



June 2025

Dear Member,

To help you better manage your care, we want you to know where you can find helpful information you may need to best manage your care. For up-to-date information about our organization, services, providers, and your rights and responsibilities, simply log in to Blue Access for Members (BAM<sup>SM</sup>) at [bcbsnm.com/member](https://bcbsnm.com/member).

### **Not registered for BAM?**

Signing up is easy. Go to [bcbsnm.com/member](https://bcbsnm.com/member). Go to the Blue Access for Members SM section and click Log In to Your Account, then on the BAM **Log In** page, click on Create an Account. Follow the steps to complete registering for BAM.

On the BAM site, click on **View all Coverage**, then Coverage and Benefits to find your health booklet and under Medical find information including:

- Benefits and services covered or not on your health plan
- Copayments, deductibles, coinsurance, and other costs you may have
- How to get primary, specialty, or behavioral health care and hospital services
- Where to get urgent or emergency care, 911 services, or care after your doctor's normal business hours
- How to get care (and restrictions of care) when you are outside of our service area
- How you can engage with our Case Management Program
- Under the Pharmacy tab, find the following information (This applies if your prescription drug benefit is provided through or administered by us.):
  - A list of covered drugs, along with restrictions and preferences
  - The process for reviewing and managing drug prescriptions
  - An explanation of dispensing limits
  - Our process for generic substitution, therapeutic interchange, and step-therapy protocols, if applicable
  - What information prescribing doctors must provide to support an exception process
- Under the Medical Benefit Highlights tab find the following information with in the Health Booklet
- Your rights and responsibilities as a member of our health plan
- How to file a claim for covered services
- How to submit a complaint or how to request an appeal for denial decisions that affect coverage, benefits or your relationship with us. This includes information on your right to an independent external review of denied medical necessity reviews
- How we evaluate new technology for inclusion as a covered benefit
- Our quality program goals, initiatives and achievements
- How to get translation services if you need language assistance, including, how to get text telephone (TTY) services if you have special communication needs, such as deafness, hearing loss or speech impairment.
- How our privacy policy keeps your data safe. Go to **Legal and Privacy** (link at bottom of page). Then choose Privacy Practices Notice and Forms.



Also, in the **My Coverage** section, you will find **Member Resources** with links to other related topics (as outlined below).

### **Prior Authorization Process**

**You can see if your healthcare provider has requested a prior authorization or recommended clinical review on your behalf. You can also track updates as the request is evaluated, including BCBSNM's decision, for which you will also receive a separate communication with your related rights.**

It is against our policy to give financial incentives to staff members to make coverage decisions that may limit or restrict your benefits. You can request a copy of criteria used in decision making by calling the number on the back of your member ID card.

### **Women's Wellness**

We endorse the Women's Health and Cancer Rights Act of 1998. This act lists what is covered for members who require mastectomy-related services. The notice is in the Coverage and Benefits article.

### **Locating a Network Provider**

Our Provider Finder® tool shows providers who are contracted in our network. You can learn about provider qualifications, such as specialty, education, training, and board certification. With this tool, you can find network providers who offer covered services. These services may include primary, medical, specialty, hospital, and behavioral health care.

### **Continuity and Coordination of Medical Care**

It is important that if you see more than one provider, your care is coordinated between providers. If you see another provider outside of your primary care provider's (PCP) office, please be sure to give the provider/office your PCP's name and address. Ask them to send a copy of the visit notes and/or test results to your PCP.

### **Preventive Wellness**

We recommend all areas of maintaining a healthy life. You can learn more about how to work with your provider to stay healthy. Another resource where you can also learn how to manage existing health conditions is at [connect.bcbsnm.com](http://connect.bcbsnm.com).

If you do not have an email address, or would prefer to receive printed copies, we can mail you a copy of any of the information listed above.. To ask for a printed copy, call the Customer Service number on the back of your member ID card.

To stay up to date with member news, be sure to visit BAM regularly.

Sincerely,

Quality Department  
Blue Cross and Blue Shield of New Mexico