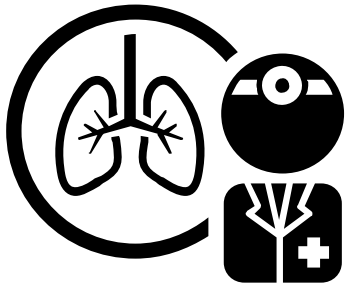




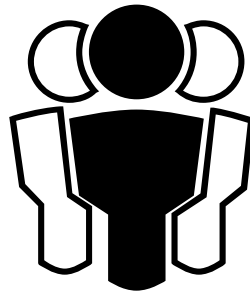
2018 NMRHCA Benefits Presentation

**Presbyterian Senior Care (HMO-POS)
Plan I and Plan II**

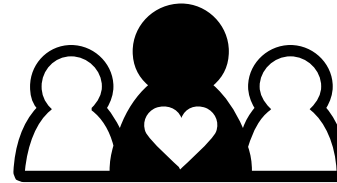
Who we are



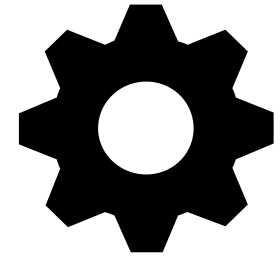
Started in **1908** as a Tuberculosis Sanatorium



Locally owned, nonprofit healthcare system in New Mexico, **servicing one in three residents**



More than **750,000** customers



Fully integrated with a delivery system, physician group, and Presbyterian Health Plan

Presbyterian Today



8 Hospitals



Presbyterian Medical Group
800+ providers



Presbyterian Health Plan
460,000 members

Medicare basics

A federal health insurance program administered by the Centers for Medicare & Medicaid Services (CMS).

Part A - Hospital insurance (inpatient)

Part B - Medical insurance (outpatient)

Part C - Medicare Advantage plans

Part D - Medicare prescription drug coverage



Presbyterian Senior Care (HMO-POS) NMRHCA Plans

- Benefits available for services from either in-network or out-of-network providers.
- Emergency and urgent care coverage anywhere in the world
- Preventive services, routine eye exams, and gym memberships at no additional cost to you
- Referrals are not required
- Video Visits provides for a new way to see a provider for non-emergencies
- A convenient and secure website just for members
- Silver Sneakers fitness center membership - Visit more than 10,000 participating locations at no additional cost to you.



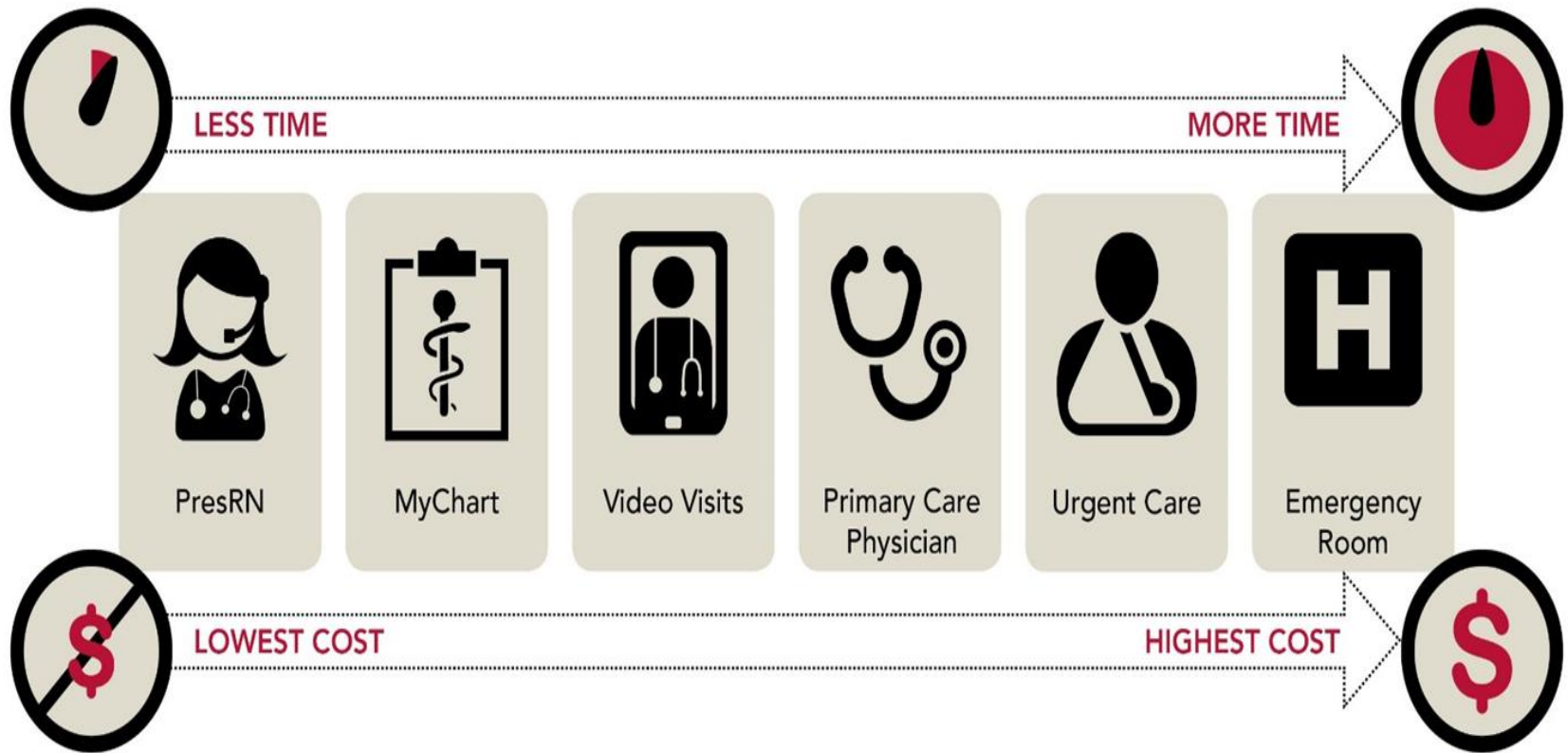
Who is eligible?

- Must have both Medicare Part A and Part B.
- Must live in the service area:

**Presbyterian Senior Care
(HMO-POS) service area is
Statewide**



Access and Cost of Care



2018 Presbyterian Senior Care (HMO-POS) NMRHCA

Benefits	Plan I In-Network	Plan II In-Network	Out-of- Network
Out-of-Pocket Maximum	\$2,500	\$3,000	\$7,500 (combined)
Office Visits and Tests			
Preventive Care, Screenings	\$0	\$0	\$35
Primary Care Office Visit	\$10	\$10	\$35
Specialist Office Visit	\$30	\$40	\$60
Diagnostic Tests, Lab Services, Imaging	\$0	\$0	10% - 20%
MRI/MRA, CT Scan PET Scan	\$0	\$250	20%
Acupuncture (20 visits/year)	\$15	\$15	\$60
Chiropractor (Medicare covered)	\$20	\$20	\$60
Podiatry Services (Medicare covered)	\$0	\$0	\$60
Vision Exams (annual routine exam and exams to diagnose and treat diseases and conditions of the eye).	\$0 for first exam; specialist copay thereafter		\$60

2018 Presbyterian Senior Care (HMO-POS) NMRHCA

Benefits	Plan I In-Network	Plan II In-Network	Out-of- Network
Emergency, Urgent & Video Visits			
Video Visits	\$0	\$0	\$35
Urgent Care	\$10	\$10	\$65
Emergency Care (worldwide) waived if admitted	\$65	\$75	Plan I \$65 Plan II \$75
Ambulance Services	\$75	\$150	\$75 - \$150
Inpatient and Outpatient Coverage			
Inpatient Hospital (per admission)	Days 1-3 \$125 per day	Days 1-5 \$225 per day	Plan I \$750 per admit
Additional Days	\$0	\$0	Plan II \$300 per day days 1-5
Outpatient Surgery	\$125	\$275	20%
Outpatient Mental Health Care	\$0	\$0	50%

2018 Presbyterian Senior Care (HMO-POS) NMRHCA

Benefits	Plan I In-Network	Plan II In-Network	Out-of- Network
Home Health & Rehabilitation			
Home Health Care	\$0	\$0	\$0
Cardiac and Pulmonary Rehab	\$0	\$0	\$35
Other Rehabilitative Services	\$10	\$15	\$35
Durable Medical Equipment	\$10	10%	25%
Diabetes Supplies	\$0	\$0	25%
Skilled Nursing Facility Days 1-20 Days 21-100 (limited to 100 days per benefit period)	\$0 per day \$40 per day	\$0 per day \$40 per day	\$0 per day \$60 per day
Drugs Covered Under Medicare Part B			
Select oral immunosuppressant and nebulized inhaled medications	\$0 when purchased through a retail pharmacy		\$0
Chemotherapy and other Part B-covered drugs	\$50	10%	20%

2018 NMRHCA Plan I drug benefits

Coverage Starts

Catastrophic Coverage

There is no coverage limit and no coverage gap with Plan I

Part D Covered Drugs

Tier 1: Preferred Generic

Tier 2: Generic

Tier 3: Preferred Brand

Tier 4: Non-Preferred Brand

Tier 5: Specialty Drugs

30-day supply	90-day mail order
\$4	\$8
\$10	\$20
\$45	\$112.50
\$95	\$285
33% up to \$100	NA

30-day supply
\$3.35 or 5%, whichever is greater
\$8.35 or 5%, whichever is greater

You stay in this stage for the rest of the year.

Catastrophic coverage begins after **your** out-of-pocket costs=\$5,000

2018 NMRHCA Plan II drug benefits

Coverage Starts

\$0 deductible for Tiers 1, 2
\$300 deductible for Tiers 3, 4, 5

Initial coverage limit \$3,750:
 includes what **both** you
 and your plan pay

Part D Covered Drugs

Tier 1: Preferred Generic

Tier 2: Generic

Tier 3: Preferred Brand

Tier 4: Non-Preferred Brand

Tier 5: Specialty Drugs

	30-day supply	90-day mail order
Tier 1: Preferred Generic	\$4	\$8
Tier 2: Generic	\$10	\$20
Tier 3: Preferred Brand	\$45	\$112.50
Tier 4: Non-Preferred Brand	\$95	\$285
Tier 5: Specialty Drugs	27%	NA

Coverage Gap "Donut Hole"

	30-day supply	90-day mail order
Tier 1: Preferred Generic	\$4	\$8
Tier 2: Generic	\$10	\$20
Tier 3: Preferred Brand	40%	40%
Tier 4: Non-Preferred Brand	40%	40%
Tier 5: Specialty Drugs	40%	NA

Catastrophic Coverage

30-day supply

\$3.35 or 5%, whichever is greater

\$8.35 or 5%, whichever is greater

You stay in this stage for the rest of the year.

Catastrophic coverage begins after **your** out-of-pocket costs=\$5,000

Prescription drug formulary

A list of drugs selected by Presbyterian Health Plan which represents the prescription therapies believed to be a necessary part of a quality treatment program.

Quantity limits and restrictions may apply and are noted in the formulary with the following abbreviations:

- PA = Prior Authorization
- QL = Quantity Limits
- ST = Step Therapy



What if your drug is not on our formulary?

- Call us and ask for a list of similar drugs that are covered.
- You can ask us to make an exception to cover your drug.

Managing your healthcare

Care management

- Trained registered nurse care managers assist with various health concerns and can help coordinate services between providers and patients.

Disease management

- Help members with certain diseases manage their health.

Utilization management reviews

- Pre-service, Urgent Concurrent and Post-service reviews ensure you receive the most appropriate treatment.




Financial Assistance

You may qualify for money-saving programs based on your income to help you pay your plan premiums and drug copays.

Extra Help (also called Low-Income Subsidy) assists you with prescription drug premiums, copays, and other costs. Income and asset limits apply.

The **Medicare Savings Program (MSP)** helps you pay for Medicare Part A and/or Part B premiums. Call 1-866-851-0324 for more information.





**Presbyterian Customer Service Center
(Located in Albuquerque)
(505) 923-6060 or 1-800-797-5343 (TTY 711)
8 am to 8 pm, seven days a week**

**Presbyterian Sales Consultants
(505) 923-8458 or 1-800-347-4766 (TTY 711)
8 am to 8 pm, seven days a week**