



HMO Highlights

January 2010

Overview

The HumanaHMO provides you with more coverage than traditional medical insurance, including many preventive care benefits to maintain your good health. Most services are covered at 100% or 100% after a small copayment—\$30 for office visits with your primary care physician and \$40 for office visits with a specialist. There are no deductible amounts to pay or claim forms to file.

The HumanaHMO option:

- Provides 100% coverage for preventive care.
- Has no deductible.
- Requires that you choose a Primary Care Physician (PCP) from Humana Premier HMO–Illinois Platinum HMO Network.
- Requires that you receive a referral from your PCP from the Humana network to see a specialist and to have benefits paid.

- Provides prescription drug coverage (subject to copayments) under the Advocate Prescription Benefits Program.
- Does not require claim forms.

Starting January 1, 2010, eligible associates and spouses (or domestic partners) enrolled in HMO coverage can complete a Succeed questionnaire and then be eligible to earn valuable financial incentives including:

- \$200 each that will be placed in a tax-free Health Reimbursement Account which they can then use to pay eligible health care expenses, and
- Other Health^e Rewards for participating in healthy activities.

Highlights of the HMO

Features	Advocate	Humana Network
Preventive Care	No copayment	No copayment
Primary Care Office Visits	\$30 copayment	\$30 copayment
Specialists Office Visits	\$40 copayment	\$40 copayment
Lab and X-Rays		
Doctor's Office	No charge after copayment	No charge after copayment
Independent Lab	No charge after copayment	No charge after copayment
PET, CT, MRI	No charge after copayment	No charge after copayment
Emergency Room Visits	\$200 copayment	\$200 copayment
Hospitalizations		
Inpatient Hospital Stay	\$100 copayment per day	\$200 copayment per day
Outpatient Surgery	\$100 copayment per visit	\$100 copayment per visit
Behavioral Health (care must be precertified)		
Outpatient Visits	\$30 copayment	\$30 copayment
Lifetime Maximum	Unlimited	Unlimited

Using the Health Care Flexible Spending Account (FSA) with the HMO

You are eligible to use the Health Care Flexible Spending Account (FSA) while enrolled in the medical plan. You can use your pre-tax contributions to the FSA on a tax-free basis to pay for eligible medical, dental and vision benefits (e.g., office visits, prescriptions drugs, copayments).

Prescription Drug Benefits

Prescription drug benefits under the HMO are automatically covered under the Advocate Prescription Benefits Program, which is administered by CVS/Caremark. Benefits are provided for prescription drugs purchased at retail pharmacies in the CVS/Caremark network or through CVS/Caremark's mail order program. To find a pharmacy in the CVS/Caremark network or use the mail order program, go to www.caremark.com.

Prescription Drug Benefit Costs

Type	Retail (up to 30-day supply)	Mail (up to 90-day supply)
Generic	\$15 copayment	\$25 copayment
Preferred Brand Name	\$30 copayment	\$60 copayment
Non-preferred Brand Name	\$50 copayment	\$110 copayment

The HMO May Be a Good Option for You If ...

- You like having more predictable health care costs and not having to meet a deductible.
- You are comfortable getting a referral from your PCP for all specialist office visits.
- You like the current HMO medical option and do not want to make a change to your medical plan option.
- You are comfortable having your care directed without choices.

For More Information

More details are available at www.advocateinfoexpress.com (click on *Advocate Benefits Online*).

Specific questions can also be directed to Advocate InfoExpress at 800.775.4784.