

A quick and easy guide to your health plan information

Please find your identification (ID) card(s) included with this benefit guide. You will need to have it each time you go for medical care.



TABLE OF CONTENTS

Welcome1
Where do I get my complete member contract? 1
Why you should register for myPRES
Key insurance terms
What is my prescription coverage and cost?
What is my medical coverage and cost?
What is my out-of-network coverage?
What is my provider network?
Supporting you in your wellness journey
Video visits – simple things treated faster
How do I avoid surprise medical bills?10
How to contact us
Filing a complaint: appeals and grievances 13

Welcome

Dear Member,

Welcome to Presbyterian. 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 member contract, you can:

- Sign in to myPRES at www.phs.org/myPRES, and then select MyHealthPlan
- Call the Presbyterian Customer Service Center at the phone number listed on the back of your ID card
- Email us at info@phs.org

We look forward to being your partner in good health.

Sincerely, Your Presbyterian Team

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



Why you should register for myPRES

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

myPres provides you with secure, 24-hour access to important, personalized health plan information.

- 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 doctors 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.

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

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

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.

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.



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...

What is my prescription coverage and cost?

Prescription coverage

Your prescription benefits are administered by Express Scripts. Express Scripts contact information:



1-800-743-1720



www.express-scripts.com



What is my medical coverage and cost?

Snapshot of your In-Network Benefits

In-network Deductible

Individual: \$350 Two-Party: \$700 Family: \$1,050

Preventive Care

No charge

Office Visits

Primary Care: \$25 per visit Specialist: \$45 per visit Video Visit: No charge

Maternity Care

Office Visit: \$25* initial visit only per pregnancy

Delivery subject to inpatient cost sharing

Urgent Care Facility

\$55 per visit*

Emergency Services

Emergency Room: \$275 per visit* Transportation: Ground \$30* Air \$100*

Diagnostic Services \checkmark

Lab Tests: 20%*

Radiology/X-ray: 20%*

Surgery and Therapy ✓

Outpatient Surgery: 20%*

Physical Therapy: \$45 per visit

Hospital Services ✓

Inpatient: \$600 per admission*

Home Health: \$45

Behavioral Health Services

Office Visit: \$25 per visit

Inpatient:√ \$500*

Alternative Therapies

Chiropractic: \$50 per visit

Acupuncture: \$50 per visit

25/visits combined

In-Network Out-of-Pocket Maximum

Individual: \$3,750 Two-Party: \$7,500 Family: \$11,250

- * Percentage or amount you are responsible for after you have met your annual deductible.
- ✓ Prior authorization may be required.

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

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.

For more information, please call the Presbyterian Customer Service Center at the number on the back of your ID card.



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's integrated health system, including eight hospitals, and Presbyterian Medical Group (PMG) primary, specialty, and urgent care clinics.
- Some national providers are also covered at an in-network benefit. Plan on getting care outside of New Mexico?
 Contact customer service to learn how our national network works for you.

How do I find providers in my network?



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

How can I get help finding a provider?

Call customer service and ask for the Member Advocate program. This program helps take the time and hassle out of finding the right provider at the right time for you and your loved ones.



Supporting you in your wellness journey

Presbyterian is committed to supporting you in your wellness journey. Here are some additional tools to keep you moving on this journey:

Preventive care – Preventive care can help you 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.

Wellness at Work – Presbyterian's Wellness at Work is an online tool that can help you create a personalized health improvement plan. It can provide you with the most up-to-date health information and resources. Simply log on to myPRES and select the Wellness at Work tile.

Care management / disease management – Trained registered nurse care managers are available to assist you with various health concerns and coordinate services between providers and patients. For more information, call (505) 923-8858 or 1-866-672-1242.

Member-only discounts through our partner, BenefitSource, for services such as acupuncture, chiropractic, hearing and vision hardware, massage therapy and Meals on Wheels. Visit benefitsource.org/Presbyterian for more details.

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

Video Visits

The simple things treated faster.

When you're trying to treat minor ailments quickly, a Video Visit from Presbyterian Health Plan is the perfect solution. Video Visits give you access to healthcare providers licensed in New Mexico and most other states. 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)
- For cost sharing refer to the medical coverage and cost page

Video Visits are secure, confidential, and compliant with all medical privacy regulations.

For instructions on how to begin, go to www.phs.org/videovisits



How do I avoid surprise medical bills?

Understand your policy

- Closely review this guide to understand the basics
- Review your member contract 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 doctor to send you to an in-network provider.
- When having a procedure, ask for a complete list of in-network doctors and facilities.

Before seeking healthcare services

- Review this guide (or your online member materials) 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. Presbyterian's Customer Service Center is also available to help answer any questions you may have.
- Go to the Treatment Cost Calculator for estimates of treatment costs based on your own personal plan benefits, deductibles and out-of-pocket maximums. Find the calculator by logging in to myPRES.

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 or your primary care provider may be an option.

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.

Saving on prescription medications. Anytime a doctor writes you a prescription, find out how much the medication costs, whether it is covered by your plan (i.e. on your formulary) and if there is a low-cost generic alternative.

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

We're here to help you. Just call the Presbyterian Customer Service Center at the number listed on the back of your member ID card.

How to contact us

Presbyterian Customer Service Center: Dedicated to you! Hours are Monday through Friday, 7:00 a.m. to 6:00 p.m.

Albuquerque: (505) 923-5600 Statewide: 1-888-275-7737

TTY: 1-877-298-7407

info@phs.org

PresRN: direct access to medical advice 24 hours a day, 7 days a week, 365 days a year.

Whenever you have a healthcare question, call PresRN toll- free at 1-866-221-9679.

Registered nurses are here to offer you suggestions for self-care measures and provide general health information on a broad range of healthcare topics.

New Mexico Crisis and Access Line: available 24 hours a day, 7 days a week for a behavioral health crisis. Call 1-855-662-7474 (1-855-NMCRISIS).

Presbyterian's Fraud and Abuse Confidential Hotline

Local: (505) 923-5959

Toll-Free: 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

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'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:

- Email to info@phs.org
- Submit online at www.phs.org/appeals
- Write to:

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

The Managed Health Care Bureau of the Office of the Superintendent of Insurance is also available to assist you with grievances, questions, or complaints. Contact them at 1-855-4ASK-OSI (1-855-427-5674).

Important Information

Presbyterian complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Presbyterian cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

Presbyterian bik'ehgo hójił'ínígíí bidadeeti'ígíí Wááshindoon t'áá át'é bilá'ashdla'ii bee bá ádahaazt'i'ígíí bibee haz'áanii dóó doo ak'íji' nitsáhákees da díí ninahji' al'áa dadine'é, dine'é bikágí át'ehígíí, binááhai'ígíí, nazhnitl'ago da, éí doodaii' asdzání dóó diné át'ehígíí.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 505-923-5420, 1-855-592-7737 (TTY: 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia 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'dę́ę', t'áá jiik'eh, éí ná hóló, koji' hódíílnih 505-923-5420, 1-855-592-7737 (TTY: 711).

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Notes

Notes



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



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

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