



Humana Medicare Enrollment
PO Box 14330
Lexington, KY 40512-9892

Dear KPPA Retiree:

Choosing your health plan is one of the most important things you do. You want a plan that fits your lifestyle and gives you the coverage you need. You also want a plan that's easy to understand. That's why Kentucky Public Pensions Authority (KPPA) teamed up with Humana to offer you a plan that does all of that – and more! We're pleased to let you know that you can have a medical and prescription drug benefit program offered through Humana's Group Medicare Advantage Preferred Provider Organization (PPO) Plans. The KPPA-sponsored "Essential" and the KPPA-sponsored "Premium" Medicare Advantage Prescription Drug Plans (MAPD) are being offered for the 2026 Plan Year.

If you would like to enroll in one of these KPPA-sponsored Medicare Advantage plans with Humana, you must fill out the enclosed KPPA enrollment form and return it to KPPA prior to your effective date. Please be advised that under Federal Law – the Medicare Secondary Payer (MSP) Act, in certain circumstances after retirement, a Medicare eligible retiree's reemployment with a participating agency of Kentucky Public Pensions Authority will PROHIBIT KPPA from offering or continuing to offer retiree coverage under the Humana Group Medicare Advantage PPO Plan. Please contact KPPA if you have questions about plans available to you.

The Humana Group Medicare Advantage PPO Plan is a Medicare Advantage plan. You must have Medicare Parts A and B to enroll in the Medicare Advantage plan and continue to pay your Part B premium.

If you do not have Medicare Part B, you cannot be enrolled in the Medicare Advantage plan. Instead, you will be defaulted to the *KPPA Medical Only plan (or another plan offered by KPPA) and your premium amount may be higher. Please contact KPPA if you have questions. For example, if you have 240 months (100%) of Service Credit-Contribution and you elect the KPPA Premium Plan you would still have an additional premium payment of \$204.73**

Humana has a network of primary care doctors, specialists, and hospitals. In addition to our network, the Humana Group Medicare Advantage PPO Plan gives you access to any provider or facility that accepts Medicare and agrees to bill Humana. However, you may pay more if you use out-of-network providers.

What you need to do:

- Read the information about Humana's Group Medicare Advantage PPO Plan.
- To learn more about the enrollment process for this plan, be sure to review the Important Information about Enrollment letter included in this packet.
- Call Humana Group Medicare Customer Care. A customer care specialist can help you with any questions you have.
- Premium information is provided below. If you have questions about your premium, please contact KPPA at 800-928-4646. You can call Monday - Friday from 8 a.m. - 4:30 p.m., Eastern time.

Monthly Premiums		
Available Plans	2026	2026 ***Mirror plan for members with no Medicare Part B
***KPPA Medical Only* <i>(This is not a Medicare Advantage Plan)</i>	\$194.23	N/A
Humana Group Medicare Advantage PPO - KPPA Essential Prescription Drug Plan	\$55.10	\$264.56
Humana Group Medicare Advantage PPO - KPPA Premium Prescription Drug Plan	\$199.94	\$404.67
<i>*The ***KPPA Medical Only Plan is not a Medicare Advantage Plan and does not provide any outpatient prescription drug benefits. It is designed to supplement any Medicare Part D prescription drug coverage you may have or obtain. If you will have prescription drug coverage (Medicare Part D) with a provider other than KPPA for 2026, the only plan available to you is the ***KPPA Medical Only Plan.</i>		

If you began participating prior to 7/1/2003 use the **Percentage Contribution Level** guide below.

Service Credit-Percentage Contribution	% KPPA Pays	Amount KPPA Pays
240 months or more	100%	\$199.94
180-239 months	75%	\$149.96
120-179 months	50%	\$99.97
48-119 months	25%	\$49.99
0-47 months	0%	\$0

If you began participating on or after 7/01/2003: Use the **Dollar Contribution guide below**, if you are receiving benefits, were hired July 1, 2003 or later, and began participating with KPPA **between August 1, 2004 and August 31, 2008.*** Or began participating with KPPA **on or after September 1, 2008.****

*In order to be eligible for health insurance benefits, you must have 120 months of service upon retirement.

**In order to be eligible for health insurance benefits, you must have 180 months of service upon retirement.

For service in a nonhazardous position: You will receive a monthly dollar contribution of \$14.85 for each year of service per month. **For example**, if you began participating September 1, 2003 in a nonhazardous position, and retired effective October 1, 2013, you would receive \$148.50 per month towards health insurance premiums. The Dollar contribution amount will increase 1.5% on July 1 each year.

For service in a hazardous position: You will receive a monthly contribution of \$22.27 for each year of service per month. **For example**, if you began participating September 1, 2003 in a hazardous position, and retired effective October 1, 2013 you would receive \$222.70 per month towards health insurance premiums. The Dollar contribution amount will increase 1.5% on July 1 each year.

If you have hazardous and nonhazardous service: You will receive contribution based on the amount of full years of service for each. **For example**, if you began participating September 1, 2003 in a nonhazardous position until September 30, 2008, and then began participating October 1, 2008 in a hazardous position, and retired effective November 1, 2013, you will receive \$185.60 per month towards health insurance premiums.

If you are receiving a monthly retirement benefit that qualifies you to receive a Health Insurance Percentage contribution and also receiving a monthly retirement benefit that qualifies you to receive a Health Insurance Dollar contribution, please contact the Retirement office for help calculating your cost.

If you have hazardous service, or if you have reciprocal service with KTRS, JRP, LRP, you will need to contact KPPA for the proper contribution amount.

Service Credit – Dollar Contribution Level- Hazardous	Years of Service	Amount KPPA Pays
Participating date after 7/1/2003	Example 10 years	\$222.70
\$22.27*		
*Calculate the KPPA Service Credit Dollar Amount by multiplying the Years of Service by the Health Insurance Dollar Contribution Amount.		
Service Credit – Dollar Contribution Level- Non Hazardous	Years of Service	Amount KPPA Pays
Participating date after 7/1/2003	Example 10 years	\$148.50
\$14.85**		
**Calculate the KPPA Service Credit Dollar Amount by multiplying the Years of Service by the Health Insurance Dollar Contribution Amount.		

If you have any questions or need help, please visit your.Humana.com/kppa or call our Customer Care team at **855-267-1935 (TTY: 711)**, Monday - Friday, 8 a.m. - 9 p.m., Eastern time. Our 24-hour automated phone system may answer your call on weekends and some public holidays. Please be sure to keep a copy of this letter for your records.

For eligibility and premium question, call KPPA at 800-928-4646. You can call Monday - Friday from 8 a.m. - 4:30 p.m., Eastern time.

Your official source of U.S. Government Medicare information is available 24 hours a day, seven days a week: Centers for Medicare & Medicaid Services (CMS) at 800-633- 4227 (TTY: 877-486-2048), or visit their website at www.medicare.gov.

We look forward to serving you now and for many years to come.

Sincerely,
Group Medicare Operations

*** Administered by Personify Health on Behalf of Humana. Personify Health is a subcontractor and may perform certain services on behalf of Humana.