BlueCross BlueShield of New Mexico



# WELCOME

## New Mexico State University Retirees

Effective January 1, 2027

Medical, Voluntary Dental and Vision

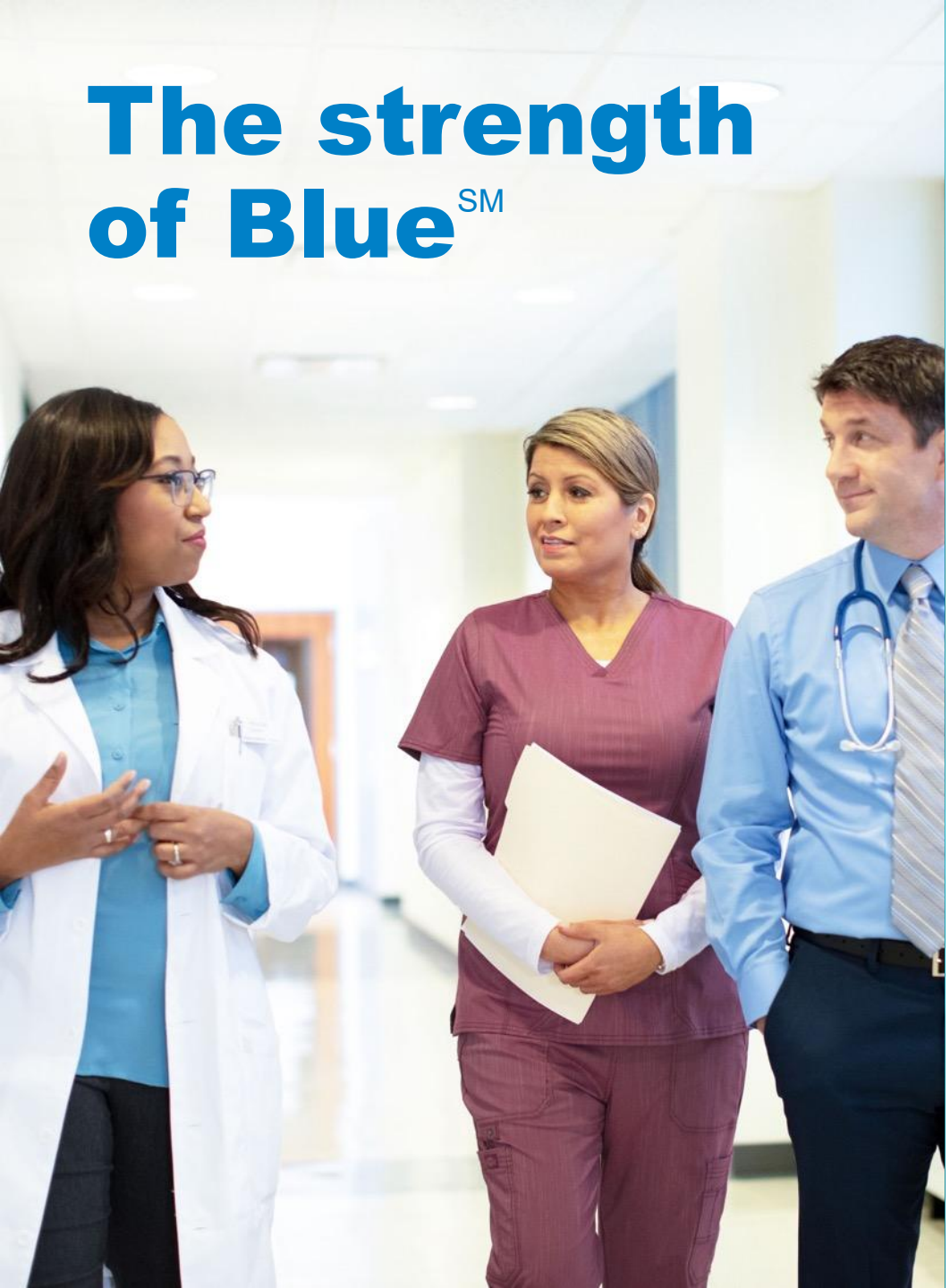
NM STATE UNIVERSITY

Blue Cross and Blue Shield 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 Medicare Plan G with BlueRx℠



# The strength of Blue℠



**NUMBER 1**
brand in health care

**OVER 118 MILLION**
members

**MORE THAN 2 MILLION**
unique, in-network providers

**98%**
of claims paid at in-network rates

# 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 Pays | |
|---|---|---|
| | In-Network | Out-of-Network |
| Deductible | $1,250 – Individual<br>$3,750 – Family | $5,000 – Individual<br>$10,000 – Family |
| Out-of-Pocket Max<br>(includes coinsurance only, not deductible or copayments) | $4,500 – Individual<br>$10,800 – Family | $15,000 – Individual<br>$30,000 – Family |
| Primary Provider Office Visit | $35 (deductible waived) | 40%* |
| Specialist Visit | $55 (deductible waived) | 40%* |
| Preventive Care/Well Visits | No Charge | 40%* |
| Inpatient Admission | $300 copay per Admission then 30%* | 40%* |
| Emergency Room | $250 copay then 30%* | |
| Urgent Care | 30%* | 40%* |
| Outpatient Facility/Physician | $300 copay per procedure then 30%* | 40%* |

*After deductible

# 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 Members℠



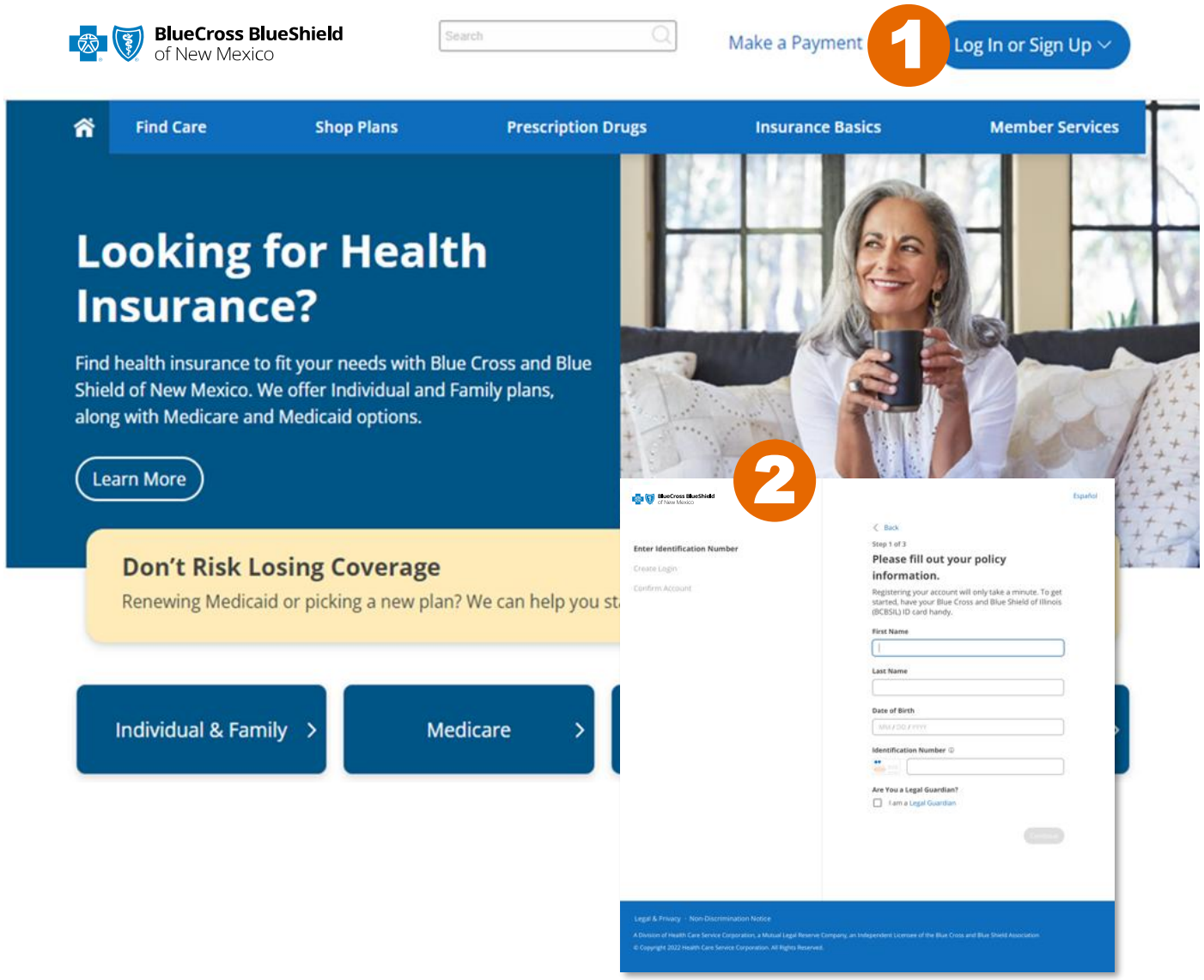
**Save time with self-service support tools and health and wellness resources available through a convenient and secure website**

**Through BAM℠, you can:**

- Once registered, view, print or download your member ID card
- View claims status and history
- See health care benefit information
- Find a doctor or pharmacy near you
- Update your communication preferences to go paperless
- Log in and perform protected transactions
  **24 hours a day, 7 days a week***

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

# Sign Up for Blue Access for Members℠



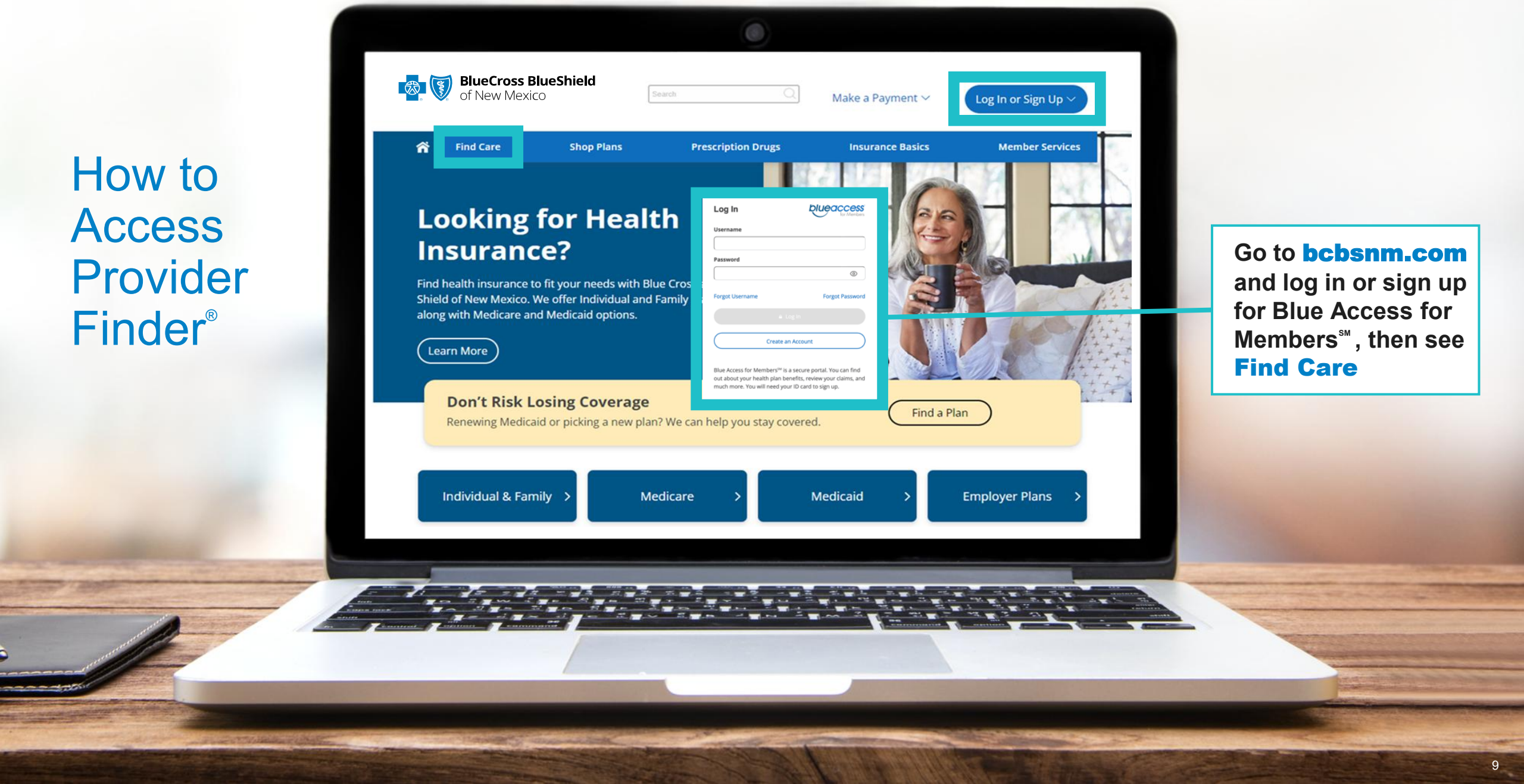

Go to **bcbsnm.com** and log in to Blue Access for Members via web or mobile

If you are a new user, choose **sign up** and follow the prompts to register

**To register you will need your identification number on the front of your ID card OR you can call the Customer Service number on the back of the card.**

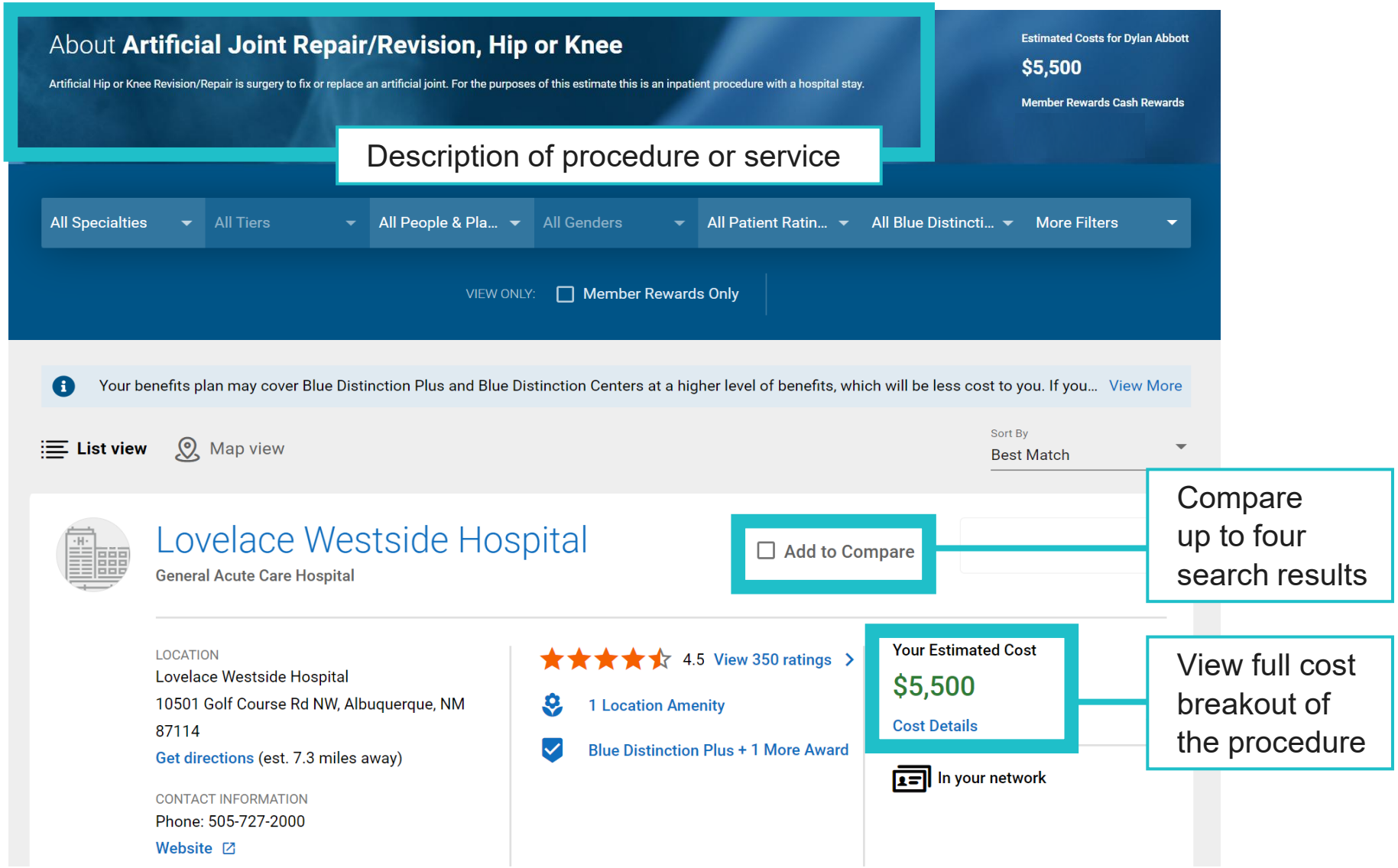
Screen images are for illustrative purposes only.

# How to Access Provider Finder®




Go to **bcbsnm.com** and log in or sign up for Blue Access for Members℠, then see **Find Care**

# Cost Estimate Search Results

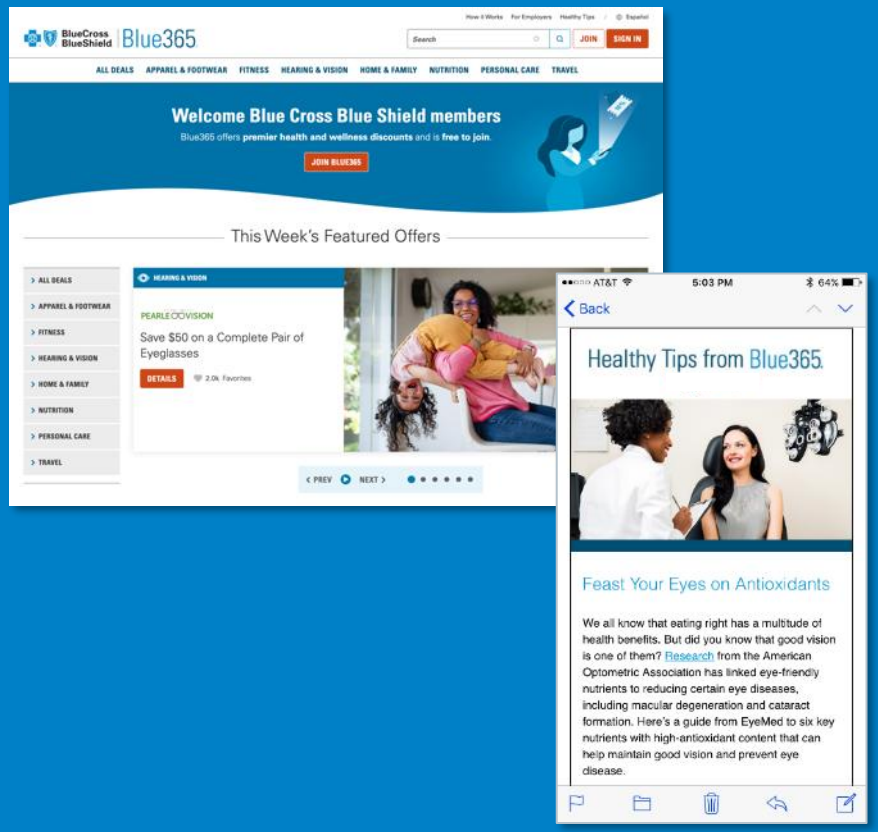



## Did you know?

### Cost Range for a Knee Replacement



# Member discounts simply for being a BCBSNM member




Screen images are for illustrative purposes only.

# Blue365®
# Member Discount Program

- 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
- Go to **www.blue365deals.com/BCBSNM** to register, view your available discounts and sign up for weekly emails

The relationship between these vendors and Blue Cross and Blue Shield of New Mexico is that of independent contractors.
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





# Teladoc Health® (formerly Livongo)

## Diabetes Management and Hypertension Management Solutions

- Welcome kit with smart glucose meter or connected blood pressure cuff
- Digital and live coaching through meter, phone and the Teladoc Health mobile app
- Services covered — no out-of-pocket costs

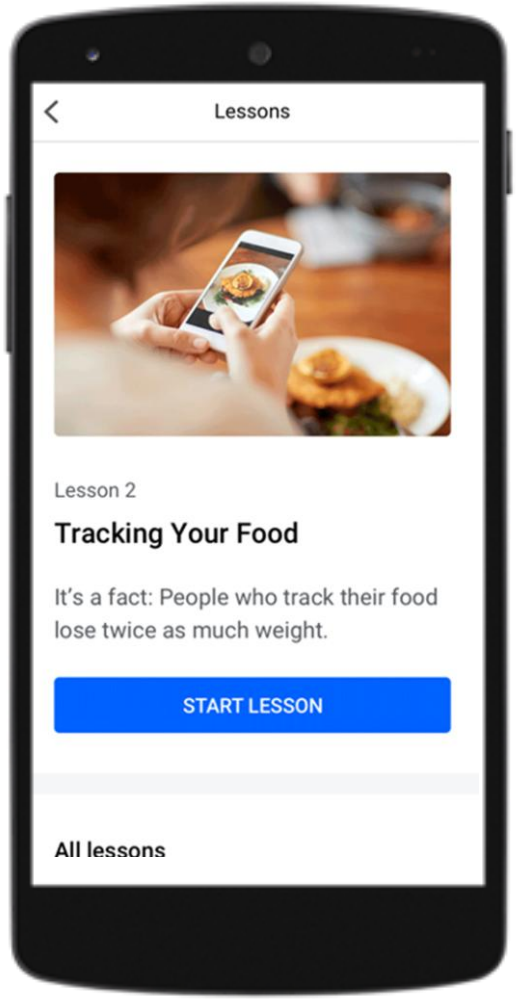
**If you are eligible, Teladoc Health will contact you about how to sign up for this program**

Teladoc is an independent company that has contracted with Blue Cross and Blue Shield of New Mexico to provide chronic condition management for members with coverage through BCBSNM. BCBSNM makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

## Teladoc Health® (formerly Livongo)

# Diabetes Prevention Program

- Evidence-based curriculum and health challenges
- Bite-sized and self-guided in-app lessons and live group sessions
- Track progress and monitor habits using your favorite device
- Photo-based food logging and digital coaching with timely member feedback
- Services covered — no out-of-pocket costs




**If you are eligible, Teladoc Health will contact you about how to sign up for this program**

Teladoc is an independent company that has contracted with Blue Cross and Blue Shield of New Mexico to provide chronic condition management for members with coverage through BCBSNM.
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# Wondr™

## Metabolic Syndrome Reversal Program

With Wondr you can lose weight, gain energy, sleep better and improve your mind and body — all while eating your favorite foods

- Online program and mobile app allows members access anywhere at any time
- Wondr is a skills-based digital weight loss program that teaches you how to enjoy the foods you love and improve your overall health

**Your employer has partnered with Wondr Health to help you improve your overall health at no cost to you.**

Wondr Health is an independent company that that has contracted with Blue Cross and Blue Shield of New Mexico to provide a metabolic syndrome reduction program for members with coverage through BCBSNM.

# 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)



# NMSU Medicare Plan

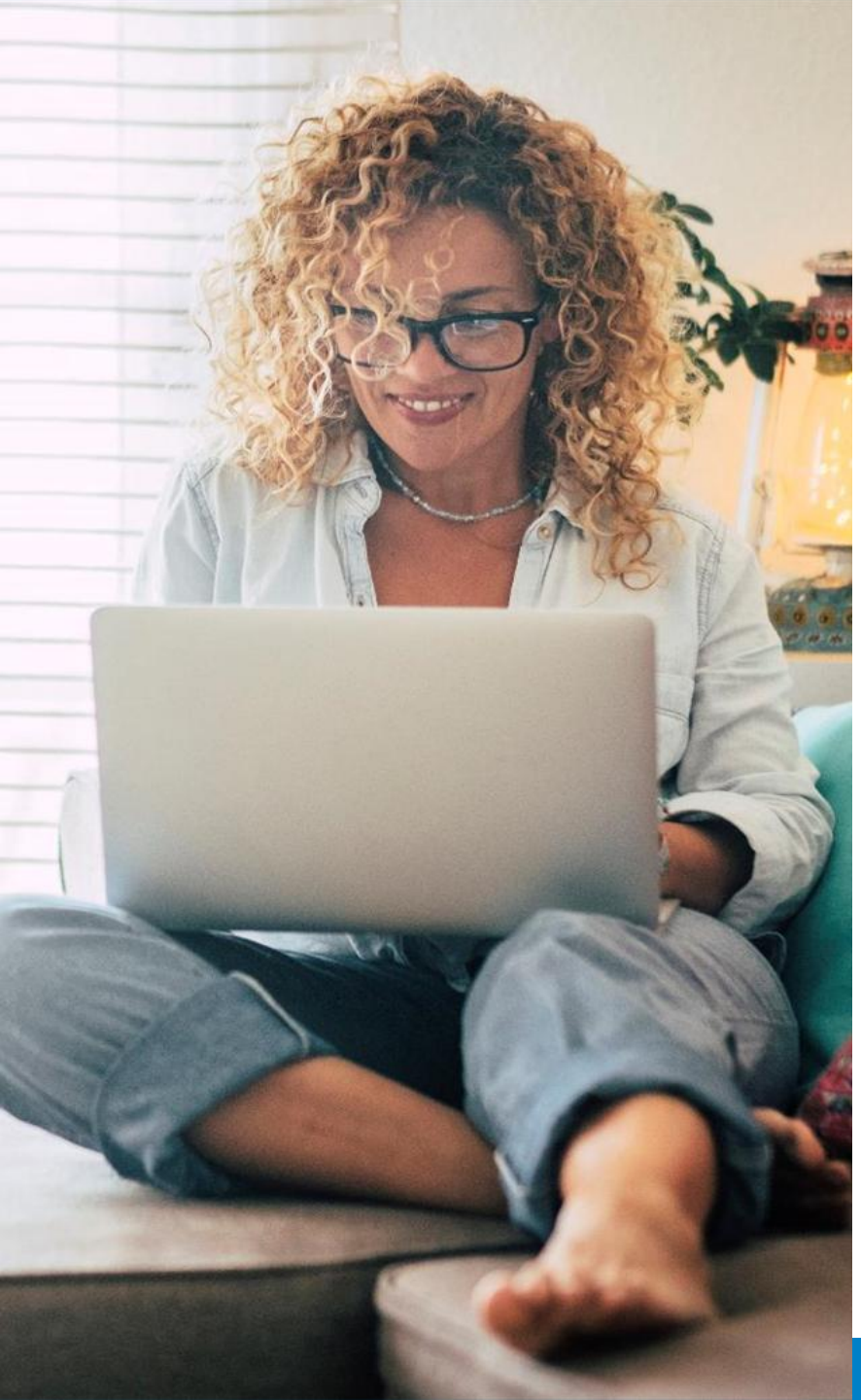
- **No** Part A Deductible
- You pay the Part B Deductible once per calendar year
- **No** coinsurance
- **No** copayments
- **No** referrals required



“Excellent Value for Your Premium Dollar”

# NMSU Medicare 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



# NMSU Medicare Plan

## For Medicare-Covered Services

- The plan covers the annual Part A deductible of $1,736
- You are responsible to meet the Part B annual deductible of $283 per calendar year
- 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

When provider does **NOT** accept Medicare assignment

# NMSU Medicare Plan

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:**<br>First $240 of Medicare-approved amounts | $0 | $0 | $283<br>(Part B Deductible) |
| **Remainder of Medicare-approved amounts** | Generally, 80% | Generally, 20% | $0 |
| **Hospitalization:**<br>First 60 days | All but $1,736 | $1,736<br>(Part A Deductible) | $0 |
| 61st through 90th day | All but $434 a day | $434 a day | $0 |
| 91st day and after: While using 60 lifetime reserve days | All but $868 a day | $868 a day | $0 |
| Once lifetime reserve days are used: Additional 365 days | $0 | 100%<br>Medicare-Eligible<br>Expenses | $0 |
| **Medicare-Covered Preventive Care** | 80% - 100% | 20% | $0 |

# Medicare BlueRx℠

(Medicare Part D Prescription Drug Plan)



# Eligibility – Medicare

- NMSU eligible retiree/spouse or dependent
- Enrollment in the NMSU Medicare 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 into Medicare

- The NMSU Medicare 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 Medicare 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



# Medicare BlueRx – 5-Tier
## (Medicare Part D Prescription Drug Plan) – No Coverage Gap

| Benefit | Enhanced Plus Plan | |
|---|---|---|
| Individual Deductible | $0 | |
| | Preferred Pharmacies – Albertsons, Walgreens, Walmart | Non-Preferred Pharmacies – Target, Costco |
| 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 $2,100 you pay: | You will pay $0 for all prescriptions | |

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



# 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 Medicare 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 Medicare 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



**Which pharmacy can I use?**

# Pharmacy – Medicare

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

877-838-3833, 7 days a week, 7 a.m. – 7 p.m. CST
or visit www.bcbsnm.com

# Resources

## Medicare BlueRx Customer Service

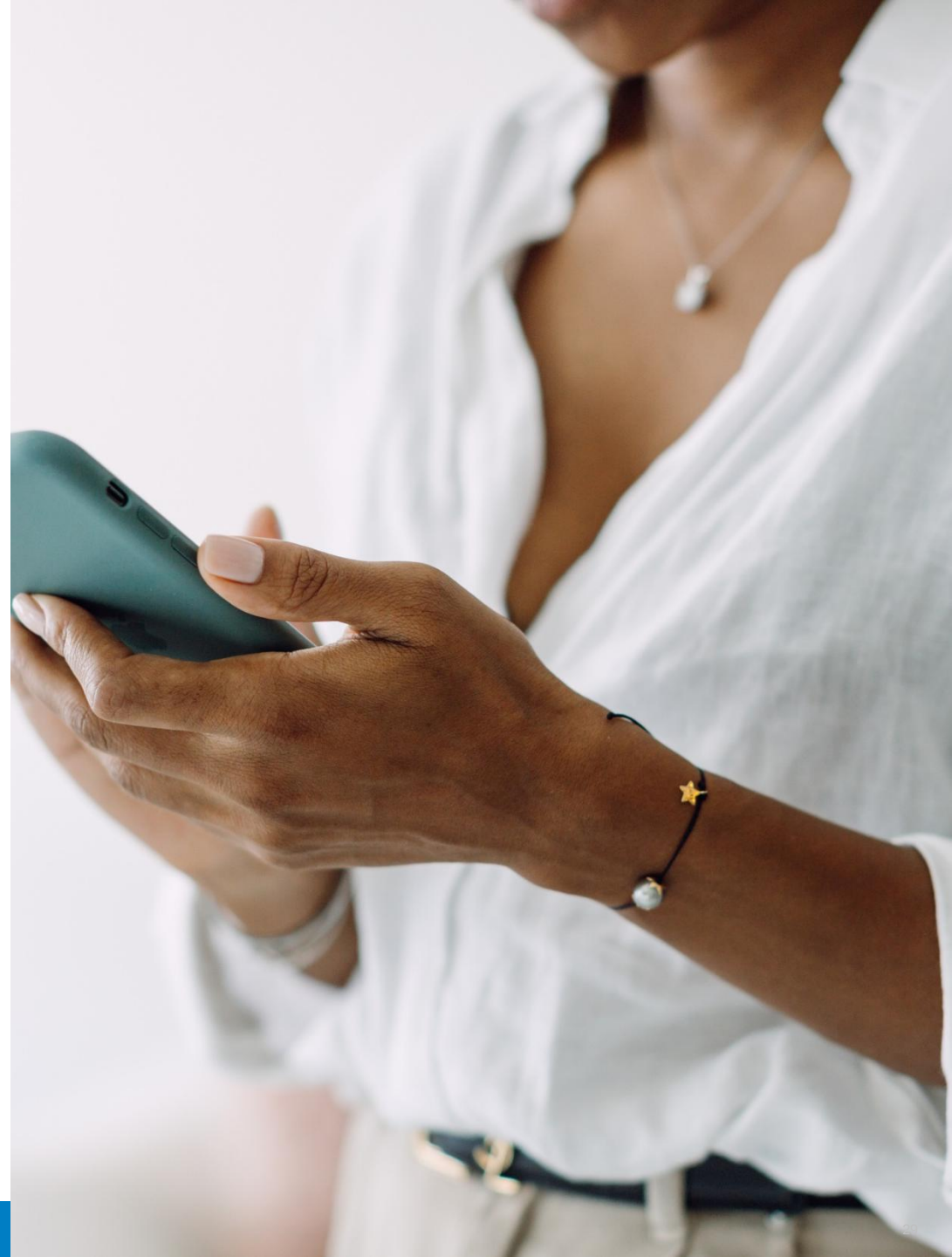
- Call 877-838-3833, 7 days a week, 7 a.m. – 7 p.m. CST
- Visit bcbsnm.com

## Medicare

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

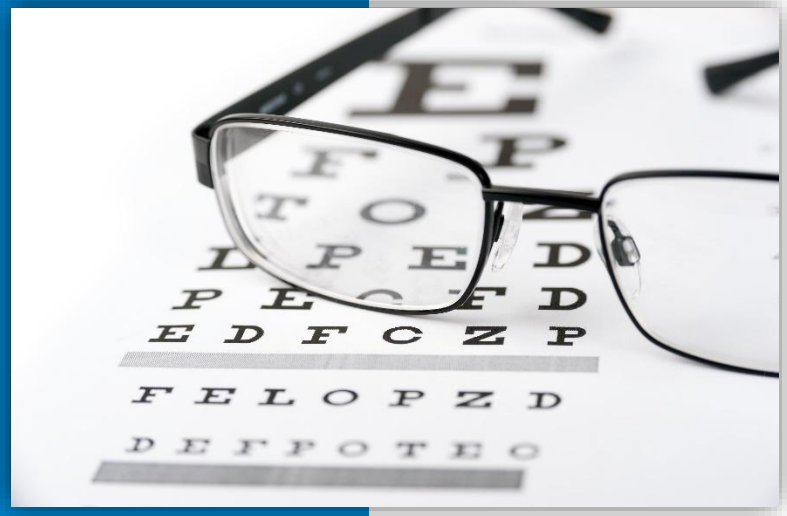
## Social Security

- 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





- 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

# Monthly Voluntary Dental Rates

| NMSU Voluntary Monthly Dental Plan Rates: | |
|---|---|
| Single | $30.19 |
| Single + Spouse | $60.38 |
| Single + Child(ren) | $63.40 |
| Family | $116.24 |

# Why **BlueCare Dental**[SM] is the right choice



## Network

- One of the largest national dental networks with over **150,000 unique providers***
- **1,181 New Mexico Unique Providers**



## Integration

- Search for a provider in New Mexico or nationally at: 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

*Source: Network360® Analytics Suite (September 2024).
**Based on the 2023 Dental Actuarial Analytics Dental PPO Network Study.

# BCBSNM BlueCare Dental Plan

## 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

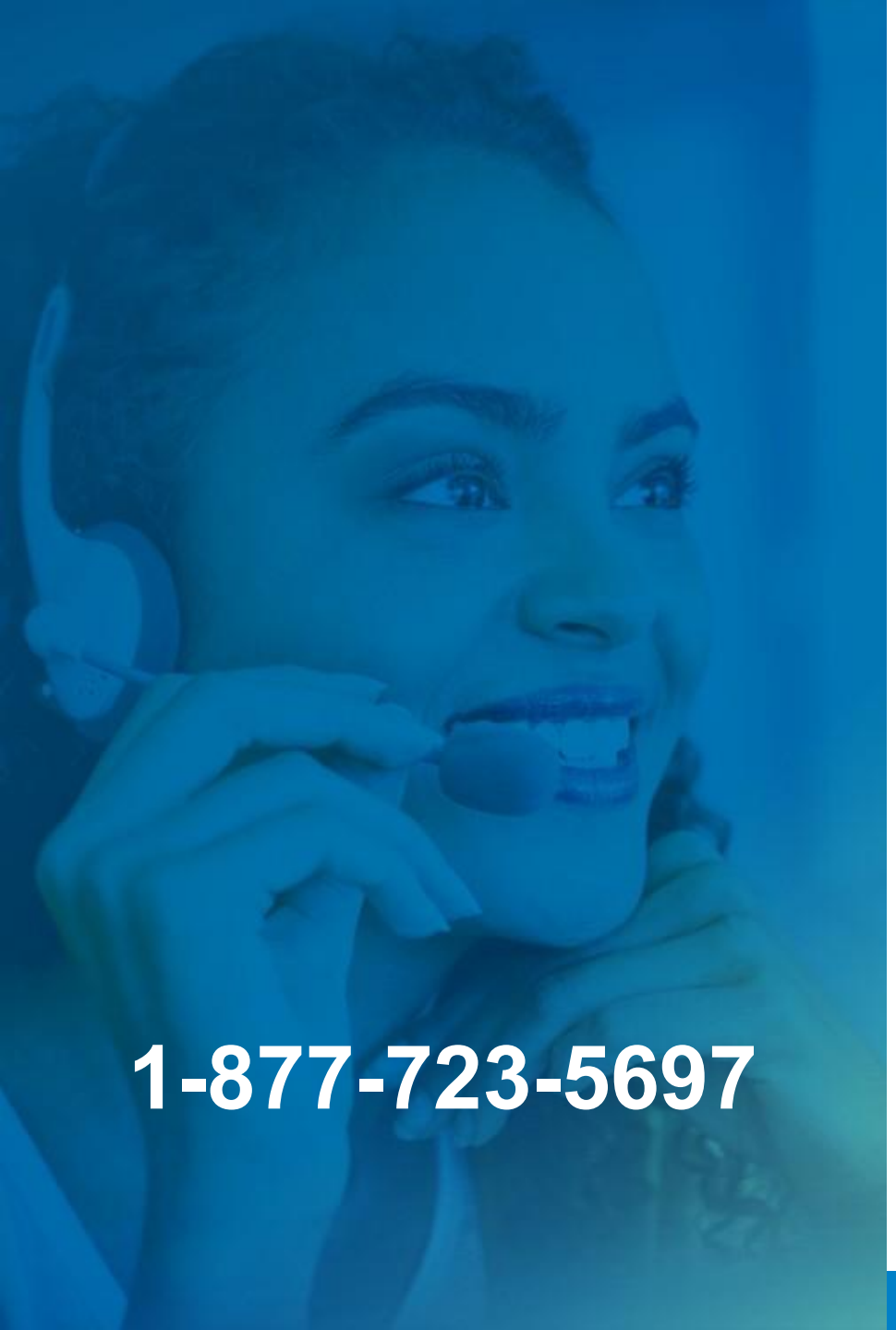
## Non-Contracted Dental Providers

- 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 90$^{th}$ percentile

# BCBSNM BlueCare Dental Plan

| Benefits | In-Network | Out-of-Network* |
|---|---|---|
| Annual Maximum Per Calendar Year | $1,000 | |
| 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



# Vision Care

## Vision benefits for every set of eyes

# Monthly Voluntary Vision Rates

| NMSU Voluntary Monthly Vision Plan Rates: | |
|---|---|
| Retiree Only | $5.88 |
| Retiree +1 | $11.16 |
| Retiree and Family | $16.39 |

# Vision Care – In-Network Options

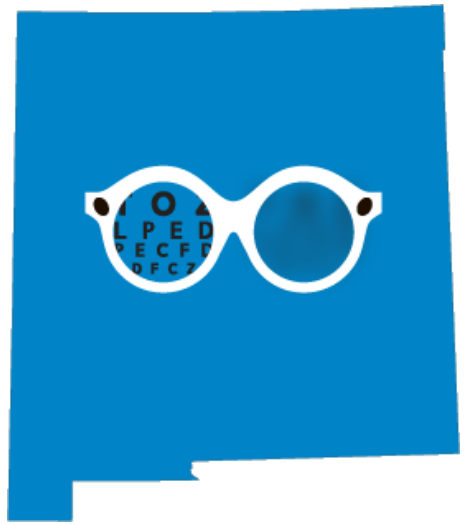
## EyeMed's Insight Network

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 Vision℠ and Target Optical℠

## In-Network Options Nationwide

| Provider Access Points | Retail Provider Locations | Independent Provider Locations | Total Locations |
|---|---|---|---|
| 102,678 | 6,224 | 18,355 | 24,579 |

# Your Vision Benefits at a Glance

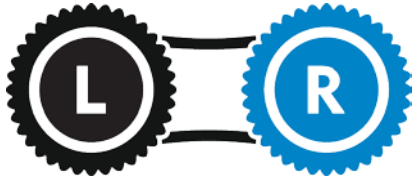
## Comprehensive eye exam every 12 months, covered with your copay – **PLUS**…



$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.

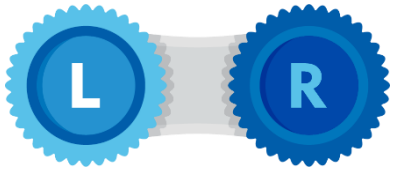
# Discounts Available with Our Vision Plans



**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

# 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).



Benefits and provider network are both available through EyeMed.

# You've Got Choices

Your vision network is powered by EyeMed's Insight 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 TARGET 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 TARGET OPTICAL GLASSES.COM

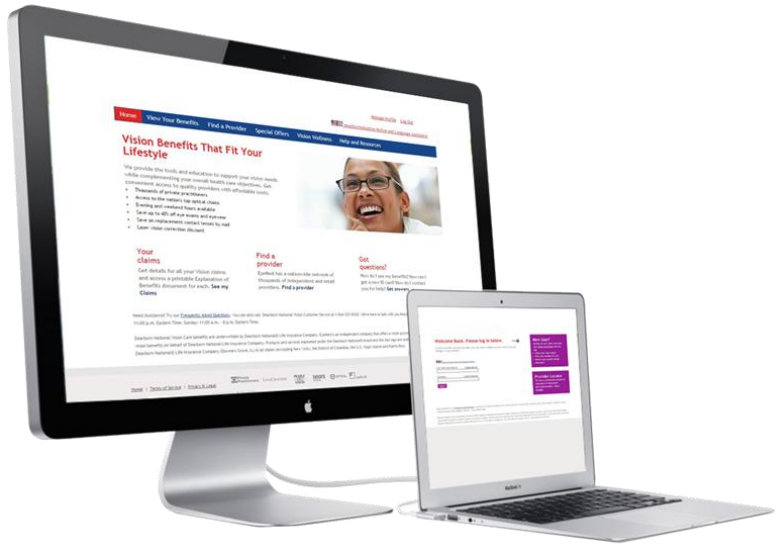
# Vision Benefit Information and Resources

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

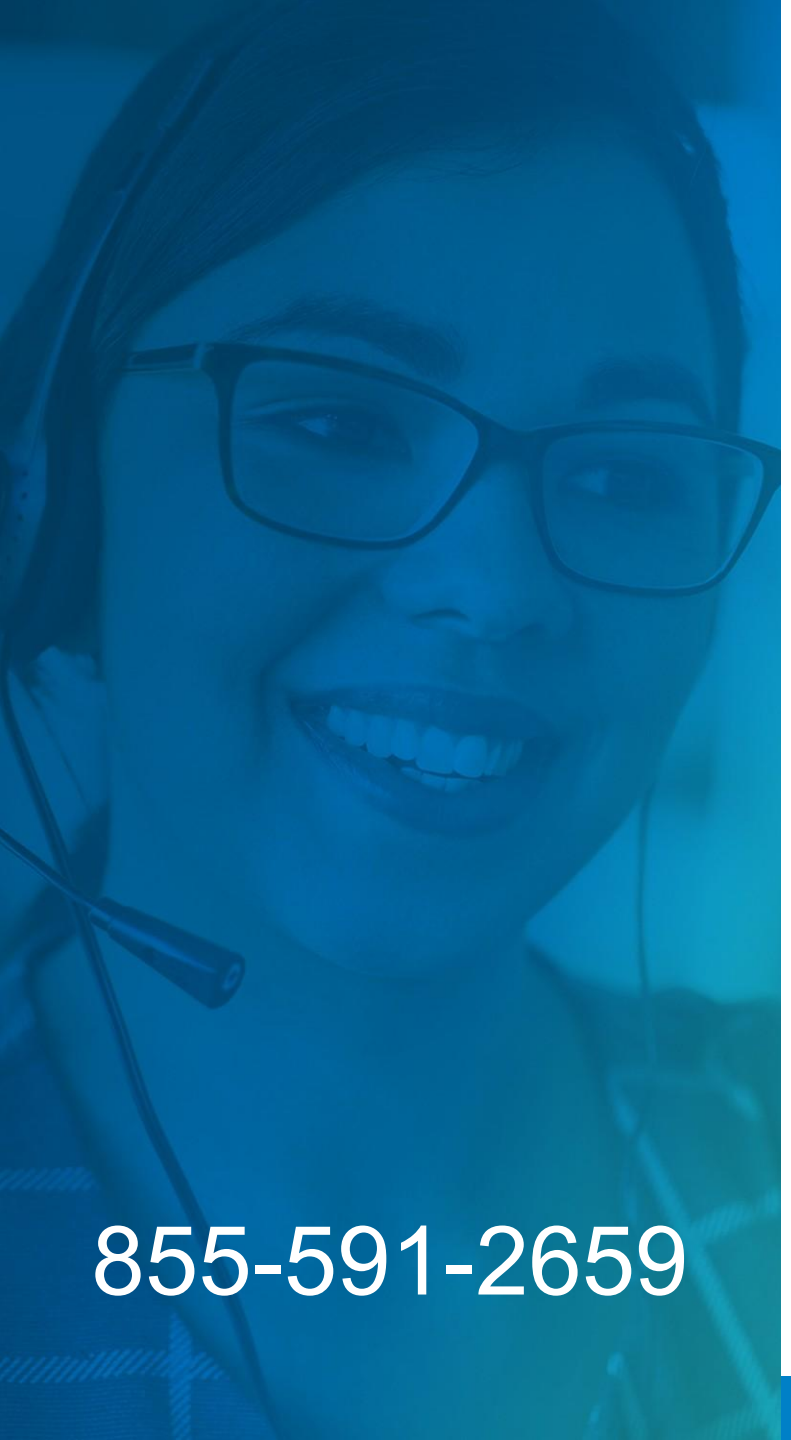
1. Register and log in to the member portal at www.eyemedvisioncare.com/bcbsnmvis

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 www.eyemedvisioncare.com/bcbsnmvis and then select “Click here to find a provider.” Enter your zip code and choose “Insight” network. Or go to bcbsnm.com and choose “Find Care” On the top left corner. Choose “Insight” network.




eyemedvisioncare.com/bcbsnmvis



855-591-2659

# 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