2024
Open/Switch
Enrollment





Employee Benefits Wellness and Well-Being Programs

NMPSIA Medical Plan Coverage Self-Insured Medical Plan Options	BlueCross BlueShield of New Mexico	PRESBYTERIAN Health Plan, Inc.	
NMPSIA Prescription Drug Coverage Self Insured Coverage for all on a Medical Plan	♥CVS caremark*		
NMPSIA Dental Plan Coverage Self-Insured Dental Plan Options	BlueCross BlueShield of New Mexico Eff. 1/1/2025	△ DELTA DENTAL	UNITED CONCORDIA DENTAL Protecting More Than Just Your Smile*
NMPSIA Vision Plan Coverage Fully-Insured Vision Plan	Davis Vision [™]		
NMPSIA Life and Long term Disability Coverage Fully-Insured Plan	π-sStandard °		
NMPSIA Musculoskeletal Surgical Services	Surgery Plus	NTERN	
Wellness & Well Being Program Discounted Gym Memberships, Member Wellness & Well Being Strategic Planning, Member Health and Wellness Onsite Events, Screenings, and Activities	NMPSIA Wellness		
NMPSIA Customer Service Claim Issues and Reconsideration of Enrollment Determinations	New Mexico Public Schools Insurance Authority		
Employer Benefits Administration Support with Enrollment, Billing and Premium Collection, COBRA Administration	Erisa Administrative Services, Inc.		

Program Guide & Medical Plan Side-By-Side Comparison

Visit https://nmpsia.com



Annual Open Enrollment



What is Open Enrollment?

- Allows an eligible employee to add medical, dental or vision coverage if currently not enrolled for these coverages
- Allows an employee to add eligible family members not currently enrolled in any employee-enrolled medical, dental or vision coverage

When is the Open Enrollment Period?

- Open Enrollment starts on October 1, 2024 through November 1, 2024
- This means the employee must make changes ONLINE no later than November 1, 2024

What is the Effective Date of an Open Enrollment Request?

- Any coverage or dependents added through Open Enrollment will be effective January 1, 2025
- Required supportive documentation to add dependents must be received no later than November 1, 2024 for the January 1, 2025 effective date



Annual Switch Enrollment



What is Switch Enrollment?

- Allows an employee who is currently enrolled in a medical plan to switch between medical carriers (Blue Cross Blue Shield NM or Presbyterian) or switch between medical plan options (High, Low, or EPO)
- Allows an employee who is currently enrolled in a dental plan to switch between dental carriers (Blue Cross Blue Shield NM, Delta Dental or United Concordia Dental) or switch between dental plan options (High or Low)

When is the Switch Enrollment Period?

- Switch Enrollment starts on October 1, 2024 through November 1, 2024
- This means the employee must make changes ONLINE no later than November 1, 2024

What is the Effective Date of a Switch Enrollment Request?

 Any medical or dental carrier or medical and dental option changes during Switch Enrollment will be effective January 1, 2025



In-Network Medical Plan

HIGH OPTION MEDICAL PLAN

- \$25 copay for office visits
- \$50 copay for specialist office visit
- \$0 copay for Telehealth virtual video visits access (via carrier website)
- \$0 Routine annual wellness visits
- Deductible waived for in-network lab and radiology
 - \$30 copay when using free-standing labs or radiology facilities
 - More expensive at out-patient hospital labs (\$60 copay)
 - No charge for Professional Interpretation/Reading of lab and radiology
 - \$600 copay or 20% (whichever is less) for MRI, MRA, CT Scan, Pet Scan
- \$750 Individual Deductible for other services and 20% coinsurance
- \$4,100 Individual Calendar Year Maximum for covered in-network services (copays, deductible, coinsurance)
- Out of network benefits at 40% coinsurance after \$1,500 individual deductible

Visit https://nmpsia.com/ to view benefit summaries and side-by-side medical plan comparison chart







In-Network Medical Plan

LOW OPTION MEDICAL PLAN – "catastrophic plan"

- \$30 copay for office visits
- \$60 copay for specialist office visit
- \$0 copay for Telehealth virtual video visits access (via carrier website)
- \$0 Routine annual wellness visits
- \$2,000 Individual Deductible and 25% coinsurance
- \$4,100 Individual Calendar Year Maximum for covered in-network services (copays, deductible, coinsurance)
- Out of network benefits at 50% coinsurance after \$4,000 individual deductible

EPO Plan – Narrow NM Network (BCBS ONLY)

- \$25 copay for office visits
- \$35 copay for specialist office visit
- \$0 copay for Telehealth virtual video visits access (via carrier website)
- \$0 Routine annual wellness visits
- \$500 Individual Deductible
- \$3,250 Individual Calendar Year Maximum for covered in-network services (copays, deductible, coinsurance)
- No out of network benefits except in an emergency







Wellness Benefits

NO COST TO MEMBERS

S S

Weight



Platforms Online

Health

ental

A PRESBYTERIAN



Wellness at Work: Online wellness portal with tons of wellness tools you can utilize. Everything is covered from nutrition, physical activities, health challenges, event registration, and health education.

BlueCross BlueShield of New Mexico Well onTarget*

Well onTarget: Online Member Wellness Portal with several tools and resources to assist you in a personalized health & wellness journey.

Mobile App:



Mobile App:



A PRESBYTERIAN



Health Coaching through The **Solutions Group**

Health Coaching through Good Measures

Noom: App that is a Psychologybased program to help individuals make healthier choices.

Wondr Health Obesity & Metabolic Syndrome Reversal **Program**

BlueCross BlueShield

of New Mexico

Virgin Pulse



Always On



PRESBYTERIAN



*Life on Mindfulness: Online Platform with live workshops & daily live guided meditations

Talkspace: Messaging Therapy for emotional wellbeing

My Stress Tools: Online suite of stress management and resiliencebuilding resources

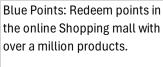
Learn to Live: Digital programming with lessons, activities and one-to-one support.

unts	
SCO	
)is	
△	
ves	
nti	
ncent	
\geq	

Rewards **Gym Memberships**

NMPSIA Wellness Rewards: Earn up to \$75 in Amazon.com gift cards by participating in

A PRESBYTERIAN



BlueCross BlueShield of New Mexico

Fitness Programs- Unlimited access to tiered national gym network including digital programs.

Discounts

Presbyterian MemberPerks Blue 365 Health & Wellness Discounts

wellness activities.

Fitness Pass Membership



Musculoskeletal **Surgical Services Coverage**

Your Cost Savings on the High Option, Low Option and EPO Plans

In-network Coverage	High Option Plans (BCBS and Presbyterian)	<u>Low Option/Plans</u> (BCBS and Presbyterian)	BCBS Preferred EPO Plan	SurgeryPlus
Deductible	\$750 individual coverage / \$1,500 family coverage	\$2,000 individual coverage/ \$4,000 family coverage	\$500 individual coverage/ \$1,000 family coverage	\$0
Coinsurance	20% after deductible	25% after deductible	25% after deductible	\$0
Total	Up to the out-of-pocket maximum: \$4,100 individual coverage / \$8,200 family coverage	Up to the out-of-pocket maximum: \$4,100 individual coverage / \$8,200 family coverage	Up to the out-of-pocket maximum: \$3,250 individual coverage/\$6,500 family coverage	There is zero cost for your SurgeryPlus procedure

Learn more and find contracted providers at surgeryplus.com





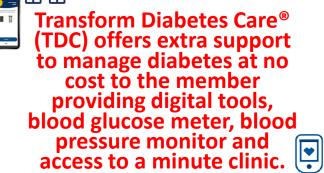
Prescription Drug Coverage

Automatically enrolled when you enroll in medical coverage

- Rx ID card issued by CVS Caremark
- Formulary https://nmpsia.com/
- Generics
 - \$10 copay for 30-day supply at the pharmacy
 - \$22 copay for 31-90 day supply at the pharmacy
 - \$22 copay for 90-day supply via mail-order
- Preferred Brand-Name
 - 30% coinsurance (\$30 min/\$60 max) for 30-day supply at the pharmacy
 - \circ \$60 copay for 31–90 day supply at the pharmacy
 - \$60 for 90-day supply via mail-order
- 70% coinsurance for non-formulary brand name drugs
- \$0 Generic & Preferred Diabetic Supplies & Injectable Diabetic Medications
- *Specialty Medications \$55 Generic; \$80 Preferred; \$130 Non-Preferred
- \$3,000 Individual Calendar Year Maximum for High & Low Option medical plans
- \$3,100 Individual Calendar Year Maximum for EPO Option medical plan

*Your plan includes the PrudentRx program for certain eligible specialty medications exclusively dispensed by CVS Specialty. For these medications, 30% coinsurance will apply. If you are enrolled in PrudentRx, your final out of pocket cost will be \$0. If you opt out of PrudentRx, you will be responsible for the 30% coinsurance.

Note: only the amount you pay out of pocket will be reflected in your annual deductible and/or maximum out of pocket.







In-Network Dental Coverage

HIGH OPTION DENTAL PLAN

- \$0 Diagnostic & Preventive Services (Deductible waived)
 - Routine Oral Exams (twice every calendar year)
 - Routine Cleanings (twice every calendar year)
 - Periodontal Cleanings (twice every calendar year)
 - X-rays complete mouth (once every 5 years);
 - bitewings (twice every calendar year through age 13, once every calendar year thereafter)
- 20% Coinsurance for Basic Services
- 50% Coinsurance for Major Services & Orthodontic Services
- \$50 Individual Deductible for Basic and Major Services
- \$1,500 Calendar Year Maximum
- \$1,500 *Lifetime* Maximum for Orthodontics
- Out of network benefits at 45% 65% coinsurance after deductible List of NM contracted dentists for each carrier can be found at nmpsia.com





UNITED CONCORDIA® DENTAL
Protecting More Than Just Your Smile®



In-Network Dental Coverage

LOW OPTION DENTAL PLAN

- \$0 Diagnostic & Preventive Services (Deductible waived)
 - Routine Oral Exams (twice every calendar year)
 - Routine Cleanings (twice every calendar year)
 - Periodontal Cleanings (twice every calendar year)
 - X-rays complete mouth (once every 5 years);
 - bitewings (twice every calendar year through age 13, once every calendar year thereafter)
- 20% Coinsurance for Basic Services
- NO Major Services or Orthodontic Services
- \$50 Individual Deductible for Basic Services
- \$1,500 Calendar Year Maximum
- Out of network benefits at 75% coinsurance after deductible

List of NM contracted dentists for each carrier can be found at nmpsia.com









In-Network Vision Coverage

- \$10 copay Eye Exam (covered every 12 months from last date of service)
- \$15 copay Spectacle Lenses (standard single-vision, lined bifocal, or trifocal lenses - covered every 12 months from last date of service)
- Frames (covered every 12 months)
 - Additional discounted Lens options & coatings
 - Frame allowance \$150, VisionWorks allowance \$200
- Contacts (covered every 12 months)
 - Order contact replacement lenses online
- Be sure to ask to see the Davis Vision Frame and Contact collection
- Includes discounts for Lasik and hearing aids

List of National contracted providers can be found at https://davisvision.com





EOI Connect for Additional Life & Long-Term Disability Coverage

Additional Life and AD&D and Long Term Disability (LTD)

If Additional Life and/or Long-Term Disability was declined and/or you chose to enroll after the 31-day New Hire enrollment deadline:

NOTE: Long Term Disability, Additional Employee Life, and/or Additional Spouse Life is allowed any time of the year by requesting ☐ Evidence of Insurability on the Employee Enrollment/Change Form or via the Employee Login online system and submitting to your employer for signature or approval. (Evidence of insurability and approval by The Standard will be required. If approved, the effective date will be determined as the first of the following month from the decision date.)



13

PAY ATTENTION!

(Important communication materials branded with these logos)







Do not mistake for junk mail!



Eligibility Rules for Employee



15

Other Lines of Coverage

 Medical, Dental, or Vision- the employee must work 20 hours or more per week (confirm requirements with your employer)

Employee is eligible for benefits if:

- Employer has determined the employee is eligible for benefits
- Employee works the minimum qualifying number of hours established by the employer

Eligible Dependents

- Spouse, Domestic Partner (if offered by employer)
- Children natural, adopted or legal guardianship, and domestic partner children (if offered by employer) up to age 26 (married or unmarried)

Proof of Dependency Required

Submit the required proof with your application to avoid a delay of coverage for your dependents

- Social Security Number or Individual Tax Identification Number
- Marriage Certificate
- Birth Certificate
- Proof of other coverage if you are excluding a dependent from a line of coverage when you
 are enrolling at least one other eligible family member



General Information and Rules

2-Year Vision Rule

Vision coverage has a two-year enrollment requirement. The vision plan cannot be dropped until the employee and each enrolled dependent have been enrolled for two years.

Double Coverage Rule

NMPSIA rules do not permit double coverage within the NMPSIA group plans.

If an employee, spouse, or their child work for a NMPSIA participating employer, neither can cover the other for the same lines of coverage.

16



Insurance Fraud

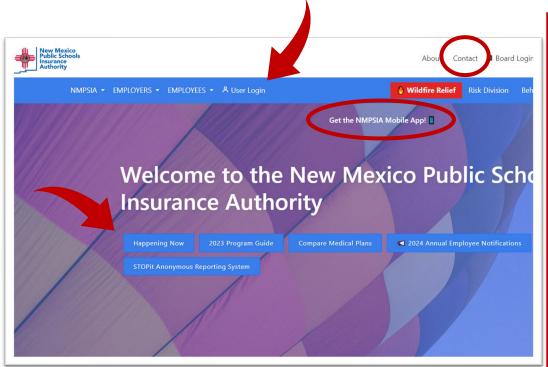
Under NMPSIA Rules and Regulations, anyone who knowingly makes any false or fraudulent statement or representation shall forfeit all employee and dependent rights to coverage or benefits. In the event of prohibited actions by an official or employee of a participating school or other educational entity, the employer shall take the appropriate disciplinary action against the offending official or employee.

If such appropriate disciplinary action is not taken, NMPSIA reserves the right to terminate coverage for the participating school, charter or other education entity. (Federal and State Insurance Laws Will Apply)

Confidential

17





Home Page

Need to reach us? Use the "CONTACT" button!

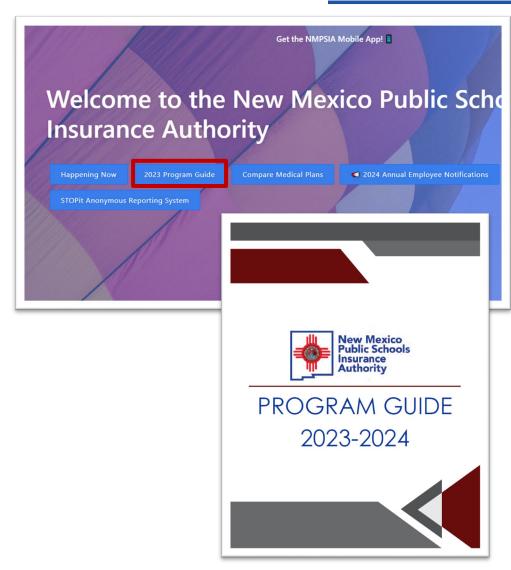
Need to check your enrollment, change contact information or beneficiary information? Use the "**USER LOGIN**" button.

Want to stay up to date with regular happenings? Use the "HAPPENING NOW" button!

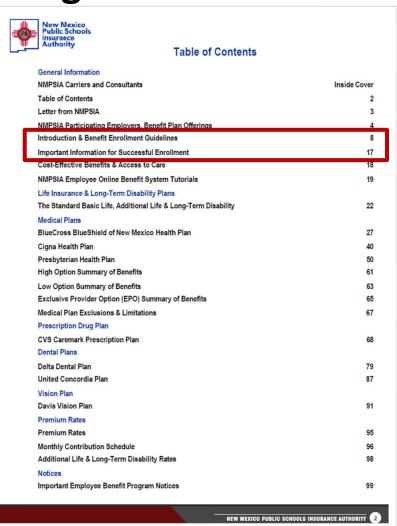
Want to have access the online system via your mobile device? Click "GET THE NMPSIA MOBILE APP".

18



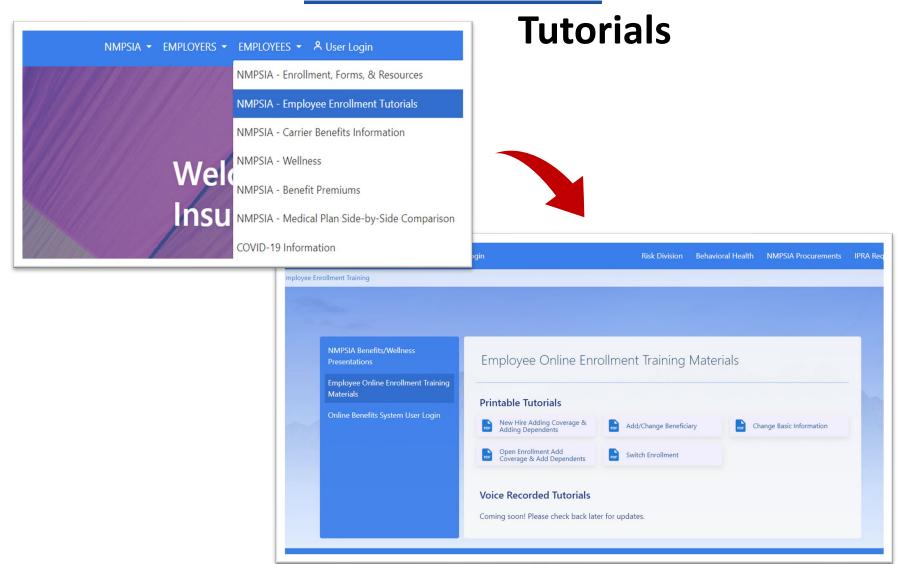


Program Guide

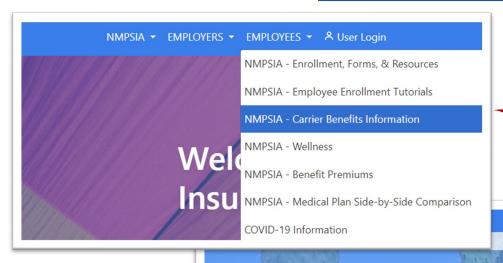


19





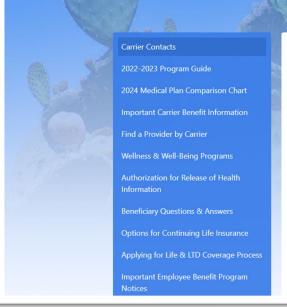


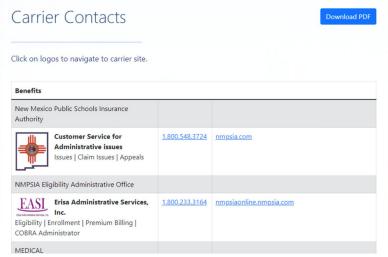


ID Cards

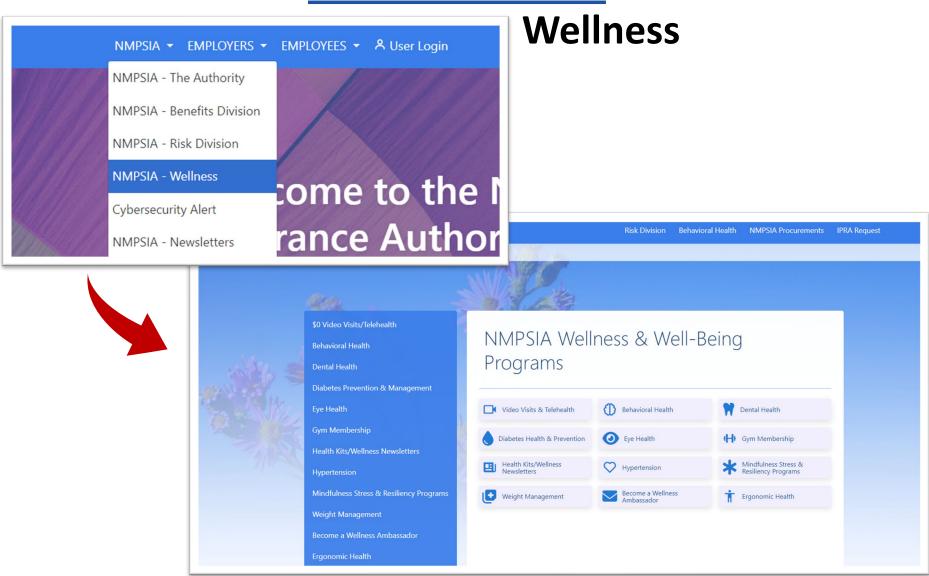


Risk Division Behavioral Health NMPSIA Procurements IPRA Request







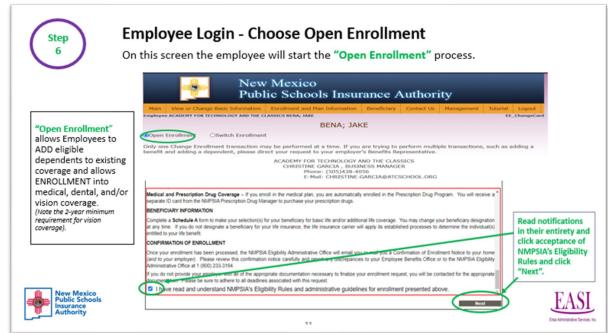




Employee Open Enrollment Tutorials

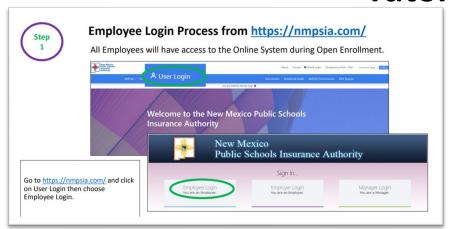




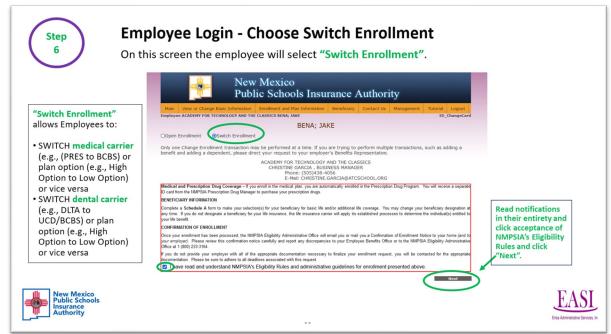




Employee Switch Enrollment Tutorials







24



Resources

NMPSIA Enrollment & Eligibility Administrative Office

Erisa Administrative Services, Inc.

- Eligibility Enrollment Premium Billing
- Premium Collection
 COBRA Administration

1.800.233.3164 or 505.988.4974 <u>sf@easitpa.com</u>



25



Resources

NMPSIA Customer Service & Claims Matters

New Mexico Public Schools Insurance Authority

https://nmpsia.com/contactUs.html

Email Claims Matters with Release of Health Information Form

https://nmpsia.com/pdfs/Release of Health Information 1.12.2021.pdf

Benefits Division

Phone: 505.988.2736

Toll Free: 1.800.548.3724

Fax: 505.983.8670



26