



PRESBYTERIAN
Health Plan, Inc.

City of Albuquerque and Participating Entities **ACTIVE PLAN**

A quick and easy guide to your health plan information

Please find your identification (ID) card(s) attached to the back of this booklet. Remove the card and keep it with you. You will need to have it each time you go for medical care.

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Welcome

Dear Member,

Welcome to Presbyterian Health Plan. In this benefit guide you will find your member ID card, an overview of your health plan coverage and benefits and other helpful information about your health plan benefits.

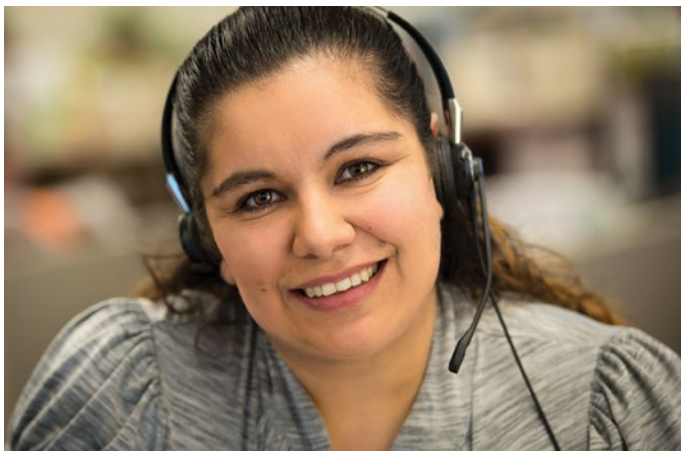
If you'd like a copy of your complete Summary Plan Description (SPD), you can:

- Sign in to myPRES at **www.phs.org/myPRES**, and then select MyHealthPlan
- Call our local Presbyterian Customer Service Center at **(505) 923-7787** or **1-855-261-7737**
- Email us at **cabqinquiry@phs.org**

We look forward to being your partner in good health.

Sincerely,
Your Presbyterian Health Plan Team

This guide is a brief summary, not a comprehensive description of benefits, limitations and exclusions. For complete information, please refer to your SPD.



Register for myPRES – the gateway to all your plan features

myPRES provides you with secure, 24-hour access to important, personalized health plan information. With myPRES you can:

- Review your claims and Explanation of Benefits (EOBs)
- Track your deductible
- View your mobile ID card or order ID replacements
- Access your plan documents
- Find providers or schedule a Video Visit



myPRES is also home to **MyChart**, a direct communication tool for you and members of your care team. This service is only for members seen by Presbyterian Medical Group (PMG) providers. With MyChart you can:

- View test and lab results
- Request an appointment
- Send messages to your care team
- Review summaries of recent visits
- Pay Presbyterian provider or hospital bills

Create your account by simply visiting **www.phs.org/myPRES**. You will need your member ID number, located on the attached ID card.

Key insurance terms

Insurance can be one of the most confusing parts of healthcare. We want to help you understand your benefits so you can feel confident – and avoid surprises – when you use them.

Here are some key health insurance terms that are important to understand.

TYPES OF COST SHARING

Cost sharing is the amount you pay versus what Presbyterian Health Plan pays for covered services. Below are the types of cost sharing:

Coinsurance: The percentage amount of a covered healthcare service that is partially paid by you and partially paid by the health plan.

Copayment (copay): The fixed dollar amount you are required to pay for a healthcare service.

Deductible: The amount that you pay annually before your plan contributes. The deductible does not apply to all services. Once you meet your annual deductible, your plan will share the cost.

Out-of-pocket maximum: The maximum dollar amount that you will pay in a calendar or plan year for covered services (includes copayments, coinsurance, and deductibles but not premiums). After you have met the out-of-pocket maximum, the plan will pay 100 percent of covered services.



Need more information? Visit www.phs.org/members. Here you can:

- Find important forms and documents
- Watch a video on how cost sharing works
- Review a Frequently Asked Questions (FAQ) resource
- Read health plan newsletters
- And much more...

Prescription coverage

Your prescription benefits are administered by OptumRX. This program offers benefits through participating retail pharmacies.

OptumRX contact information:



1-800-372-8563



What is my medical coverage and cost?

Snapshot of your in-network benefits

Annual Deductibles and Out-of-Pocket Maximums

(includes medical through Presbyterian Health Plan (PHP) and pharmacy through OptumRX)

Annual Deductible		Annual Out-of-Pocket Maximum	
Individual	Family	Individual	Family
\$175	\$350	\$6,350	\$12,700

Office Visits

Plan Benefit/Coverage	In-Network Member Costs	Subject to deductible
Preventive Care <i>For a complete list of preventive services, visit www.phs.org and search Preventive. Services that are not medically necessary, such as licensing, certification, employment insurance and foreign travel are not covered.</i>	No charge	No
Primary Care Provider Visits Telehealth visits will have the same cost share as the office visits	\$35 copay/visit	No
Specialist Provider Visits Telehealth visits will have the same cost share as the office visits <i>PHP does not require you to get a written referral to see a specialist. However, some specialists may require referrals even if PHP does not. You should talk to your primary care provider (PCP) about any specialists you plan to visit.</i>	\$50 copay/visit	No
Video Visits through the myPRES portal with a nationwide network of providers.	No charge	No
NEW Behavioral Health Services	\$0	No
Maternity Care Prenatal and Postnatal <i>Delivery subject to inpatient cost sharing and prior authorization.* Elective home births and services are not covered. Be sure to enroll your newborn in your health plan within 31 days of birth.</i>	\$35 copay/visit up to \$200 max per pregnancy	No
On-campus Student Health Center	\$35 copay/visit	No

No charge for anything related to COVID-19 screening, testing, or medical treatment. In-network Behavioral Health services are covered at \$0 copay when the diagnosis is the primary or secondary diagnosis on the claim.

*Some services may have a penalty if prior authorization is not obtained.

Emergent, Inpatient and Outpatient Care

Plan Benefit/ Coverage	In-Network Member Costs	Subject to deductible
Urgent Care Facility	\$50 per visit In-network \$50 per visit Out-of-network	Yes
Emergency Room Visit	\$200 copay/visit	Yes
<i>Copay waived if admitted into a hospital, then hospital copay applies.</i>		
Emergency Medical Transportation	Ground - \$50 copay Air - \$100 copay Inter-facility - No Charge	Yes Yes No
Hospital Inpatient Stay	\$500 copay/ admission	Yes
Certified Hospice Care	\$500 copay/ admission	Yes
Skilled Nursing Care <i>Up to 60 days per plan year</i>	\$500 copay/ admission	Yes
Home Healthcare	No charge	No
Outpatient Surgery	20% up to \$500/visit	Yes
Cardiac Catheterization Lab	\$200 copay/visit	Yes
Infertility Services (including drugs and injections)	50%	Yes
Dialysis	20%	Yes
Durable Medical Equipment	50%	Yes
<i>Such as diabetes supplies, orthotic appliances, prosthetic devices and hearing aids for school-aged children under 18 years old (or under 21 years of age if still attending high school).</i>		

No charge for anything related to COVID-19 screening, testing, or medical treatment. In-network Behavioral Health services are covered at \$0 copay when the diagnosis is the primary or secondary diagnosis on the claim.

*Some services may have a penalty if prior authorization is not obtained.

Diagnostic Services, Rehabilitation and Therapy

Plan Benefit/Coverage	In-Network Member Costs	Subject to deductible
Laboratory Tests <i>If your provider sends out lab work, be sure the laboratory is in-network. Using an in-network provider or facility saves you money.</i>	No charge	No
Radiology, X-ray and EKG	No charge	No
Imaging and Scanning	\$125 per test PET/MRI \$75 per test CT Scan	Yes
Home/Sleep Studies	\$50 copay/study	Yes
Gastrointestinal Lab (and endoscopies)	\$175 copay/visit	Yes
Allergy Testing and Serum (Extracts)	20%	Yes
Outpatient Speech, Physical, or Occupational Therapy <i>Up to 24 visits combined per plan year</i> <i>These services and other complementary therapies are limited. Please refer to your SPD.</i>	\$35 copay/visit	No
Chiropractic and Acupuncture <i>Up to 20 visits per plan year</i>	\$50 copay/visit	No
Cardiac Rehabilitation <i>Up to 36 visits per plan year</i>	\$10 copay/visit	No
Pulmonary Rehabilitation <i>Up to 24 visits per plan year</i>	\$35 copay/visit	No
Radiation Therapy and Chemotherapy Treatment <i>Chemotherapy Drugs follow Medical Drug benefit of 20% up to \$400 per drug</i>	No charge	No

No charge for anything related to COVID-19 screening, testing, or medical treatment. In-network Behavioral Health services are covered at \$0 copay when the diagnosis is the primary or secondary diagnosis on the claim.

*Some services may have a penalty if prior authorization is not obtained.

Unique services reimbursement program

You'll also receive up to a \$150 reimbursement per family per calendar year under the Unique Services Reimbursement Program for the following:

- Routine vision care, exams, glasses and contact lenses
- Ambulance copays
- Copays for x-rays, MRIs and other scans
- Sterilization services
- Smoking cessation services
- Birth control pills
- LASIK surgery
- Gym membership fees*
- Weight loss programs*
- Vitamins*
- Dental treatments (cosmetic services are not reimbursable)*

*If recommended by a doctor to treat a specific medical condition. You must submit a note or prescription from your doctor with your Unique Services Reimbursement Form.

To receive your unique services reimbursement, fill out the reimbursement form at **www.phs.org/cabq**.

Here are some tips to help your reimbursement go smoothly:

- Save all relevant receipts.
- Submit original, itemized receipts with our reimbursement form.
- Complete one form each time you submit eligible expenses for reimbursement.
- Return the original, signed form to Presbyterian Health Plan, and keep a copy for your records.
- The program is based on the calendar year. You must submit all your receipts within one year from the date of service.

What is my out-of-network coverage?

Urgent or emergency care services are covered wherever you need them, regardless of whether you are in or out of the state of New Mexico. **Your plan does not cover care from out-of-network providers except in urgent and emergent situations.**

- Urgent or emergency care includes unforeseen conditions that require prompt medical attention to prevent a serious decline in your health. In these situations, you may seek services from the nearest appropriate facility, which may include an emergency room, urgent care center or provider office.
- You must get follow-up care from an in-network provider or get prior authorization from Presbyterian Health Plan for your follow-up care to be covered out-of-network.
- You may also seek coverage through Video Visits. See page 18 for more details.

For more information, please call our local Presbyterian Customer Service Center at **(505) 923-7787** or **1-855-261-7737**.



What is my provider network?

As part of your Presbyterian plan, you have access to a large range of in-network providers:

- More than 17,000 providers in more than 500 locations in New Mexico and into Colorado and Texas.
- Presbyterian Health Plan's integrated health system, including nine hospitals and Presbyterian Medical Group (PMG) primary, specialty and urgent care clinics.

How do I find providers in my network?



You can find in-network providers and facilities by visiting **www.phs.org** and selecting the "Find a Doctor" icon at the top of the page.

Choosing a PCP

Having a primary care provider (PCP) who you like and trust is essential to you and your family's good health. Your PCP may be a physician, a physician assistant or nurse practitioner within Presbyterian's Internal Medicine, Family Medicine or Pediatrics specialties.

24/7 Urgent and Emergency Care

Presbyterian Health Plan members now have a new choice for medical care. Presbyterian is proud to introduce PRESNow 24/7 urgent and emergency care.

Located at 6400 Paseo Del Norte NE, 4515 Coors Blvd. NW and 3436 Isleta Blvd. SW, these are Albuquerque's only 24/7 urgent care and emergency care under one roof. Our medical staff will decide the level of care you need. Each patient is assessed by a clinician and treated for their condition.

PRESNow

24/7

Urgent and
Emergency Care

Supporting your physical well-being

Presbyterian Health Plan is committed to supporting your physical well-being. Preventive care is one way you can stay well and prevent illness, disease and other health problems. Preventive services are covered at 100 percent when you are seen by an in-network provider. Go to **www.phs.org/preventive** for a detailed list of these services.

Presbyterian Health Plan also offers the following **no-cost** programs for you and your covered dependents to further support your physical well-being:

- **PresRN** – PresRN is an easy way to speak with a local Presbyterian registered nurse (RN). Call **(505) 923-5570** or **1-866-221-9679** **to access local Presbyterian Health Plan registered nurses 24 hours a day, seven days a week, 365 days a year at no cost. Call PresRN toll free.** As always, if you are having a medical emergency, please call **911**.
- **Gym memberships** – Please check with your benefit administrator if you have a gym membership as a health plan benefit.
- **Care coordination** – Care coordinators are available to assist you with various health concerns and coordinate services between providers and patients. Call **(505) 923-8858** or **1-866-672-1242**.
- **Clickotine®** – Quit smoking using an app that helps you create and stick to a quit plan and overcome nicotine cravings. Learn more about this successful program by going to **Try.Clickotine.com** and enter the access code **731C73**.
- **Wellness at Work** – An online tool that helps you create a personalized health improvement plan and provides you with health information and resources. Simply log on to myPRES and select the Wellness at Work tile.
- **Member-only discounts** – Discounts are available through our partner, BenefitSource. Find discounts on acupuncture, chiropractic, hearing and vision hardware, massage therapy, Meals on Wheels and more! Visit **www.benefitsource.org/Presbyterian** for more details.



For more information on health and wellness, go to **www.phs.org/members**.

Supporting your mental well-being

Effective July 1, 2023, there is no cost-sharing for Behavioral Health Services. Presbyterian Health Plan is committed to supporting your mental well-being and also offers the following **no-cost** programs for you and your covered dependents:

- **Talkspace** – Talkspace delivers behavioral health coaching with licensed behavioral therapists via text, video or audio messaging. For more information on how to sign up, go to **www.talkspace.com/php** or contact our local Presbyterian Customer Service Center at **(505) 923-7787** or **1-855-261-7737**.
- **On to Better Health – Virtual Care Solutions** – With On to Better Health, you have:
 - Online access to self-help tools and resources proven to help people get better and feel better.
 - Complete guided therapy programs to change unhelpful thoughts and behaviors.Through the On to Better Health program, you can read health and wellness articles, chat online with a clinician or schedule a virtual therapy session. To access the program, go to **www.ontobetterhealth.com/php**.
- For a behavioral health crisis, the **New Mexico Crisis and Access Line** is available to anyone (with or without insurance) 24 hours a day, seven days a week. Call **1-855-662-7474** (1-855-NMCRISIS).

Get care today

The simple things treated faster.

If you need care today, use our Get Care tool to self-navigate to same-day service. You can receive care on the phone, online, via video and in person. To see which option is best for you, go to www.phsgetcare.org.

For cost sharing, refer to the medical coverage and cost page.

For a Video Visit, all you need is a device with a camera and mobile data or Wi-Fi access.

Need help getting care?

The default insurance provider is **Presbyterian**. [Have something else?](#)

When do you need care?

Get care today

Get care later

Get care today

Urgent Care Video Appointments

Convenient care for minor illnesses and injuries

Cost

\$0 - \$

Wait time

Online Visits

Online medical interview and response

Cost

\$0 - \$

Wait time

PresRN

24/7 nurse advice line

Cost

\$0

Wait time

Urgent Care

Same-day in-person care for minor illnesses and injuries

Cost

\$

Wait time

Emergency Care*

Walk-in critical care

Cost

\$\$\$

Wait time

13

Additional no-cost healthcare solutions

Baby Benefits – This program for expectant mothers helps you have a healthy pregnancy and baby. In our three-step program, as an expectant mother, you can earn gift cards for completing:

1. Your first prenatal visit
2. At least 10 prenatal care visits, or 80 percent of the recommended number of visits by your provider
3. Your postpartum visit after your baby is born

For full details, you can pick up a Baby Benefits brochure at your benefit or HR office. You may also visit **www.phs.org/mypres**.

Healthy Solutions Disease Management Program – This is a coaching service for Presbyterian Health Plan members who have chronic health conditions. Presbyterian Health Plan offers this service at no extra cost to you.

Health coaching can help you learn how to take control of your health for conditions such as asthma, coronary artery disease, diabetes, and high blood pressure.

You and your health coach will talk about:

- How you can make small changes that lead to healthier habits
- What might be keeping you from living a healthier lifestyle
- What healthy choices have worked well for you in the past
- How to work with your healthcare provider to meet your health needs and goals

Healthy Solutions coaches work with you by phone and/or video visit to:

- Set up coaching times that work with your busy schedule
- Encourage you to improve your health

To get started, please contact Presbyterian Healthy Solutions Disease Management program at **1-800-841-9705** or **HealthySolutions@phs.org**.

Additional no-cost healthcare solutions

Online Visits – With Online Visits, powered by SmartExam, we can save you a trip to your provider's office. Through our online system, Presbyterian Medical Group providers diagnose, treat and prescribe medications via email. All you need to do is answer a few questions about your condition and then fill any prescriptions you receive at a pharmacy. There is no cost for Online Visits at this time. The online questionnaire takes a few minutes, and for many conditions, your treatment plan may be ready in about an hour.

Online Visits is available to people 18 years of age and older who are Presbyterian Health Plan patients. Online Visits is available 24/7. You can access Online Visits at **www.phs.org/onlinevisits**.

Welcome to Online Visits, Maria

✓ English ○ Español

Online Visits is a telehealth care option and you will be charged the same as if you were having an in-person appointment, including any applicable out-of-pocket costs. Please check with your health insurer if you have any questions. If you are uninsured, you can still use Online Visits by paying an access fee of \$40.

Who is getting care today?

 Maria (You) 66 years old	 Add child
---------------------------------	---------------

How it works

- Take an interview**
Tell us about your symptoms, medications, and allergies. Takes about 10 minutes! We'll make sure you're getting the best care for your condition.
- Rest easy, as a provider reviews your responses**
Our providers are specially trained for this kind of thing. And they're fast. They'll make a diagnosis and recommend a treatment plan, just for you!
- Get your After-Visit Summary in an email**
In about an hour, you'll get a brief summary of your visit and a personalized treatment plan. Any necessary prescriptions will be sent to your pharmacy.

Quit for Life® – Enrollment in the Quit for Life American Cancer Society smoking cessation program is easy – just call **1-866-QUIT-4-LIFE (1-866-784-8454)** to get started. A registration specialist will verify eligibility to enroll and transfer you to a Quit Coach to get started. For more information, please visit **www.quitnow.net**.

Digital physical therapy – overcome your pain at home



Start your journey to living pain free with Sword, digital physical therapy for back, joint and muscle pain that you can do from the comfort of home, or anywhere. Combining the best in human care with easy-to-use technology, Sword offers a proven and more convenient option than traditional in-person physical therapy.

Sword is available to eligible members as part of your health plan benefits.



Bloom is an innovative digital pelvic therapy solution developed by Sword Health. Members are partnered with Pelvic Health Specialists, all of whom have Doctor of Physical Therapy degrees. It is designed to address pelvic dysfunctions such as bladder leakage, bowel issues and pelvic pain.

Sword and Bloom programs are available to eligible members enrolled on Presbyterian Health Plan through the City of Albuquerque. More information on how to register is coming soon!

Hearing aid benefit

TruHearing® – Enjoy better hearing and comprehensive care. Good hearing is important to your health. That's why Presbyterian Health Plan offers you a hearing aid benefit through TruHearing. Hearing aids can be expensive, an average of \$3,250 per aid, but your benefit makes addressing hearing loss more affordable with the following copayments. Members pay:

- Hearing exams of \$45 per visit through select TruHearing providers
- 32-channel advanced hearing aid at \$699 per aid
- 48-channel premium hearing aid at \$999 per aid

You can call **1-866-202-0110** (TTY: 711) to speak with a TruHearing consultant Monday through Friday, from 8 a.m. to 8 p.m.

Check your hearing at **www.Truhearing.com/Presbyterian-HS**.



Video visits

The simple things treated faster.

When you're trying to treat minor ailments quickly, a Video Visit is the perfect solution. Presbyterian Health Plan Video Visits utilize a nationwide network of providers through your myPRES account. Video Visits give you access to healthcare providers licensed in the U.S. Use Video Visits anytime, without an appointment, from the comfort of your own home, office or other location. All you need is mobile data or Wi-Fi access.

- Set up an appointment on your smartphone, tablet or computer (with a working webcam)
- Speak with a provider 24 hours a day, 365 days a year
- Get diagnosed for non-urgent illnesses such as flu, allergies, fevers and sore throats
- Receive prescriptions (providers cannot prescribe narcotics or lifestyle medications)
- Video Visits are secure, confidential and compliant with all medical privacy regulations
- For instructions on how to begin, go to **www.phs.org/videovisits**

"This is a great service when you or your covered dependents are traveling and may need to seek medical care."



Presbyterian's Mobile Health Center: bringing no-cost care to you

It is important that you have a regular primary care provider (PCP), but with your health plan, you also have access to Presbyterian's Mobile Health Center (MHC), offering non-work- related routine healthcare and urgent care services exclusively to you and your enrolled dependents. The MHC, a 45-foot van, travels to different locations, giving you the option to visit the health center wherever it is.



Appointments are available for no copay on a scheduled or walk- in basis (as time permits). Standard out-of-pocket expenses will apply if you are referred outside the MHC for more specialized services.

The MHC is staffed and equipped to diagnose and treat symptoms such as:

- Colds
- Sore throats
- Coughs
- Earaches
- Flu symptoms
- Pink eye
- Sinus infections
- Urinary tract infections
- Strains and sprains
- Cuts
- Removal of stitches

The staff can also administer:

- Your annual physical exam
- Select vaccinations
- Lab tests
- Ongoing screenings for A1C, cholesterol, blood glucose and blood pressure

The MHC team may refer you to specialists and write prescriptions as needed.

For schedules and locations, visit www.cabq.gov and enter Mobile Health Center in the 'Search' field.

Call **(505) 220-6562** to schedule an appointment.

Keep your costs low and avoid surprise medical bills

Understand your policy

- Closely review this guide to understand the basics.
- Review your Summary Plan Description for services you know you will use.

Use in-network providers. You will always save money when you use in-network providers. Here are a few tips to consider:

- Ask your provider to send your lab work to TriCore Reference Laboratories. This is your plan's in-network lab provider.
- When getting a specialist referral, ask your provider to send you to an in-network provider.
- When having a procedure, ask for a complete list of in-network providers and facilities.

Before seeking healthcare services

- Review this guide (or your online Summary Plan Description) to determine your cost sharing and if your service requires prior authorization.
- Talk to the provider's office to find out if pre-payment is required. Our local Presbyterian Customer Service Center is also available to help answer any questions you may have.

Emergency treatment. It's important to have an emergency care plan in place well before you need it.

- Determine which in-network hospital(s) you prefer to go to.
- For non-life-threatening situations, going to an urgent care, doing a Video Visit, or visiting the MHC or your primary care provider may be an option.
- PRESNow, Presbyterian's new 24/7 urgent and emergency care facility, at three locations to serve Albuquerque.

Keep your costs low and avoid surprise medical bills

Know what's not included in preventive care. There may be times that you have other concerns about your health during your preventive care visit.

- You may be charged for a regular visit if your preventive visit turns into a regular visit.*
- Know that your visit will change to a regular visit if you ask about other concerns you may have about your health.

*Claims that are billed by the provider as preventive services will be covered with no cost sharing. Any non-preventive codes, further testing or treatment identified during a preventive service means cost sharing may apply. See your benefit plan for your cost-sharing amount.

Call us if you have questions or get an unexpected bill.

We're here to help you. Just call our local Presbyterian Customer Service Center at **(505) 923-7787** or **1-855-261-7737**.

How to contact us

Presbyterian Customer Service Center: Dedicated to you! Hours are Monday through Friday, 7 a.m. to 6 p.m.



(505) 923-7787 or 1-855-261-7737 (TTY: 711)



cabqinquiry@phs.org

New Mexico Crisis and Access Line: available 24 hours a day, seven days a week for a behavioral health crisis. Call **1-855-662-7474 (1-855-NMCRISIS)**.

Presbyterian's Fraud and Abuse Confidential Hotline



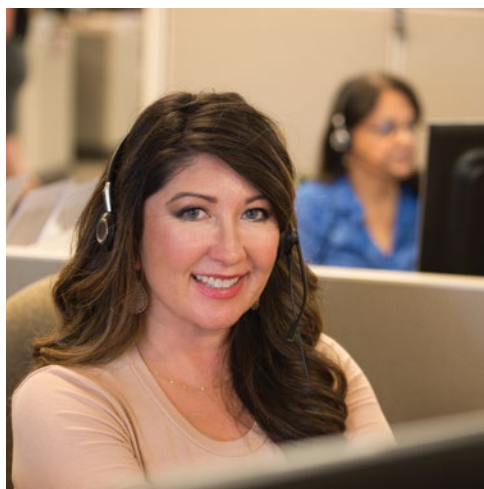
(505) 923-5959 or 1-800-239-3147

Tell us how we are doing. We are always looking for ways to make it easier for you to learn about your health plan. Email us your suggestions: feedback@phs.org.

Our claims process

From the day of your appointment or other medical service to receiving your Explanation of Benefits (EOB) in the mail, this is how Presbyterian Health Plan processes your claims:

- You present your member ID card at the healthcare provider's office.
- After your visit, your provider's office will send us a claim. A claim is a request for payment that you or your provider submits to your health insurer when you receive services or items you think are covered.
- We process your claim according to your plan's benefits.
- We send you an EOB that explains how your claim was processed. We send a statement, along with any applicable payment, to your provider's office.
- Your provider may bill you for any remaining balance, depending on your plan's benefits. If you have any questions or concerns, you can always call the Presbyterian Customer Service Center at the number on the back of your member ID card.



Tip:

Review your EOBs carefully. EOBs tell you what your plan has paid on your behalf and exactly what you should be paying for healthcare services. This is called cost sharing.

Filing a complaint: Appeals and Grievances

We are committed to providing you with high-quality care and service. If you're not satisfied, we want to know. There are two types of complaints you can file if you are not satisfied with the coverage of your services or with your care:

Grievance	Appeal
An official notice of your dissatisfaction with your health plan or your care.	A formal request for review of a decision or action that Presbyterian Health Plan has made that affects your healthcare, e.g., a denial or limitation of a service.
You must file your grievance within 180 calendar days of the date that you had the problem.	You must file your appeal within 180 calendar days of the date that you received notice of Presbyterian Health Plan's decision.
Most grievances take up to 30 days to resolve.	Most appeals take up to 30 days to resolve. If you believe your health will be in danger if you wait that long, you may ask for an expedited appeal.

You can file a grievance or an appeal in one of three ways:



gappeals@phs.org



www.phs.org/appeals



Presbyterian Health Plan, Inc.
Appeal and Grievance Department
P.O. Box 27489
Albuquerque, NM 87125-7489

Important information

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 yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiiik'eh, éí ná hóló, kojí' hódíłnih (505) 923-5420, 1-855-592-7737 (TTY: 711).


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



P.O. Box 27489
Albuquerque, NM 87125-7489

**Welcome to Presbyterian
Health Plan! Look inside to
learn more about your plan.**

Please check your Presbyterian Health Plan member ID card to be sure the information is correct. If anything on the card needs to be changed, please call our local Presbyterian Customer Service Center at the number located on the back of your member ID card. We will be happy to help you.



You may also access your member ID card via myPRES. This will allow you to view, fax or email your member ID card to yourself or your provider straight from your computer or smartphone.