

NMPSIA Open/Switch Enrollment October 1st through November 15, 2019 Changes are Effective January 1, 2020

Contact your Benefits Office if you are interested in open or switch enrollment.

Open Enrollment allows employees the opportunity to add medical, dental and vision and/or add eligible dependents to these benefits. *(Variable hour employees are only allowed medical coverage. If you are a variable hour employee, such as a substitute teacher, check with your benefits to determine if you are eligible to apply to enroll to medical coverage.)*

If enrolling eligible dependents, supportive documentation to prove dependency to the employee will be required to be provided prior to January 1, 2020 for coverage to go into effect on January 1, 2020.

If the supportive documentation is not turned in prior to January 1, the effective date of coverage for these dependents will be delayed as follows; effective the first of the month following the day the employee turns in (to the benefits office) the required documentation within 61 days from January 1, 2020.

Switch Enrollment allows employees currently enrolled in medical and/or dental coverage, to switch plan options or switch medical carriers. *(Variable hour employees are only allowed to switch their medical coverage)*

Employees who are currently enrolled in NMPSIA medical coverage can switch medical plan options *(high option, low option, EPO option)* or medical carriers *(Presbyterian or BCBSNM)*.

Employees who are currently enrolled in NMPSIA dental coverage, can switch dental plans *(high option to low option or low option to high option)*

Open/Switch Enrollment can be processed by the employee via paper *Change Card* or the Online System *(if the school district/charter school/educational entity currently allows online enrollment)*.

Please access the side-by-side **07/2019 Medical Benefit Comparison** at the following link (<https://nmpsia.com/PDFs/07.01.2019%20Benefit%20Summary%20Comparison.pdf>) to see the medical plans offered by Presbyterian and BCBSNM.

The Blue Preferred **EPO Plan** is **only** available under BCBSNM. You must use **Blue Preferred EPO providers** to receive benefits (except in a medical emergency). This is a **narrow network** with providers who have agreed to contract with this plan and committed to managing patients closely. Providers also are contracted with lower reimbursement fees. The mission is to improve population health and keep down claim costs. **No out-of-network care (except for emergency) is available under this plan and there are certain regions of the state where there is a limited amount (or no contracted) providers.** If you are considering this plan, please view contracted providers at the following link and select Blue Preferred EPO

Network: (<https://www.bcbsnm.com/nmpsia/doctors-and-hospitals.html>).

Each medical plan has unique wellness and health management benefits. This is another area an employee should take into consideration when making a medical plan selection.

Please contact your benefits office if you have any questions, or you can call NMPSIA at 1.800.548.3724 and ask for the Benefits Department.