



## 2023 ENROLLMENT GUIDE

**Presbyterian Senior Care (HMO-POS)  
New Mexico Retiree Health Care Authority  
Plan I and Plan II**



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

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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 yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', ł'áá jiik'eh, éí ná hóló, kóji' hódíłnih (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 640,000 enrolled in Medicare Advantage, Medicaid, and Commercial/Individual plans.

## Presbyterian by the Numbers

**114** years  
of serving  
New Mexicans



**9** hospitals in  
**8** communities



More than **1,200**  
providers in  
Presbyterian  
Medical Group



**900,000**  
individual  
customers  
(and counting)



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



More than  
**640,000**  
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.

# ABOUT US

## No-cost Ways to Access Care Virtually

When seeking quick care for minor ailments, **Video Visits** provide access to healthcare providers **anytime**, without an appointment, from the comfort of your own home, office or other location with mobile data or Wi-Fi access.

**Online Visits** offer an online medical interview that is sent to a Presbyterian Medical Group provider who will diagnose, treat and prescribe medications, when necessary.

**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.

To learn more about these virtual care options, visit [www.phsgetcare.org](http://www.phsgetcare.org).

The screenshot shows a web interface titled "Need help getting care?". Below the title is a note: "The default insurance provider is **Presbyterian**. [Have something else?](#)". The main heading is "When do you need care?". There are two buttons: "Get care today" (with a clock icon) and "Get care later" (with a calendar icon). Under "Get care today", there are three service cards under the heading "Telehealth":

Service	Icon	Description	Cost	Wait time
PresRN	Headset with red cross	24/7 nurse advice line	\$0	⌚
Online Visits	Smartphone with checkmarks	Online medical interview and response	\$0 - \$	⌚
Video Visits	Doctor in a video frame	Same-day video care for minor illnesses and injuries	\$0 - \$\$	⌚



# ABOUT US

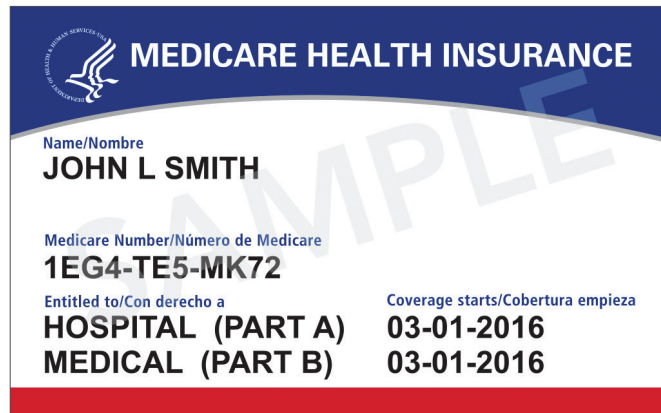
## Managing the Health of Our Members

- **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.
- **PresRN** – This offering gives 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**.



# 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 2023, your Part B and Part D premium may be higher if your income is above \$91,000 a year as an individual. You will be notified if these amounts change in 2024.

### 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.







## 2023 SUMMARY OF BENEFITS

**Presbyterian Senior Care (HMO-POS)  
New Mexico Retiree Health Care Authority  
(NMRHCA) Plan I and Plan II**



This is a summary of health and drug services covered by Presbyterian Senior Care (HMO-POS) NMRHCA Plan I and Plan II, January 1, 2023 to December 31, 2023.

### **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) NMRHCA

	Plan 1 In-Network You pay	Plan II In-Network You pay	Out-of- Network You pay
<b>Maximum Annual Out-of-Pocket Responsibility</b> <i>(This is the most you pay in a calendar year for covered medical and hospital services. It does not include prescription drugs.)</i>	<b>\$2,500</b>	<b>\$3,000</b>	<b>\$7,500 (combined)</b>
<b>Inpatient Hospital Care*</b> <i>(per admission)</i> <ul style="list-style-type: none"> <li>Additional Days</li> </ul>	\$125 per day Days 1 - 3 \$0	\$225 per day Days 1 - 5 \$0	Plan I \$750 per admit Plan II \$300 per day Days 1 - 5
<b>Ambulatory Surgery Center / Outpatient Surgery*</b>	\$125	\$275	20%
<b>Doctor Visits</b> <i>(no referral required)</i> <ul style="list-style-type: none"> <li>Primary Care</li> <li>Specialists</li> <li>Telehealth visits (video, telephone or online visits for primary care, specialists and urgent care)</li> </ul>	\$10 \$30 \$0	\$10 \$40 \$0	\$35 \$60 Out-of-network copays apply
<b>Preventive Care and Routine Physicals</b>	\$0	\$0	\$35
<b>Emergency Care</b> <i>(worldwide)</i> <i>(This copay is waived if admitted to the hospital.)</i>	\$65	\$75	Plan I \$65 Plan II \$75
<b>Urgently Needed Services</b>	\$10	\$10	\$65
<b>Diagnostic Services/ Labs/Imaging</b> <ul style="list-style-type: none"> <li>Lab services</li> <li>Diagnostic tests and procedures</li> <li>Outpatient x-rays</li> <li>Diagnostic radiology service* (such as CT, MRA, MRI, PET scans)</li> </ul>	\$0 \$0 \$0 \$0	\$0 \$0 \$0 \$250	20% 10% 10% 20%

# SUMMARY OF BENEFITS

## Presbyterian Senior Care (HMO-POS) NMRHCA

	Plan 1 In-Network You pay	Plan II In-Network You pay	Out-of- Network You pay
<b>Hearing Services</b> <i>(does not go toward maximum out-of-pocket responsibility)</i> <ul style="list-style-type: none"> <li>Hearing exam</li> <li>Hearing aid <i>(from TruHearing®)</i></li> </ul>	\$0 \$699 - \$999	\$0 \$699 - \$999	\$60 Not covered
<b>Dental Services</b> <ul style="list-style-type: none"> <li>Medicare covered</li> <li>Routine</li> </ul>	\$30 Not covered	\$40 Not covered	\$60 Not covered
<b>Vision Services</b> <ul style="list-style-type: none"> <li>Annual routine exam</li> <li>Diagnosis/treatment of diseases and conditions of eye</li> <li>Eyewear after cataract surgery</li> </ul>	\$0 \$10 \$10	\$0 \$10 10%	\$60 \$60 25%
<b>Mental Health Services</b> <ul style="list-style-type: none"> <li>Inpatient visit*               <ul style="list-style-type: none"> <li>– Additional days</li> </ul> </li> <li>Outpatient group therapy visit</li> <li>Outpatient individual therapy visit (including virtual)</li> </ul>	\$125 per day Days 1 - 3 \$0 \$0 \$0	\$225 per day Days 1 - 5 \$0 \$0 \$0	Plan I \$750 per admit Plan II \$300 per day Days 1 - 5 50% 50%
<b>Skilled Nursing Facility (SNF)*</b> <ul style="list-style-type: none"> <li>Days 1 - 20</li> <li>Days 21 - 100 <i>(Our plan covers up to 100 days in a SNF.)</i></li> </ul>	\$0 per day \$40 per day	\$0 per day \$40 per day	\$0 per day \$60 per day
<b>Rehabilitation Services</b> <ul style="list-style-type: none"> <li>Cardiac and Pulmonary rehab</li> <li>Occupational, Physical, and Speech and Language therapy visits <i>(\$0 for telehealth visits)</i></li> </ul>	\$0 \$10	\$0 \$15	\$35 \$35
<b>Ambulance (ground and air)</b>	\$75	\$150	Plan I - \$75 Plan II - \$150

\* Prior authorization required.

# SUMMARY OF BENEFITS

## Presbyterian Senior Care (HMO-POS) NMRHCA

	Plan 1 In-Network You pay	Plan II In-Network You pay	Out-of- Network You pay
<b>Routine Transportation</b>	Not covered	Not covered	Not covered
<b>Medicare Part B Drugs*</b>			
• Chemotherapy Drugs and other drugs administered by a medical professional	\$50	10%	20%
• Purchased at a retail pharmacy	\$0	\$0	20%
<b>Foot Care</b> ( <i>podiatry services</i> )			
• Foot exams and treatment ( <i>Medicare covered</i> )	\$0	\$0	\$60
<b>Medical Equipment/Supplies*</b>			
• Durable Medical Equipment ( <i>e.g., wheelchairs, oxygen, continuous glucose monitors/supplies</i> )	\$10	10%	25%
• Prosthetics ( <i>e.g., braces, artificial limbs</i> )	\$10	10%	25%
<b>Wellness Programs</b> ( <i>e.g., fitness</i> )	\$0 SilverSneakers® Fitness Program is included. For participating locations visit <a href="http://www.silversneakers.com">www.silversneakers.com</a>		
<b>Acupuncture</b>			
• Medicare covered	\$15	\$15	\$60
• Routine ( <i>limited to 25 visits/year</i> )	\$15	\$15	\$60
<b>Chiropractic</b>			
• To correct subluxation	\$20	\$20	\$60
• Routine ( <i>limited to 25 visits/year</i> )	\$20	\$20	\$60
<b>Home Health Care*</b>	\$0	\$0	\$0



# SUMMARY OF BENEFITS

## Presbyterian Senior Care (HMO-POS) NMRHCA Plan I Prescription Drug Benefit

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

Part D Covered Drugs	30-day supply	90-day mail order (preferred)	
<b>Tier 1:</b> Preferred Generic	\$0	\$0	\$4.15 or 5% for generics (whichever is greater)
<b>Tier 2:</b> Non-Preferred Generic	\$10	\$20	
<b>Tier 3:</b> Preferred Brand	\$45	\$112.50	\$10.35 or 5% for brand names (whichever is greater)
<b>Tier 4:</b> Non-Preferred Brand	\$95	\$285	
<b>Tier 5:</b> Specialty Drugs	33% up to \$100	NA	

Catastrophic coverage begins after **your** out-of-pocket costs = \$7,400

## Presbyterian Senior Care (HMO-POS) NMRHCA Plan II Prescription Drug Benefit

**Initial Coverage**      **Coverage Gap "Donut Hole"**      **Catastrophic Coverage**  
 Limit \$4,660; includes what both **you** and **your plan** pay

Part D Covered Drugs	30-day supply	90-day mail order (preferred)	30-day supply	90-day mail order (preferred)	
<b>Tier 1:</b> 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.	\$4.15 or 5% for generics (whichever is greater)
<b>Tier 2:</b> Non-Preferred Generic	\$10	\$20			
<b>Tier 3:</b> Preferred Brand	\$45	\$112.50			\$10.35 or 5% for brand names (whichever is greater)
<b>Tier 4:</b> Non-Preferred Brand	\$95	\$285			
<b>Tier 5:</b> Specialty Drugs	27%	NA			

Catastrophic coverage begins after **your** out-of-pocket costs = \$7,400

**For both Plan I and Plan II, your copay will be no more than \$35 for a 30-day supply of covered insulins.**

# SUMMARY OF BENEFITS

## 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](http://www.silversneakers.com).



# 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**<sup>®</sup> *Select*

### 2023 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   11 Styles	48 Channels   14 Styles	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**

## VALUE-ADDED ITEMS AND SERVICES



### 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](http://www.assistamerica.com) or call 1-800-872-1414.

*These additional services/items are not part of the plan benefit package or the Medicare benefit.*

### Low-Income Subsidy (LIS) and Other Medicare/Medicaid Savings Programs

If you qualify for Low-Income Subsidy (LIS), your 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. 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

For more information about Presbyterian Medicare Advantage plans, please call us at the phone numbers below or visit us at [www.phs.org/medicare](http://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](http://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](http://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](http://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](http://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](http://www.phs.org/medicare) and click Prescription Drugs.

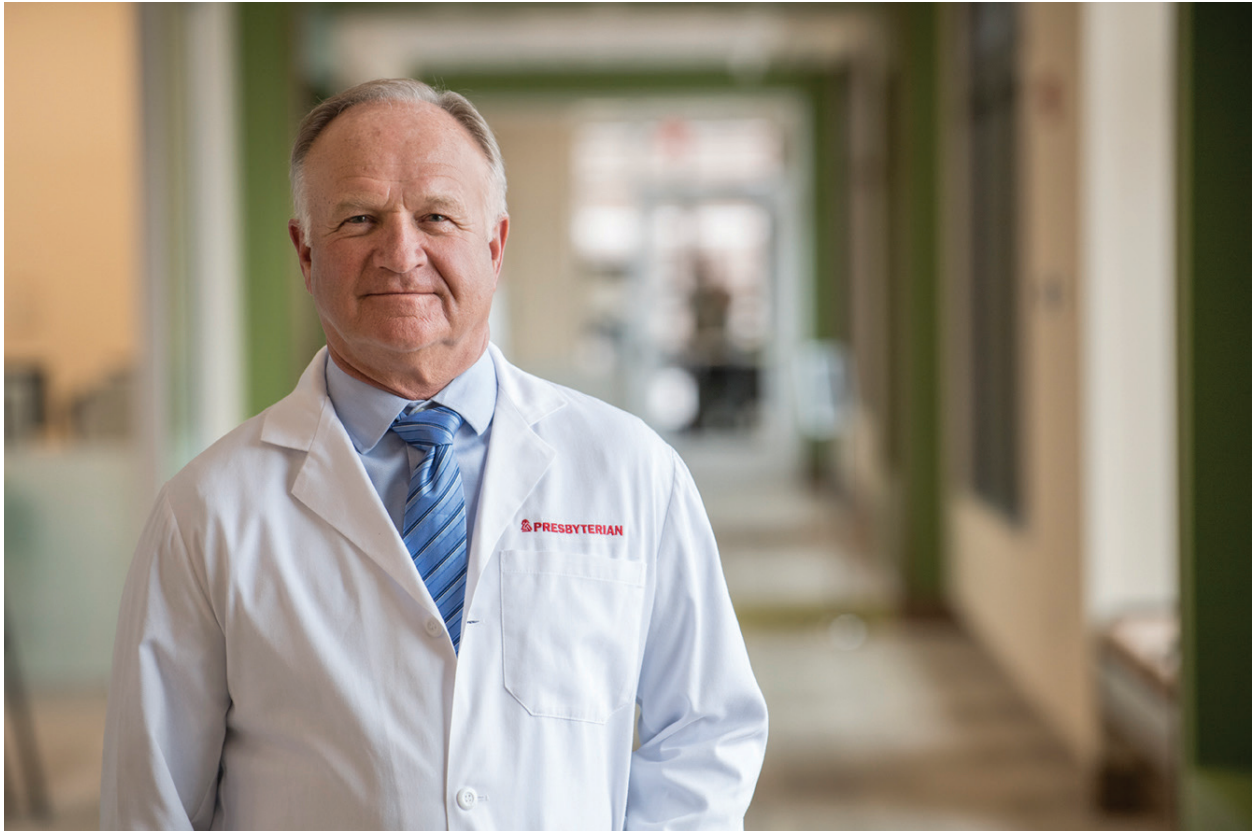
# PROVIDERS AND PHARMACIES

The enclosed list is an index by practitioner name, provider group name and pharmacy name in alphabetical order as of July 2022.

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](https://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.



# CONTACT US

## 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 and speak to a customer service representative at **1-800-797-5343** or **(505) 923-6060** (TTY 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 doctor. Visit **[www.phs.org/medicare](http://www.phs.org/medicare)** or call **1-800-797-5343** or **(505) 923-6060** (TTY 711) to view a copy of the EOC.
- ☐ Review the provider directory (or ask your doctor) to make sure the doctors you see now are in the network. If they are not listed, it means you will likely have to select a new doctor.
- ☐ 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, 2024.
- ☐ This 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.



#### **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.

**Call the Presbyterian Customer Service Center if you need assistance in selecting a primary care provider (PCP).**

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