

Open Enrollment 2022

New Mexico State University

Effective January 1, 2022



BlueCross BlueShield of New Mexico

A Division of Health Care Service Corporation, a Mutual Legal Reserve Company,
an Independent Licensee of the Blue Cross and Blue Shield Association



NMSU PPO and
Medigap Plan with BlueRx



NMSU Retirees

Two plans are available

❑ NMSU Preferred Provider Option PPO Plan

- Non-Medicare-Eligible Retirees
- **Plan changes 1/1/2022**

❑ NMSU Medigap Plan

- Medicare-Eligible Retirees



More Doctors. More Hospitals.

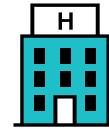


96%
of hospitals

83%
of doctors



1.5+ million
Providers



More than 9,000
Hospitals



Nationwide Coverage
when traveling or living
outside of home state



Blue Cross Blue Shield Global[®] Core
coverage when traveling in
190+ countries and territories

PPO — How It Works

In-Network Providers

ADVANTAGES

- Receive the highest level of benefits and potentially pay less for care
- Protection from billing over the allowed amounts (balance billing)
- No claim forms (provider files claim)
- No referrals required
- No requirement to select a PCP
- Access to a national PPO network

Out-of-Network Providers

DRAWBACKS

You do have coverage, but

- You pay a greater share of the costs
- You may receive fewer benefits out-of-network
- You may need to file your own claims
- You may be billed for charges over the allowed amount (balance billing)

Your Benefits – PPO

Benefits – PPO	Member Share	
	Preferred Provider	Non-Preferred Provider
Deductible	\$1,000 – Individual \$3,000 – Family	\$5,000 – Individual \$10,000 – Family
Out-of-Pocket Max (includes coinsurance only, not deductible or copayments)	\$4,500 – Individual \$10,800 – Family	\$15,000 – Individual \$30,000 – Family
Primary Provider Office Visit	\$35 (deductible waived)	40%*
Specialist Visit	\$55 (deductible waived)	40%*
Preventive Care/Well Visits	No Charge	Not Covered
Inpatient Admission	30%*	40%*
Emergency Room	30%*	
Urgent Care	30%*	40%*
PET Scans, CT Scans, MRIs, Lab Tests, X-rays, including EKGs	30%*	40%*

*After deductible

DENOTES Changes

Retail Pharmacy Program – PPO

	Coinsurance, if the coinsurance is between the minimum and maximum copay	Minimum Copayment	Maximum Copayment
Generic Drug on Drug List	\$15	\$15	\$15
Brand-Name on Drug List	30%	\$30	\$50
Brand-Name not on Drug List	40%	\$50	\$85
Specialty Drug	25%	\$130	\$275

Mail-order copay is 2 times the monthly cost

Blue Access for MembersSM



Save time
with self-service
support tools
and health and
wellness resources
available through a
convenient and
secure website

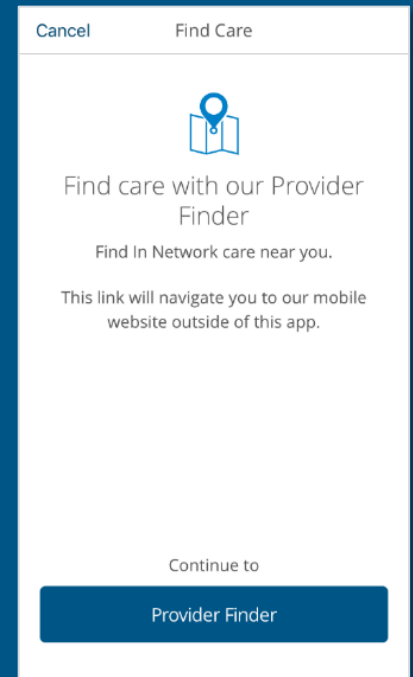
- Check claims and claims history
- View, save or print Explanation of Benefits (EOBs)
- Sign up for electronic EOBs, and save paper
- View benefits and covered dependents
- Check coverage details and Rx benefit information
- Manage mobile and texting preferences
- Request new ID cards or print temporary ID cards
- Access health and wellness information and guides
- Get details on wellness, discounts, 24/7 Nurseline
- Use Provider Finder[®] to find in-network doctors and hospitals

Log in and perform protected transactions
24 hours a day, 7 days a week*

*Claim Statements/EOBs are not available from 3 – 6 a.m.

Accessing the Provider Finder[®]

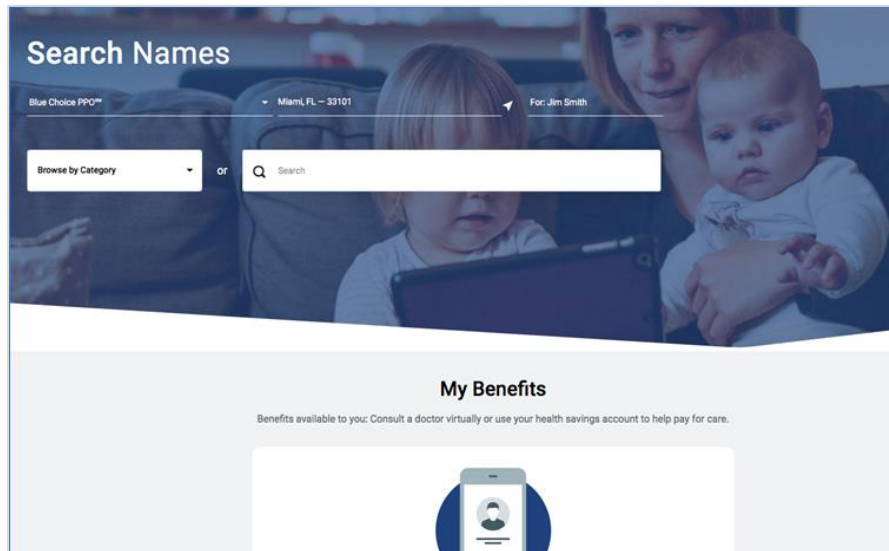
- Log in to Blue Access for MembersSM
- On your dashboard, select “FIND CARE”



Or access Provider Finder through the BCBSNM App

Inside Provider Finder

- You can look up expected out-of-pocket costs for 1,600 specific procedures*
- Quality designations for facilities and physicians
- Enhanced provider demographics
- Customizable search, maps and directions
- Patient reviews on physicians



*Cost information available for most plans

Also available
on the mobile app



Cost Estimate: MRI of the Brain

Out-of-pocket costs change depending on the provider you choose.

Estimated Costs for Jim Smith
\$276 - \$1,507

ESSENTIAL NOTE
For more information regarding your out-of-pocket costs for this procedure, please Review Your Benefits. If you require more details, Request a Written Estimate.

Ambulatory Diagnostic Center
Radiology

LOCATION
Ambulatory Diagnostic Center
6789 Western Pkwy Ste 101, Albuquerque, NM 87102
Get directions (2.1 mi away)

CONTACT INFORMATION
Phone: 505-555-1111

4.1 View 24 ratings >
2 Awards

Add to Compare [View Profile](#)

Your Estimated Cost
\$276
In your network

Flagler Diagnostic Center
Multi-Specialty

LOCATION
Flagler Diagnostic Center
4213 Main St Ste 100, Albuquerque, NM 87102
Get directions (2.2 mi away)

CONTACT INFORMATION

Be the First to Review
2 Awards
1 Affiliation

Add to Compare [View Profile](#)

Your Estimated Cost
\$300
In your network

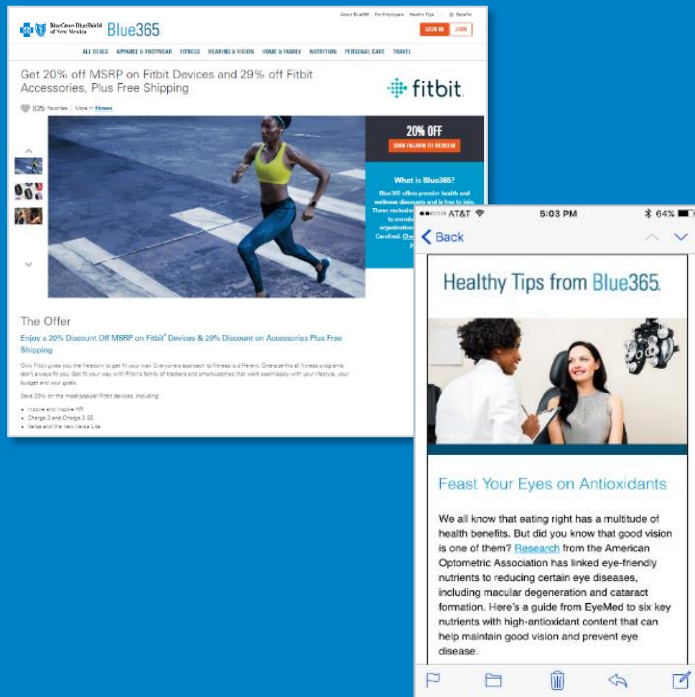
Estimated cost range

Estimated cost by provider and facility

Blue365[®]

Member Discount Program

Member discounts simply for being a BCBSNM member



- Exclusive health and wellness deals from national and local retailers
- Save money on fitness gear, family activities, gym memberships, healthy eating, dental, vision, hearing aids and more from top national and local retailers
- Log in to Blue Access for MembersSM and click “Member Discount Program” in Quick Links to view your available discounts and to register for weekly emails

Blue365 is a discount program only for BCBSNM members. This is NOT insurance. Some of the services offered through this program may be covered under your health plan. Employees should check their benefit booklet or call the Customer Service number on the back of their ID card for specific benefit facts. Use of Blue365 does not change monthly payments, nor do costs of the services or products count toward any maximums and/or plan deductibles. Discounts are only given through vendors that take part in this program and are subject to change. BCBSNM does not guarantee or make any claims or recommendations about the program's services or products. Members should consult their doctor before using these services and products. BCBSNM reserves the right to stop or change this program at any time without notice.

BCBSNM makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

24/7 Nurseline

Advice anytime. Advice isn't just needed from 9 to 5.

Round-the-clock health and wellness
advice from licensed nurses

Plus, you can also listen to more than
1,000 health topics

800-973-6329

Available in English and Spanish

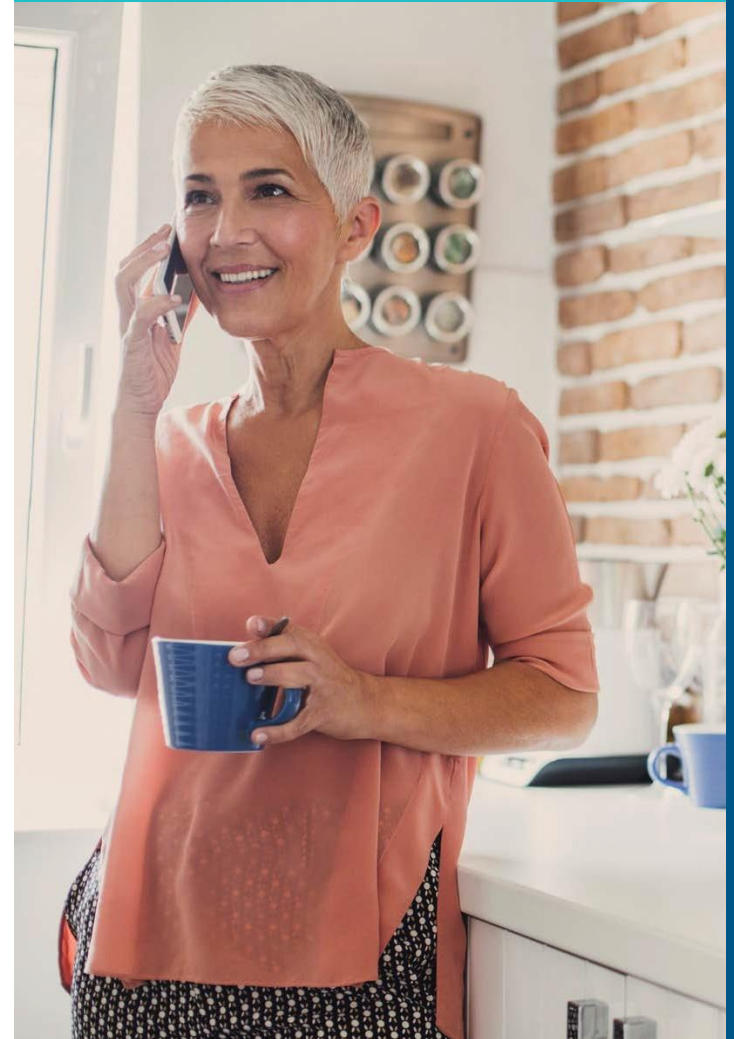


Customer Service

Call Customer Service for assistance and questions about:

- Claims
- Medical benefit coverage
- Finding network providers
- Membership and eligibility
- Navigating digital tools and resources
- ID card requests
- Health education and transfer to other health programs
- Transition of care

866-369-NMSU (6678)



What's coming?

The following digital health programs will be included in your Retiree PPO Plan beginning January 1, 2022

Livongo® A new approach to Diabetes and Hypertension Management

- [Livongo for Diabetes](#) is a health benefit that combines advanced technology with coaching to support you with your diabetes.

Checking, tracking, and support

- Real-time, personalized tips with each blood glucose check
 - Optional family alerts keep everyone in the loop
 - Support when you're out of range
 - Your meter can send data directly to your doctor
 - Unlimited strip reordering right from your meter
 - Automatic uploads means no more paper logbooks
- [Livongo for hypertension](#) gives you the technology, insights, and expert support to help you more easily manage high blood pressure.

Smart Tools for Better Health

- Monitor your numbers
- Get personalized tips after every check
- Make lifestyle changes with help from trained coaches
- Stay on track with reminders when to check
- Send data directly to your doctor
- Know how you're doing with customized reports

What's coming? Cont.

The following digital health programs will be included in your Retiree PPO Plan beginning January 1, 2022

Wondr Health™ (formerly Naturally Slim)

Clinically-proven weight loss without counting calories. Now you can lose weight, gain energy, sleep better, and improve your mind and body – all while eating your favorite foods.

No points, plans, or counting calories. Wondr is a skills-based digital weight loss program that teaches you how to enjoy the foods you love to improve your overall health. Our behavioral science-based program was created by a team of doctors and clinicians and is clinically-proven for lasting results.

To learn more, go to wondrhealth.com/BCBSNM

NMSU Medigap Plan

- ✓ **No** Part A Deductible
 - Part B Deductible may apply to outpatient services
- ✓ **No** coinsurance
- ✓ **No** copayments
- ✓ **No** referrals required



NMSU Medigap Plan

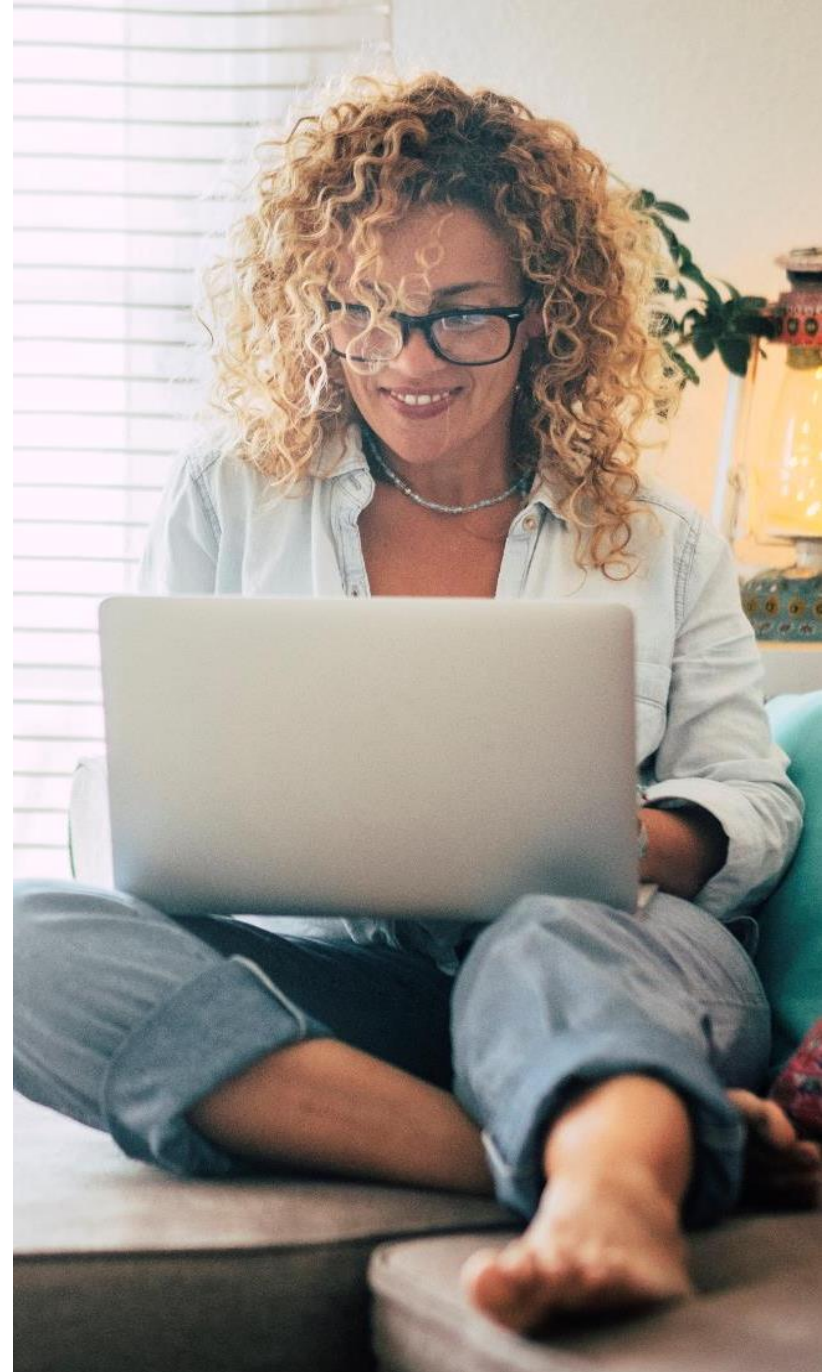
- You choose your hospitals and physicians anywhere within the U.S.
- Coverage when traveling outside of the U.S.
- Low or no out-of-pocket costs
- Affordable and easy to use
- Complements your Medicare coverage
- No referrals required
- No claims to file

“Excellent Value for
Your Premium
Dollar”

NMSU Medigap Plan

For Medicare-Covered Services

- The plan covers the annual Part A deductible \$1,556
- You are responsible to meet the Part B annual deductible of \$233 per calendar
- Once the Part B deductible has been met, you have no out-of-pocket costs when you choose a physician that accepts Medicare assignment for Medicare-covered services



NMSU Medigap Plan G

When provider
does **NOT**
accept Medicare
assignment

Example: Dr. Smith does not accept Medicare assignment but says that he will see you and may file the claim on your behalf to Medicare.

- He charges \$100 and Medicare allows \$80.
- He may only charge you 15% (\$12) above the \$80 allowable charge and BCBSNM will pay this excess at 100%. You will need to contact Customer Service for assistance in reimbursement.

Summary of Benefits

Services	Medicare Pays	Plan Pays	Member Pays
Medical Expenses: First \$233 of Medicare-approved amounts	\$0	\$0	\$233 (Part B Deductible)
Remainder of Medicare-approved amounts	Generally 80%	Generally 20%	\$0
Hospitalization: First 60 days	All but \$1,556	\$1,556 (Part A Deductible)	\$0
61st through 90th day	All but \$389 a day	\$389 a day	\$0
91st day and after: While using 60 lifetime reserve days	All but \$778 a day	\$778 a day	\$0
Once lifetime reserve days are used: Additional 365 days	\$0	100% Medicare-eligible expenses	\$0
Medicare-Covered Preventive Care	80%-100%	20%	\$0

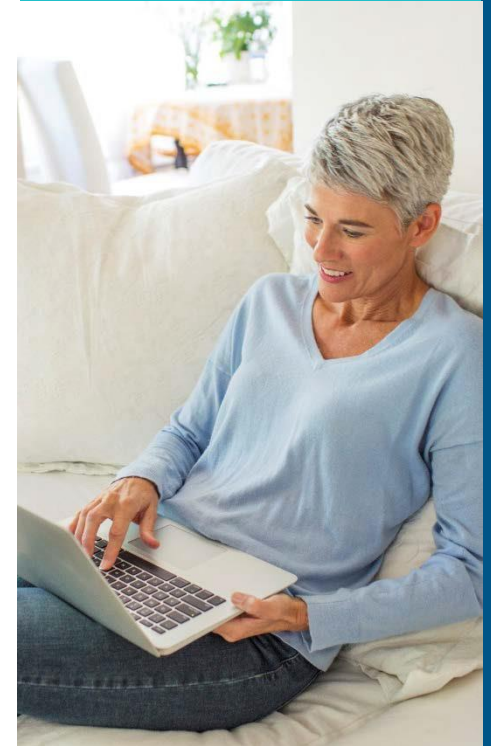
Medicare BlueRxSM

(Medicare Part D Prescription Drug Plan)



Eligibility – Medicare

- NMSU eligible retiree/spouse/dependent
- Enrollment in the NMSU Medigap 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 and B card



Non-Medicare Retirees – Aging in



- The NMSU Medigap Plan includes a 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 NMSU Medigap Plan 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 and B enrollment **prior** to the effective date of Medicare

Enhanced Plus Blue MedicareRx 5-Tier

– Preferred Pharmacies

Benefit	Enhanced Plus Plan	
Individual Deductible	\$0	
	Preferred Pharmacies – Walgreens, Albertsons, Savon	Non-Preferred Pharmacies – CVS, Target, Smith's
Tier 1 – Preferred Generic	\$0 copay	\$5 copay
Tier 2 – Non-Preferred Generic	\$2 copay	\$7 copay
Tier 3 – Preferred Brand	\$25 copay	\$30 copay
Tier 4 – Non-Preferred Brand	\$55 copay	\$60 copay
Tier 5 – Specialty	33%	33%
After your total out-of-pocket costs exceed \$7,050 you pay:	\$3.95 or 5%, whichever is greater, Tier-1 and Tier-2 generics and \$9.85 or 5%, whichever is greater, Tier-3, Tier-4 and Tier-5 brand-name drugs	

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 Benefits. 90-day supply at retail is 3 times copay.

New Mexico Network Pharmacies – Examples

Preferred	Non-Preferred**
Walgreens Savon Albertsons Health Mart Atlas*	CVS Costco Walmart Smith's Target

*Health Mart Atlas is comprised of independent, clinic and hospital pharmacies.

**See the Pharmacy Directory on our website for the full list of network pharmacies.

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's medical and Blue MedicareRx plan 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 during the annual Medicare Open Enrollment or terminate by enrolling under another medical plan or Part D plan outside of NMSU and providing that proof of enrollment.
 - Open enrollment cancellations take place October through December but are not effective until January 1 and do not require proof of other enrollment
- If you pick up another Medicare Part D prescription plan outside of NMSU, you will be disenrolled from the NMSU Medigap Plan G and Blue MedicareRx plan automatically, per CMS requirements.
 - Any claims paid after the other coverage begins will be reversed and you will be responsible for payment.
 - Any premiums taken for non-covered periods will be refunded unless notification of other coverage is more than 90 days after coverage begins.
- 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

Which
pharmacy
can I use?

For a complete list of our retail, network and preferred network pharmacies call Medicare BlueRx customer service

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

Resources – Medicare

Medicare BlueRx Customer Service

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

Medicare

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

Social Security

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

NMSU Voluntary Dental and Vision Plans

– Effective 1/1/2022

- Paid by the retiree
- Retirees may only enroll or disenroll during the annual Open Enrollment period, unless a change in status qualifies for a Special Enrollment (marriage, birth of child, divorce)
- If someone disenrolls from either Dental or Vision, they must wait 4 years before they can enroll again
- ID cards will be issued for Dental and Vision



Dental

Voluntary Dental Rates (monthly)

NMSU Voluntary Dental Plan Rates:

Single	\$36.49
Single + Spouse	\$72.98
Single + Child(ren)	\$76.63
Family	\$140.49

Three Reasons Why

BlueCare Dental is the right choice



NETWORK

- One of the largest national dental networks with over **139,000 unique providers***



PROVIDERS

- Search for a provider in New Mexico or nationally:
https://c4.go2dental.com/member/dental_search/searchprov.cgi?brand=nm&product=ppo

OR

- www.bcbsnm.com and use the Provider Finder® tool by clicking on “Find a Doctor or Hospital” and then on “Find a Dentist” on the left side of the page.



SERVICE

- U.S.-based, dental-only customer service and claims units

BCBSNM BlueCare Dental

Contracted Dental Providers

- Member's out-of-pocket costs will generally be the least amount because these providers have contracted with BCBSNM to accept a discounted rate
- Member is not required to file claims
- Member will not be balanced-billed over the allowable discounted rate

Non-Contracted Dental Providers

- Member's out-of-pocket costs may be greater because non-contracted providers have not entered into a contract with BCBSNM to accept a discounted rate
- Member may have to file claims
- Members may be balance billed for costs exceeding the 90th percentile

BCBSNM Dental Plan

Annual maximum per calendar year \$1,000	In-Network	Out-of-Network*
Deductible	\$50 (3x family)	\$50 (3x family)
Diagnostic Evaluations (deductible waived)	100%	100%*
Preventive (deductible waived)	100%	100%*
Basic Restorative Dental Services	80%	80%*
Periodontal Services	50%	50%*
Major Restorative Services (crowns,bridgework)	50%	50%*
Orthodontics	Not Covered	Not Covered

*Paid at 90th Percentile



Service That Takes You Out of the Middle

Call your BCBSNM Dental
Customer Service team for:

- Claim questions or status
- Dental benefit coverage questions
- Help with finding network providers
- Membership and eligibility
- Help with navigating online tools
- ID card requests
- Health education information

1-877-723-5697



Vision Care

Vision benefits for every set of eyes

Voluntary Vision Rates (monthly)

NMSU Voluntary Vision Plan Rates:

Retiree Only	\$6.66
Retiree +1	\$12.65
Retiree and Family	\$18.58

Rate guarantee period: 48 months for Vision (1/1/2021 through 12/31/2022)

Vision Care In-Network Options

EyeMed's Select Network

Provider Access Points

385

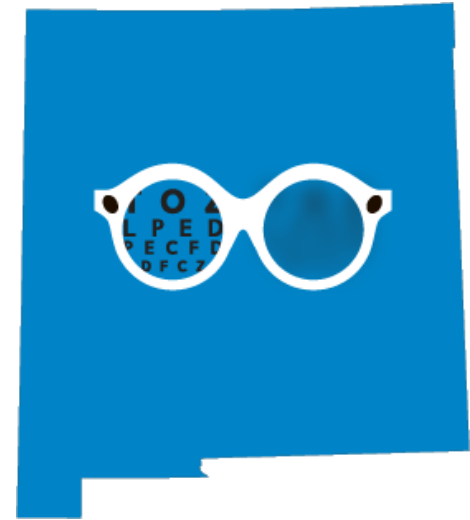
Retail Provider Locations

37

Independent Provider Locations

55

Total Locations
92



Plus, you can visit top retail providers such as LensCrafters®, Pearle VisionSM and Target OpticalSM

In-Network Options Nationwide

Provider Access Points
102,678

Retail Provider Locations
6,224

Independent Provider Locations
18,355

Total Locations
24,579

Your Vision Benefits at a Glance

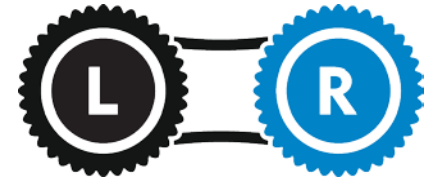
Comprehensive eye exam every 12 months,
covered with your copay – PLUS...



\$130 frame allowance every
24 months



\$10 lens copay plus
fixed pricing on options,
every 12 months



\$130 contact lens
allowance, with coverage
for fit and follow-up every
12 months

Benefits and provider network are both available through EyeMed.

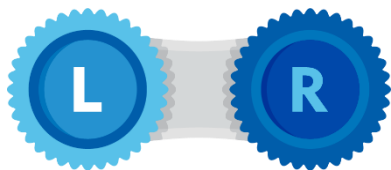
Discounts Available with Our Vision Plans



20% off
balance over
frame allowance



15% off
retail or 5% off
promotional price LASIK



15% off
balance over
conventional contacts



40% off
second pair
of prescription glasses



20% off
a pair of
non-prescription glasses

Benefits and provider network are both available through EyeMed.

A Few More Basic Benefits

Your frequency is based on: Date of Service

- So, if you receive an exam today, you are eligible again 12 months from today's date of service.

Contacts are in lieu of lenses only

That means you are entitled to a full pair of glasses (frame and lenses) OR contacts and frames (you would then receive a 20% discount on lenses).



Summary of Benefits – Vision

Frequency		
Examination	Once every 12 months	
Lenses or contact lenses	Once every 12 months	
Frame	Once every 24 months	
Benefits	In-Network Member Cost	Out-of-Network Reimbursement
Exam with dilation as necessary	\$10 Copay	Up to \$30
Contact lens fit and follow-up	\$0 for Standard; 10% off retail price for Premium, then apply \$40 allowance	Up to \$40
Frames: Any available frame at provider location	\$0 Copay, \$130 Allowance, 20% off balance over \$130	Up to \$65
Lenses: Single vision Bifocal Trifocal	\$10 Copay \$10 Copay \$10 Copay	Up to \$25 Up to \$40 Up to \$55
Contact Lenses: Conventional Disposable	\$0 Copay, \$130 Allowance, 15% off balance \$0 Copay, \$130 Allowance, plus balance over \$130	Up to \$104 Up to \$104

Benefits and provider network are both available through EyeMed.

Summary of Benefits – Vision Cont.

Lens Options	In-Network Member Cost	Out-of-Network Reimbursement
UV treatment	\$15	N/A
Tint (solid and gradient)	\$15	N/A
Standard plastic scratch coating	\$0	Up to \$5
Standard polycarbonate – adults	\$40	N/A
Standard polycarbonate – kids under 19	\$0	Up to \$5
Standard anti-reflective coating	\$45	N/A
Polarized	20% off retail price	N/A
Photochromatic/transitions plastic	\$75	N/A
Premium anti-reflective	See below table	N/A
Contact lenses (contact lens allowance includes materials only)		
Conventional	\$0 copay / \$130 Allowance / 15% off balance	Up to \$104
Disposable	\$0 copay / \$130 Allowance / Plus balance over \$130	Up to \$104
Medically necessary	\$0 copay, Paid in full	Up to \$210
Other		
Lasik or PRK from U.S. Laser Network	15% off retail price or 5% off promotional price	N/A
Additional pairs benefit:	Members also receive a 40% discount off complete pair eyeglass purchase and a 15% discount off conventional contact lenses once the funded benefit has been used.	N/A

Benefits and provider network are both available through EyeMed.

MAXIMIZE YOUR CONTACTS BENEFIT

For illustrative purposes only. Coverage may be subject to limitations, exclusions and other coverage conditions contained in the issued policy. Please consult the policy for the actual terms of coverage.

Benefit Overview

With your vision benefit, you're eligible for either contacts or spectacle lenses within the defined benefit frequency. ***If you use your benefit for contacts, you're still eligible to use your frame benefit, too.***

Sample Vision Plan



Sample Member Transaction

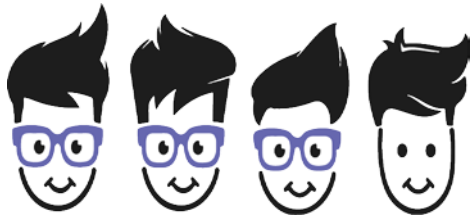
- You buy contacts (apply \$130 contacts allowance)
- You buy a pair of glasses (apply \$130 frame allowance and 20% off any amount over, plus receive 20% off spectacle lenses)

Additional Discounts

- 40% off unlimited complete pairs of prescription eyewear (once benefit has been used)
- 20% off partial eyewear purchases and non-covered items
- 15% off conventional contacts

Here's why choosing a vision benefit is a good idea:

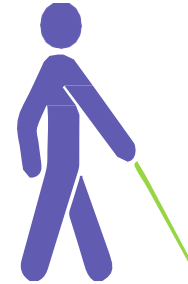
Vision disorders are the second most prevalent health condition in the United States.¹



75%

**Approximately 202.6 million
of U.S. adults**

use some form of vision correction.²



50,000 people

lose their sight each year
even though half of all causes of blindness
can be prevented with proper care.³

¹ Prevent Blindness America, 2019. www.preventblindnessamerica.us/sightsaved/about.html.

² All About Vision, "Vision Problems of School-Age Children," Accessed July 3, 2019.

³ <https://www.preventblindness.org/5-blinding-facts-you-should-know-0> Accessed March 16, 2020

Vision Benefits Have Perks Beyond Helping with Vision Correction

With a comprehensive vision exam, it's easier to find serious eye and general health conditions sooner, such as*:



Diabetes



High Blood Pressure



High Cholesterol



Glaucoma



Cataracts

* Vision Monday, New Vision Health Report Highlights Importance of Comprehensive Eye Exams. Accessed March 16, 2020.

You've Got Choices

You're vision network is powered by EyeMed's **Select** network, which means you have access to:

More than 33,319 providers at 22,749 locations, including:

INDEPENDENT
PROVIDER
NETWORK



LENSCRAFTERS'

PEARLE
EST. 1961
VISION

OPTICAL

Plus, your local retailers.

And online options:

Choose from hundreds of brand-name frames and contacts.
Instantly apply your in-network benefits at checkout.
Enjoy free shipping and returns.

contactsdirect

LENSCRAFTERS'

Ray-Ban

OPTICAL

GLASSES.COM

Vision Benefit Information and Resources

Finding a provider and scheduling an appointment is as easy as...

1. Register and log in to the member portal at eyemedvisioncare.com/bcbsnmvis

2. Review your vision benefit information.

Our member portal gives you access to benefit details, claims, provider locations and more. And since many providers offer extended evening and weekend hours, you can get care when it works for you.

3. Find a provider near you:

Log in to eyemedvisioncare.com/bcbsnmvis, and then select “Click here to find a provider.” Enter your zip code and choose “Select” network.



eyemedvisioncare.com/bcbsnmvis



Service That Takes You Out of the Middle

Call your BCBSNM Vision
Customer Care team:

- Claim questions or status
- Vision benefit coverage questions
- Help with finding network providers
- Membership and eligibility
- Help with navigating online tools
- ID card requests

855-591-2659