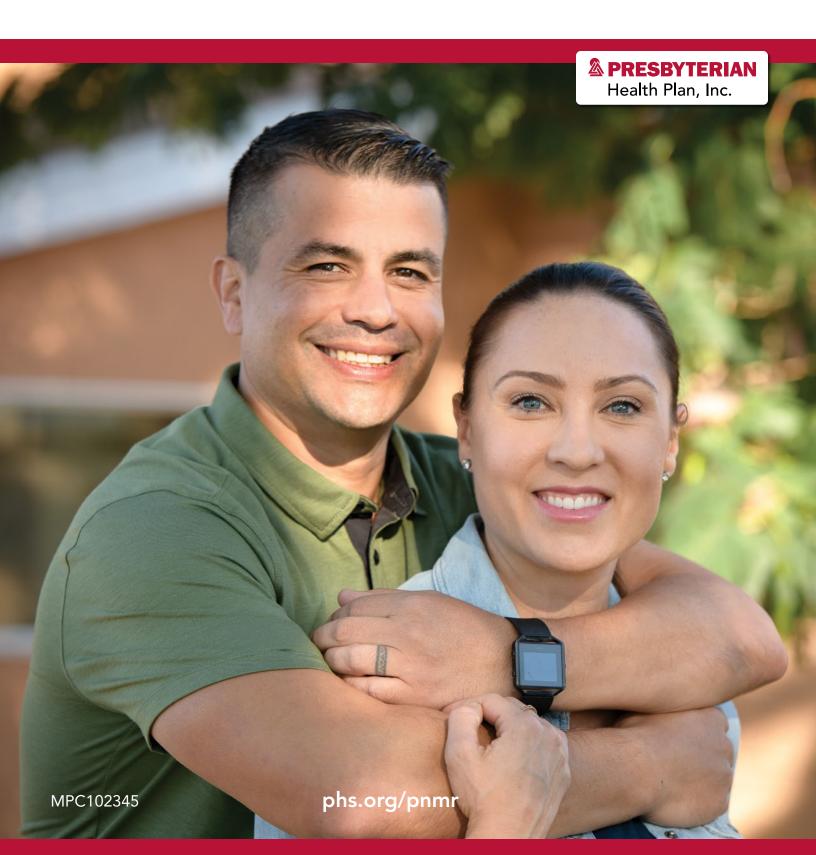
Health Insurance Benefits for PNMR



Improving the health of New Mexicans for over 100 years

Presbyterian Health Plan, Inc. has a long tradition of providing our members the high quality care they need to stay healthy, and in that tradition, Presbyterian Health Plan, Inc. is proud to provide PNMR health benefits. For more than a century, Presbyterian has been improving the health of New Mexicans and is committed to the patients and members who count on us.

In-Network Benefit Summary at a Glance

	PPO OPTION	CCP OPTION
Individual Deductible	\$500	\$2,500
Family Deductible	\$1,500	\$5,000
Primary Care Visit	\$20 copay	20% after deductible
Urgent Care Visit	\$35 copay	20% after deductible
Specialist Visit	\$40 copay	20% after deductible
Hospitalization	15% after deductible	20% after deductible
Emergency Care	\$150 copay	20% after deductible

Enroll Today

Contact your human resources, health benefits or payroll office for more information. For information on Transition of Care (TOC), visit **www.phs.org/pnmr**.

If you would like to receive your member materials by mail, contact our Customer Service Center at (505) 923-7778 or 866-670-0603.

For assistance in finding a Primary Care Provider or Specialist within the Presbyterian Healthcare System, please contact our Presbyterian Member Advocate Team at (505) 923-7727 or 866-670-0602.

We'll Be There Wherever You Go

Presbyterian offers you the value that comes with our integrated system of physicians, hospitals, and a health plan – all working together to keep you healthy and provide new and innovative service.

With access to thousands of providers statewide and in bordering communities, Presbyterian gives you more freedom to manage your own healthcare. To find the most current list of providers and create your very own personal Provider Directory based on criteria you choose, visit www.phs.org/directory.

Optum (formerly ABQ Health Partners/Davita) is now in-network for PNMR members.

Investing in Growing Communities

Presbyterian has served the communities of northern New Mexico for more than 60 years. In 2015, we opened our first Santa Fe facility on St. Michael's Drive, and in 2018, we opened the Presbyterian Health Park in Santa Fe, featuring a medical center with 30+ patient beds, specialty medical services, surgery suites and an urgent care and emergency department.



We'll be there wherever you go.

In addition to our robust provider network, members also receive in-network benefits outside of New Mexico through our partnership with our national network. Refer to your Summary of Benefits and Coverage (SBC) to see if your plan qualifies.

No-Cost Member Benefits

PresRN Nurse Advice Line



Speak with a registered Presbyterian nurse for medical advice at no cost 24 hours a day, every day, including holidays. Call (505) 923-5570 or 1-866-221-9679.

For details, visit **www.phs.org** and search for "PresRN."

Video Visits



See a provider anytime, day or night. This option offers a new way to see a medical provider for non-emergency medical conditions via secure video through a smartphone, tablet or

computer webcam. Visits are \$0.

For details, visit www.phs.org/videovisits.

myPRES



Get the information you want when you need it. Presbyterian's web-based services offer fast and convenient service any day of the year. To sign in or register, visit

www.phs.org/myPRES.

- Look up benefit information securely, view claims status, and track deductibles.
- View or request a replacement member ID card.
- Use Get Care to schedule appointments, including telehealth visits.

All these great features are now also available on your mobile device via an app that can be downloaded for Apple and Android devices. Simply search for myPRES in the App Store for Apple or the Google Play Store for Android devices.

MyChart



Members with a Presbyterian Medical Group provider can send electronic messages and communicate with their care team, request prescription renewals and schedule office or

telephone visits. You can also view medical records, lab and radiology reports, procedures and test results.

For details, visit www.phs.org/mychart.

Talkspace



No-cost messaging therapy offers members age 14 and older behavioral health coaching with licensed behavioral therapists via

text, video or audio messaging at a time and place that is convenient for them.

Go to www.talkspace.com/php to access the program.

Clickotine



Clickotine is an innovative program that uses clinically driven app technology to help you create and stick to a quit plan and overcome nicotine cravings. To get started, simply download

the Clickotine[®] app in the App Store or Google Play and activate your personalized program by entering the code LNV20C. Find out more at **Clickotine.com**.

On to Better Health



This interactive software offers an alternative to traditional mental health and substance abuse care by providing access to tools

and resources that are easy to use, confidential and available 24/7 at no cost.

Go to www.ontobetterhealth.com/php.





Relieve aches + pain from the comfort of your home

Tired of chronic pain or loss of mobility? Struggling with discomfort? Meet Sword, the new digital physical therapy program designed to help you overcome your joint, back, or muscle pain—all from home.

Combining licensed PT with easy-to-use technology, Sword is more than just convenient. It's proven to work better than in-person physical therapy, too.¹



Here's how it works















Pick Your PT

Thanks to your dedicated PT, your Sword program is entirely customized to you, your goals and your abilities.

Get Your Sword Kit

Your kit comes with your own tablet, and will provide you and your PT with realtime feedback.

Stay Connected

Chat 1:1 with your PT anytime. They'll check in, monitor your progress, and adjust your program as needed.

Feel the Relief

Complete your exercise sessions whenever is most convenient for you. Then feel pain relief for yourself.

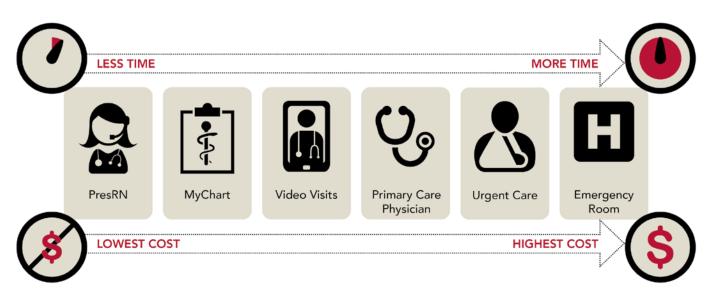
Pain doesn't wait. Why should you?

Enroll today to get started!

join.swordhealth.com/presbyterian/register



Convenient ways to Access Care



Direct access to medical advice 24 hours a day, 365 days a year. The PresRN nurse advice line is an easy way to speak with a registered Presbyterian nurse if you're not feeling well and do not know what to do. This service is available at no cost to you 24 hours a day, 7 days a week, including holidays. Our nurses are happy to answer general health questions when you are healthy, too. Call (505) 923-5570 or **1-888-730-2300**.

A secure, web-based portal for direct communication to your care team. MyChart allows members with a Presbyterian Medical Group provider to send electronic messages and communicate with their care team, request prescription renewals and schedule office or telephone visits. Members can also conveniently view their medical records, lab and radiology reports, procedures and test results.

See a provider anytime day or night with Video Visits. This convenient option offers you a new way to see a medical provider for non-emergency medical conditions via secure video through your smartphone, tablet or computer webcam. Visits are \$0 for PPO members. To learn more about these virtual care options, visit **www.phsgetcare.org**.

Primary care physicians can treat most health problems. They may be a general/family practice physician, internal medicine physician, gynecologist, physician assistant, or nurse practitioner. For assistance in finding a Primary Care Provider, please contact our Presbyterian Member Advocate Team at (505) 923-7727 or 866-670-0602.

Urgent care clinics provide care for minor illness and injuries that are not an emergency. For added convenience, Presbyterian now offers same-day, scheduled appointments.

Emergency rooms are for serious medical emergencies or injuries that require immediate medical attention.

Value-Added Benefits



Discounts for Acupuncture, Massage Therapy, Chiropractic and more. Our partnership with BenefitSource brings you member-only discounts for alternative medicine and vision services. Simply present your Presbyterian Member ID card to a participating provider and receive as much as 35% off services like massage therapy, hearing and vision hardware, and acupuncture and chiropractic treatments. For a list of participating providers, fee schedules, and more, visit www.benefitsource.org/Presbyterian or call (505) 237-1501 or 1-888-862-8659.



Create your very own Provider Directory based on criteria you choose. At www.phs.org/directory, you can find providers who are close to your work or home; find specific providers, PCPs or specialists; narrow your search to match your preferences, such as a male or female provider; and find facilities and pharmacies.



Presbyterian Member Advocate Team

PNMR members will have access to Presbyterian's Member Advocate Team, a specialized customer service unit specifically trained on PNMR's benefit design, provider selection and scheduling process. The Member Advocate Team can help you select a Primary Care Provider if you are new to the Presbyterian care delivery system, as well as help you schedule your first appointment. This team is available Monday through Friday, 7 a.m. – 6 p.m. at (505) 923-7727 (or toll-free at 866-670-0602) or via email at info@phs.org.

PNMR PPO Summary of Benefits

PNMR PPO Benefit		In-Network	Out-of-Network
Deductible	Annual Member Deductible (calendar year)		
	Individual	\$500	\$1,000
	Individual + 1	\$1,000	\$2,000
	Family	\$1,500	\$3,000
Physician Services	Non-Specialist	\$20 office visit copay	35% coinsurance after deductible
	Specialist	\$40 office visit copay	35% coinsurance after deductible
	Surgery in Office	15% coinsurance after deductible	35% coinsurance after deductible
	Injectable drugs administered in physician's office • Does not include cost of drug	Included in office visit copay	35% coinsurance after deductible
	Self-injectable drugs (specialty pharmaceuticals)	Generic: 15% up to \$250 max; Non-Preferred: 15% up to \$500 max	Not Covered
Preventive Care Services ¹	 Routine Physical Annual women's exam Annual men's exam including PSA Related laboratory tests including X-Rays (includes routine pap tests, cholesterol tests, urinalysis, mammogram, colonoscopy, etc.) Well child care including vision and hearing screenings (through age 21) Immunizations Health education and counseling (including smoking/tobacco cessation education Medications used to treat specific conditions Family planning 	Plan pays 100%	35% coinsurance after deductible
Outpatient Diagnostic Testing	Advanced Radiology ² (i.e., PET, MRI, CT scans)	15% coinsurance after deductible	35% coinsurance after deductible
	Other Diagnostic Laboratory	15% coinsurance after deductible	35% coinsurance after deductible
	Other Diagnostic X-Rays	15% coinsurance after deductible	35% coinsurance after deductible

PNMR PPO Benefit		In-Network	Out-of-Network
Hospital Services	 Inpatient Hospitalization² Includes room and board, inpatient physician care – physician visits, surgeon, anesthesiologist, laboratory tests and X-Rays 	15% coinsurance after deductible	35% coinsurance after deductible
	Inpatient Rehabilitation Services ²	15% coinsurance after deductible	35% coinsurance after deductible
	Observation Stay ²	15% coinsurance after deductible	35% coinsurance after deductible
Surgical Services	Inpatient Surgery ²	15% coinsurance after deductible	35% coinsurance after deductible
	Outpatient Surgery ²	15% coinsurance after deductible	35% coinsurance after deductible
	Office Surgery	15% coinsurance after deductible	35% coinsurance after deductible
Urgent Care Services	Physician charges	\$35 copay	35% coinsurance after deductible
	Facility charges	15% coinsurance after deductible	35% coinsurance after deductible
Telephonic Services	Video Visits	\$0 copay	Not Covered
Emergency Services	Emergency Room/Emergency observation trea	ntment:	
	Facility charges	\$150 copay	\$150 copay
	Physician charges	15% coinsurance after deductible	15% coinsurance after deductible
Ambulance	Ground/Air Emergency Transport	15% coinsurance after deductible	15% coinsurance after deductible
	Non-Emergency Air ²	15% coinsurance after deductible	35% coinsurance after deductible
Maternity Services	Physician/Midwife Services		
	Delivery, prenatal and postnatal care - Primary Care	\$20 copay for first visit only, then \$0 copay thereafter	35% coinsurance after deductible
	Delivery, prenatal and postnatal care - Specialist	\$40 copay for first visit only, then \$0 copay	35% coinsurance after deductible
	Hospital Admission Includes room and board, inpatient physician care physician visits, surgeon, anesthesiologist, laboratory tests and X-Rays	15% coinsurance after deductible	35% coinsurance after deductible
	Aftercare following delivery	15% coinsurance after deductible	35% coinsurance after deductible
Behavioral/Mental Health/Substance Abuse Services	Outpatient Services	\$20 copay	35% coinsurance after deductible
	Inpatient Services ² /Partial Hospitalization ²	15% coinsurance after deductible	35% coinsurance
	Partial Hospitalization ²		after deductible
	Intensive Outpatient Treatment	\$20 copay	35% coinsurance after deductible

PNMR PPO Benefit		In-Network	Out-of-Network
Other Services	Allergy Testing and Treatment	15% coinsurance after deductible	35% coinsurance after deductible
	Allergy Injections only	15% coinsurance after deductible	35% coinsurance after deductible
	Acupuncture Maximum benefit of \$1,500 per calendar year	15% coinsurance after deductible	Not Covered
	Chiropractic Maximum benefit of \$1,500 per calendar year	15% coinsurance after deductible	Not Covered
	 Autism Spectrum Disorders² Diagnosis and treatment of autism spectrum disorder for members 19 years of age or younger (or under 22 years of age if still enrolled in high school) Applied Behavioral Analysis (ABA) 	Copay/Coinsurance based on place of service	Copay/Coinsurance based on place of service
	Cardiac Rehabilitation ²	15% coinsurance after deductible	35% coinsurance after deductible
	Pulmonary Rehabilitation ²	15% coinsurance after deductible	35% coinsurance after deductible
	Chemotherapy and/or Radiation Therapy, Inpatient Dialysis Medical Drugs administered as part of Chemotherapy and/or Radiation Therapy are not included in the copayment	15% coinsurance after deductible	35% coinsurance after deductible
	Outpatient Dialysis Medical Drugs administered as part of Dialysis are not included in the copayment	0% coinsurance after deductible	0% coinsurance after deductible
	Durable Medical Equipment	15% coinsurance after deductible	35% coinsurance after deductible
	Physical, Occupational, and Speech Therapy ²	15% coinsurance after deductible	35% coinsurance after deductible
	 Skilled Nursing Facility³ Maximum lifetime benefit of 30 days per condition for inpatient therapy and rehabilitation services. All types of therapy and all locations are combined. Includes room and board, physician visits, surgeon, anesthesiologist, laboratory tests and X-Rays 	15% coinsurance after deductible	35% coinsurance after deductible
Prescription Drugs	Pharmacy services administered by Express Scripts. Please contact for more information.		

PNMR PPO Benefit In-Network Out-of-Network

1. The Patient Protection and Affordable Care Act (also known as Health Care Reform) requires health plans to cover specific Preventive Care Services, including Women's Preventive Care Services, at no cost to the member when the services are provided by an In-Network Participating Provider. Although these services are covered at no charge, the provider may charge a copayment for other services provided during the office visit. Additionally, some covered Family Planning services, including male vasectomies, continue to require member cost-sharing. If you have questions regarding the Preventive Care Services that are covered under this plan, including Family Planning Services, or your cost for these services, please refer to your Summary Plan Description or contact Presbyterian Health Plan at the phone number listed on your ID card.

- 2. Pre-Admission Review and/or Prior Authorization may be required. Your In-network Practitioner/Provider must obtain this Prior Authorization before providing these services to you. If you do not get admission review when required, a financial penalty of \$300 may apply and/or benefits may be denied.
- 3. This benefit includes an annual visit limitation. See your Summary Plan Description for more information.



Your care. Your choice.



Save time and money by choosing where you receive care.

It can be confusing to know where to go to get the quality of care you need, when you need it at the lowest out-of-pocket cost.

That's why we have worked hard to add many convenient, lower cost care facilities to our network. Here we provide guidance to help you choose where to receive care, and if you need to speak with someone, we have an exceptional customer service team to guide you.

Many common tests and treatments performed in a hospital can just as easily be provided at more convenient and lower cost locations. When certain procedures are done outside of a hospital-based facility, the savings to you can really add up.

	Average claim costs in a hospital facility*	Savings opportunity by choosing a lower cost location	Your potential claim savings by choosing a lower cost location**
Orthopedic (joint) procedures	\$5,357	40%	\$2,143
Colon Screening	\$1,417	65%	\$921
Diagnostic Imaging	\$1,320	50%	\$660
Lab Work	\$261	65%	\$170

^{*} Average claim for a member of a Presbyterian employer-sponsored health insurance plan. Based on 2019 Presbyterian claims data.

Take advantage of these resources to help you choose the most appropriate facility for the services you need:

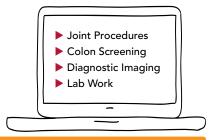
Ask your provider to refer you to non-hospital locations for certain care needs.

Call the Presbyterian Customer Service Center number on the back of your member ID card for assistance in choosing a care location with the lowest out-of-pocket cost.

Visit www.phs.org/ yourcareyourchoice







MPC052201 PHP-149



^{**} Savings to the member are dependent on plan benefits, copays and deductibles.

PNMR CCP Summary of Benefits

PNMR CCP Benefit		In-Network	Out-of-Network
Deductible	Annual Member Deductible (calendar year)		
	Individual	\$2,500	\$5,000
	Individual + 1	\$5,000	\$10,000
	Family	\$5,000	\$10,000
Physician Services	Non-Specialist	20% coinsurance after deductible	40% coinsurance after deductible
	Specialist	20% coinsurance after deductible	40% coinsurance after deductible
	Surgery in Office	20% coinsurance after deductible	40% coinsurance after deductible
	Injectable drugs administered in physician's office	20% coinsurance after deductible	40% coinsurance after deductible
	Self-injectable drugs (specialty pharmaceuticals)	20% coinsurance after deductible	Not Covered
Preventive Care Services ¹	 Routine Physical Annual women's exam Annual men's exam including PSA Related laboratory tests including X-Rays (includes routine pap tests, cholesterol tests, urinalysis, mammogram, colonoscopy, etc.) Well child care including vision and hearing screenings (through age 21) Immunizations Health education and counseling (including smoking/tobacco cessation education Medications used to treat specific conditions Family planning 	Plan pays 100%	40% coinsurance after deductible
Outpatient Diagnostic Testing	Advanced Radiology ² (i.e., PET, MRI, CT scans)	20% coinsurance after deductible	40% coinsurance after deductible
	Other Diagnostic Laboratory	20% coinsurance after deductible	40% coinsurance after deductible
	Other Diagnostic X-Rays	20% coinsurance after deductible	40% coinsurance after deductible

PNMR CCP Benefit		In-Network	Out-of-Network
Hospital Services	Inpatient Hospitalization ² • Includes room and board, inpatient physician care – physician visits, surgeon, anesthesiologist, laboratory tests and X-Rays	20% coinsurance after deductible	40% coinsurance after deductible
	Inpatient Rehabilitation Services ²	20% coinsurance after deductible	40% coinsurance after deductible
	Observation Stay ²	20% coinsurance after deductible	40% coinsurance after deductible
Surgical Services	Inpatient Surgery ²	20% coinsurance after deductible	40% coinsurance after deductible
	Outpatient Surgery ²	20% coinsurance after deductible	40% coinsurance after deductible
	Office Surgery	20% coinsurance after deductible	40% coinsurance after deductible
Urgent Care Services	Facility charges	20% coinsurance after deductible	40% coinsurance after deductible
	Physician charges	20% coinsurance after deductible	40% coinsurance after deductible
Telephonic Services	Video Visits	0% coinsurance after deductible	Not Covered
Emergency Services	Emergency Room/Emergency observation treatment:		
	Facility charges	20% coinsurance after deductible	20% coinsurance after deductible
	Physician charges	20% coinsurance after deductible	20% coinsurance after deductible
Ambulance	Ground/Air Emergency Transport	20% coinsurance after deductible	20% coinsurance after deductible
	Non-Emergency Air ²	20% coinsurance after deductible	40% coinsurance after deductible
Maternity Services	Physician/Midwife Services		
	Delivery, prenatal and postnatal care - Primary Care	20% coinsurance after deductible	40% coinsurance after deductible
	Delivery, prenatal and postnatal care - Specialist	20% coinsurance after deductible	40% coinsurance after deductible
	Hospital Admission Includes room and board, inpatient physician care physician visits, surgeon, anesthesiologist, laboratory tests and X-Rays	20% coinsurance after deductible	40% coinsurance after deductible
	Aftercare following delivery	20% coinsurance after deductible	40% coinsurance after deductible
Behavioral/Mental Health/Substance Abuse Services	Outpatient Services	20% coinsurance after deductible	40% coinsurance after deductible
	Inpatient Services ² /Partial Hospitalization ² Partial Hospitalization ²	20% coinsurance after deductible	40% coinsurance after deductible
	Intensive Outpatient Treatment	20% coinsurance after deductible	40% coinsurance after deductible

PNMR CCP Benefit		In-Network	Out-of-Network
Other Services	Allergy Testing and Treatment	20% coinsurance after deductible	40% coinsurance after deductible
	Allergy Injections only	20% coinsurance after deductible	40% coinsurance after deductible
	Acupuncture Maximum benefit of \$1,500 per calendar year	20% coinsurance after deductible	Not Covered
	Chiropractic Maximum benefit of \$1,500 per calendar year	20% coinsurance after deductible	Not Covered
	Autism Spectrum Disorders ² • Diagnosis and treatment of autism spectrum disorder for members 19 years of age or younger (or under 22 years of age if still enrolled in high school) • Applied Behavioral Analysis (ABA)	20% coinsurance after deductible	Copay/Coinsurance based on place of service
	Cardiac Rehabilitation ²	20% coinsurance after deductible	40% coinsurance after deductible
	Pulmonary Rehabilitation ²	20% coinsurance after deductible	40% coinsurance after deductible
	Chemotherapy and/or Radiation Therapy, Inpatient Dialysis • Medical Drugs administered as part of Chemotherapy and/or Radiation Therapy are not included in the copayment	20% coinsurance after deductible	40% coinsurance after deductible
	Outpatient Dialysis • Medical Drugs administered as part of Dialysis are not included in the copayment	0% coinsurance after deductible	0% coinsurance after deductible
	Durable Medical Equipment	20% coinsurance after deductible	40% coinsurance after deductible
	Physical, Occupational, and Speech Therapy ²	20% coinsurance after deductible	40% coinsurance after deductible
	 Skilled Nursing Facility³ Maximum lifetime benefit of 30 days per condition for inpatient therapy and rehabilitation services. All types of therapy and all locations are combined. Includes room and board, physician visits, surgeon, anesthesiologist, laboratory tests and X-Rays 	20% coinsurance after deductible	40% coinsurance after deductible
Prescription Drugs		inistered by Express Scriptor or more information.	ts.

PNMR CCP Benefit In-Network Out-of-Network

1. The Patient Protection and Affordable Care Act (also known as Health Care Reform) requires health plans to cover specific Preventive Care Services, including Women's Preventive Care Services, at no cost to the member when the services are provided by an In-Network Participating Provider. Although these services are covered at no charge, the provider may charge a copayment for other services provided during the office visit. Additionally, some covered Family Planning services, including male vasectomies, continue to require member cost-sharing. If you have questions regarding the Preventive Care Services that are covered under this plan, including Family Planning Services, or your cost for these services, please refer to your Summary Plan Description or contact Presbyterian Health Plan at the phone number listed on your ID card.

- 2. Pre-Admission Review and/or Prior Authorization may be required. Your In-network Practitioner/Provider must obtain this Prior Authorization before providing these services to you. If you do not get admission review when required, a financial penalty of \$300 may apply and/or benefits may be denied.
- 3. This benefit includes an annual visit limitation. See your Summary Plan Description for more information.

Personalized Service Dedicated to You







Visit your web site for PNMR employees. Quickly view and print your medical, dental, and vision plan benefit materials and view other helpful resources online at your convenience at www.phs.org/pnmr.

Get the information you want when you need it.

Get the information you want when you need it. Presbyterian's web-based services offer fast and convenient service any day of the year. To sign in or register, visit www.phs.org/myPRES.

- Look up benefit information securely, view claims status, and track deductibles.
- View or request a replacement member ID card.
- Use Get Care to schedule appointments, including telehealth visits.

All these great features are now also available on your mobile device via an app that can be downloaded for Apple and Android devices. Simply search for myPRES in the App Store for Apple or the Google Play Store for Android devices.

Centrally located customer service. Our friendly representatives, located in Albuquerque, are standing by to answer your benefit questions Monday through Friday from 7 a.m. to 6 p.m. You can contact our Presbyterian Customer Service Center by calling (505) 923-7778 or 866-670-0603 or by sending an e-mail at any time to **info@phs.org**.

Keep moving with a Fitness Pass membership.

The 2024 cost is only \$22.50 per eligible member per month. Enrollment is open year-round.



As a Presbyterian Health Plan member, you and your dependents have access to more than 10,000 fitness, recreation and community centers, including:

- Defined Fitness locations in Albuquerque, Rio Rancho, Farmington and Santa Fe
- Prime Fitness network (nationwide)
- A discount on Sports & Wellness gym fees



Defined Fitness is one of New Mexico's premier health clubs, offering a wide variety of group exercise classes, supervised child care and state-of-the-art strength training and cardiovascular equipment. All locations feature an aquatic complex with an indoor pool, hot tub, dry sauna and steam room.



The Prime Fitness network provides group exercise classes and amenities such as pools, sport courts, tracks and more. You can visit participating locations nationwide as often as you like, including select CHUZE, YMCAs, Snap Fitness, Curves® and more. When you use Prime Fitness, your fitness travels with you.



www.sports and wellness.com

Sports & Wellness is where Albuquerque has gone to find fun, friends and fitness for 25+ years. Enjoy a special Presbyterian Health Plan member rate and experience five-star service and first-rate amenities at five New Mexico locations.

Fitness Pass program enrollment is easy. How to start:

For quick access and to learn more about Fitness Pass, go to www.phs.org/mypres.

- All enrolled health plan members aged 18 and older are eligible to enroll.
- Once enrolled, Presbyterian will automatically debit your account or credit card each month.
- Your enrollment will last through the current calendar year, and you must reenroll each year.

Keep moving with a Fitness Pass Membership

Your journey to a healthier you is as easy as a few clicks!

- 1. Visit www.phs.org.
- 2. Sign in using your myPRES credentials. Need a myPRES account? Sign up at www.phs.org/myPRES.
- 3. Select the eligible family members that would like to enroll. Remember, only enrolled members aged 18 and older are eligible for the Fitness Pass.
- 4. Fill out the banking information. Presbyterian accepts checking/debit accounts and most major credit cards.
- 5. Print/save a copy of your confirmation page. If you have any questions, please call our customer service center using the number on the back of your Member ID card and reference the confirmation number.
- 6. We will send your eligibility information beginning the first of the following month.
- 7. Visit the gym of your choice. At Defined Fitness and Sports & Wellness, you will be issued an ID card directly by the gym after you present your Presbyterian Member ID card. If you want to use Prime Fitness, visit **www.primemember.com** to obtain a Prime ID Card before visiting a gym in that network.

Some things to keep in mind about your Fitness Pass membership

- You can use as many gyms simultaneously as you would like; there is no limit to the number of gyms you can utilize.
- Upon enrollment, your fitness pass eligibility will start on the first of the following month.
- Initial enrollment is open all year, although if you enroll you are committed through the calendar year.
- Eligible dependents must be at least 18 years of age to participate.
- Dependents living outside of New Mexico can still participate and have access to the nationwide Prime Fitness Network.
- You must be active on your Presbyterian Health Plan policy to remain eligible for the Fitness Pass.
- Fitness Pass accounts cannot be changed or cancelled voluntarily.
- If your account is cancelled for non-payment, you cannot re-enroll until the following year.
- All gym memberships through the Fitness Pass are basic memberships; upgrades may be purchased directly through the fitness center.

MPC032001



Presbyterian complies with civil rights laws and does not discriminate on the basis of protected status including but not limited to race, color, national origin, age, disability, or sexual orientation or gender expression. If you need language assistance, services are available at no cost. Call (505) 923-5420, 1-855-592-7737 (TTY: 711).

ATENCIÓN: Si usted prefiere hablar en español, están a su disposición servicios gratuitos de ayuda lingüística. Llame al (505) 923-5420, 1-855-592-7737 (TTY: 711).

Díí baa akó nínízin: Díí saad bee yánítti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hóló, kojj' hódíílnih (505) 923-5420, 1-855-592-7737 (TTY: 711).

For more information, visit https://www.phs.org/pages/nondiscrimination.aspx.