

2022 ENROLLMENT GUIDE

**Presbyterian Senior Care (HMO-POS)
University of New Mexico (UNM)
Premier Plan and Select Plan**



Thank you for your interest in Presbyterian Medicare Advantage Plans. Presbyterian offers you the value that comes with our integrated system of physicians, hospitals and health plan – all working together to keep you healthy and provide new and innovative services.

Plan Highlights

- \$0 for any telehealth visit through video, online or telephone with a network provider
- No prescription drug deductible
- Coverage for emergency and urgent care anywhere in the world
- Routine acupuncture and chiropractic care
- Gym memberships included through SilverSneakers®

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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 jik'eh, éí ná hóló, kojí' hódíílnih (505) 923-5420, 1-855-592-7737 (TTY: 711).

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

ABOUT US

Who We Are

- Founded in New Mexico in 1908, Presbyterian Healthcare Services is a locally owned, not-for-profit healthcare system of nine hospitals, a medical group, and a health plan.
- Presbyterian's health system serves one in three New Mexico residents in our clinics, hospitals and as members of our health plan.
- Owned by Presbyterian Healthcare Services, Presbyterian Health Plan, Inc. was formed in 1985 and now has more than 600,000 enrolled in Medicare Advantage, Medicaid, and Commercial/Individual plans.

Presbyterian by the Numbers

113 years
of serving
New Mexicans



9 hospitals in
7 communities



More than **1,600**
providers in
Presbyterian
Medical Group



Nearly
900,000
individual
customers
(and counting)



More than
13,000
employees –
New Mexico's
largest private
employer



600,000
Presbyterian
Health Plan
members, which
includes nearly
42,000 Medicare
Advantage
members



ABOUT US

Our Integrated System



As part of an integrated healthcare system, Presbyterian offers patients throughout New Mexico access to dedicated primary care providers, as well as highly specialized care, including cancer care, heart and vascular care, and behavioral health

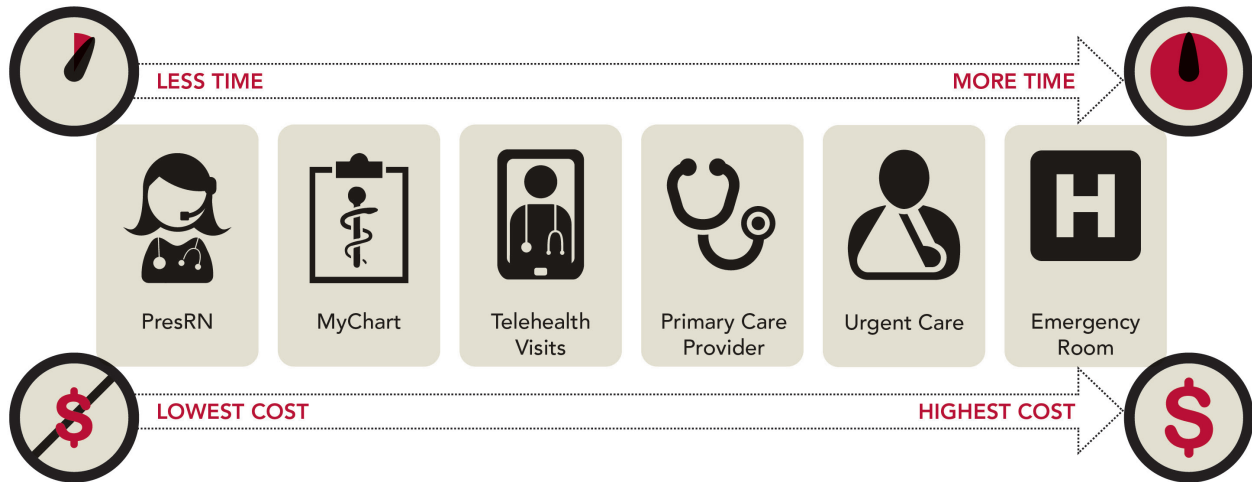
24/7 Urgent and Emergency Care Under One Roof in Albuquerque and Santa Fe

Residents in Albuquerque and Santa Fe don't have to guess if a condition is an emergency because medical staff decide the level of care needed. Both urgent and emergency care are open 24 hours a day at two PRESNow locations in Albuquerque's Northeast Heights and the Westside. In Santa Fe, the Presbyterian Santa Fe Medical Center at 4801 Beckner Rd. on Santa Fe's south side now offers both options all day, every day.



ABOUT US

Easy Ways to Access Care



PresRN is a great starting point, giving you direct, local access to medical advice 24 hours a day, seven days a week, including holidays. There is no charge to call our experienced registered nurses (RNs) for answers to your health or wellness questions. Call **(505) 923-5573** or **1-800-887-9917**.

MyChart is a secure, web-based portal allowing members with a Presbyterian Medical Group provider to send electronic messages to their care team, request prescription renewals, view medical records or test reports, and schedule office or telephone visits.

Any **telehealth service** (video, telephone or online visit) with an in-network provider is \$0, including Primary Care, Specialist, Urgent Care or Behavioral Health visits. To learn more, visit **www.phs.org** and select **"Get Care Today."**

Primary care providers can treat most health problems. They may be a general/family practice physician, internal medicine physician, gynecologist, physician assistant, or nurse practitioner.

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.

ABOUT US

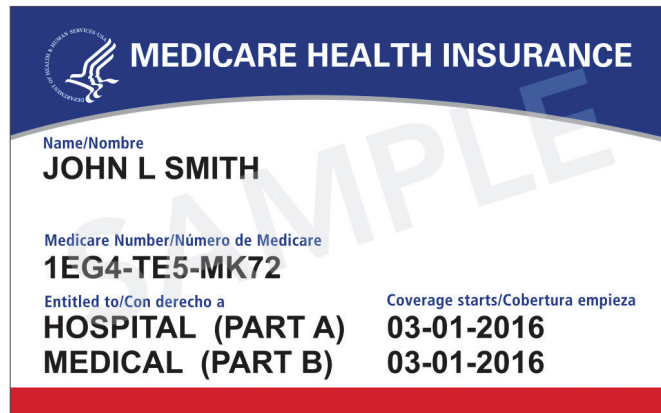
Managing the Health of Our Members

- **Healthy Solutions Program** – A Health Coach provides education and telephonic or video lifestyle coaching to assist you in managing your chronic condition for asthma, coronary artery disease, diabetes or hypertension.
- **Case management** – Nurses and social workers help you manage your complex medical needs and will help link you with appropriate providers that will work to keep you out of the hospital or emergency room.
- **Utilization management reviews** – Pre-service, urgent concurrent, and post-service reviews ensure you are receiving the most appropriate covered treatments and services for you.
- **Complete Care Clinic** – This program provides comprehensive primary care services for adults with chronic or complex illnesses and helps these patients access care and navigate the medical system. The clinic works closely with other programs such as Presbyterian Home Care, Hospital at Home, and Palliative Care.
- **National Diabetes Prevention Program** – This is a year-long program for eligible members that encourages lifestyle changes to prevent or delay Type 2 diabetes.



MEDICARE BASICS

Medicare is a federal health insurance program administered by the Centers for Medicare & Medicaid Services (CMS) that provides hospital and medical coverage. There are several parts to Medicare coverage, each with different benefits and costs.



Parts of Medicare

Part A

Covers hospitalization, such as inpatient care, hospice care, and some home healthcare, skilled nursing home care and nursing home care. Most people do not have to pay premiums for Part A.

Part B

Covers medical services such as doctor's visits (including most doctor services while you're in the hospital) and outpatient treatments, as well as medical services and supplies not covered under Part A. Most people pay premiums for Part B.

Part C

Commonly called Medicare Advantage, these plans combine Part A and Part B. Part D may also be included as well as other benefits.

Part D

Part D covers prescription drug costs and is available to individuals who have Part A, B or C. Joining a health plan that includes Part D prescription drug coverage is voluntary.

MEDICARE BASICS

What You Should Know

Late Enrollment Penalties

- **Part B** – You may have to pay a late enrollment penalty for Part B if you do not enroll when you first become eligible and then enroll later.
- **Part D** – You may have to pay a late enrollment penalty if you had any period of 63 days or more without drug coverage that is as good as or better than Part D coverage. The penalty amount would be added to your Medicare Advantage plan premium for as long as you have Part D.

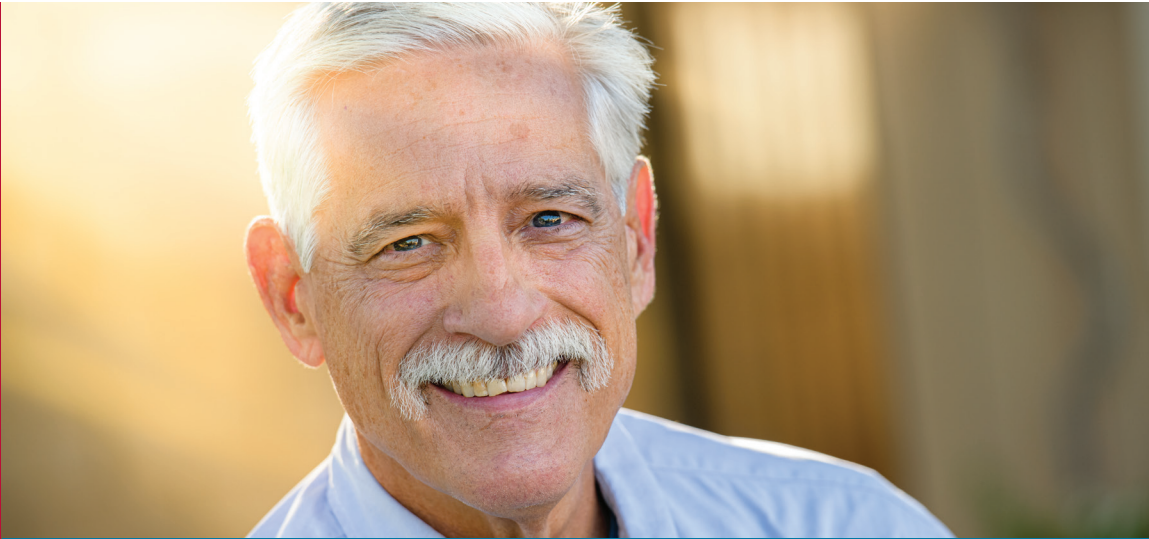
Income Related Monthly Adjusted Amounts (IRMAA)

- In 2021, your Part B and Part D premium may be higher if your income is above \$88,000 a year as an individual. You will be notified if these amounts change in 2022.

Automatic Disenrollment

- Medicare beneficiaries cannot be enrolled in a Medicare Advantage plan and a stand-alone Medicare Part D prescription drug plan with another company at the same time. For example, if you enroll in a separate Part D plan, you will automatically be disenrolled from your Medicare Advantage plan.





2022 SUMMARY OF BENEFITS

**Presbyterian Senior Care (HMO-POS)
University of New Mexico (UNM)
Premier Plan and Select Plan**



This is a summary of health and drug services covered by Presbyterian Senior Care (HMO-POS) University of New Mexico (UNM) Premier Plan and Select Plan, January 1, 2022 to December 31, 2022.

To enroll in Presbyterian Senior Care (HMO-POS):

- You must be entitled to Medicare Part A and enrolled in Medicare Part B.
- You must live in New Mexico.

This plan covers services from either in-network or out-of-network providers, as long as the services are covered benefits and are medically necessary. If you choose to receive care from out-of-network providers, there will likely be a higher out-of-pocket cost for you.

\$0 copay for these valuable benefits and more!

- Hearing exam
- Telehealth visits with in-network providers
- Preferred generic drugs
- PresRN nurse advice line
- Lab services
- Diagnostic tests
- Foot care
- Diabetic test strips and lancets
- Outpatient mental health visits

SUMMARY OF BENEFITS

Presbyterian Senior Care (HMO-POS) UNM Premier Plan and Select Plan

	Premier Plan In-Network You pay	Select Plan In-Network You pay	Out-of- Network You pay
Maximum Annual Out-of-Pocket Responsibility <i>(This is the most you pay in a calendar year for covered medical and hospital services. It does not include prescription drugs.)</i>	\$2,500	\$3,000	\$10,000 (combined)
Inpatient Hospital Care* <i>(per admission)</i> <ul style="list-style-type: none"> • Days 1 – 3 • Additional Days 	\$175 per day \$0	\$225 per day \$0	\$1,000 per admission
Ambulatory Surgery Center / Outpatient Surgery*	\$150	\$200	20%
Doctor Visits <ul style="list-style-type: none"> • Primary Care • Specialists • Telehealth visits (video, telephone or online visits for primary care, specialists and urgent care) 	\$10 \$30 \$0	\$10 \$40 \$0	\$35 \$55 Out-of-network copays apply
Preventive Care and Routine Physicals	\$0	\$0	\$35
Emergency Care <i>(worldwide)</i> <i>(This copay is waived if admitted to the hospital.)</i>	\$65	\$75	\$65-\$75
Urgently Needed Services	\$10	\$10	\$65
Diagnostic Services/Labs/ Imaging <i>(Prior authorization may be required.)</i> <ul style="list-style-type: none"> • Lab services • Diagnostic tests and procedures • Outpatient x-rays • Diagnostic radiology service (such as CT, MRA, MRI, PET scans) 	0% 0% 0% 0%	0% 0% 0% \$250	20% 10% 10% 20%

SUMMARY OF BENEFITS

Presbyterian Senior Care (HMO-POS) UNM Premier Plan and Select Plan

	Premier Plan In-Network You pay	Select Plan In-Network You pay	Out-of- Network You pay
Hearing Services <i>(does not go toward maximum out-of-pocket responsibility)</i> <ul style="list-style-type: none"> Hearing exam Hearing aid <i>(from TruHearing)</i> 	\$0 \$699 - \$999	\$0 \$699 - \$999	\$55 Not covered
Dental Services <ul style="list-style-type: none"> Medicare covered Routine 	\$30 Not covered	\$40 Not covered	\$55 Not covered
Vision Services <ul style="list-style-type: none"> Annual routine exam Diagnosis/treatment of diseases and conditions of eye Eyewear after cataract surgery 	\$0 \$10 \$20	\$0 \$10 20%	\$55 \$55 25%
Mental Health Services <ul style="list-style-type: none"> Inpatient visit (Days 1 - 3)* – Additional days Outpatient group therapy visit Outpatient individual therapy visit (including virtual) 	\$175 per day \$0 \$0 \$0	\$225 per day \$0 \$0 \$0	\$1,000 per admission 50% 50%
Skilled Nursing Facility (SNF)* <ul style="list-style-type: none"> Days 1 - 20 Days 21 - 100 <i>(Our plan covers up to 100 days in a SNF.)</i> 	\$0 \$0 per day	\$0 \$40 per day	\$0 \$125 per day
Rehabilitation Services <ul style="list-style-type: none"> Cardiac and Pulmonary rehab <i>(limit 36 visits)</i> Occupational, Physical, and Speech and Language therapy visits <i>(\$0 for telehealth visits)</i> 	\$0 \$20	\$0 \$20	\$35 \$35
Ambulance <i>(ground and air)</i>	\$75	\$75	\$75
Transportation	Not covered	Not covered	Not covered

* Prior authorization required.

SUMMARY OF BENEFITS

Presbyterian Senior Care (HMO-POS) UNM Premier Plan and Select Plan


	Premier Plan In-Network You pay	Select Plan In-Network You pay	Out-of- Network You pay
Medicare Part B Drugs: [*]			
• Chemotherapy Drugs and other drugs administered by a medical professional	\$50	\$50	20%
• Purchased at a retail pharmacy	\$0	\$0	20%
Foot Care (<i>podiatry services</i>)			
• Foot exams and treatment (<i>Medicare covered</i>)	\$0	\$0	\$55
• Routine foot care	Not covered	Not covered	Not covered
Medical Equipment/Supplies [*]			
• Durable Medical Equipment (<i>e.g., wheelchairs, oxygen, continuous glucose monitors/ supplies</i>)	\$20	20%	25%
• Prosthetics (<i>e.g., braces, artificial limbs</i>)	\$20	20%	25%
• Diabetes supplies, services, and training	0%	0%	10%
Wellness Programs (<i>e.g., fitness</i>)	\$0 SilverSneakers® Fitness Program is included. For participating locations visit www.silversneakers.com		
Acupuncture			
• Medicare covered	\$15	\$15	\$55
• Routine (<i>limited to 25 visits/year</i>)	\$15	\$15	\$55
Chiropractic			
• To correct subluxation	\$20	\$20	\$55
• Routine (<i>limited to 25 visits/year</i>)	\$20	\$20	\$55
Home Health Care [*]	\$0	\$0	\$0

SUMMARY OF BENEFITS

UNM Premier Plan Prescription Drug Benefit

Coverage Starts **Catastrophic Coverage**
There is no coverage limit and no coverage gap with the Premier Plan.

Part D Covered Drugs	30-day supply	90-day mail order (preferred)		
Tier 1: Preferred Generic	\$0	\$0	\$3.95 or 5% for generics (whichever is greater) \$9.85 or 5% for brand names (whichever is greater)	You stay in this stage for the rest of the year.
Tier 2: Non-Preferred Generic	\$10	\$20		
Tier 3: Preferred Brand	\$45	\$90		
Tier 4: Non-Preferred Brand	\$95	\$190		
Tier 5: Specialty Drugs	33% with a \$250 maximum	NA		



 Catastrophic coverage begins after **your** out-of-pocket costs = \$7,050

UNM Select Plan Prescription Drug Benefit

Select Plan has a coverage gap.

Initial Coverage **Coverage Gap** **Catastrophic Coverage**
 Limit \$4,430; includes what both **you** and **your plan** pay "Donut Hole"

Part D Covered Drugs	Initial Coverage		Coverage Gap "Donut Hole"		Catastrophic Coverage	
	30-day supply	90-day mail order (preferred)	30-day supply	90-day mail order (preferred)		
Tier 1: Preferred Generic	\$0	\$0	Refer to Formulary. Tier 1 and 2 drugs noted with "GC" are \$0 or \$10. 25% generic and brand Refer to Formulary. Tier 1 and 2 drugs noted with "GC" are \$0 or \$20.	\$3.95 or 5% for generics (whichever is greater) \$9.85 or 5% for brand names (whichever is greater)	You stay in this stage for the rest of the year.	
Tier 2: Non-Preferred Generic	\$10	\$20				
Tier 3: Preferred Brand	\$45	\$90				
Tier 4: Non-Preferred Brand	\$95	\$190				
Tier 5: Specialty Drugs	33% with a \$250 maximum	NA				


 Catastrophic coverage begins after **your** out-of-pocket costs = \$7,050

SUMMARY OF BENEFITS

Extra Help / Low-Income Subsidy (LIS)

If you qualify for Low-Income Subsidy (LIS), your plan premium and drug copays will be reduced. The prescription drug coverage gap (also known as the donut hole) in your drug coverage is eliminated. You also pay reduced copays for your Part D drugs.

LIS qualifying income levels for 2021¹ – To qualify, your annual income and resources / assets need to be at or below the following:

Single

Annual Income¹: \$19,320

Resources / Assets²: \$13,290

Married

Annual Income¹: \$26,130

Resources / Assets²: \$26,520

¹ Income limits may change in 2022.

² The house you live in, the car you drive, life insurance policies, and burial plots do not count toward the resource / asset limit. Contact Social Security for other income / resource exclusions.

Medicaid and Other Medicare Savings Programs (MSP)

Those who qualify for Extra Help may also qualify for Medicare Savings Programs that help pay Part A and/or Part B premiums. Medicaid programs may also lower your copays, depending on the level for which you qualify.

FIND OUT IF YOU QUALIFY FOR ASSISTANCE

Presbyterian offers a personal service that helps you find out if you qualify for these money-saving programs. A trusted partner since 2006, My Advocate™, helps you apply for Extra Help / Low-Income Subsidy and Medicare Savings Programs.

Call My Advocate™ at 1-866-851-0324.

You also have the option to contact:

- 1-800-Medicare (1-800-633-4227), 24 hours a day, seven days a week (TTY 1-877-486-2048)
- Social Security, 1-800-772-1213 (TTY 1-800-325-0778)
- NM State Human Services Department, 1-888-997-2583 (TTY 1-855-227-5485)

SUMMARY OF BENEFITS

Enjoy Better Hearing and Comprehensive Care

Good hearing is important to your overall health. That's why we cover a routine annual hearing exam for no copay.



TruHearing Select

2022 Hearing Aid Coverage

Your plan covers up to two hearing aids per year (one per ear per year).

TruHearing Advanced	TruHearing Premium	Routine Exam
32 Channels 6 Programs	48 Channels 6 Programs	TruHearing Network Provider
\$699 copay/aid	\$999 copay/aid	\$0 exam copay

Your Comprehensive Hearing Benefit Includes:

State-of-the-Art Technology

- Enjoy natural, lifelike sound in virtually all listening situations.
- Hear speech clearly, even in noisy environments.
- Stream audio and phone calls directly to your ears from most smartphones.



Personalized Care

- Guidance and assistance from a TruHearing consultant.
- Local, professional care from an accredited provider in your area.
- A hearing exam plus one year of follow-up visits for fitting and adjustments.

Help Along Your Way

- A worry-free purchase with a 60-day trial and three-year warranty.
- 80 free batteries per aid included with non-rechargeable models.
- Guides to help you adapt to your new hearing aids at [TruHearing.com/GetStarted](https://www.truhearing.com/GetStarted).

Call TruHearing to learn more and schedule an appointment.

1-866-202-0110 | TTY 711 | 8 a.m. - 8 p.m., Monday - Friday

SUMMARY OF BENEFITS

More Plan Advantages for Presbyterian Members



Improve Your Fitness with Free SilverSneakers® Memberships

The SilverSneakers Fitness program is included at no additional cost to you. Visit more than 15,000 participating nationwide locations, including Planet Fitness, Anytime Fitness, Defined Fitness, Chuze Fitness, YMCA, and more.

- Enroll at multiple locations at any time.
- Reach and maintain a healthy body weight.
- Take fitness classes at convenient venues.
- Expand your circle of friends and enjoy social activities.



For participating locations visit www.silversneakers.com.



Travel Worldwide and Be Protected with Assist America®

Enjoy the protection of Assist America's global emergency travel assistance services 24 hours a day, 365 days a year, for up to 90 days. This unique program immediately connects you to doctors, hospitals, pharmacies and other services when experiencing a medical emergency while traveling 100 miles or more away from your permanent residence or in another country.

Services include:

- Emergency medical evacuation and repatriation
- Prescription assistance
- Medical monitoring
- Interpreter and legal referrals
- Return of mortal remains
- Free mobile app and much more



For benefit details, visit www.assistamerica.com or call 1-800-872-1414.

SUMMARY OF BENEFITS

For more information about Presbyterian Medicare Advantage plans, please call us at the phone numbers below or visit us at www.phs.org/medicare.

Presbyterian Medicare Sales Consultants

(505) 923-8458 or 1-800-347-4766 (TTY 711)

Hours: 8 a.m. to 8 p.m., 7 days a week (except holidays) from October 1 through March 31, and Monday to Friday (except holidays) from April 1 through September 30.

Presbyterian Customer Service Center (for members)

(505) 923-6060 or 1-800-797-5343 (TTY 711)

Hours: 8 a.m. to 8 p.m., 7 days a week from October 1 through March 31 and Monday to Friday (except holidays) from April 1 through September 30.

You can see our plan's provider and pharmacy directory if you visit our website at www.phs.org/medicare and select **Providers** at the top of the page.

For coverage and costs of Original Medicare, look in your current **Medicare & You** handbook. View it online at www.medicare.gov or get a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, seven days a week. TTY users should call 1-877-486-2048.

To learn how we safeguard your Protected Health Information and your rights, call us at (505) 923-6060 or 1-800-797-5343 (TTY 711) or visit www.phs.org/medicare and select **Privacy Notice** at the bottom of the page.

Out-of-network/non-contracted providers are under no obligation to treat Presbyterian Senior Care (HMO-POS) members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

To get a complete list of services we cover, contact the plan or please refer to the Evidence of Coverage. You may easily download a copy of the Evidence of Coverage from our website, www.phs.org/medicare, and select **For Members** at the top of the page. You may also request a copy by calling customer service.

Presbyterian Senior Care (HMO-POS) is a Medicare Advantage plan with a Medicare contract. Enrollment in the plan depends on contract renewal.

PRESCRIPTION DRUG FORMULARY



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

Drugs listed on the formulary are generally covered as long as the drug is medically necessary.

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. Generally, we will approve your request for an exception as a Tier 5 drug if drugs on our formulary are not as effective at treating your condition.

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

PA = Prior Authorization	GC = Gap Coverage
QL = Quantity Limits	LA = Limited Access
ST = Step Therapy	NDS = Non-Extended Day Supply

For more information or to download the formulary drug list, visit www.phs.org/medicare and click Prescription Drugs.

PROVIDERS AND PHARMACIES

The enclosed list is an index by practitioner name, provider group name and pharmacy name in alphabetical order as of July 2021.

This listing is subject to change. Some providers and pharmacies may have been added or removed from our network after this listing was printed. We do not guarantee that each provider is accepting new patients.

Here are other ways to find your provider.

- **Call us** – If you need help finding your provider, please call (505) 923-8458 or 1-800-347-4766 (TTY 711).
- **Online** – View our online directory at phs.org/medicare/en/Pages/providers.aspx. Since our network providers can change daily, our online listing can help you find the most current information.



Presbyterian Customer Service Center (for members)

(505) 923-6060 or
1-800-797-5343
(TTY 711)

Hours: 8 a.m. to 8 p.m.,
seven days a week from
October 1 through
March 31 and Monday to
Friday (except holidays)
from April 1 through
September 30.

Presbyterian Senior Care (HMO-POS) is a Medicare Advantage plan with a Medicare contract. Enrollment in this plan depends on contract renewal.

Pre-Enrollment Checklist

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call us at **(505) 923-8458** or **1-800-347-4766**. TTY users can call 711.

Understanding the Benefits

- Review the full list of benefits found in the Evidence of Coverage (EOC), especially for those services for which you routinely see a provider. Visit **www.phs.org/medicare** or call **(505) 923-8458** or **1-800-347-4766**, TTY users can call 711, for a copy of the EOC.
- Review the provider directory (or ask your provider) to make sure the providers you see now are in the network. If they are not listed, it means you will likely have to select a new provider.
- Review the pharmacy directory to make sure the pharmacy you use for any prescription medicine is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.

Understanding Important Rules

- In addition to your monthly plan premium, you must continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month.
- Benefits, premiums and/or copayments/co-insurance may change on January 1, 2023.
- For the HMO plan, except in emergency or urgent situations, we do not cover services by out-of-network providers (doctors who are not listed in the provider directory).
- For the HMO-POS, the plan allows you to see providers outside of our network (non-contracted providers). However, while we will pay for covered services provided by a non-contracted provider, the provider must agree to treat you. Except in emergency or urgent situations, non-contracted providers may deny care. In addition, you will pay a higher co-pay for services received by non-contracted providers.

2022 Presbyterian Senior Care/Employer/Union Group Enrollment Request Form

To enroll in Presbyterian Senior Care, please provide the following information:			
Employer Group or Union Name:	Plan Name:		
Group #:			
LAST Name:	FIRST Name:	Middle Initial:	
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.			
Birth Date: (___ / ___ / ___) (M M / D D / Y Y Y Y)	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Home Phone Number: ()	Alternate Phone Number: ()
Permanent Residence Street Address (Don't enter a P.O. Box):			
City:	State:	ZIP Code:	
Mailing Address, if different from your Permanent Residence Address (P.O. Box allowed) Street Address:			
City:	State:	ZIP Code:	
Email Address:			
Your Medicare information:			
Medicare Number: _ _ _ _ - _ _ _ - _ _ _ _			
Answer these important questions:			
Are you the retiree? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, retirement date (month/date/year): _____ If no, name of retiree: _____			
Are you covering a spouse or dependents under this employer or union plan? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, name of spouse: _____ Name of dependents: _____			
Will you have other prescription drug coverage (like VA, TRICARE) in addition to Presbyterian Senior Care? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, name of other coverage: _____ Member number for this coverage: _____ Group number for this coverage: _____			

2022 Presbyterian Senior Care/Employer/Union Group Enrollment Request Form
IMPORTANT – Read and sign below:

- I must keep both Hospital (Part A) and Medical (Part B) to stay in Presbyterian Senior Care.
- By joining this Medicare Advantage Plan, I acknowledge that Presbyterian Senior Care will share my information with Medicare, who may use it to track my enrollment, to make payments, and for other purposes allowed by Federal law that authorize the collection of this information (see Privacy Act Statement below).
- Your response to this form is voluntary. However, failure to respond may affect enrollment in the plan.
- The information on this enrollment form is correct to the best of my knowledge. I understand that if I intentionally provide false information on this form, I will be disenrolled from the plan.
- I understand that Presbyterian Senior Care has worldwide emergency/urgent care services.
- I understand that when my Presbyterian Senior Care coverage begins, I must get all of my medical and prescription drug benefits from Presbyterian Senior Care. Benefits and services provided by Presbyterian Senior Care and contained in my Presbyterian Senior Care “Evidence of Coverage” document (also known as a member contract or subscriber agreement) will be covered. Neither Medicare nor Presbyterian Senior Care will pay for benefits or services that are not covered.
- I understand that my signature (or the signature of the person legally authorized to act on my behalf) on this application means that I have read and understand the contents of this application. If signed by an authorized representative (as described above), this signature certifies that:
 - 1) This person is authorized under State law to complete this enrollment, and
 - 2) Documentation of this authority is available upon request by Medicare.

Signature:	Today’s Date:
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If you’re the authorized representative, sign above and fill out these fields:

Name:	Address:
Phone Number:	Relationship to Enrollee:

Office Use Only:

Name of staff member, agent, or broker (if assisted in enrollment):
 _____ Broker # _____

How was enrollment received: _____ Date Received: _____

Plan ID# _____ Effective date of coverage: _____

ICEP/IEP: _____ AEP: _____ SEP (type): _____ Not Eligible: _____

2022 Presbyterian Senior Care/Employer/Union Group Enrollment Request Form

Section 2 – All fields on this page are optional
Answering these questions is your choice.
You can't be denied coverage because you don't fill them out.

As part of your enrollment, do you want to receive any of the following materials via email?

- Plan Formulary
- Summary of Benefits
- Evidence of Coverage

Would like to go paperless for your Explanation of Benefits and Annual Notice of Change documents?

- Yes, I want to go paperless.
- No, continue to send by mail.

Email address: _____

All materials are available in Spanish and a machine-readable format through our website or by request. Other options, such as other languages, large print or Braille are available by request. Please contact Presbyterian Senior Care at (505) 923-6060 or 1-800-797-5343. Our office hours are 8 a.m. to 8 p.m., seven days a week from October 1 to March 31, and Monday to Friday (except holidays) from April 1 through September 30. TTY users can call 711.

Select one if you want us to send you information in a language other than English.

- Spanish Other _____

Do you work? Yes No

Does your spouse work? Yes No

List your Primary Care Physician (PCP), clinic, or health center:

 **PRESBYTERIAN**