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# REVISED OFFER

February 24, 2005

TO ALL PCOT Membership

Gentlemen and Ladies:

Sincerely

Humana/Choicecare has requested that PCOT messenger out to the membership, the terms of their contract for the product of Medicare Advantage PPO. As a messenger model IPA, each physician has the right to accept or reject all contract offers. The Humana/Choicecare contract amendment terms are as follows:

- 1) New plan will be for enrollees that are Medicare eligible
- 2) Reimbursement at 100% of Medicare Fee Schedule or your billed charges, whichever is less
- 3) Modifications and adjustments to the fee schedule will require a 60 day written notice prior to implementation.
- 4) Meet all federal requirements to participate in Medicare

Please indicate your practice's plan to participate in the Humana/Choicecare Medicare Advantage PPO plan by checking one of the boxes below. This response should be mailed to PCOT, 935 S. Baxter, Stc. 101, Tyler, TX, 75701 or faxed to PCOT at 903-526-2320.

Brenda Shepherd, MBA, CPC, CPCS
Executive Director

Yes, our practice will accept these fees and all physicians in the practice will participate in the Humana/Choicecare contract amendment for Medicare Advantage PPO.

No, our practice does not wish to participate in the Humana/Choicecare contract amendment for Medicare Advantage PPO.

Date:

Practice Name:

Authorized Signature:

Tax I.D. No:

Print Physician Name(s)

935 S. Baxter, Suite 101 Tyler, Texas 75701 903-526-3268 or 1-888-248-1907 Fax: 903-526-2320 info@pcot.org www.PCOT.org **News Release** 

# Humana approved by CMS to offer Medicare Advantage regional health plans in 23 states, alternative to Original Medicare

Medicare Modernization Act offers significant enhancements in health plan coverage options with plans that feature prescription drug benefits, low out-of-pocket costs

LOUISVILLE, KY - Sep 23, 2005 - Humana Inc. (NYSE: HUM) announced today that it has received approval from The Centers for Medicare & Medicaid Services (CMS) to offer a regional PPO, a new type of Medicare Advantage health plan, in 23 states. This plan is a direct result of the Medicare Modernization Act (MMA) of 2003, and will be offered by Humana to Medicare beneficiaries in 14 recently created Medicare Advantage regions.\*

Beginning Jan. 1, 2006, more than 42 million Medicare eligible beneficiaries throughout the United States will have access to the Medicare Advantage regional preferred provider organization (MA-PPOs) health plans. These plans differ from Medicare Advantage HMOs in that there is no referral necessary to see a physician or specialist of choice. MA-PPOs also differ from Original Medicare in that they feature a prescription drug benefit and have been designed by CMS to ensure that Medicare beneficiaries living in all areas of the country have ready access to affordable, comprehensive health insurance.

Humana currently offers Medicare Advantage HMO and local PPO plans in more than 40 markets nationwide, and Medicare Advantage private fee for-service (PFFS) plans statewide in more than thirty states.

\* See table for listing of states where Humana's MA-PPOs are offered

"This award by CMS is significant in that it allows Humana to better meet the needs of people with Medicare who live in areas that have not previously had access to alternative Medicare plans," said Stefen Brueckner, Humana vice president of senior products. "Until recently, many Medicare beneficiaries residing in areas other than metropolitan hubs had little, if any, health care insurance plans to choose from other than Original Medicare or Medicare supplement (Medigap) plans."

Brueckner added, "Congress has taken a historical step in modernizing the Medicare program, and we are taking action to make healthcare coverage more affordable and accessible by expanding our product offerings into new markets. All 14 regions where Humana will offer the regional PPO will have two plan options that will include the prescription drug benefit. In some regions, a third PPO will have a zero premium but will not include the prescription drug benefit. Those options, coupled with membership in the SilverSneakers® Fitness Program at no additional cost to our members makes this approach very attractive to Medicare beneficiaries around the country."

### About Humana

Humana Inc., headquartered in Louisville, Ky., is one of the nation's largest publicly traded health benefits companies, with approximately 7 million medical members. Humana offers a diversified portfolio of health insurance products and related services — through traditional and consumer-choice plans — to employer groups, government-sponsored plans, and individuals.

Over its 44-year history, Humana has consistently seized opportunities to meet changing customer needs. Today, the company is a leader in consumer engagement, providing guidance that leads to lower costs and a better health plan experience throughout its diversified customer portfolio.

More information regarding Humana is available to investors via the Investor Relations page of the company's web site at <a href="https://www.humana.com">www.humana.com</a>, including copies of:

- · Annual report to stockholders;
- Securities and Exchange Commission filings;
- Most recent investor conference presentation;
- · Quarterly earnings news releases;
- Replays of most recent earnings release conference call;
- Calendar of events (includes upcoming earnings conference call dates, times, and access number, as well as planned interaction with institutional investors);
- Corporate Governance Information.

2006 HUMANA MEDICARE ADVANTAGE REGIONAL PPOS	MMA REGION	# of MEDICARE BENEFICIARIES
Alabama	10	750,733
Arizona	21	769,443
Arkansas	15	471,368
Georgia	8	1,019,219
Florida	9	3,041,852
Illinois	14	1,720,335
Indiana	13	910,9890
Kansas	18	405,801
Kentucky	13	677,660
Louisiana	16	650,510
Michigan	11	1,501,197
Mississippi	16	457,314
Missouri	15	917,825
North Carolina	7	1,258,190
Ohio	12	1,784,284
Oklahoma	18	541,369
Pennsylvania	6	2,167,299
South Carolina	8	636,365
Tennessee	10	912,365
Texas	17	2,504,912

7	981,773
6	359,789
14	834,673
	7 6 14

# FOR MORE INFORMATION, CONTACT:

Barbara Kerr

Humana Corporate Communications

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# **HUMANA MEDICARE ADVANTAGE PPO**

Humana is pleased to announce the addition of a Medicare Advantage PPO to the array of our product offerings. Outlined below are just some of the program highlights associated with this plan.

## o Reimbursement

100% of the CMS allowable, plans pay according to CMS regulations

### Product Information

Full replacement plan to traditional Medicare Part A and B coverage Co-pays and a limited co-insurance (with little or no monthly premium) Routine physical exams, hearing exams, and vision discounts Worldwide emergent/urgent coverage

# Product Design

More benefits than Original Medicare Members can receive services from in-network and out of network providers Member cost- sharing increases when out of network providers are utilized Predictable costs (co-payments and/or co-insurance) Prior notification is requested for inpatient admissions Limited prior authorizations for gastric bypass surgeries, cosmetic procedures, and services not covered under traditional Medicare No referrals Limited secondary billing

Member Education

- New Members Specialists Personal Plan Representatives that work directly with all new Humana Medicare Advantage plan members for the first 3 months
- New Member Orientations to help members get the most out of their Humana Medicare Advantage plan
- MyHumana Provides members access to a personalized homepage and other valuable tools available on the web

We also offer access to Humana's online Provider Portal at www.Humana.com. Once registered, you are able to access some of the following features:

Online eligibility

Claim status and claim reconsideration

Various contract related materials

Online notification inquiry.....and much more!

We are excited to offer this plan in your area, and look forward to establishing long-term, strong relationships in your community.