

Obtaining Needed Care During a Disaster or Emergency

Presbyterian Medicare Advantage Plans will ensure access to benefits in the following manner when a disaster or emergency is declared and there is disruption of access to health care.

A disruption of access to healthcare is an interruption or interference in the service area such that members do not have the ability to access contracted providers or contracted providers do not have the ability provide needed services to members, resulting in Presbyterian Medicare Advantage Plans failing to meet the normal prevailing patterns of community health care delivery in the service area.

- Cover Medicare Part A and B services and supplemental Part C benefits furnished at non-contracted facilities.
- Waive requirements for gatekeeper referrals where applicable.
- Provide the same cost-sharing as if the service or benefit had been furnished at a contracted facility.
- Make the changes that benefit members effective immediately without the required 30-day notice.

A declaration of disaster will identify the geographic area affected by the event and may be made as one of the following:

- Presidential declaration of disaster or emergency under either:
 - The Stafford Act.
 - The National Emergencies Act.
- Secretarial declaration of a public health emergency under section 319 of the Public Health Service Act.
- Declaration by the Governor of the State of New Mexico.

Presbyterian Medicare Advantage Plans will continue furnishing access to benefits as described above for 30 days after the following, whichever is earlier:

- All sources that declared a disaster or emergency declare an end.
- No end date was identified, and all applicable emergencies or disasters declared for the area have ended, including through expiration of the declaration or any renewal of such declaration.
- There is no longer a disruption of access to health care.