NMSU PPO & Medicare Carve-out
Two plans are available:

- NMSU Preferred Provider Option PPO Plan
  - Non-Medicare Eligible Retirees

- NMSU Carve-out Plan
  - Medicare Eligible Retirees
Preferred Providers - PPO

Nationwide, more than 95% of hospitals and 85% of doctors

Over 20,000 contracted providers in New Mexico

Nationwide coverage when traveling outside of home state

More than 930,000 providers

More than 5,300 hospitals

Worldwide® coverage when traveling in more than 195 countries
When You Choose a Network Provider... PPO

• You receive the **highest level of benefits** when you see a provider in the Blue Cross and Blue Shield of New Mexico (BCBSNM) network of contracted providers
  
  ✓ BCBS ID card accepted in lieu of payment in full
  ✓ No balance billing
  ✓ Provider files claim for you

• You receive a **lower level of benefits** when you see an out-of-network provider
  
  ✓ You are responsible for paying the provider up front
  ✓ You will be billed for the remaining balance over the allowed amount
  ✓ You are responsible for getting prior authorization
Enhanced Benefit

- Short-Term Rehabilitation: Inpatient and Outpatient Occupational, Physical and Speech Therapy (max. 60 visits per condition for all services combined)

- Skilled Nursing Facility and Inpatient Rehabilitation (max. 60 days per condition)
## Benefits - PPO

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Member Share</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Preferred Provider</td>
</tr>
<tr>
<td><strong>Deductible</strong></td>
<td></td>
</tr>
<tr>
<td>– Individual</td>
<td>$500</td>
</tr>
<tr>
<td>– Family</td>
<td>$1,500</td>
</tr>
<tr>
<td><strong>Out-of-Pocket Maximum</strong></td>
<td>$3,500</td>
</tr>
<tr>
<td>– Individual</td>
<td>$3,500</td>
</tr>
<tr>
<td>– Family</td>
<td>$8,750</td>
</tr>
<tr>
<td><strong>Primary Provider Office Visit</strong></td>
<td>$25 (deductible waived)</td>
</tr>
<tr>
<td><strong>Specialist Visit</strong></td>
<td>$35</td>
</tr>
<tr>
<td><strong>Preventive Care / Well Visits</strong></td>
<td>No Charge</td>
</tr>
<tr>
<td><strong>Inpatient Admission</strong></td>
<td>25%*</td>
</tr>
<tr>
<td><strong>Emergency Room</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Urgent Care</strong></td>
<td>25%*</td>
</tr>
<tr>
<td><strong>PET Scans, CT Scans, MRIs, Lab Tests, X-rays, including EKGs</strong></td>
<td>25%</td>
</tr>
</tbody>
</table>

*After deductible
On October 6, 2014, all states will consider hydrocodone medicines to be Schedule II controlled substances due to their risk for addiction or abuse.

What does this mean for you?
Starting October 6, when you are ready to order a refill, you will need to mail in an *original, hand-signed prescription order to PrimeMail®.*

### Retail Pharmacy Program (up to a 30-day supply or 120 units, whichever is less)

<table>
<thead>
<tr>
<th>Type of Prescription</th>
<th>% of Covered Charge you pay (coinsurance), if the % is between the minimum and maximum copayment</th>
<th>Minimum Copayment</th>
<th>Maximum Copayment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic drug</td>
<td>N/A</td>
<td>$10</td>
<td></td>
</tr>
<tr>
<td>Brand drug on Drug List</td>
<td>30%</td>
<td>$25</td>
<td>$45</td>
</tr>
<tr>
<td>Brand drug NOT on Drug List</td>
<td>40%</td>
<td>$45</td>
<td>$80</td>
</tr>
<tr>
<td>Specialty Pharmacy (Limit is 30 Days)</td>
<td>25%</td>
<td>$125</td>
<td>$250</td>
</tr>
</tbody>
</table>

Mail-order copay is 2 times the monthly cost
Self Service: Blue Access for Members

Claims and Customer Service

Members can:

- Check status of claims
- View Explanations of Benefits
- Communicate with Customer Advocates through e-mail
- View provider selections
- Order new ID cards or print temporary copy
- Link to Wellness site (Well onTargetSM)
The NEW Integrated Provider Finder®

Quick and Easy Ways to find Providers and Treatment Costs

• Log in to bcbsnm.com/BlueAccess for Members
• National quality designations for facilities and physicians nationwide
• Users can view patient reviews on physicians or submit one of their own
• Enhanced provider demographics added
• Estimate the cost of provider’s procedures, treatments and tests.
• Cost estimates are based on real claims data of all BCBS plans and National.
Health Insurance Marketplace is open. Enroll now.

Changes in health coverage offer some people new choices. Find the right plan for you.

Health Care Reform
Health insurance is changing. Do you know how these changes affect you? Get to know more with Health Care Reform and You.

Get a Quick Quote
It’s important to find the plan to fit your needs. Help you make that decision.

Medicare and You
Our Medicare Supplement Medicare Advantage plans cover medical expenses.

Assistance Available for Members Impacted by Floods in New Mexico
Find phone numbers and other information to help if you’ve been impacted and/or displaced as a result of the recent flooding. Read more
Looking for a specific provider? Type in all or part of the provider’s name and the location.

State you live in:*  
State you are searching in:*  
Type of Search:*  
Health Care Professional  Facility

Provider Name:*  
Name or facility name. For example, Smith or Community Hospital

Provider location:*  
Street and City or Street and Zip or City or Zip

Network:*  
Preferred Provider Organization (PPO)

Search the BlueCard Worldwide site for providers outside the U.S

How to search for a health care professional or facility

There are several ways that you can find just the right provider for you or check to make sure your provider is an in-network provider. You can search by a specific name or browse providers by specialty, type, costs, reviews, and more.

Understanding provider quality and costs

You want quality health care at a sensible cost, but how can you measure a provider’s quality? We leverage quality indicators from industry experts and make that information available to you so that you can better assess how well a doctor or hospital meets your needs.
You are searching for: Orthopaedic Surgery located within 10 miles of 60606, IL who accepts PPO - (Participating Provider Organization) Change search criteria

Page views: List | Map

Sort results by: Distance

Results 1-10 of 234

1. Orthopaedic Surgery
   Saul S Haskell MD
   205 W Randolph St Fl 7
   Chicago, IL 60606-1867
   0.2 miles away
   Highlights: Board Certified
   Overall Member Rating: Be the first to Rate this Provider

2. Orthopaedic Surgery
   Ronald L Silver MD
   205 W Randolph St Fl 7
   Chicago, IL 60606-1867
   0.2 miles away
   Highlights: Board Certified
   Overall Member Rating: Be the first to Rate this Provider

3. Orthopaedic Surgery
   Daniel T Ivankovich MD
   101 W Grand Ave Ste 200
   Chicago, IL 60654-7130
   0.7 miles away
   Highlights: Patients' Choice Award
   Overall Member Rating: Be the first to Rate this Provider

Compare: Click 'compare' in the search results to add a provider.

Compare: Daniel T Ivankovich MD
Compare: Ronald L Silver MD
Compare: Saul S Haskell MD

Search Tips:
Understanding your results: Providers in your plan's network are listed here, with those closest to your location listed first. To view more details about a provider, click the View Profile button. To narrow your results, use the filters on the left.

Is your provider not in our network?
Request that he or she be added to our network.
Cost Estimator Features - PPO

- Cost for more than 300 specific procedures
- Quality measurement information
- “Learn More about this Treatment” (alternatives to surgery)
- Alternative options:
  - Lower cost
  - Closer locations
  - Alternative to hospitals

- Member Liability Estimator - displays expected member out-of-pocket costs based on specific benefit plan, episodic contracted cost information, real-time deductible, and coinsurance

![Review MRI Lumbar Spine Details](image)
DOCTORS & HOSPITALS

Estimate your costs for treatment

Home
1 Patient & Location
2 Select a Treatment
3 Review Estimates

Patient and Location of Treatment

Select a Patient
Patient: TINA SMITH

Location of Treatment
Enter Location: 87107
List Providers within: 10 miles away

Use this tool to estimate your costs for common medical procedures. The costs displayed are estimates of the cost for the service or procedure selected and are not a guarantee of charges or payments. Your costs may vary depending on the services performed as part of undergoing treatment. Always confirm that the facility you choose is in network, that the procedure is covered under your benefits plan, and that you obtain proper preauthorization when necessary.

Download: Adobe® Reader™ | Adobe® Flash Player | Apple Quicktime | Windows Media Player
Estimate your costs for treatment

1. Patient & Location
2. Select a Treatment
3. Review Estimates

Estimated costs for TINA SMITH  ZIP CODE:  87107

Treatment Involves
- An Office Visit
- A Procedure or Surgery
- Diagnostic Radiology (MRI, CT Scan, etc)

Select a Treatment
- MRI Lumbar Spine

TREATMENT DESCRIPTION:

MRI Lumbar Spine: A MRI of the Lumbar Spine takes detailed 3-D pictures (scans) of soft tissues bone and virtually all other internal parts of the Lumbar Spine. It is used to help diagnose diseases and injuries.

Use this tool to estimate your costs for common medical procedures. The costs displayed are estimates of the cost for the service or procedure selected and are not a guarantee of charges or payments. Your costs may vary depending on the services performed as part of undergoing treatment. Always confirm that the facility you choose is in network, that the procedure is covered under your benefits plan, and that you obtain proper preauthorization when necessary.

Download: Adobe® Reader™ | Adobe® Flash Player | Apple Quicktime | Windows Media Player

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# Review Diagnostic Radiology Estimates

You've searched: **MRI Lumbar Spine** - [See Description](#)

## Provider Location Within:

<table>
<thead>
<tr>
<th>Distance</th>
<th>Provider Name</th>
<th>Cost Estimates</th>
<th>Coverage Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 Miles</td>
<td>Abq Hlth Prtnrs Radiology &amp; Imagi</td>
<td>Procedure Likely Cost: $602</td>
<td><strong>HCA Balance</strong> $433.88</td>
</tr>
<tr>
<td></td>
<td>3901 Carlisle Blvd NE</td>
<td>Cost range: $538 - $666</td>
<td>BlueEdge Health Care Account $433.88</td>
</tr>
<tr>
<td></td>
<td>Albuquerque, NM 87107-4503</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>86 Procedures Performed</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Miles</td>
<td>G Force LLC dba Upright MRI of NM</td>
<td>Procedure Likely Cost: $800</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7800 Jefferson St NE</td>
<td>Cost range: $760 - $840</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Albuquerque, NM 87109-4380</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>33 Procedures Performed</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Miles</td>
<td>Lovelace Womens Hospital</td>
<td>Procedure Likely Cost: $1,771</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4701 Montgomery Blvd NE</td>
<td>Cost range: $967 - $2,576</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Albuquerque, NM 87109-1219</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>5 Procedures Performed</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Miles</td>
<td>Lovelace Med Ctr Downtown</td>
<td>Procedure Likely Cost: $1,994</td>
<td></td>
</tr>
<tr>
<td></td>
<td>504 Elm St NE</td>
<td>Cost range: $1,458 - $2,530</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Albuquerque, NM 87102-2512</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>27 Procedures Performed</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Miles</td>
<td>Lovelace Med Ctr Downtown</td>
<td>Procedure Likely Cost: $1,994</td>
<td></td>
</tr>
<tr>
<td></td>
<td>601 Dr Martin Luther King Jr Ave NE</td>
<td>Cost range: $1,458 - $2,530</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Albuquerque, NM 87102-3619</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>27 Procedures Performed</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Miles</td>
<td>Unm Hospital</td>
<td>Procedure Likely Cost: $1,968</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2211 Lomas Blvd NE</td>
<td>Cost range: $1,546 - $2,290</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Albuquerque, NM 87106-2745</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>38 Procedures Performed</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Blue365® Member Discount Program

Weight Management – Discounts at Jenny Craig® on membership and food

Vision Care and Eyewear – Discounts on eyewear, contact lenses and laser vision correction surgery

Dental Products – Discounts on Procter & Gamble oral care bundles.

Hearing Aids – Discounts on hearing aids for members, parents and grandparents

Under the My Health tab
24/7 Nurseline

Advice anytime –
Round-the-clock health and wellness advice from licensed professionals

1-877-213-2567

✓ Our 24/7 Nurseline is here to help
✓ Nurses provide health advice and information
✓ AudioHealth Library® includes topics such as kicking the smoking habit

Available in English and Spanish
What if I Have Questions?

Personalized Service

Call your customer service team for:

• Claim questions/status
• Network provider information
• Membership and eligibility
• Medical coverage questions
• Inquiries (telephone and e-mail)
• Transition of Care information
• ID card requests
• Help with online tools

1-866-369-NMSU (6678)
Toll-free
Customer Service
NMSU Medicare Carve-out Plan – No changes

- Must be enrolled in Medicare Parts A & B
- Low or no out-of-pocket costs
- Freedom to choose your providers
- No referrals required
- No claims to file
- Worldwide Coverage for Emergencies
- Many non-Medicare covered services provided
NMSU Medicare Carve-out Plan

When a Provider Accepts Medicare Assignment:

- No Deductible
- No Coinsurance
- No Co-payments
- No referrals required
Medicare Carve-out Plan

When provider does NOT accept Medicare assignment

OR

When services are NOT covered by Medicare, but ARE plan benefits

Example: Acupuncture is not covered by Medicare.

- $140 Calendar year deductible
- 20% Coinsurance
- $1,500 Annual out-of-pocket maximum
- Prior Authorization from BCBS applies
Medicare Blue Rx℠
(Medicare Part D Prescription Drug Plan)
Eligibility – Medicare

- NMSU eligible retiree/spouse/dependent

- Enrollment in the Medicare Carve-Out (MCO) plan is required upon reaching Medicare eligibility to continue coverage through NMSU

- Upon reaching Medicare eligibility, usually age 65.

- Not enrolled in any other Medicare Prescription Drug Plan (PDP)

- If the retiree/spouse/dependent is eligible for Medicare prior to reaching age 65, the retiree/spouse must contact NMSU Benefit Services and provide a copy of the Medicare A&B card
Non-Medicare Retirees – Aging in

• MCO plan include Medicare Part D prescription plan

• NMSU will mail you a packet containing the Medicare Part D information at least forty-five days prior to your birthday month

• NMSU will *automatically* enroll you in Blue MedicareRx and Medicare Carve-out program once they have received confirmation of Medicare Part A and Medicare Part B enrollment from you

• NMSU must have proof of Medicare Part A & B enrollment *prior* to the effective date of Medicare
## Enhanced Plus Blue MedicareRx – Preferred Pharmacies 5-tier

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Enhanced Plus Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Deductible</td>
<td>$0</td>
</tr>
<tr>
<td>Preferred Pharmacy- <strong>Walmart, CVS, Walgreens, Albertsons</strong></td>
<td>Non-Preferred Pharmacy</td>
</tr>
<tr>
<td>Tier 1 - Preferred Generic</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Tier 2 - Non-Preferred Generic</td>
<td>$2 copay</td>
</tr>
<tr>
<td>Tier 3 – Preferred Brand</td>
<td>$25 copay</td>
</tr>
<tr>
<td>Tier 4 – Non-Preferred Brand</td>
<td>$55 copay</td>
</tr>
<tr>
<td>Tier 5 – Specialty</td>
<td>33%</td>
</tr>
</tbody>
</table>

| After your total out-of-pocket costs exceed $4,550 | You pay the greater of: $2.65 or 5%, whichever is greater, for Tier 1 and Tier 2 and $6.60 or 5% coinsurance, whichever is greater, for Tier 3, Tier 4 and Tier 5. |

Copayments shown are per 30-day supply at an in-network pharmacy. For more detailed information on this benefit plan, please refer to your Summary of Benefit.
On October 6, 2014, all states will consider hydrocodone medicines to be Schedule II controlled substances due to their risk for addiction or abuse.

What does this mean for you? Starting October 6, when you are ready to order a refill, you will need to mail in an original, hand-signed prescription order to PrimeMail®.
Mentally or Physically impaired Dependents - Medicare

• If your dependent child loses Medicaid eligibility as secondary coverage (Dependent has Medicare as the primary coverage) you may add them to the NMSU medical and Blue MedicareRx within 31 days of the loss of coverage.

• You must provide proof of loss to NMSU’s Benefits Office
Termination - Medicare

• You can terminate your coverage at Open Enrollment or terminate by enrolling under another Part D plan outside of NMSU and providing that proof of enrollment.

• If you pick up another Medicare Part D prescription plan outside of NMSU, you will be disenrolled from the NMSU MCO and Blue MedicareRx plan automatically, per CMS requirements.

• Once you have been disenrolled from the NMSU plans, either voluntarily or involuntarily, you will not be eligible to re-enroll at a later date.
Pharmacy - Medicare

What pharmacy can I use?

For a complete list of our retail, network and preferred network pharmacies

- Call 1-877-838-3877, 7 days a week, 7 a.m. – 7 p.m., Local time. For the hearing or speech impaired, please call 1-888-285-2252

- Or visit www.bcbsnm.com
Resources - Medicare

Medicare BlueRx

- Call 1-877-838-3877, 7 days a week, 7 a.m. – 7 p.m., CST
- For the hearing or speech impaired, please call 1-888-285-2252 days a week, 7 a.m. – 7 p.m., CST
- Visit www.bcbsnm.com

Medicare

- Call 1-800-MEDICARE (1-800-633-4227) 24 hours a day
- TTY/TDD Users: 1-877-486-2048, 24 hours a day
- Visit www.medicare.gov
Resources (continued) – Medicare

Social Security

• Call 1-877-772-1213, 7 a.m. – 7 p.m. Monday–Friday
• TTY/TDD Users: 1-800-325-0778, 7 a.m. – 7 p.m. Monday–Friday
• Visit www.socialsecurity.gov
OUR PURPOSE

TO DO EVERYTHING IN OUR POWER
TO STAND WITH OUR MEMBERS
IN SICKNESS AND IN HEALTH