarily be paid by the policy. These expenses include the Medicare deductibles for Part A and Part B but do not include the plan's separate foreign travel emergency deductible.

K²	L²	N⁴
50%	75%	✓
50%	75%	✓
50%	75%	✓
		✓
✓ ³	✓ ³	

2 Cost-sharing for items and services covered in Plans K and L is different from the cost-sharing provided by Plans A-J, and Plan N. Once you reach the annual limit, the plans pay 100 percent of the Medicare copayments, coinsurance, and deductibles for the rest of the calendar year. The out-of-pocket annual limit does not include charges from your provider that exceed Medicare-approved amounts, called "Excess Charges." You will be responsible for paying Excess Charges.

If a column lists a percentage, the policy covers that percentage of the described benefit. Hospitalization and preventative care are covered at 100%.

3 The out-of-pocket annual limit may increase each year for inflation. See Outline of Coverage for details and exceptions.

4 Plan N pays 100% of the Part B coinsurance except up to [\$20] copayment for office visits and up to [\$50] for emergency department visits.

How to Enroll

Based on where you live, Humana has up to three ways to enroll:

- **In Person** – contact your agent/producer to set up a personal appointment.
- **Telephone** – call Humana at [1-888-310-8482] to set up an appointment or request information. Licensed agents/producers are available [Monday through Friday, 8 a.m. to 8 p.m. If you use a TTY, call 711.]
- **Online** - visit Humana’s website at [Humana-Medicare.com.]



Definitions

Coinsurance

The percentage of costs you pay for medical services after you pay any deductibles

Copayment

The fixed dollar amount you pay when you receive medical services

Deductible

The amount you must pay for medical services before your plan starts paying certain benefits

Out-of-pocket costs

Any amounts other than your premium that you pay out of your pocket, including the deductible, copayments, and coinsurance specified in your plan

Premium

The amount you pay for your health plan

Additional Information

Review of Medicare basics:

Medicare doesn't cover all your medical expenses. Your coverage depends on whether you have Medicare Part A, Medicare Part B, or both. Even then, Medicare only pays a portion of your costs for services and supplies.

Medicare Parts A and B cover much of the medical care you need, but not all of it.

Medicare Part A:

Once you're eligible, **Part A** covers:

- Some inpatient hospital care
- Up to 100 days of care at a skilled nursing facility per benefit period
- Some hospice care and home healthcare

You're responsible for copayments and a deductible.

Medicare Part B:

You can sign up and pay a premium for **Part B**, which helps cover:

- Doctor visits and outpatient care - subject to Part B limitations
- Some services not covered by Part A – including some physical and occupational therapy and some home healthcare, if the services are medically necessary

Medicare Part C:

Better known as a **Medicare Advantage plan**, Part C is available only from private insurers like Humana that have a contract with Medicare. You must be enrolled in both Medicare Parts A and B to join a Medicare Advantage plan, which covers the same benefits as Medicare Parts A and B and usually includes additional benefits.

Medicare Part D:

Part D is prescription drug coverage available only from private insurers like Humana that have a contract with Medicare. Medicare Supplement members can also purchase a Part D plan for prescription drug coverage.

Medicare Supplement:

Many people buy a Medicare Supplement insurance plan from a private insurer like Humana. These supplemental plans cover some of the costs that Medicare Parts A and B don't.

Medicare Supplement Open Enrollment:

During this six-month period, you can buy any Medicare Supplement plan you want that is sold in your state. It starts in the first month that you are covered under Medicare Part B and you are age 65 or older - or under age 65 in some states.

Guaranteed Acceptance:

Your acceptance in a Humana Medicare Supplement plan is guaranteed if you apply during your open enrollment period. In some situations, you may qualify for guaranteed acceptance outside of your open enrollment period.

Pre-Existing Conditions:

Under a Humana Medicare Supplement policy, medical expenses incurred during the first 90 days of coverage may not be covered if they're due to a condition or conditions for which medical advice was given or treatment was recommended by a physician within six months prior to the coverage effective date. Limitations may not apply or may be reduced if you enroll during your open enrollment period or in your guaranteed issue period or if you satisfy creditable coverage requirements.

Questions



Common questions about Medicare Supplement Plans

Q. I signed up for a Humana Medicare Supplement Plan. When will I receive my ID card and policy?

A. Your coverage is effective on the first day of the month after Humana accepts your completed application, unless you've requested a future effective date. You'll receive your ID card and policy in the mail [seven to ten days] after your application has been processed.

Q. Can you cancel my coverage?

A. Medicare Supplement insurance plans are guaranteed renewable. This means Humana cannot cancel your plan for any reason other than non-payment of premiums or material misrepresentation.

Q. How do I pay my monthly premium?

A. You may select one of the following payment methods:

- Automatic bank withdrawal – Your premium is automatically deducted from your checking or savings account each month, and a [\$2] discount per payment is included for using this economical and secure form of payment.
- Coupon book – We provide a book of coupons that show your monthly premium. Mail in a coupon with your payment before the end of each month.
- Recurring credit card – Your premium is automatically charged to your credit card account each month.
- Premiums may change every year, but they can only change if the premiums for all policies like yours in your state change. Your premium cannot change because of claims filed, a change in your health, or because of a change in your work. Your premium may also be adjusted annually following your birthday if the policy you purchase is attained-age rated. Also, deductibles and copayments may increase annually, as set by the Centers for Medicare and Medicaid Services.

Q. Once my coverage begins, what number do I call with questions I might have?

A. Customer Care representatives are available to help you. For questions about enrollment, billing, disenrollment, claims, or benefits, call [1-800-866-0581]. Representatives are on call [Monday through Friday 8 a.m. to 8 p.m.] If you use a TTY, call 711.

About Humana

Humana has experience you can trust – as a Fortune [100] company with [more than 49] years in the health industry, and as a provider of Medicare plans for [more than 20 years]. We currently serve more than [11.4] million members, including [4.5] million Medicare members.⁵ You can rely on us to guide you through your Medicare Supplement insurance options and make it easier for you to choose the plan that’s right for your healthcare needs, your lifestyle, and your budget.

Call Humana at [1-888-310-8482] today to find out more about Humana Medicare Supplement plans or any of our Medicare plans. If you use a TTY, call 711. Or visit our website at [[Humana-medicare.com](https://www.humana-medicare.com)].

⁵ Medicare Advantage, Cost, PACE, Demo, and Prescription Drug Plan Organizations Report. Medicare membership includes those enrolled in Humana Medicare Supplement, Medicare Advantage and Prescription Drug Plans.



[Sample Photo]

Medicare Supplement insurance is available to those enrolled in Parts A and B of Medicare due to age and is available in some states to under 65 disabled Medicare recipients. You may be responsible for deductibles and coinsurance before benefits are payable. Calls will be answered by licensed Medicare Supplement insurance agents/producers. Benefits vary by plan and the premium will vary with the amount of benefits selected. Coverage is limited to Medicare-eligible expenses. These policies may have exclusions and limitations; please call your agent/producer or Humana for complete details of coverage or costs. Policy form series MESM10 or state equivalent. Idaho Policy forms: IDMESM10A, IDMESM10B, IDMESM10C, IDMESM10F, IDMESMF10(HD), IDMESM10K, and IDMESM10L. Tennessee Policy forms: TNMESM101A, TNMESM101B, TNMESM101C, TNMESM101F, TNMESM101F(HD), TNMESM101K, and TNMESM101L.



HUMANA®

- Medicare
- Group health benefits
- Individual health
- Specialty Benefits
- Pharmacy Solutions

[[Humana-medicare.com](https://www.humana-medicare.com)]

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Supporting Document Schedules

	Item Status:	Status
Satisfied - Item: SOV	Filed-Closed	08/31/2011
Comments:		
Attachment:		
Sales Brochure Statement of Variability.pdf		

Statement of Variability - GNA0B40HH

Page 1, 3

[sample photo] – bracketed to indicate photo may change. Some changes are due to format testing.

Pages 4 and 5

All extra services are bracketed for discretion of using language or not, in case one or more are no longer offered.

Page 6 and 7

[sample photo] – bracketed to indicate photo may change. Some changes are due to format testing.

Page 8

[1-888-310-8482] – bracketed, may change, so we can ensure correct number is displayed

Page 9

[\$20] [\$50] – bracketed to reflect correct copayment

Page 10

[1-888-310-8482] [Monday through Friday, 8 a.m. to 8 p.m. If you use a TTY, call 711.]– bracketed, may change, so we can ensure correct number and hours of operation are displayed

[Humana-Medicare.com] – in the case Website address changes, we will ensure correct one displays. Also bracketed for flexibility to include or not include based on availability.

[sample photo] – bracketed to indicate photo may change. Some changes are due to format testing.

Page 12

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[1-888-310-8482] [Monday through Friday, 8 a.m. to 8 p.m. If you use a TTY, call 711.]– bracketed, may change, so we can ensure correct number and hours of operation are displayed

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[sample photo] – bracketed to indicate photo may change. Some changes are due to format testing.

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[49] – bracketed in case our years in industry changes

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[4.5] -- bracketed in the case membership changes

[Policy series form MESRD or state equivalent. Idaho Policy forms: [IDMESRDA, IDMESRDF, IDMESRDF(HD), IDMESRDK, and IDMESRDN. Tennessee Policy forms: TNMESRDA, TNMESRDF, TNMESRDF(HD), TNMESRDK, and TNMESRDN.]] – these are required disclosures for TN and ID. Will be used if material is marketed in those states. If not, disclosures may be omitted.

[1-888-310-8482] – bracketed, may change, so we can ensure correct number is displayed

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Page 16

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