

Humana.

Elect to stay on your current policy - call us at 1-877-222-0650



Re:

Policy/Certificate Number:



Choose the policy that works best for you and your family



Thank you for being a Humana member. As you may have heard, the Affordable Care Act (ACA), also known as the healthcare reform law, is changing the rules governing healthcare coverage. We encourage you to learn more about healthcare reform and what it means for you, including guidance about the new health insurance marketplace and the different ways you go about determining whether you may be eligible for financial assistance. Visit Humana.com/HealthcareForYou for more information.

Some people are unclear about how ACA will affect them. Humana will be updating policies such as yours to meet the new 2014 ACA rules. The required 2014 ACA changes include removing any exclusionary riders that you may currently have on your medical policy and providing coverage for a new set of healthcare service categories called Essential Health Benefits (EHBs). EHBs include coverage for a variety of services that may or may not be relevant to you - preventive and wellness services, mental health and substance use disorders, maternily coverage, chronic disease management, and many other benefits and services that may be new to you.

As you begin to think about making choices regarding your medical coverage, we want you to understand that the ACA's provisions will impact the cost of your future health insurance coverage, but also provide broader benefits under the EHB requirements.

Humana is offering you a choice about your coverage. Please choose one of these two options no later than 30 days from the date of this letter.

Option A: Keep your current policy with all your existing benefits and services, including any exclusionary riders, rate-ups, and limitations. By electing Option A and agreeing to a policy amendment, you will keep your current policy and establish your policy year as December 31, 2013 through December 30, 2014. On December 31, 2014 Humana will issue to you a 2014 ACA compliant policy. This option gives you the time to decide what Humana 2014 ACA policy you want in the future 1.

Option B: Choose a new policy with 2014 ACA benefits effective January 1, 2014. In addition to including the EHBs listed above, any exclusionary riders and rate-ups will be removed. See attachment #3 for a benefit comparison between your current policy and the 2014 ACA policy.

To help you with your decision, we've enclosed an estimated comparison of premiums and a general description of the coverage differences between Option A and Option B. See attachment #1 for that cost comparison.



4797A8 910684 Elect to stay on your current policy (Option A) by agreeing to an amendment to your policy. The policy amendment that is required for Option A has been filed with your state Department of Insurance (DOI) and the amendment is subject to DOI approval. If the DOI does not approve the filed amendment by November 15, 2013, Humana will not be able to provide you Option A and you will automatically be provided Option B. However, in order to be considered for Option A, you must complete the unapproved amendment no later than 30 calendar days following the date of this letter.

We offer a variety of convenient ways to opt in to keep your current benefits and services as is:

- Call us at 1-877-222-0650 using our 24-hour automated system to electronically sign the policy amendment. Signing the amendment in this manner will require agreeing to the amendment electronically. This must be completed no later than 30 calendar days of the date of this letter, or
- Sign the policy amendment form, Included with this mailing, and either fax it to 1-877-562-8320 or mail it using the enclosed envelope to: Humana Insurance Company, PO Box 30111, Tampa, FL 33630-3111. The policy amendment form is attachment #2. The signed amendment must be received by Humana no later than 30 calendar days following the date of this letter.

Remember you must make a decision and tell us if you wish to stay on your current policy. You have two options: continue your current policy on December 31, 2013 and retain it through December 30, 2014 (Option A) or choose to include the new 2014 ACA benefits in your policy beginning January 1, 2014 (Option B). If you don't select Option A or B, then we will discontinue your current policy and you will receive a new policy with ACA benefits and rates (Option B). With either option, if you have a Traditional Preferred Dental policy, that policy will automatically renew with your medical policy and you will receive a separate letter regarding that product.

As a Fortune 100 company with years of healthcare experience, Humana wants to help you manage your health and well-being. It's our privilege to have you as a Humana member. We look forward to serving you in the coming year. As always, please feel free to contact your agent or a Customer Care Specialist at 1-877-222-0650 if you have any questions about your options.

Sincerely,

Steve DeRaleau

Humana Individual Products

Enclosure

¹Members also have the option to enroll in medical insurance with 2014 ACA benefits during the new initial open enrollment period, October 1, 2013 through March 31, 2014.

Attachment #1

Below is an estimated cost comparison between continuing your current policy with a new policy year (Option A) or choosing to include the new 2014 ACA benefits in your policy beginning 1/1/2014 (Option B). The 2014 cost comparison is based on your existing policy as of the date of this letter and does not reflect any changes or updates you may have made to the policy since then. Note: The 2014 ACA policy premium amount is a projection and could change. The 2014 ACA compliant policy premium has been filed with your state's Department of insurance (DOI) and is subject to DOI approval. The uncertainty of the DOI approved premium level must be considered by you as part of your evaluation of what option you select.

	Option A Current Premium	
Policy Name:	HumanaOne Copay / 70%	Humana Nall Preferred Bronze 4850/6350 with Children's Dental
Provider Offering/Network:	Humana/ChoiceCare Network PPO	Humana/CholceCare Network PPO
In-network deductible:	\$5000 ind/\$15000 fam	\$4850 ind/\$9700 fam
In-network coinsurance:	We pay: 70%, You pay: 30%	We pay 80% you pay 20%
In-network office visits:	3 visits after copay; \$36 PCP/\$60 Specialist; then 70% after deductible	3/\$55/\$55/\$46/\$80
Separate prescription deductible:	1000	1500
In network coinsurance out-of-pocket ilmit (does not include deductible or copays);	\$5000 ind/\$10000 fam	\$8350 ind/\$12700 fam
Health Savings Account - Qualified;	No	No
Essential Health Benefits:	No	Yes
Monthly Premlum:	\$238.92	\$719.88

This is a policy snapshot only. Association and administrative fees may apply. The estimated premium amount includes fees and lexes, some of which support and fund components of the Affordable Care Act (ACA, commonly known as "healthcare reform") and are paid directly by Humana. This amount also includes any optional benefits, but may not reflect recent changes to your policy. For a complete list of your current policy benefits, covered services, out-of-network coverage, limitations and exclusions, please review your policy located on MyHumana, your secure website on Humana.com, or call 1-877-222-0650. If you haven't registered for MyHumana yet, you can go to Humana.com and click on "Register for MyHumana" to get started. If you would like a paper copy of your policy/ceitificate, call the Customer Care number on the back of your Humana ID card. We'll mail a copy within 10 business days of your request. You can also reference the Summary of Benefits and Coverage (SBC) which is a government-required document intended to provide you with consistent and comparable information about your health policy options across health insurance carriers. You can also find your SBC on MyHumana.

If your policy premium increased, you should know this isn't unique to Humana -- premium increases generally will occur industry-wide. Increases aren't based on your individual claims or changes in health status. Many other factors go in to your premium, including:

- · ACA compliance, including the addition of the new essential health benefits
- Increasing cost of medical care
- Your age and where you live



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AMENDMENT

HUMANA HEALTH PLAN, INC. 500 W. Main Street Louisville, KY 40202

Policyholder.	
Policy Number:	
This amendment should be attached to and made a part of yo	our <i>policy.</i>
I hereby agree to the following change(s);	•
To establish the policy year as the period of time from De	ecember 31, 2013 through December 30, 2014.
	•
•	
I hereby acknowledge that I have read and understand the abo	ve statements.
Date:/	
	Primary applicant or parent/guardian of minor

Bruce Broussard President

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