BENEFIT BASICS Guidance for Benefits Administration

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Benefits fundamentals.
Clear roles. Confident administration.

Guide for Employer Benefits Representatives

1 Learn

Know the roles and where you fit.

2 Apply

Use the rules and feel confident applying them.

3 Support

Help employees understand and take action.

Today's Roadmap

What you should be able to do after this session

Know the Team

Understand the roles of NMPSIA, the third-party administrator, and the employer.

Know Eligibility

Recognize basic enrollment, eligibility, and dependent requirements.

Know the Timing

Understand enrollment deadlines and Qualifying Event responsibilities.

Know the Tools

Use NMPSIA resources, training, guides, and support contacts.

The goal: Deliver consistent, accurate benefit administration — reducing surprises for employees.

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Who Does What?

Three roles working together

NMPSIA

Provides the group benefit program and purchasing structure for participating public schools, charter schools, and post-secondary educational entities.

Third-Party Administrator

Provides administrative services on behalf of NMPSIA, including eligibility support, enrollment administration, premium collection, recordkeeping, and customer service.

Employer

Determines employee eligibility under applicable rules and local policy, supports employees, verifies information, and completes required employer actions.

Different responsibilities. One shared goal: accurate benefits administration.

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Your Role: Employer Benefits Representative

You are the connection point between employees and the benefits process

- Understand the benefit programs offered by your entity.
- Help employees understand enrollment steps, deadlines, and required documentation.
- Verify employee information and employer certifications before submission.
- Know when to contact NMPSIA or the third-party administrator for assistance.
- Keep local procedures consistent and document actions taken.

Helpful Tip

You do not have to memorize everything. Know where to find the rule, form, guide, or contact you need.

Best Practice

When in doubt… ask before the deadline, not after it.

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Eligibility Basics

Start here before beginning an enrollment

1 Participating Employer

The employer must participate in NMPSIA and determine the employee is eligible for benefits.

2 Active at Work

The employee must be active at work when coverage is scheduled to begin.

3 Required Hours

The employee must meet the minimum qualifying hours established by the employer and NMPSIA requirements.

Employees must work 15+ hours/week to be eligible for Basic Life;
20+ hours/week for other lines of coverage.
(unless Part-time resolution is in place)

Always apply the current NMPSIA rules and your entity's approved eligibility provisions.

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Basic Life: The Starting Point

Automatic Enrollment

Enroll eligible employees in the Basic Life amount offered by the employer.

Effective Date

Basic Life is effective the first day of the month following date of hire.

Employer Amount

The employer determines the Basic Life amount offered to its eligible employees.

Remember

When an employee moves between participating employers, enroll the employee in the Basic Life benefit offered by the new employer and advise employee to enroll in other lines of benefits timely.

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New Hire Enrollment Window

Timing matters

31 DAYS

Employee has 31 days from date of hire to apply for benefits offered by the employer.

Employee

Complete enrollment and provide required information.

Employer

Verify eligibility, dates, and employer-required information.

Submit Timely

Process all complete transaction before the deadline.

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Enrollment Requirements

Get the identifying information right

Employee & Dependents

A Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) is required for enrollment in the NMPSIA group plan.

International Dependents

Temporary identification number may be assigned if an SSN or ITIN has not been received by the time coverage is scheduled to start.

Helpful Tip

Match names, dates of birth, and identification numbers to the supporting documents before submitting.

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Eligible Dependents

Who may be eligible for coverage?

Legal Spouse

Marriage documentation is required.

Domestic Partner

Only when the employer has elected to offer this option; affidavit is required.

Child Under Age 26

Includes natural, step, domestic partner children, adopted, and guardianship relationships.

Foster Child

Placement and licensing requirements apply.

Other Special Situations

Medical child support orders and certain incapacitated dependent rules may apply.

Eligibility depends on the relationship to the NMPSIA employee and required supporting documentation.

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Dependent Documentation

Think: relationship + proof

Spouse

Official marriage certificate.

Natural / Stepchild

Official birth certificate or acceptable birth registration.

Adoption / Placement

Placement documentation from a licensed agency, government agency, or court.

Legal Guardianship

Court order or decree establishing guardianship.

Foster Child

Placement order and foster home license.

Medical Child Support

Qualified medical child support order.

Do not rely on informal or incomplete documentation when formal proof is required.

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Common Ineligible Dependent Examples

Know when to stop and verify

- Ex-spouses after divorce.
- Common-law relationships not recognized as valid under applicable law.
- Children in an employee's care without required legal guardianship documentation.
- Parents, aunts, uncles, siblings, or others not defined as eligible dependents.
- Domestic partners when the employer has not elected that option.

Why It Matters

Covering an ineligible dependent can create premium, claim, and compliance issues.

Best Practice

Verify eligibility before approving or forwarding the transaction.

Enrollment Deadlines at a Glance

Use the right timeframe for the right transaction

New Hire

Apply within 31 days of date of hire / first day of work.

Qualifying Event

The qualifying event must be reported within 31 days of the event.

Open / Switch

Annual fall opportunity for eligible medical, dental and/or vision enrollment or switching, effective January 1 of the following year.

Important

Missed deadlines may limit when an employee can make a change.

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LTD & Optional Life

Different rules apply

LTD

Employees may apply for Long Term Disability throughout the year; coverage is not guaranteed. Evidence of Insurability (EOI) is required.

Additional Life

Employees may apply throughout the year; coverage is not guaranteed. Evidence of Insurability (EOI) is required to add or increase coverage.

Spouse Life

Evidence of Insurability may be required; approved coverage becomes effective according to carrier approval rules.

Use the current LTD/Life guidance and carrier materials for detailed processing instructions.

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QUALIFYING EVENTS

Life changes.
Benefits may need to change too.

Know the event • Know the deadline • Get the documentation

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Qualifying Event Examples

Examples of NMPSIA recognized QEs

Birth

A child is born.

Marriage / Partnership

Marriage or qualifying domestic partnership.

Adoption / Placement

Adoption or placement in anticipation of adoption.

Divorce / Termination

Divorce, annulment, or termination of domestic partnership.

Loss of Coverage

Exhaustion of Medicaid, COBRA or other qualifying status changes.

Other Events

Death, legal guardianship, certain job classification changes, or qualifying incapacitation.

A Life Event Happened — Now What?

Prompt reporting matters

1 Report

Employee reports the qualifying event within the applicable timeframe (31 days).

2 Complete

Complete the required change request / transaction on MyBenefits Portal.

3 Document

Provide the required supporting documentation.

4 Review

Employer verifies the event, date, request, and documentation. Approve in MyBenefits portal for submission to EASI Edu for processing.

Important: A life event does not automatically update benefits.

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Qualifying Event Documentation

The proof should support the event and the date

Examples

- Marriage certificate
- Birth certificate
- Adoption / placement documents
- Divorce decree
- Loss-of-coverage letter
- Other event-specific documents

For Loss of Coverage, think:

WHERE • WHO • WHAT • WHEN • WHY

Helpful Tip

A document showing only an end date may not explain enough to support the request. Make sure the documentation explains why coverage ended when that information is required.

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Why Deadlines Matter

Late reporting can create real consequences

- Delayed effective dates.
- Delay or denial of requested benefit coverage.
- Waiting until the next available enrollment opportunity.
- Evidence of Insurability requirements for certain optional coverages.
- Premiums may not be refundable.
- COBRA or continuation rights may be affected.
- Ineligible claim overpayments may be subject to recovery.

Best Practice

Date-stamp requests when received and act on incomplete documentation quickly.

Remember

Do not assume a late request can be made retroactive.

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GENERAL RULES

A few rules prevent a lot of cleanup.

Vision • Double coverage • Fraud

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2-Year Vision Rule

A specific commitment applies to vision coverage

2 YEARS

Vision coverage cannot be dropped until the employee and each enrolled dependent have been enrolled for two years.

Helpful Tip

Before processing a vision cancellation, confirm the enrollment duration for everyone covered under vision.

Double Coverage Rule

Avoid duplicate NMPSIA coverage

The Rule

NMPSIA group plans do not permit double coverage for the same lines of coverage.

Example

If an employee, spouse, or child also works for a participating employer, they cannot cover one another for the same line of NMPSIA coverage.

Check for NMPSIA-to-NMPSIA coverage before approving dependent enrollment.

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Accuracy & Insurance Fraud

Benefit records must be truthful and supported

Employee Responsibility

Information and supporting documents must be accurate, complete, and truthful.

Employer Responsibility

Verify required information and follow established procedures when information appears incomplete or inconsistent.

Important

False or fraudulent statements can result in loss of coverage, denial of benefits and other financial consequences.

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Common Administration Errors

Small misses can become big problems

Missing Deadline

Request received or submitted after the applicable enrollment window.

Incomplete Proof

Documentation does not verify the relationship, event, date, or reason.

Wrong Effective Date

Dates do not align with the event or enrollment rules.

Ineligible Dependent

Relationship does not meet eligibility requirements.

Duplicate Coverage

Employee/dependent already has coverage for the same NMPSIA line elsewhere.

Incomplete Review

Employer certification or required fields were not fully verified.

A Simple Review Workflow

Use the same checks every time

1 Eligibility

Is the employee/dependent eligible?

2 Timing

Is the request within the applicable window?

3 Documentation

Does the proof support the request?

4 Dates

Do event and effective dates make sense?

5 Submit

Is everything complete and ready?

Consistent review = fewer corrections, fewer delays, better employee service.

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Knowledge Check

Talk it through

Question 1

Who determines whether an employee meets the employer's eligibility requirements?

Question 2

How long does a new employee have to apply for benefits?

Question 3

Can two NMPSIA-covered employees cover one another for the same line of coverage?

Question 4

What should appropriate supportive documentation include?

Question 5

What should you do when you are unsure about a deadline or rule?

Your NMPSIA Toolbox

You do not have to do this from memory

Program Guide

Benefit offerings, enrollment guidance, rates, and participating employer information.

Trainings & Tutorials

Use current NMPSIA training materials and step-by-step tutorials.

Employer Policies

Know your entity's local eligibility and administrative procedures.

Benefits Carriers

Use carrier contacts for plan-specific questions.

FAQs & Glossary

Great for quick definitions and common questions.

Ask for Help

Contact NMPSIA / the administrator when a situation needs review.

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New to Benefits? Start Here

A practical first-week checklist

- Learn the basic roles: NMPSIA, administrator, employer, carriers.
- Review your entity's benefit eligibility and local policies.
- Bookmark the current NMPSIA Program Guide and training resources.
- Learn the common enrollment deadlines and documentation requirements.
- Identify your primary NMPSIA / administrator contacts.
- Practice reviewing a new hire, dependent add, and qualifying event transactions.

You Don't Need to Know Everything

You need a reliable process and the right resources.

When Something Looks Off

Stop, verify, and ask before processing.

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Back to Basics: Key Takeaways

Know Your Role

Support employees and verify employer responsibilities.

Know Eligibility

Confirm eligibility before processing enrollment.

Know the Deadline

Enrollment windows matter.

Know the Proof

Supportive documentation should support the request.

Know Where to Ask

Use current NMPSIA resources when you need help.

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YOU'VE GOT THE BASICS.

Now use them consistently.

Eligibility • Timing • Documentation • Review • Resources

Questions?

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