



SPRING 2011

# What is cholesterol?



**Vanessa Marin, MD,**  
Presbyterian  
Heart Group

We all have and need cholesterol, a waxy, fatlike substance found in the bloodstream and in all your body's cells. It is also in certain foods, such as food from animals (dairy products and meat). It's an important part of a healthy body because it's used to form cell membranes, some hormones, vitamin D and bile acids and is needed for other functions. Cholesterol and other fats can't dissolve in the blood. They have to be transported to and from cells by special carriers called lipoproteins. There are several kinds of lipoproteins, but the most important are low-density lipoprotein (LDL or bad cholesterol) and high density lipoprotein (HDL or good cholesterol).

When too much LDL (bad) cholesterol circulates in the blood, it can slowly build up in the inner walls of the arteries that feed the heart and brain.

**High cholesterol affects 42 million Americans, and 63 million more have borderline-high cholesterol. Know your cholesterol numbers and risk factors.**

Together with other substances, it can form plaque, a thick, hard deposit that can narrow the arteries and make them less flexible. This condition is known as atherosclerosis. If plaque ruptures, a clot may

form and block a narrowed artery, resulting in a heart attack or stroke.

That's why it is important to have your cholesterol levels checked regularly and to know your numbers. There are four main components of cholesterol, which your practitioner will measure by performing a fasting blood test: total cholesterol, HDL, LDL and triglycerides. Your test report will show your cholesterol levels in milligrams per deciliter of blood (mg/dL). With a goal of less than 200 mg/dL, your total cholesterol is the sum of your HDL (good cholesterol) and LDL (bad cholesterol) levels and triglycerides (blood fats).

## **WHAT SHOULD MY HDL (GOOD) CHOLESTEROL LEVEL BE?**

HDL is the good cholesterol because it is associated with a lower risk of heart disease and stroke—the higher your HDL cholesterol, the better. If your practitioner tells you that your HDL cholesterol level is too low, you can raise your HDL cholesterol by quitting smoking, losing excess weight and being more active.

### **HDL cholesterol levels:**

- 60 mg/dL: High HDL (puts you at lower risk for heart disease).
- 40 to 59 mg/dL: The higher, the better.
- Less than 50 mg/dL for women: Low HDL (puts you at higher risk for heart disease).

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Help us defeat fraud and abuse

 **PRESBYTERIAN**

## Celebrating 25 years

This spring, Presbyterian Health Plan is marking its 25th year of offering health insurance coverage to New Mexicans. When we first formed in 1986 (using the name Health Plus), we offered only one type of health plan. Since then, we've grown to serve more than 400,000 members throughout the state. Today, the choice of insurance products include health plans for Medicare beneficiaries, people with Medicaid, and people who get insurance through their employers or who purchase it for themselves.



**Dennis Batey, MD,**  
President,  
Presbyterian  
Health Plan  
and Presby-  
terian Insur-  
ance Co., Inc.

Presbyterian started the health plan because we believe that an integrated health-care system is the best way to improve the health of our members. An integrated healthcare system means that Presbyterian's physicians, hospitals and health plan all work together to keep you healthy. Our efforts at integration were recently recognized in a report in *Modern Healthcare*, where Presbyterian ranked 16th in the latest evaluation of the 100 most integrated networks in the nation in a study conducted by the independent research firm SDI.

In past issues we've shared with you the value of our healthcare system, including our innovations, such as Hospital at Home (hospital-level care delivered in your home), group visits (diabetes patients meeting with their care team and other patients to improve their health) and patient navigation in our emergency departments (making sure you get the right level of care at the right time). These processes and others are making a real difference in our member's healthcare experience.

We take personal pride in bringing great service and outstanding value to our members and look forward to continuing our tradition of innovation.

## What is cholesterol?

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- Less than 40 mg/dL for men:  
Low HDL (puts you at higher risk for heart disease).

### WHAT SHOULD MY LDL (BAD) CHOLESTEROL LEVEL BE?

LDL is the main carrier of harmful cholesterol in the blood. A high level of LDL cholesterol means there's a higher risk for heart disease and stroke. The lower your LDL, the better.

#### LDL cholesterol levels:

- 100 to 129 mg/dL: Normal.
- 130 to 159 mg/dL: Borderline high.
- 160 to 189 mg/dL: High.
- 190 mg/dL: Very high.

### WHAT SHOULD MY TRIGLYCERIDE LEVEL BE?

Triglycerides are the most common type of fat in the body—and a major source of energy. Triglycerides come from the food we eat, and our body also makes them. As people age, gain excess weight or both, their triglyceride and cholesterol levels tend to rise. Many people who have heart disease or diabetes have high fasting triglyceride levels. Some studies have shown that people with above normal fasting triglyceride levels have a higher risk of heart disease and stroke.

#### Triglyceride levels:

- Less than 150 mg/dL: Normal.
- 150 to 199 mg/dL: Borderline high.
- 200 to 499 mg/dL: High.
- 500 mg/dL and above: Very high.

### WHAT SHOULD MY TOTAL CHOLESTEROL LEVEL BE?

#### Total blood cholesterol levels:

- Less than 200 mg/dL: Desirable.
- 200 to 239 mg/dL:  
Borderline high.
- 240 mg/dL and above: High.

High cholesterol (hypercholesterolemia) can be inherited, but it is

often preventable and treatable. Avoid prepared and fast food, buy low-fat or skim milk products, and limit your intake of red meat to once or twice a month. Eat more fiber and complex carbohydrates, such as whole-grain breads and cereals or brown rice. Weight loss and regular aerobic exercise can go a long way toward reducing high cholesterol.

Depending on your cholesterol level and how effective your lifestyle changes have been, your practitioner may prescribe medication to lower your cholesterol. There are various types of cholesterol-lowering medication. Some examples are statins, bile acid sequestrants, niacin and fibrates. No matter which medication is chosen, it is important to realize that the treatment of high cholesterol is a lifelong process and consistency is the key.

If your cholesterol level is within the normal range and you have few risk factors for heart disease, your cholesterol level should be checked at least every 5 years. If you are taking medication for cholesterol or have risk factors for heart disease, your physician will likely check your cholesterol level more frequently. Take charge of your cholesterol and your well-being!

The clinicians of Presbyterian Heart Group are pleased to answer any questions you may have or to discuss your heart-related conditions with other healthcare professionals. To schedule an appointment, please call the Presbyterian Heart Group office at **505-563-2500** or **1-800-734-4278** weekdays from 9 a.m. to 5 p.m.

da Vinci system

## Look who's in the operating room

Five hundred years ago, Leonardo da Vinci was working in Italy as an artist and engineer, drawing amazingly detailed sketches of human anatomy and designing complex machines. Today, a robot-assisted surgery system that bears his name is being used by Presbyterian.

"The da Vinci Robot is a great addition to Presbyterian's surgical capabilities and efficiencies in our operating room," says Tuschar Dandade, MD, an obstetric/gynecology specialist with Presbyterian Medical Group. The da Vinci Robot will be used for gynecology and urology surgeries, including the treatment of prostate cancer and hysterectomies (removal of the uterus).

### HOW DOES THE DA VINCI SYSTEM WORK?

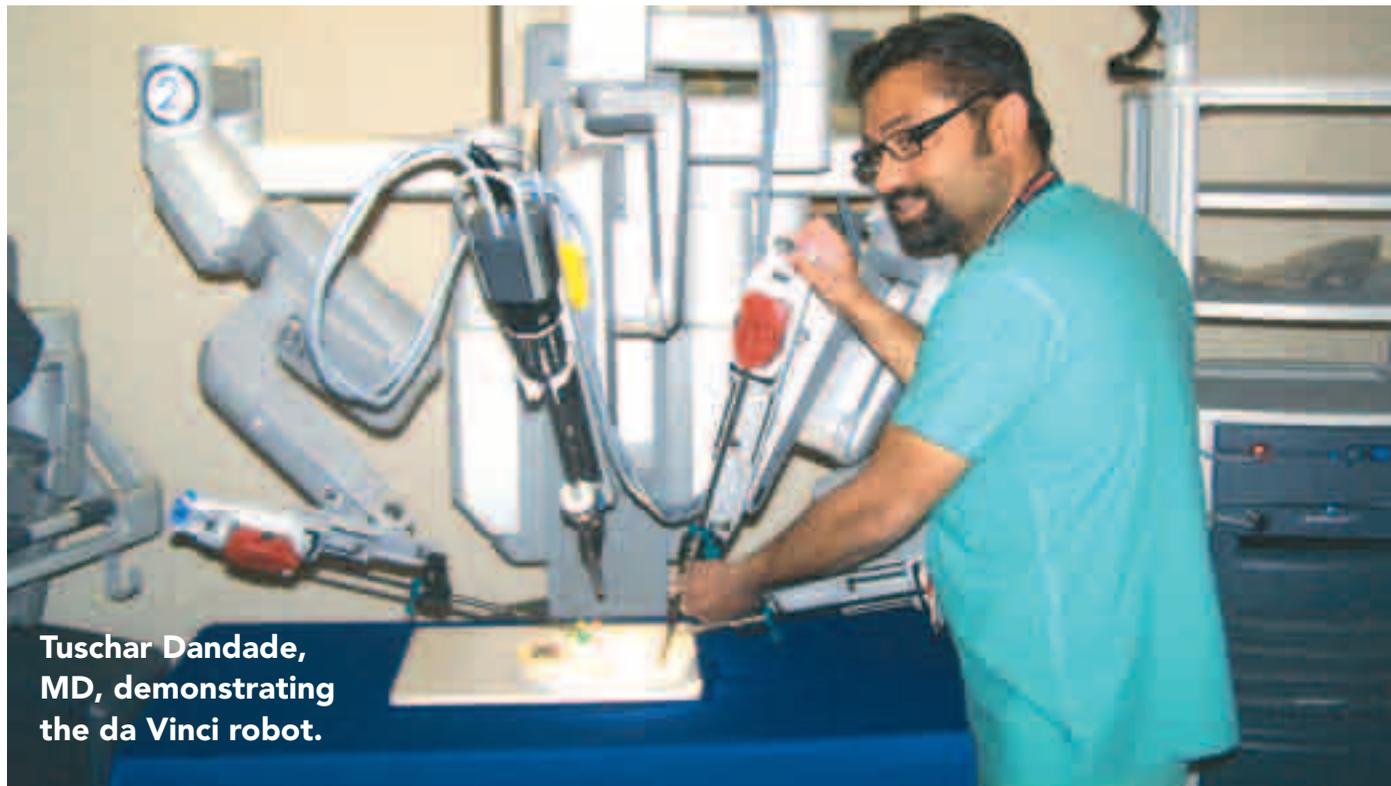
The da Vinci Surgical System consists of two main pieces of equipment: The first is a computer console with a viewing monitor, hand controls and foot pedals. This is where the surgeon sits.

The second is a cart that holds four robotic arms with flexible, articulated wrists. One arm holds a miniature camera that transmits a 3-D image of the operating area to the console's monitor. The other three arms can hold a variety of surgical tools.

During surgery, the surgeon sits at the console a few feet from the operating table. A magnified, high-definition image of the operating area appears on the monitor. The surgeon then performs the procedure, using the computerized hand and foot controls to manipulate the robotic arms.

### WHAT ARE THE BENEFITS?

The magnified view of the operating field, combined with the flexibility and precision of the computer-controlled surgical tools, allows for very small incisions during surgery. According to the U.S. Food and Drug Administration (FDA), compared with traditional



**Tuschar Dandade, MD, demonstrating the da Vinci robot.**

surgery, these smaller incisions potentially result in less blood loss, less pain and a quicker recovery.

Not all surgeries can be performed using the da Vinci system, notes the FDA, and not everyone is a candidate for its use. If you're considering surgery, ask your practitioner to explain the risks and benefits of using the da Vinci system.



**Tuschar Dandade, MD,**  
Presbyterian  
Medical Group

### Presbyterian, MD Anderson Cancer Center team up

Through an exclusive local partnership with MD Anderson, Presbyterian brings new hope to cancer patients who require radiation as part of their treatment. To learn more about services offered at The Cancer Center at Presbyterian, including radiation therapy by the MD Anderson Cancer Center Radiation Treatment

Center in Albuquerque, call 505-559-6100 or visit us at [www.phs.org/cancer](http://www.phs.org/cancer).



THE UNIVERSITY OF TEXAS  
**MD Anderson**  
**Cancer Center**

Making Cancer History®

# Pain by the joint

Treating common problems in the places where bones meet

It's pretty easy to take most of the 200-plus joints in the body for granted—until something goes awry.

Then, certainly, an ailing joint gets your attention, as anyone can attest who's ever had an arthritic hip, throbbing knee, or any other kind of painful problem in a place where two or more bones meet.

If, by chance, you're coping with an aching joint right now, there are likely some remedies available to ease your pain. Of course, your practitioner is the go-to person for specific advice on your case.

In the meantime, here's a look at some of the most effective treatments for common problems in some of the major joints, with information from the American Academy of Orthopaedic Surgeons and the National Institutes of Health (NIH).

## HIPS

Arthritis is the major cause of hip pain and disability. It wears away the protective cartilage that cushions the ends of bones and helps the hip joint glide. If cartilage disappears completely, bones rub directly against each other, making movement very painful.

The damage arthritis causes can't be reversed. Still, there are things that can help control the pain of mild arthritis and slow the disease's progression:

- Physical therapy or activity that includes gentle, regular exercise, such as swimming or cycling.
- Pain relievers, such as acetaminophen or ibuprofen.
- Weight loss, if you carry extra pounds.

If a hip is severely damaged by arthritis, hip replacement may be a good option.

The damaged hip is replaced with one made of metal or other materials in a relatively routine surgery. Most people who undergo hip replacement surgery experience a dramatic reduction in pain.

According to the NIH, the surgery can be very successful in younger people as well as those older than 60. And some research suggests that people who choose surgery before a hip joint becomes severely damaged tend to recover more easily and have better outcomes than those with more advanced deterioration.

## KNEES

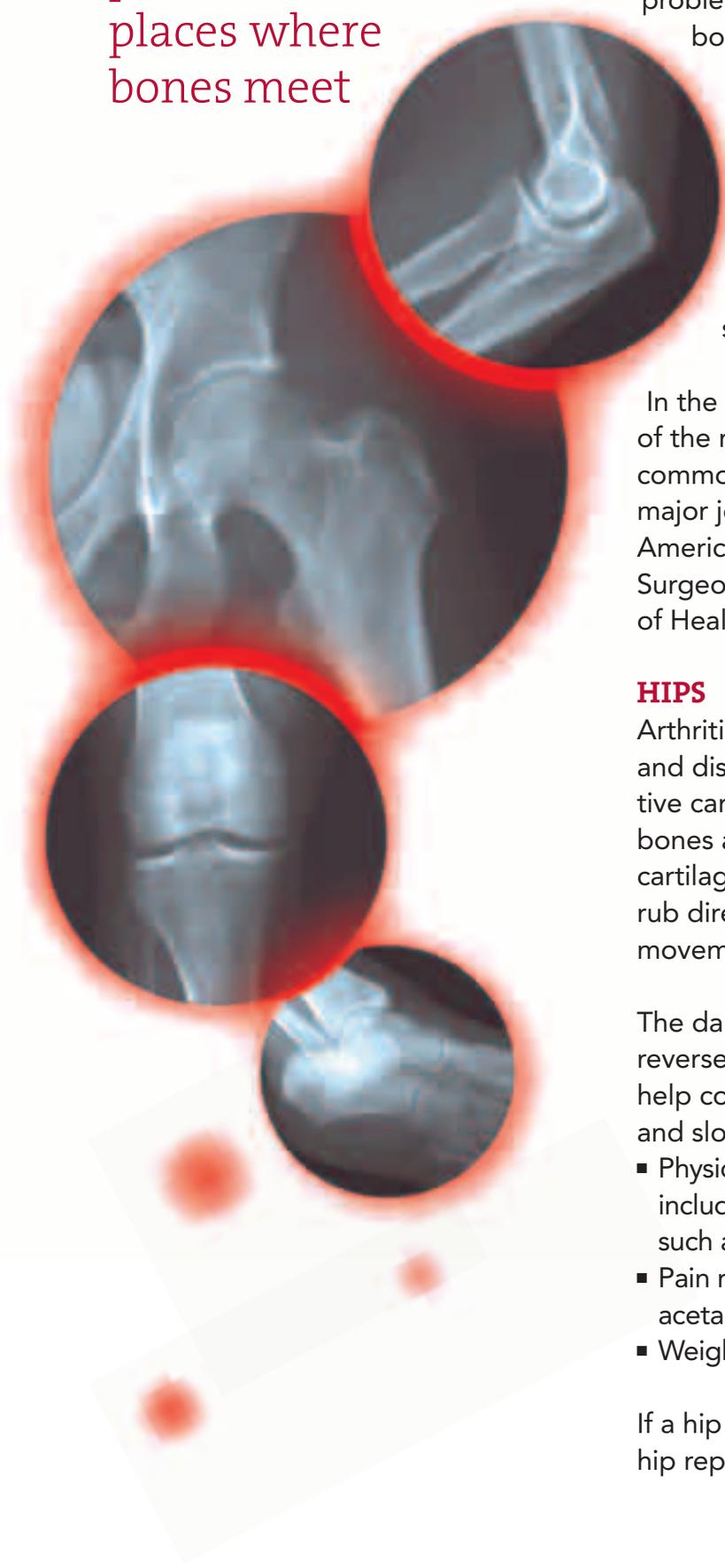
As it can in the hip, arthritis can occur in the knee. And like a hip, a severely arthritic knee can be replaced with an artificial one through surgery—a choice that nearly 600,000 Americans will opt for this year.

The largest joint in the body, the knee is also one of the most easily injured. Get medical treatment for an injury right away if you:

- Hear a popping noise and feel your knee give out.
- Have severe pain.
- Can't move your knee or start to limp.
- Have swelling at the injury site.

One of the most common knee injuries is a tear in the anterior cruciate ligament (ACL), tissue that acts like strong rope to keep the knee stable. Changing direction rapidly, slowing down when running and landing incorrectly from a jump all can cause an ACL injury. When an ACL is torn, it often needs to be repaired with surgery.

The good news: ACL repairs are generally done arthroscopically, requiring only small incisions that speed recovery. This minimally invasive surgery can also be used to fix a torn meniscus, an easily injured piece of cartilage that acts like a shock absorber in the knee.





Your practitioner is the best source of specific advice about your pain.



### SHOULDERS

If you twist your shoulder very hard, you might dislocate it—meaning that the ball at the top of the bone in your upper arm has popped out of its socket. Expect severe pain and an abnormally shaped shoulder. See a practitioner right away. Typically, he or she will be able to push the ball of the upper arm back into its proper place.

Another common shoulder injury is a rotator cuff tear. Your rotator cuff stabilizes your shoulder joint. It's made up of several tendons (bands of tissue that connect muscles to bones) and four muscles that cover the top of the upper arm bone.

You can tear this part of your body in a fall or other mishap. But most tears occur because of repetitive overhead motions, such as throwing a baseball again and again.

Resting your shoulder, using pain medication and participating in physical therapy may be all that's necessary to help you heal. In some cases, surgery may be needed.

### ELBOWS

Even if you've never picked up a tennis racket, you've probably heard of tennis elbow, an inflammation of the tendons that join the forearm muscles on the outside of the elbow. What

you might not know is that tennis elbow can strike anybody who overuses these muscles, from factory workers to house painters.

The first step toward recovery is resting your arm. Pain relievers, muscle-strengthening exercises and the use of a forearm brace can also ease the pain of tennis elbow. If these non-surgical treatments aren't effective, your doctor may advise surgery.

### MORE INFORMATION

To learn more about effective treatments for joint problems—including those in your hands and feet—go to [www.orthoinfo.aaos.org](http://www.orthoinfo.aaos.org).



**Jim Hinton,**  
President  
and CEO,  
Presbyterian  
Healthcare  
Services

## Embracing change to improve

I hear a common theme as I talk to people in the community: Health care is changing. I like to remind people that health care is always changing as we accept new treatments, welcome advances in technology and learn to make measurable improvements in delivering care to our patients. And while some express their concerns about how new legislation may impact their health insurance, others wonder if new legislation will give them the ability to have health insurance for the first time.

In the 102 years that Presbyterian has been providing care to New Mexicans, we've gone through many changes and faced many severe economic challenges, just as we do today with the state's budget deficit, unemployment rate and high number of uninsured citizens.

Presbyterian is committed to making fundamental

changes to our business, ensuring that we can continue providing needed health services and health plan coverage to New Mexicans.

At Presbyterian we refer to these fundamental changes as "transformations" because we are deliberately using innovative processes and ideas to radically change and improve.

We would never think of standing still while so many New Mexicans are uninsured and while so many are in need of ongoing treatment for chronic conditions such as diabetes. When we open the Presbyterian Rio Rancho Medical Center later this year, it will fill an important need for a full-service hospital serving Rio Rancho and surrounding communities.

You can be sure that Presbyterian will continue putting the needs of our members, patients and citizens at the heart of transformation.

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## Presbyterian Rio Rancho Hospital to provide an exceptional patient experience

### New technology and design will enhance patient safety

The Presbyterian Rio Rancho Medical Center will open in late October this year.

Presbyterian is excited to be building New Mexico's first 21st-century hospital, scheduled to open in Rio Rancho in October. Each patient room will be private and will include expansive windows allowing for natural light, as well as sound-absorbing ceilings, floors and walls to improve sleep, which will help patients heal faster.

In addition to the enhanced design of the new facility, one of the most innovative features of the hospital is an electronic intensive care unit that will allow virtual caregivers to be located next to patients.

Through secured telephone lines and computer monitors, caregivers can view and monitor the condition of each patient in every room in the hospital. This new technology is designed to enhance patient safety by teaming specially trained critical care physicians and nurses with bedside staff to identify and address changes in patients' conditions 24/7 before those changes become complications.

Presbyterian's highly skilled physicians and staff will also provide care in both the inpatient and outpatient setting at the new hospital. Our services will include the following:



#### **INPATIENT SERVICES:**

- Critical care.
- Orthopedic care.
- Surgery.
- General medical care.
- Mother-baby and neonatal intensive care.

#### **OUTPATIENT SERVICES:**

- Emergency care.
- Full imaging services.
- Surgical services.

Learn more about Presbyterian Rio Rancho Medical Center by going to [www.facebook.com/PresRioRancho](http://www.facebook.com/PresRioRancho).

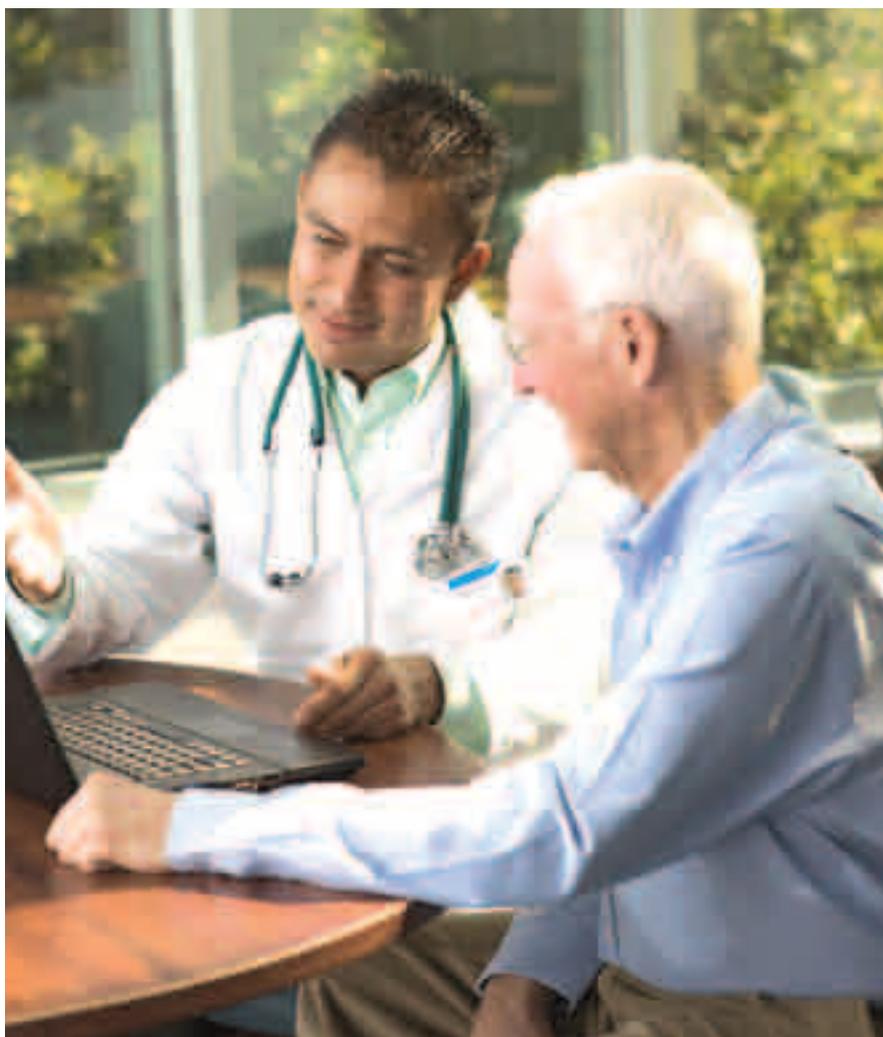
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### What does transformation look like at Presbyterian?

- Responding to a critical need not to burden our emergency departments with nonemergency patients, we staffed patient navigators in our Albuquerque hospital emergency departments. The navigator helps patients find the proper medical care they need, such as Urgent Care or a primary care practitioner (PCP). This new process helps us reserve the valuable services of emergency departments for true emergencies.
- Our investment in a comprehensive electronic medical record will eventually connect all of Presbyterian's locations, including hospitals and clinics. Your PCP's notes, lab work and x-rays will be available for your PCP during your visit. Patients will also have access to their PCP through online communications and will be able to book appointments and look at test results.

## Questions or concerns?

Call the Presbyterian Customer Service Center **505-923-6060** or **1-800-797-5343** (TTY: **1-888-625-8818**), Monday through Sunday from 8 a.m. to 8 p.m. Voice mail will be returned by close of business the next business day.



## Find the benefit information you need

Presbyterian wants to make sure you have the information you need to understand your benefit coverage and to get medical care. You can look in your *Summary of Benefits or Evidence of Coverage/Member Handbook* that you received in the Annual Notice of Change packet mailed to you last fall, or request a copy by calling the Presbyterian Customer Service Center at the number on the back of your member Identification (ID) card.

We also include articles in this newsletter to explain select benefits and health plan procedures.

### **YOUR MEMBER MATERIALS INCLUDE INFORMATION ABOUT:**

- Covered and excluded benefits and services.
- Your pharmaceutical benefits.
- Co-payments and other charges that you pay.
- Benefit restrictions when you get services outside the health plan's service area.
- How to submit a claim for covered services, if applicable.
- How to obtain language assistance.
- How to find information about practitioners and providers.
- How to obtain primary care services, choose practitioners and access care.
- How to obtain hospital care, specialty care and behavioral health services.
- How to obtain care after normal business hours.
- How to obtain emergency care, including when to directly access emergency care or use 911 services.
- How to obtain care and coverage outside the health plan's service area.
- How to voice a complaint or appeal a health plan decision that impacts your medical coverage, benefit coverage or your relationship with the health plan.
- How the health plan evaluates new technology for inclusion as a covered benefit.

## Your story

We hope you've seen our "Your story is our story" advertising campaign showing some of our patients, members and health practitioners telling their stories. We want to highlight the positive changes in healthcare including programs such as our Healthy Solutions disease management and Hospital at Home, as well as successful outcomes like saving a young mother's life following a heart attack.

### **DO YOU HAVE A GREAT STORY TO TELL?**

We know that our members and patients have great stories to tell about how Presbyterian has partnered with you to improve your health, whether it's attending group visits, receiving extra help for your chronic condition, or even a mobile mammography van that came to your community. We'd like to hear them.

You can send your story to us at [yourstory@phs.org](mailto:yourstory@phs.org).

You can also write to us at:

**FOCUS On Senior Health editor**  
**Presbyterian Health Plan**  
**2501 Buena Vista SE, Suite 2400**  
**Albuquerque, NM 87106**

We'll get in touch with you to find out more.

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You can also find information about your benefits on our secure, online service, Pres Online for Members. You can access Pres Online on our website, [www.phs.org](http://www.phs.org). Register and log on to the home page. On the Pres Online home page, select "Medical Product Plan" under "Health Plan Snapshot" to see the details of your benefits.

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# WHAT MEMBERS NEED TO KNOW...

Presbyterian Senior Care (HMO) and Presbyterian MediCare PPO

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## Questions or concerns?

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## Choosing the kind of care you need

If you have a serious medical problem, the emergency department (ED) is the place to go. The ED has the doctors, nurses and tools needed to treat you. Emergency care can help if you have a heart attack or stroke. It can save your life.

But sometimes you have a minor illness or an injury that's not an emergency. Maybe it's after office hours. Or you can't see your provider right away. That's when the Urgent Care center is the place to go.

Of course, it's not always easy to know what kind of care you need. "Choosing the Right Kind of Care" (at right) can help. If you're still not sure, remember to use the 1-2-3 tips to help you decide.

### 1-2-3 TIPS

**1.** Call NurseAdvice New Mexico at **1-800-887-9917 / TTY: 1-800-659-8331**, 24 hours a day. The nurse can help you decide where to get the right treatment.

**2.** Call your primary care practitioner (PCP). The PCP may have you come to the office or send you to an Urgent Care center for treatment. If it's after hours, the PCP will leave a number for you to call.

**3.** Go to an Urgent Care or an Extended Hours Clinic. But don't wait if you think you need emergency care. Call 911.

### CHOOSING THE RIGHT KIND OF CARE

#### Choose the emergency department for:

- Chest pain.
- Any sudden or severe pain.
- Difficulty breathing.
- A head injury.
- Fainting or passing out.
- Sudden changes in vision.
- Difficulty speaking.
- Sudden confusion or dizziness.
- Suicidal feelings.
- Coughing up or throwing up blood.
- Major broken bones, such as a leg.
- Severe diarrhea or throwing up that doesn't stop.
- Severe bleeding or bleeding that doesn't stop.

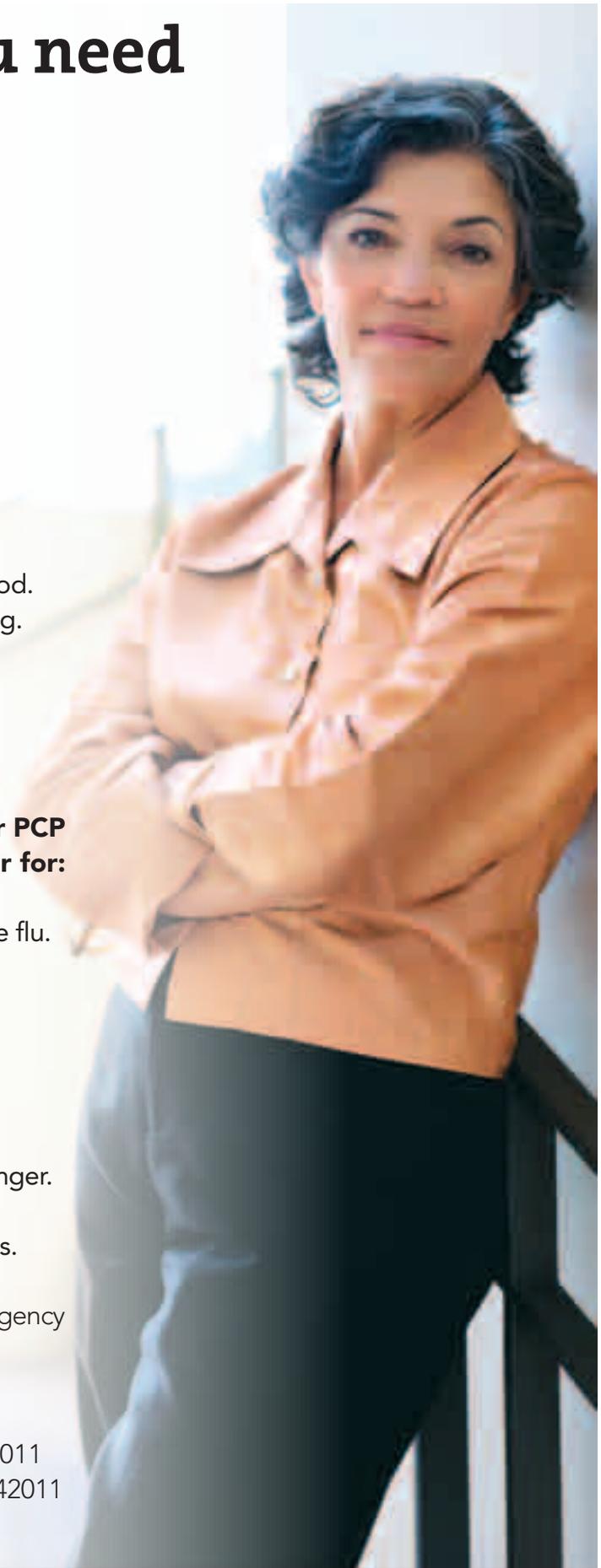
#### Make an appointment with your PCP or go to the Urgent Care center for:

- Sprains and strains.
- Sore throats, coughs, colds or the flu.
- Ear infections.
- Sinus infections.
- Allergy flare-ups.
- Mild asthma.
- Animal bites.
- Insect bites.
- Minor broken bones, such as a finger.
- Skin rashes.
- Minor cuts that may need stitches.
- Nausea.

Sources: American College of Emergency Physicians; National Association for Ambulatory Care

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### Annual Member Appreciation Events

Presbyterian Medicare Plans would like to thank you for choosing Presbyterian as your healthcare partner. For the past 12 years, we have enjoyed meeting you at our annual Member Appreciation events. Each year we look forward to the opportunity to express just how much we appreciate you, our members.

Like last year, we will have several events for you to choose from. Your invitation, with all the details (including the telephone number to call and when we'll start taking reservations), will be mailed soon—so watch your mailbox. You won't want to miss it.

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# WHAT MEMBERS NEED TO KNOW...

Presbyterian Senior Care (HMO) and Presbyterian MediCare PPO

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## Questions or concerns?

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## Your prescription drug coverage

Prescription drug benefits provide cost-effective coverage and value with your safety in mind. If prescription drugs are a covered benefit under your plan (check your *Summary of Benefits or Evidence of Coverage/Member Handbook*, or call Customer Service to find out), generally your benefits cover:

- Generic and brand-name drugs listed on our Preferred Drug List (also called a formulary)
- Non-preferred drugs
- Certain specialty pharmaceuticals

### WHY DO WE HAVE A PREFERRED DRUG LIST?

- Having a Preferred Drug List (sometimes called a formulary) helps us keep your out-of-pocket costs down. The list contains thousands of drugs and is reviewed and updated by a committee of healthcare practitioners and pharmacists. The list can change at any time.
- You can find the Preferred Drug

list on our website at [www.phs.org](http://www.phs.org) or review the *Presbyterian Senior Care & Presbyterian MediCare PPO Formulary* mailed to you last fall.

- If you need a drug that is not on the formulary, your practitioner can request an exception. We will look at the request and give authorization if we find that the drug is medically necessary.

### FOUR-TIER DRUG PLANS

Most members have a four-tier drug plan with four co-payment levels. See your *Summary of Benefits or Evidence of Coverage/Member Handbook* for the amount of your co-payments.

- Your out-of-pocket expenses are lowest when you fill prescriptions for Level 1 (preferred generic) and Level 2 (preferred brand-name) drugs.
- Your co-payments are highest for Level 3 (non-preferred) drugs.
- Level 4 drugs are specialty

pharmaceuticals. You must get these drugs from a designated specialty pharmacy vendor. Your practitioner may first have to obtain a pharmacy exception before these drugs are covered.

### WILL MAIL SERVICE SAVE YOU MONEY?

Depending on your prescription drug plan and on the medication you take, you may save money using the mail-order service. Check your plan documents for information about these co-payments.

To register for this service, go to [www.phs.org](http://www.phs.org) and select "Health Plans" then "Pharmacy" or contact Customer Service for a mail-order brochure. Note: Specialty pharmaceuticals (Level 4) are not available through mail order.

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## Questions or concerns?

Call the Presbyterian Customer Service Center **505-923-6060** or **1-800-797-5343** (TTY: **1-888-625-8818**), Monday through Sunday from 8 a.m. to 8 p.m. Voice mail will be returned by close of business the next business day.

## Your rights and responsibilities

Presbyterian is committed to respecting our members' rights and responsibilities. We expect employees, participating practitioners, and providers to treat each member without bias and according to general community standards for the delivery of health care. A more complete list of your rights and responsibilities is included in your *2011 Evidence of Coverage/Member Handbook* that was mailed to you at the end of October 2010. You can find the current *Evidence of Coverage/Member Handbook* on our website.

### For Presbyterian Senior Care (HMO), go to:

[www.phs.org/PHS/healthplans/Medicare2011/PSC/index.htm](http://www.phs.org/PHS/healthplans/Medicare2011/PSC/index.htm)

### For Presbyterian MediCare PPO, go to:

[www.phs.org/PHS/healthplans/Medicare2011/ppo/index.htm](http://www.phs.org/PHS/healthplans/Medicare2011/ppo/index.htm)

Just scroll down to the heading "2011 Evidence of Coverage/Member Handbook," and click on the link that corresponds to the plan you have.

### ALL MEMBERS HAVE A RIGHT TO:

1. Be treated with dignity, respect and fairness.
2. Have your medical records and personal health information kept private.
3. See plan practitioners, get covered services, and get your prescriptions filled within a reasonable period of time.
4. Have candid discussions about your treatment options and participate in decisions about your health care.
5. Use an Advance Directive (such as a Living Will or a Power of Attorney).
6. Make complaints if you have concerns or problems related to your coverage or care.
7. Get information about our Plan, Plan practitioners and providers, drugs, healthcare coverage, and costs.
8. Ask questions about your rights.

### ALL MEMBERS HAVE THE RESPONSIBILITY TO:

1. Be familiar with your coverage and the rules you must follow to get care as a member.
2. Let us know if you have additional health insurance coverage.
3. When seeking care (unless it is an emergency) advising practitioners and providers that you are enrolled in our Plan.
4. Give your practitioner and other providers the information they need to care for you, and follow the treatment plans and instructions that you and your practitioners agree on.
5. Act in a way that supports the care given to other patients and helps the smooth running of your practitioner's office, hospitals and other offices.
6. Pay your plan premiums and co-payments for your covered services. You must pay for services that are not covered.
7. Let us know if you move.
8. Let us know if you have questions, concerns, problems or suggestions.

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### Learn more about your practitioner

You can call the Presbyterian Customer Service Center at the number on your member Identification (ID) card to find more information about a healthcare practitioner. Customer Service can tell you:

- Where the practitioner went to medical school.
- Where the practitioner completed his or her residency.
- Whether the practitioner is board-certified. (In many states, including New Mexico, board certification is not a requirement to obtain a license to practice medicine.)

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### It's 2:30 in the morning and you don't feel well.

#### Not sure what to do?

Call the **FREE Medicare Advantage NurseAdvice New Mexico** line at **1-800-887-9917 / TTY 1-800-659-8331**, 24 hours a day, 365 days a year. Don't hesitate. Call any time.

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Y0055\_PPO110221 File & Use 03142011

## Questions or concerns?

Call the Presbyterian Customer Service Center **505-923-6060** or **1-800-797-5343** (TTY: **1-888-625-8818**), Monday through Sunday from 8 a.m. to 8 p.m. Voice mail will be returned by close of business the next business day.

## Join us to fight fraud and abuse

Healthcare fraud and abuse is a national problem that affects all of us either directly or indirectly. National estimates project that billions of dollars are lost to healthcare fraud and abuse on an annual basis. These losses lead to increased healthcare costs and potential increased costs for coverage.

Presbyterian cooperates with government, regulatory and law enforcement agencies in reporting suspicious activity, and you can help. If you suspect fraud or abuse, call **505-923-5959** or **1-800-239-3147** / TTY **1-888-625-8818**, Monday through Friday from 8 a.m. to 5 p.m.

### SOME EXAMPLES OF PRACTITIONER/PROVIDER FRAUD AND ABUSE ARE:

- Practitioners/providers charging for services you did not receive.
- Billing more than one time for the same service.
- Billing for one type of service but giving you another type.

### SOME EXAMPLES OF MEMBER FRAUD AND ABUSE ARE:

- Forging or selling prescriptions.
- Giving false enrollment information.
- Allowing someone else to use your member ID card.

### EXAMPLES OF MEDICARE PART D PRESCRIPTION DRUG FRAUD, WASTE OR ABUSE ARE:

- An individual or organization pretends to represent Medicare and/or Social Security and asks you for your Medicare or Social Security number, bank account number, credit card number, money, etc.
- Someone asks you to sell your Medicare prescription drug ID card.
- You feel a Medicare prescription Drug Plan has discriminated against you, including not letting you sign up for their plan because of your age, health, race, religion and/or income.
- You were encouraged to disenroll from your plan.
- You were offered cash or a gift worth more than \$15 to sign up for a Medicare Prescription Drug Plan.
- You were billed for prescription drugs that you didn't receive.
- You received a different drug than your practitioner ordered.

Thank you for allowing Presbyterian to be your partner in good health. By working together to prevent fraud and abuse, we can focus on improving the health of the patients, members and communities we serve.

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### The Tobacco Quit Line: Ready when you are

Presbyterian members can get confidential support by calling the Tobacco Quit Line for Presbyterian members at **1-888-840-5445**. The Quit Line is available:

- Monday through Thursday, 7 a.m. to 9 p.m.
- Friday, 7 a.m. to 7 p.m.
- Saturday and Sunday, 8 a.m. to 4:30 p.m.

When you enroll, you will receive up to five coaching sessions with a trained quit coach. You may also be eligible to receive nicotine replacement therapy products.

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### Premium withdrawal and Social Security

Presbyterian would like to remind you that if you have signed up for automatic withdrawal of your plan premiums from your Social Security check, it may take up to three or four months for that payment method to take effect. The Centers for Medicare and Medicaid Services (CMS) and the Social Security Administration review all requests for premium withdrawals from a Medicare beneficiary's Social Security check, Presbyterian has nothing to do with that process or decision. In addition, the law states that CMS cannot deduct more than two months of premiums from an individual's Social Security check.

While this payment method is being processed, please keep an eye on the amount of your monthly Social Security check and remember that you are responsible for making sure that your monthly plan premium is paid on time.

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## Take a Class

### Presbyterian Senior Connection Classes at the Healthplex

Thursdays, 1 to 2:30 p.m.

6301 Forest Hills Drive NE, Albuquerque

Reservations required.

Call 505-823-8352.

#### April 21

**Tinnitus:** Do you “hear” buzzing, humming and/or ringing in one or both ears? Come and learn about this very common condition.

*Presented by: Dr. Brad Smith, Audiologist,  
Hearing Group of New Mexico*

#### May 5

**Three common eye problems:** Macular degeneration, glaucoma, cataracts

*Presented by: Dr. Ronald L. Friederich, ophthalmologist*

#### 19

**“Get Quit” Clinic:** Everything you need to know about quitting smoking

*Presented by: V J Sleight, tobacco treatment specialist*

#### June 2

**Three common eye problems:** Macular degeneration, glaucoma, cataracts

*Presented by: Ronald L. Friederich, MD, ophthalmologist*

#### 16

**Herbs:** How they can improve your health

*Presented by: Stella Vigil, BS, MA, APP, RPP, Reiki I and II  
educational consultant, Compassionate Hands*

## WHAT MEMBERS NEED TO KNOW...

Presbyterian Senior Care (HMO) and Presbyterian MediCare PPO

## When our service doesn't meet your expectations

We're committed to providing you high-quality care and service. If you're not satisfied with our service, we want to know. We have established procedures for reviewing and resolving your concerns. Please contact Customer Service at the phone number on the back of your member Identification (ID) card.

- If Customer Service cannot resolve your situation, you can call or write Presbyterian Health Plan Attn: Grievances and Appeals.
- Some problems require formal attention. In those cases, you have a right to file a grievance or an appeal. You also may request a detailed written explanation of the grievance procedures by contacting Customer Service for assistance.
- You may also file a formal complaint with the New Mexico Medical Review Association (NMMRA). The NMMRA is the Quality Improvement Organization in New Mexico and is paid by Medicare to check on the quality of care for people with Medicare. This bureau is available to assist you with grievances, questions or complaints. Call them at **1-800-663-6351** or write to the NMMRA at 5801 Osuna Road NE, Suite 200 ABQ 87109. Their website is [www.nmmra.org](http://www.nmmra.org).

Your *Evidence of Coverage/Member Handbook* also details these procedures. Presbyterian Health Plan will not take any retaliatory action against you for filing a grievance under your health benefits plan.

### TO CALL THE PRESBYTERIAN CUSTOMER SERVICE CENTER:

**505-923-6060, 1-800-797-5343, TTY: 1-888-625-8818**

Monday through Sunday — 8:00 a.m. to 8:00 p.m.

You can also contact Customer Service by sending an email to [info@phs.org](mailto:info@phs.org).

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