



New Mexico Public Schools Insurance Authority

Created 1986 - Statutes 22-29-2 and 22-29-4

2026 Administration Training
Mastering Employee Benefits Administration

Today's Objectives

- ❖ Important Employer Responsibilities
- ❖ Successful Employee Benefits Enrollment
- ❖ Instructions for Effective Monthly Bill Reconciliation and Payment
- ❖ Reminder of Annual Benefits Administration Events
- ❖ Appendices

NMPSIA Role

- Serve the Participating Employers
 - Support Employers, Employees, and Students
- Manage the Benefits and Risk Programs
 - Procure Benefits and Risk Program Services and Administrators
 - Set Rules, Administrative Practices, and Procedures
 - Manage Program Benefits/Coverages and Rate Projections
 - Monitor Trends and Propose Adjustments to Maintain Fiduciary Responsibilities
- Support in Navigating Claims Issues
 - Complete Release of Health Information Form
 - <https://nmpsia.com/auth-release-health-info.html>

EASI Role

- Employee Benefits Administration
 - Enrollment
 - Eligibility
 - Premium Billing
 - Premium Collection
- **Enforce NMPSIA Rules of Enrollment and Administrative Practices**

Employer Role

- Know the Rules of Enrollment
 - [6.50.1-18 NMAC](#)
 - Annual [Program Guide](#) (Pages 8-17)
- Visit & Utilize [NMPSIA.COM](https://nmipsia.com)
 - Use NMPSIA Online Benefits System via Employer Login
 - Review [Employers Tab](#) Available Tutorials & Trainings
 - Basic Knowledge of all Benefit Plans and Plan Designs
 - [Side-by-Side Medical Plan Comparison Chart](#)
 - Annual [Program Guide](#)
- Provide “Complete” and “Timely” Enrollment Data
- Reconcile Monthly Billing Statement
- Pay on Time and Pay as Billed

Employer Role

- Support your employees
 - Be accessible to your employees
 - Share your knowledge and resources
- Know where to locate employee/employer resources on [NMPSIA.COM](https://nmipsia.com)
- Tap into your resources:
 - EASI Account Representative
 - NMPSIA Benefits Team
 - Reach out to other participating employers
 - Share best practices

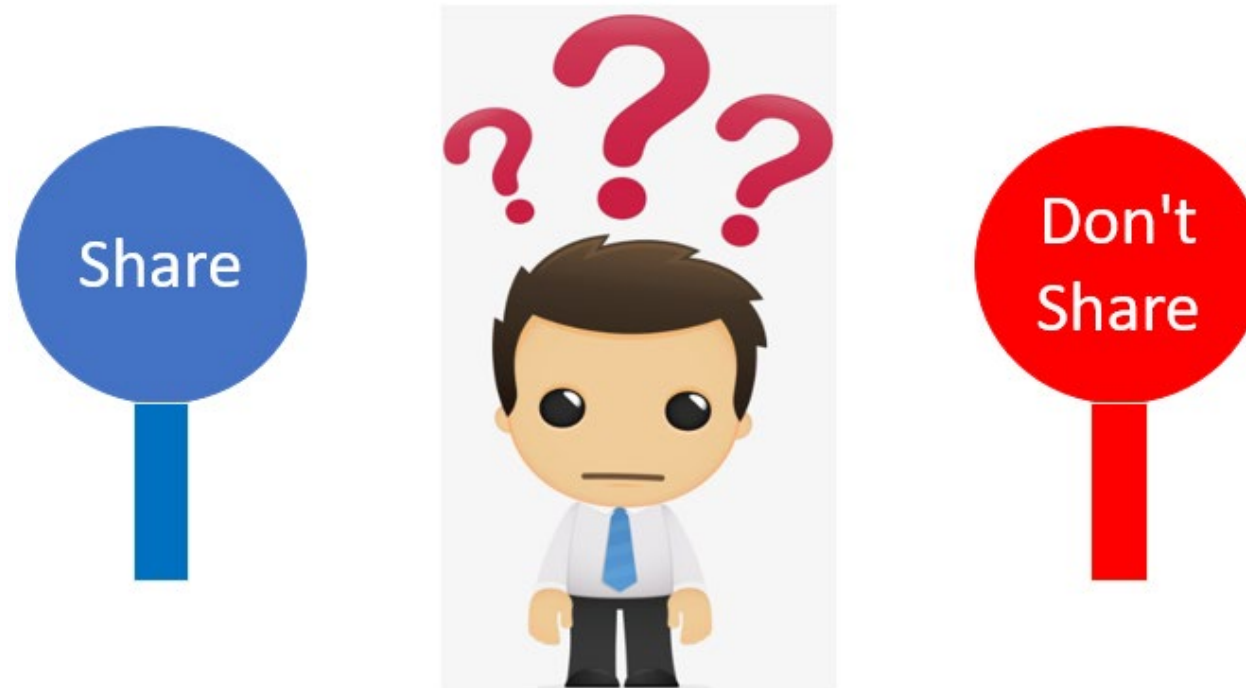
Understanding the NMPSIA Employee Benefits Program



HIPAA Privacy & Security

NMPSIA Benefits Information - Share or Don't Share?

Personal Health Information (PHI) or Personal Identifiable Information (PII)



Enrollment Process

Employer Responsibility*

Regular vs. Variable Hour Employee

As the employer you are responsible for identifying regular employees vs. variable hour employees

If the employer has determined a long-term substitute or permanent substitute job title meets the employer's definition of a *benefits eligible employee* the job title reported on enrollment and/or claim forms should not include the job title as "substitute".

Variable Hour Employee

An employee is a **variable hour employee** if he/she is not on contract and one or more of the following apply:

- Job classification is substitute teacher or substitute employee
- Non-contracted employee (a sub voucher or timesheet is used)
- Hired to serve in a non-benefit eligible position
- No guaranteed set work hours; fluctuating hours
- No fixed working pattern
- Work is limited to a certain period of time
- Work is seasonal or temporary
- On call, as needed
- As the employer, you determine which of your employees meet the variable hour definition and *when they become eligible* to be offered **medical** coverage **ONLY, and NO Basic Life.**
- You need to ensure you identify these variable hour employees properly when setting them up in the Online Enrollment system or when completing the employer section of the enrollment forms. This includes the "date eligible for benefits" section.

*** Employer contractors are not allowed to request or process benefits enrollment.**

Enrollment Process

Employer Steps to Follow



BENEFITS SPECIALIST

A new hire, great!

- What is their date of hire?
- How many hours will they work per week?
- Are they benefits eligible?
- What is their base annual earnings?

New hire will be working 15+ hrs/wk; Enroll in Basic Life IMMEDIATELY!



New hire will be working 20+ hours/week*; I need to meet with them to enroll in NMPSIA benefits. The clock is ticking!

Are they coming from another NMPSIA participating employer?

Are they a return-to-work retiree?

**Employer may have passed a part-time employee resolution, approved by the NMPSIA Board, that allows employees to enroll in other lines of coverage if working fewer than 20 hours/week but at least 15 hours/week.*

Enrollment Process

Employer Responsibility*

Employer*
Enrolls **Benefits Eligible**
Employee for
Basic Life via
Online System**
(Enrollment mandated
by the Life Policy)

Date of Hire
Triggers
Timeline for
Benefits Eligible
Employee to
Enroll in Other
Lines of
Coverage

Employee
Enrolls*** in
Other Lines of
Coverage and
Provides
Supportive
Documentation
Timely

Employer
validates receipt
of enrollment and
Approves/Rejects
*the Online***
*Enrollment*****

* Employer contractors are not allowed to request or process benefits enrollment.

** NMPSIA Online Benefits System

*** NMPSIA Online Enrollment Required.

**** The employer must follow-up timely (within 3-4 business days) to Approve or Reject the transaction.

EASI will notify the employer of pending Online transactions that must be addressed before the next month's billing statement.

Enrollment Process

Employer Steps to Follow

Welcome to the Employee
Benefits Department
Let's get enrolled!

1. You only have **31 days** from date of hire to enroll in benefits.
2. What effective date would you like to start? The soonest date means a double payroll deduction because premiums are collected 1 month in advance; for the next possible effective date, we can run payroll deductions through our normal pay cycles.
3. "Enroll" means you must complete, digitally sign, and submit requested enrollment* and upload required supportive documentation via the NMPSIA Employee Online Benefit System.
 - a. Employee will receive a Confirmation Notice via USPS mail that the enrollment was received along with any supportive documents you provided to complete the enrollment.



* Employee must enroll Online

Enrollment Process

Employer Steps to Follow



Received new hire benefits enrollment paperwork.

Step 1 - Data stamp “Received” on all forms and documents provided by the employee and/or keep all email communications to prove date received by the employer.

Before completing Employer Certification/Attestation:

Step 2 - Check all required fields are complete on the form and review any supportive documents.

Step 3 - Employer Certification/Attestation: Confirm Date of Hire, Base Annual Salary, # of Hours Worked Weekly, Job Title, Benefits Employee Signature and Date.



Step 4 - Submit to EASI by entering the request into the Online System before coverage effective date.

Step 5 - Download the Confirmation Notice to ensure employee is approved by EASI and no further documentation is needed.

Enrollment Process

Employer Steps to Follow



Time to process payroll deductions!

1. Did EASI honor the employee request?
2. Check Online Inquiry or Confirmation Notice.
3. Check “Premium” tab in Inquiry to verify the premium that will be on the next bill.
4. Confirm the requested effective date to collect single month or double month premium.

I will need to pend this enrollment to make sure payroll deductions match the next month’s bill for monthly bill reconciliation.

Enrollment Process

Supportive Documentation

- Supportive documents are required to prove dependency to the employee for all dependent enrollment; proof of birth, marriage certificate, domestic partner affidavit, proof of other insurance coverage for an excluded dependent; SSN or ITIN*
- Supportive documents are required to remove ineligible dependents; divorce decree, termination of domestic partner affidavit
- This documentation must be received **timely** and **prior to the requested effective date**; otherwise enrollment will be delayed or premium refund will not apply



***Process for out of country families (Copy of passport, visa and application for SSN or ITIN required for all dependents)**

Enrollment Process

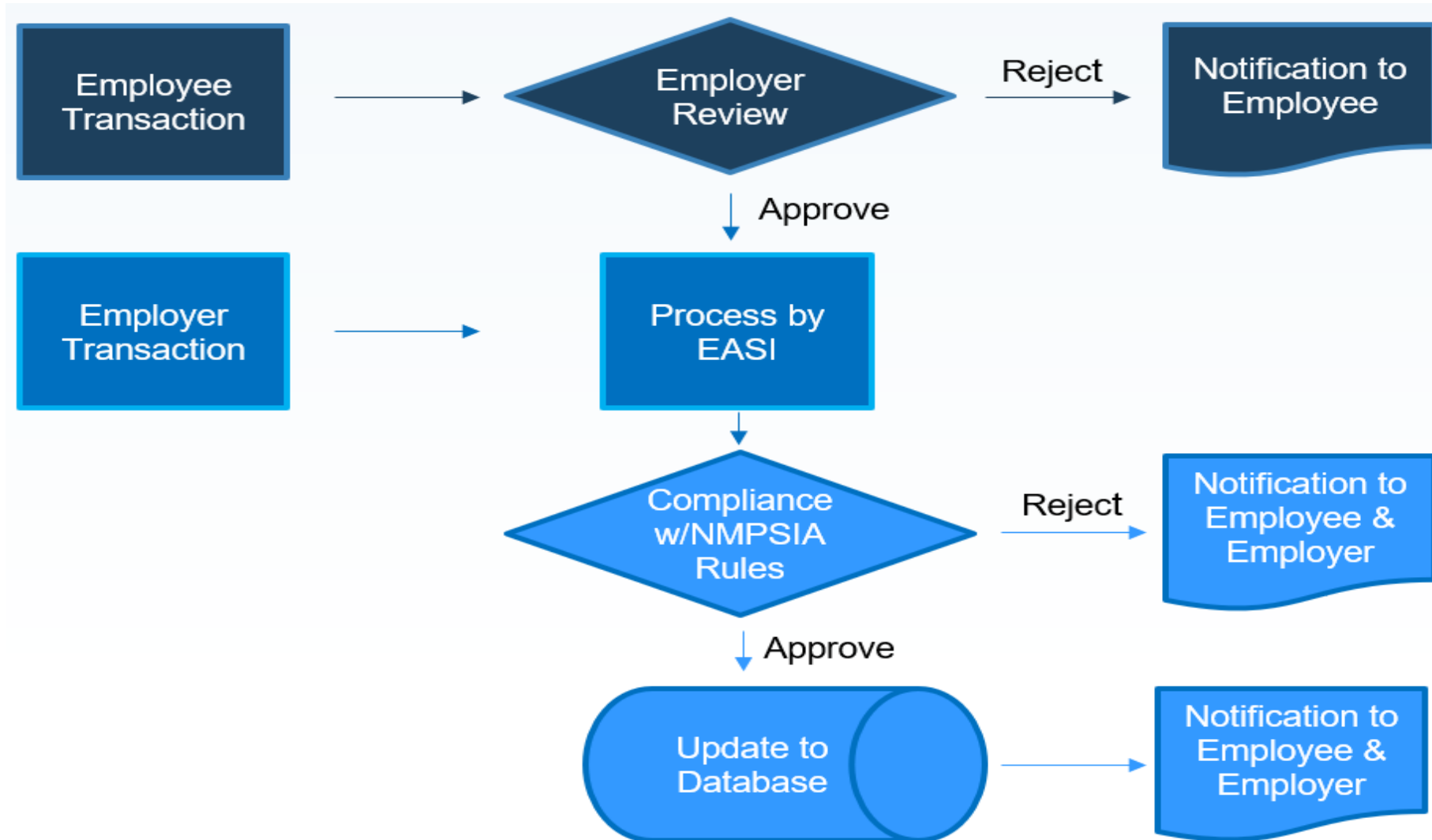
Supportive Documentation

- A new hire is granted **61** days from the day other lines of coverage go into effect to provide the appropriate supportive documentation proving that dependents are eligible for NMPSIA coverage.
- For changes in status an employee is granted **61** days from the qualifying event to provide the appropriate supportive documentation.
- The effective date of coverage for dependents will go into **effect on the first day of the month following the day the employee turns in the appropriate supportive documentation to the employer's benefits office or uploads the documents via the Online Enrollment system (*provided the employee applies timely and meets the 61-day timeline for supportive documentation*)**. **The effective date of coverage for dependents will not be made retroactive to the employee's effective date of coverage.**
 - There are exceptions for newborns and adopted children who are enrolled timely. (Refer to page 13 of the 2025 Program Guide)

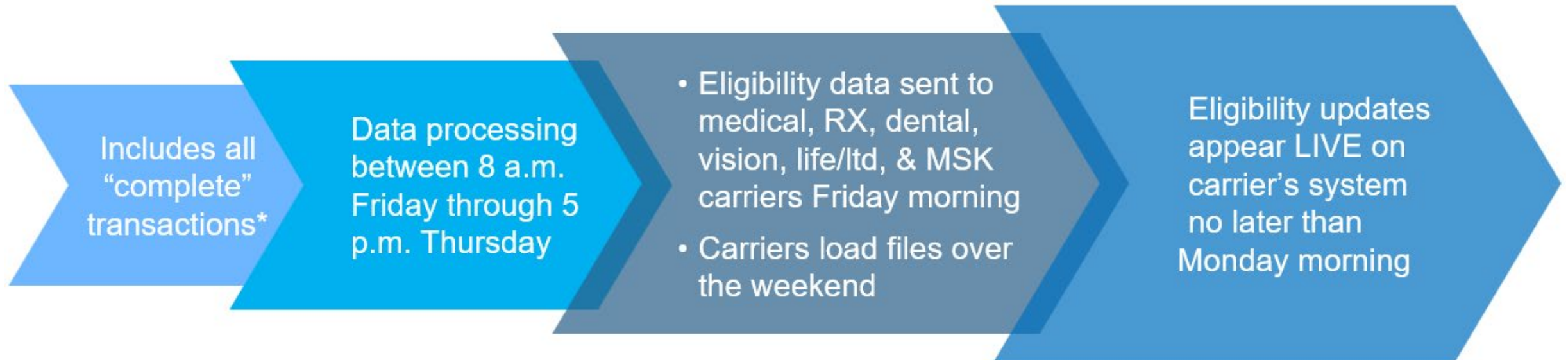
Online Enrollment Employer and Employee



Online Enrollment Employer and Employee Transaction Processing



Weekly Eligibility Reporting



* If complete information or documents are not provided, no eligibility will be sent to the carriers.

Enrollment Process Reminders

Employer Responsibility*

- **Enrollment for Return-to-Work Retirees**

- **The NMRHCA requires retirees who return to work, to cancel NMRHCA medical coverage and enroll in their employer's group medical plan if employed in a benefits eligible position.**

Return to work retirees should contact the NMRHCA for guidance about this NMRHCA Rule and to determine which benefits should be cancelled and added under the NMPSIA Group Plan.

- **Employees Transitioning Benefits from another NMPSIA participating Employer to your Employer**

- **Work with your EASI Representative to coordinate when benefits end at the former employer and when benefits will begin with your employer.**

- **NMPSIA Reporting Requirements**

6.50.10.12 REPORTING REQUIREMENT: Authority insurance providers depend on **timely reporting** of dismissals, resignations, change in status, reports of new employees and eligible dependents and those dropping coverages. **The only source of this information is from the participating entity.** Participating entities shall report this information on or before the 15th day following notification from the employee of the event. In the event they fail to so timely report, the responsible participating entity shall be liable for any losses an eligible employee or dependent may incur as a result of the failure to timely report.

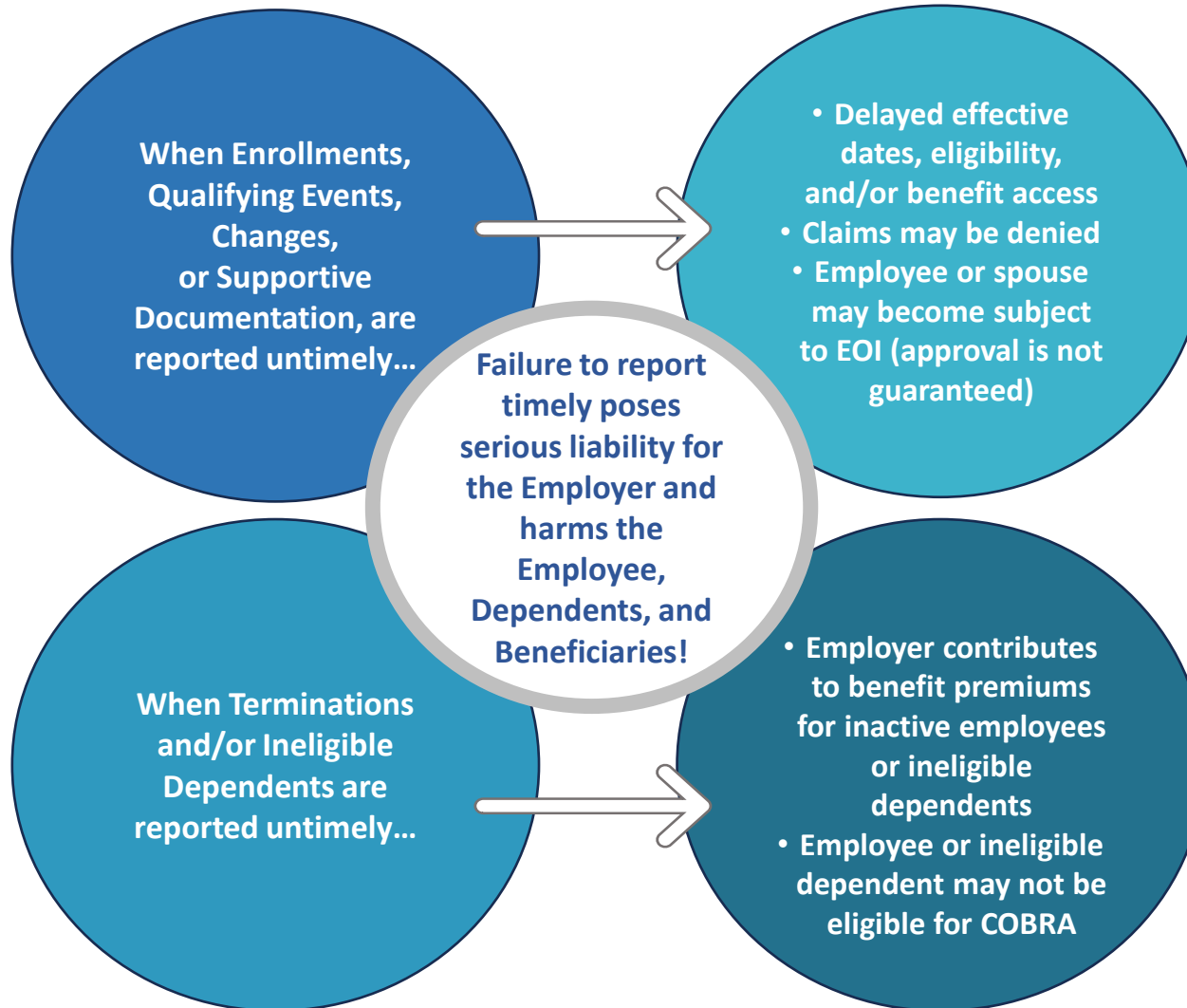
[6.50.10.12 NMAC - N, 09/01/2014]

- If the employee fails to timely report a change in status to their participating employer that results in cancellation of coverage, NMPSIA will collect any claim overpayments incurred directly from the employee (*Example: Late reporting of an ineligible dependent*)
- If the participating employer fails to timely report a change in status that was turned in timely by the employee or fails to report any change, NMPSIA will address any losses with the participating employer
- It is important to **report any discrepancies to EASI immediately** to avoid these consequences and receive guidance through these occurrences

* Employer contractors are not allowed to request or process benefits enrollment.

Enrollment Process

Late Reporting Events and Consequences



- ⌚ Claim overpayments that are not eligible for retraction, may be collected from the Employee when the employee is late in reporting.
- ⌚ The Employer may be liable for losses in cases where the Employer is late in reporting.
- ⌚ Employer and Employee will not be refunded premium for retroactive termination dates for the ineligible employee or dependent.
- ⌚ NMPSIA makes this determination and will handle accordingly.

Late Reporting Events and Consequences (Continued)

Late Report – Basic Life Enrollment

Hypothetical Event:

- Five (5) employees are hired. Contracts are executed December 5, 2025 and first day to report to work is January 5, 2026.
- **Employer** fails to enroll basic life (within the 15-day reporting requirement) then enrolls via paper enrollment on February 27, 2026, retroactively to February 1, 2026. Premiums are paid March 10, 2026.
- These **Employees** die unexpectedly before March 1, 2026.

Employer Consequences

- Employer offers a \$50,000 basic life plan.
- Life claims are denied by the Life carrier for untimely enrollment and receipt of premium.
- **Employer must pay out a total of \$250,000 (\$50,000 x 5) to beneficiaries.**

Late Report – Qualifying Event: Divorce

Hypothetical Event:

- **Joe** enrolled in self & spouse medical, dental, vision, and life. Years pass, the employee divorces in 2023 and does not report the divorce to the **Employer**.
- A year later the **Employer** learns of the divorce and fails to report it to EASI.
- Six months after learning of the divorce the **Employer** receives a copy of a marriage certificate from **Joe** to add a new spouse. The **Employer** contacts EASI for next steps.
- Enrollment and claims are collected by EASI and findings reported to NMPSIA for review.

Consequences

Employer: No premium refund back to April 2023.

Employee: No premium refund back to April 2023 and is responsible to reimburse NMPSIA for \$450,000 of claims incurred by the ex-spouse after the divorce.

Ex-Spouse: Eligibility for ex-spouse is cancelled back to March 31, 2023 and is not eligible for COBRA.

Everyone involved loses.

Late Report – Termination

Hypothetical Event:

- In spring, employees are not rehired for the next school year. Employees' last day is May 31, 2026. **Employer** collects premiums to cover insurance to September 30, 2026.
- **Employer** fails to report the terminations. Employer is paying the monthly Benefits premium invoice as billed.
- The monthly Benefits premium invoice is finally reconciled in March 2027.

Employer Consequences

- No premium refund from November 1, 2026 to March 31, 2027 for not reconciling the bill.
- Eligibility and payment has continued and may be considered a "gift" to a former employee.
- Liable for all claim payments for services received during this time.

Enrollment Process

Leave of Absence Management

Employer Responsibility*

Employer Reports Upon Notification (“Report Leave Of Absence (LOA)” via Online)

- Approved leave effective and end date
- Change in return-to-work date
- Return-to-work date
- Advise employees to file for any applicable Standard benefits if the leave is for the employee’s own health reasons - Long Term Disability (LTD), Accelerated Benefit (AB), Specified Disease Benefit (SDB), Life Waiver Of Premium (LWOP)
- If the employee cancels any line of coverage voluntarily during LOA, they have 31 days from the return-to-work date to add only the lines of coverage that were cancelled

*** Employer contractors are not allowed to request or process benefits enrollment.**

EASI

- Records LOA status and monitors the expected return-to-work date or NMPSIA allowed 12-month enrollment period on the NMPSIA Active Group Plan
- Once the 12-month enrollment period has been exhausted, COBRA will be offered for any medical, dental and vision coverage that will end

Sample Bills and Salary & Hours File

October Sample Bill (*Opportunity to reconcile October Bill*)

- Available September 1st includes:
 - New hire enrollment • New premium rates • All “complete” enrollment processed by 5 p.m. August 30th

January Sample Bill (*Advise employees what to expect in December paychecks*)

- Available November 16th includes:
 - Open and Switch Enrollment • Premium changes for salary updates that affect Long Term Disability (LTD) and Additional Life (ADL) enrollment • Premium changes for age that affect ADL enrollment • All “complete” enrollment processed by 5 p.m. October 30th.

Salary & Hours File (Salary Workbook)

- Available October 1st
- Due back by October 30th
 - Report 2026-2027 salary* • Report hours worked per week • Report personal email address

Do not prorate base annual salary for employees starting late during the year. Report base annual salary for the primary position: no stipends or increments. For employees that work less than full-time or < 1 FTE, report a base annual salary for the position based on the FTE level. **ONLY decreases are reported immediately during the year.*

Monthly Premium Billing



- Data processing through 5 p.m. on the last business day of the month for all “complete” transactions
- Bills are created and made available Online on the 1st day of the month
- Last page of the PDF format provides:
 - Electronic payment information for ACH and Wire Transfer
 - NMPSIA **Benefits** bank account information
 - Accounts Receivable Balances
 - Late and Not Paid as Billed penalty details

Monthly Billing Reconciliation

Employer is responsible to reconcile billing and premiums collected, **each month**.

Due diligence is required for timely reporting and verification of:

1. “Complete” enrollment/change requests
2. Providing supportive documentation
3. Respond to EASI email requests
4. Check Confirmation notices
5. Approve valid and complete Online transactions
6. Confirm accurate premium collection and payment (Reminder: Do not collect benefit premiums from the employee until confirming what Erisa has approved)



Consequences of not reconciling monthly:

- No refund of premiums for late reporting of terminated employees or ineligible dependents
 - Remember employers pay the majority of the premiums
- NMPSIA pays claims for ineligible members which may require collection measures from the employee or employer for claim overpayments
 - These claim overpayments contribute to premium increases the following year

Timely Monthly Bill Payment

Employer is Required to Pay as Billed



- Payment is due and needs to arrive to the NMPSIA bank on the 10th of the month, and Employers can pay as early as the 1st day of the month (highly recommended).
 - Initiating payment when the bill is first available assures timely payment.
 - Paying via Wire Transfer prior to your bank's cut-off time is the preferred method of payment to ensure your payment arrives to the NMPSIA bank timely.
 - ACH payment must be initiated and approved/confirmed before it is sent and may take up to 3-4 days to complete. Weekends and bank holidays may also slow the ACH process.
- Payment is recorded on the date paid and can be confirmed via Online System
- Late Payment and Not Paid As Billed penalties are assessed at 1.5% of the Grand Total Due with a minimum Not Paid as Billed penalty of \$500 (*Penalties apply to overpayments and underpayments; if you pay late you will also be assessed a Not Paid as Billed penalty*).
- NMPSIA may consider approving one penalty waiver within a rolling 12-month period but requires a school administrator (not a billing contractor) to file a written appeal to the NMPSIA Deputy Director.
 - NMPSIA will provide a written response and copy to the school superintendent, governing board, or head school administrator.
 - If you incur a 2nd penalty within the same rolling 12-month period, you will need to file a formal written appeal for a penalty waiver to the NMPSIA Board of Directors and send it to the Deputy Director. The Board will consider this appeal at the next available Board meeting.

Employer Governing Board Member Coverage

Employer Governing Board Member Coverage Offering

Appointments during the year will be Effective January 1st

Actively serving governing board members of the participating employer are eligible to enroll in the NMPSIA benefit plans (except for Basic life and Long-Term Disability coverage) offered at the entity they represent. Board members have 31 days from being sworn in or appointed to office to apply for benefits. The Additional life insurance amount available is equal to the Basic life insurance amount offered to the employees at the entity. **These board members pay 100% of the monthly premium (employer does not contribute premium).**

- Employer Responsibility
 - Offer benefits to eligible employer board members • Report service terms • Offer Open and Switch Enrollment
- Board Member Responsibility
 - Apply for benefits timely by turning in the Board Member Application and any supportive documentation directly to EASI • Pay premium timely to EASI (by check or bank draft) • Report qualifying events directly to EASI • Notify EASI of any contact information changes or changes to enrollment
- EASI Responsibility
 - Enroll actively serving board members • Monitor service term • Premium billing and collection • Offer Open and Switch enrollment • COBRA administration when the term expires

Annual Open and Switch Enrollment

Effective January 1st

(Notify employees in advance, this affects the employee's December payroll deductions)

Occurs on October 1st through October 30th

*(Enrollment window closes October 30th for Sample Bill purposes. After October 30th, enrollments will be honored **ONLY** if the Employer accepts the enrollment and forwards to EASI no later than December 31st)*

Open Enrollment

(Add benefits and/or eligible dependents)

- Medical • Dental • Vision
- *Not intended for adding LTD or to add /increase Additional Life (allowed only via Evidence Of Insurability at anytime during the year. Employees do not need to wait until Open Enrollment to apply for these coverages, increase Additional Life or adding spouse life)*

Switch Enrollment

- Switch medical or dental carriers and/or High or Low Option Plans

Appendix

ACA Reporting



Annual ACA Reporting

All Affordable Care Act (ACA) is the full responsibility of the Employer

- All NMPSIA participating employers MUST submit timely reports to the Internal Revenue Service (IRS) and the respective ACA forms to employees as required annually.

EASI Provides

- Enrollment information to the employer as a tool to assist in compiling information to fulfill the employer reporting responsibilities and requirements of the IRS.
- EASI can only provide information about employees that have enrollment data in the benefits enrollment system. Employers **will** have employees that EASI is not aware of (employees the employer never enrolled or employees that declined all coverage). This is one reason why this **employee data is incomplete**.
- Be advised that regulations cite **compliance with Affordable Care Act reporting requirements as the employer's responsibility**. While enrollment information is being made available to employers, **the employer is ultimately responsible for the accuracy and timeliness of information provided to employees and information submitted to the IRS**.

Annual ACA Reporting

2026 Data File

- Draft Report Tentatively Scheduled Availability December 2, 2026
- Final Report Tentatively Scheduled Availability January 4, 2027
- The file includes identifiers for COBRA and Board Member participants
- Employers encouraged to work with software providers to enhance ACA reporting tools to meet reporting needs
- Employers should review the data carefully
 - Triage any Basic Life only enrollment
 - Add variable hour employees who declined medical
- Review annual IRS instructions for 1094 and 1095 forms
- Hire a consultant with ACA reporting experience to assist you in handling this very important employer responsibility

Appendix

Contractor's Role



Contractor's Role vs Benefits Role

TITLE 6 PRIMARY AND SECONDARY EDUCATION
CHAPTER 50 INSURANCE
PART 1 GENERAL PROVISIONS

6.50.10.12 REPORTING REQUIREMENT: Authority insurance providers depend on timely reporting of dismissals, resignations, change in status, reports of new employees and eligible dependents and those dropping coverages. The only source of this information is from the participating entity. Participating entities shall report this information on or before the 15th day following notification from the employee of the event. In the event they fail to so timely report, the responsible participating entity shall be liable for any losses an eligible employee or dependent may incur as a result of the failure to timely report.

[6.50.10.12 NMAC - N, 09/01/2014]

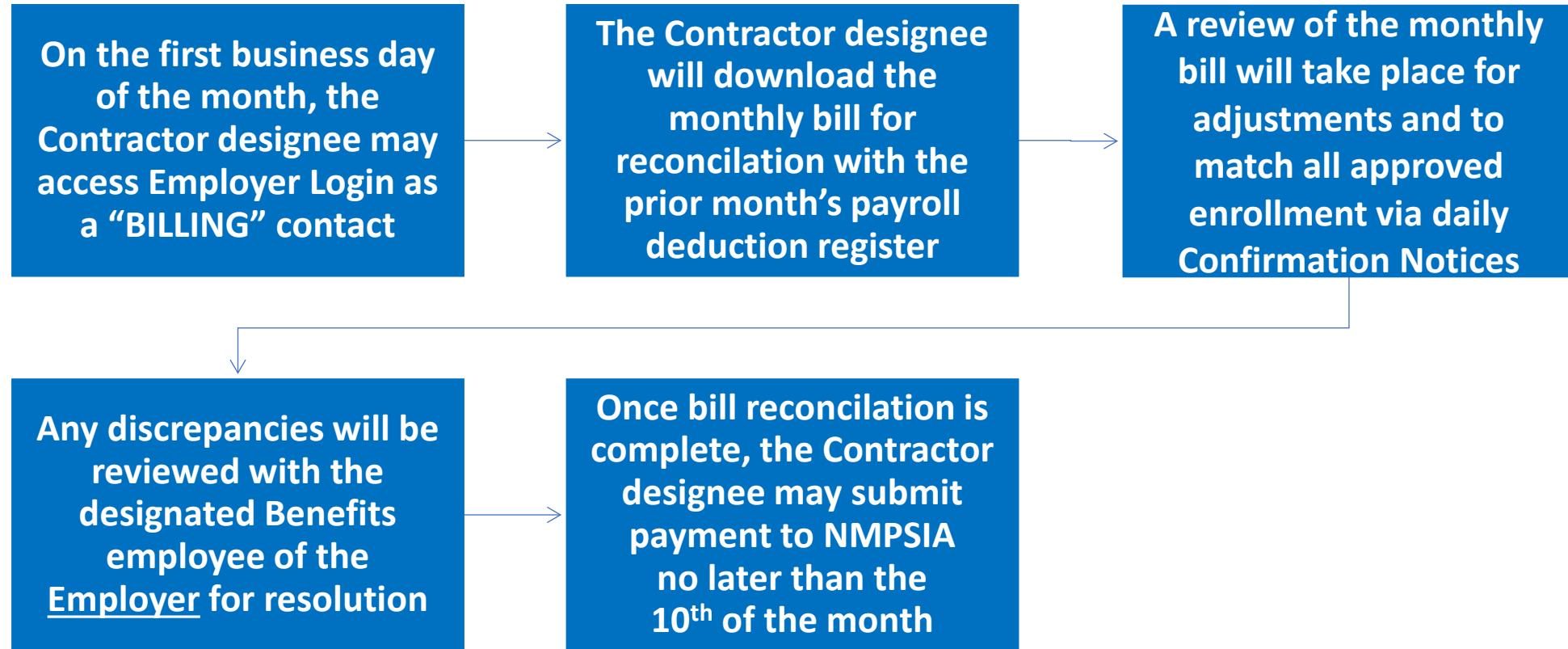
NMPSIA participating entities (school districts, charter schools, and educational entities) may contract with third parties (contractors) to handle HR, Payroll, and Benefits functions.

For NMPSIA Benefits enrollment and reporting, the designated employee of the participating entity Employer (not a contractor designee) is responsible for reporting, certifying and approving enrollment requests and claim forms for employees.

NMPSIA cannot accept any reporting, processing, certifying or approving of Benefits enrollment, changes in status, terminations, retirements, resignations, leaves of absence, etc. from any outside party (including contractor designees) other than the designated Benefits employee of the Employer.

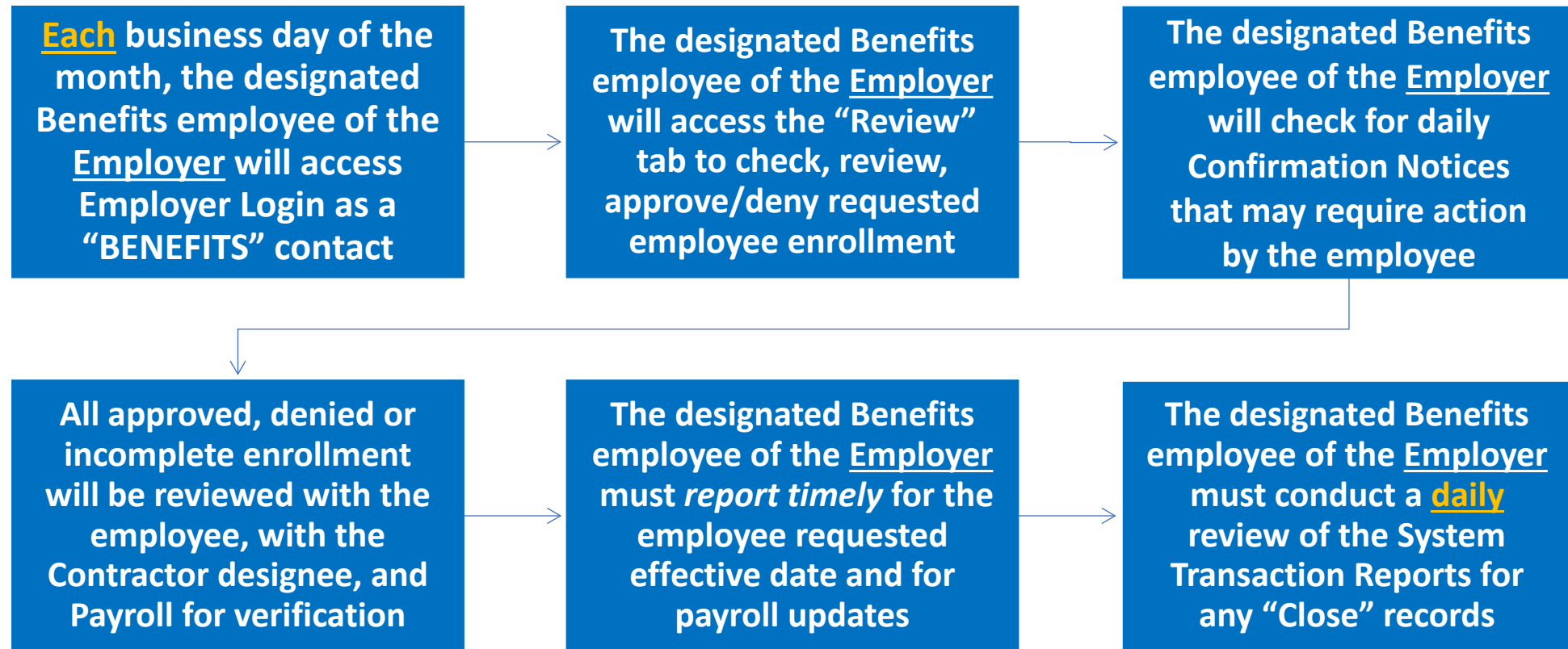
The Contractor Designee Role

NMPSIA Benefits Billing and Payment



The Benefits Employee of the Employer Role

NMPSIA Benefits Enrollment Processing



The Benefits Employee *of the Employer* Role

Benefits Review & Confirmation with Employee, Billing Contractor, and Payroll



Confirm the employee is aware and understands the enrollment that was requested, approved, denied, or is incomplete and what actions need to be taken next, if any, the effective date, and when payroll deductions will take place for the change.

Assure all actions in Benefits including enrollment, changes, cancellations, leaves of absence, approvals, denials, incomplete enrollments, etc. are shared with the Contractor designee and/or Payroll immediately.



Recommendations Regarding Contractor Roles

- NMPSIA allows all Member Employers to utilize a Contractor designee, provided the role is limited to review NMPSIA Benefits for monthly Benefits premium bill reconciliation and payment ONLY.
- We recommend Member Employers confirm that the Contractor designee of the Employer is reported as a “Contractor” job title contact and only has Billing access to reconcile & pay the monthly NMPSIA bill and that a designated Benefits employee of the Employer is responsible to attest, approve, and certify all employee benefits enrollment including required supportive documentation.

Appendix

Continuation of Life Insurance



Continuation of Life Insurance

Employer Responsibility*

Options to Continue Life Insurance

Total Disability

Life Waiver

Approved by The Standard

NMPSIA

Up to 12 months on an approved leave of absence

Conversion

NMRHCA** (with credit)
Disability retirement

Employment Ending

Portability

- Insured for 12+ consecutive months
- Less than age 65
- Not disabled

Conversion

Conversion and Portability send Employer Statement to **cbt@standard.com** or fax 800.331.3397 (Subject line: "NMPSIA 645549 Life Continuation for...")

Retirement

NMPSIA

Retiree Life for retirees less than age 65

NMRHCA** (with credit)

Portability

- Insured for 12+ consecutive months
- Less than age 65
- Not disabled

Conversion

* Employer contractors are not allowed to request or process benefits enrollment.

** NMRHCA coverage is available to employers who participate with NMRHCA

Appendix

Domestic Partners & Imputed Income Tax Schedules



Employer Responsibility to Implement Domestic Partner Coverage



Step 1

- Be prepared to validate that the Employee and Partner meet the required criteria listed on the Affidavit of Domestic Partnership

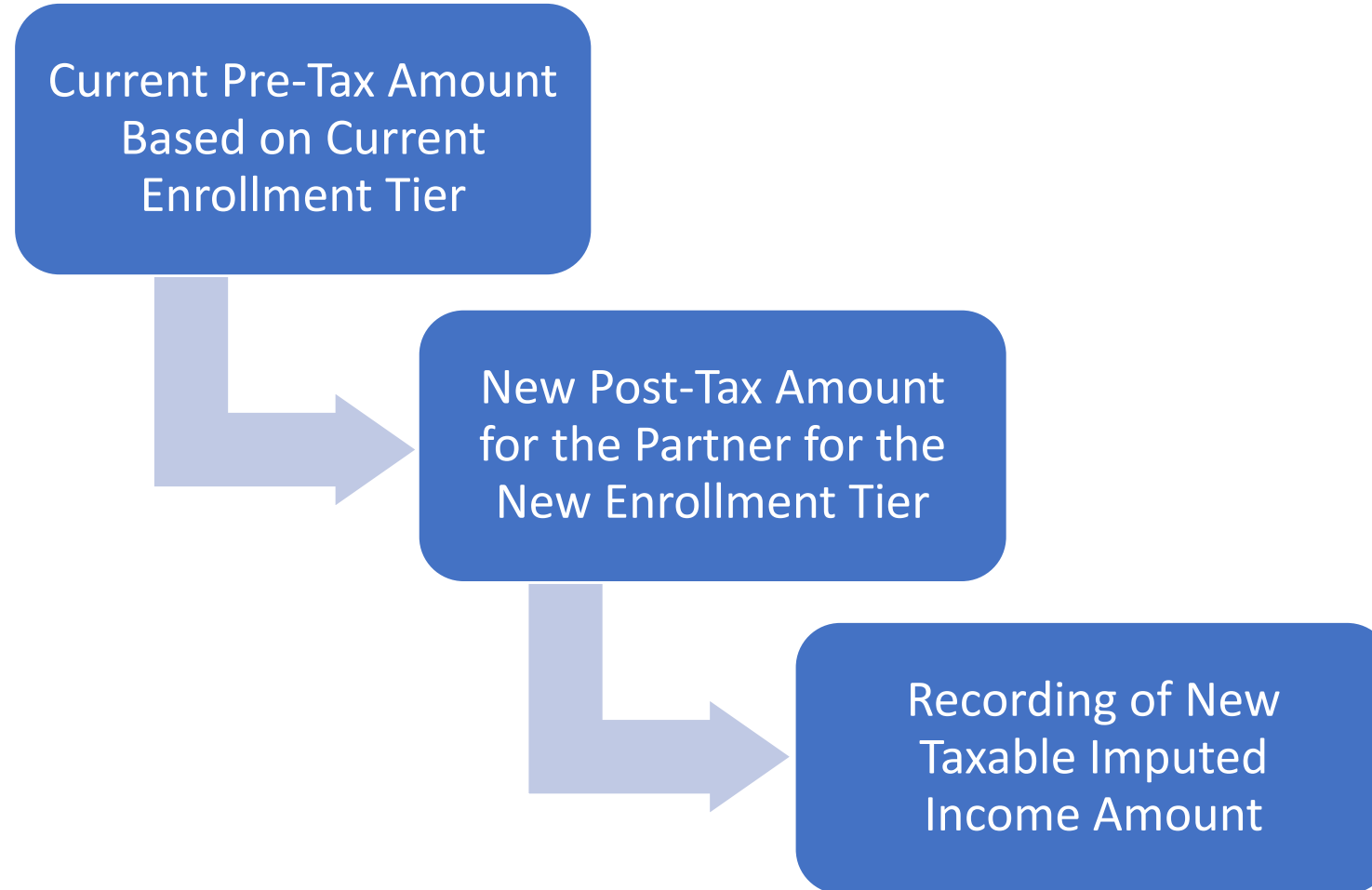
Step 2

- Confirm your payroll system software can accommodate the Imputed Income tax amounts per paycheck and print on the annual W-2 Statement

Step 3

- Review and confirm the correct Imputed Income tax Tables to use based on the Employee's current enrollment status and the status the Employee will be moving to with a Partner and/or Partner's Children

Explain to Employee New Payroll Deductions and Taxable Imputed Income



Employer Must Follow Domestic Partner Imputed Income Tables

Domestic Partner Imputed Income Tables

+ 10/1/2024 & 1/1/2025 3-Tier Standard Contributions Schedule Rates ^

- Domestic Partner Coverage Imputed Income, Effective 10/1/2024 & 1/1/2025
-  Any salary, previously **employee only** coverage (effective 10/1/2024 & 1/1/2025)
-  Any salary, previously **employee plus one** coverage(effective 10/1/2024 & 1/1/2025)
-  Any salary, previously **family coverage** (effective 10/1/2024 & 1/1/2025)

Visit [Premium Rates & Imputed Income Tables](#)

Employer Must Follow Domestic Partner Imputed Income Tables

New Mexico Public Schools Insurance Authority Fair Market Value of Domestic Partner Benefits Effective October 1, 2024 for Employees otherwise electing Single Coverage with Rates Shared 20% Employee/80% Employer													
Domestic Partner Only													
	BCBS High	BCBS Low	BCBS EPO	Pres High	Pres Low	Delta High	Delta Low	UCCI High	UCCI Low	Vision			
a. FMV Domestic Partner	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46			
b. Preliminary Total	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46			
c. Maximum (2-Party Rate)	1,930.26	1,338.34	1,737.20	1,723.48	1,195.00	52.80	26.44	53.40	26.74	59.98	30.04	10.80	
d. Maximum FMV (min of b. and c.)	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46			
e. Employee after-tax contribution (2-Party rate less Single rate)	183.04	126.92	164.76	180.56	125.18	5.02	2.50	5.08	2.54	5.70	2.84	0.88	
f. Imputed Income (d. - e.)	\$ 831.94	\$ 576.78	\$ 748.68	\$ 640.20	\$ 443.96	\$ 22.72	\$ 11.40	\$ 22.98	\$ 11.52	\$ 25.82	\$ 12.94	\$ 5.58	
Domestic Partner + 1 Child													
	BCBS High	BCBS Low	BCBS EPO	Pres High	Pres Low	Delta High	Delta Low	UCCI High	UCCI Low	Vision			
a. FMV Domestic Partner	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46			
b. Preliminary Total	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46			
c. Maximum (2-Party Rate)	1,930.26	1,338.34	1,737.20	1,723.48	1,195.00	52.80	26.44	53.40	26.74	59.98	30.04	10.80	
d. Maximum FMV (min of b. and c.)	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46			
e. Employee after-tax contribution (2-Party rate less Single rate)	183.04	126.92	164.76	180.56	125.18	5.02	2.50	5.08	2.54	5.70	2.84	0.88	
f. Imputed Income (d. - e.)	\$ 831.94	\$ 576.78	\$ 748.68	\$ 640.20	\$ 443.96	\$ 22.72	\$ 11.40	\$ 22.98	\$ 11.52	\$ 25.82	\$ 12.94	\$ 5.58	
Domestic Partner + 2 Children													
	BCBS High	BCBS Low	BCBS EPO	Pres High	Pres Low	Delta High	Delta Low	UCCI High	UCCI Low	Vision			
a. FMV Domestic Partner	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46			
b. Preliminary Total	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46			
c. Maximum (2-Party Rate)	1,930.26	1,338.34	1,737.20	1,723.48	1,195.00	52.80	26.44	53.40	26.74	59.98	30.04	10.80	
d. Maximum FMV (min of b. and c.)	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46			
e. Employee after-tax contribution (2-Party rate less Single rate)	183.04	126.92	164.76	180.56	125.18	5.02	2.50	5.08	2.54	5.70	2.84	0.88	
f. Imputed Income (d. - e.)	\$ 831.94	\$ 576.78	\$ 748.68	\$ 640.20	\$ 443.96	\$ 22.72	\$ 11.40	\$ 22.98	\$ 11.52	\$ 25.82	\$ 12.94	\$ 5.58	

Domestic Partner Only

for Employees otherwise electing Single Coverage

	BCBS High	BCBS Low	BCBS EPO	Pres High	Pres Low	Delta High	Delta Low	UCCI High	UCCI Low	Vision
a. FMV Domestic Partner	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46
b. Preliminary Total	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46
c. Maximum (2-Party Rate)	1,930.26	1,338.34	1,737.20	1,723.48	1,195.00	52.80	26.44	53.40	26.74	59.98
d. Maximum FMV (min of b. and c.)	\$ 1,014.98	\$ 703.70	\$ 913.44	\$ 820.76	\$ 569.14	\$ 27.74	\$ 13.90	\$ 31.52	\$ 15.78	\$ 6.46
e. Employee after-tax contribution (2-Party rate less Single rate)	183.04	126.92	164.76	180.56	125.18	5.02	2.50	5.08	2.54	5.70
f. Imputed Income (d. - e.)	\$ 831.94	\$ 576.78	\$ 748.68	\$ 640.20	\$ 443.96	\$ 22.72	\$ 11.40	\$ 22.98	\$ 11.52	\$ 25.82

Visit [Premium Rates & Imputed Income Tables](#)

Employee Requests Domestic Partner Coverage



Completes a change request and Affidavit of Domestic Partnership that is executed with a Notary Public witness (Submits to Employer Benefits Office for approval)



Provides proof of cohabitation and joint responsibility for financial obligations (Kept by Employer)



If adding Domestic Partner's children, proof of each child's dependency to the Partner is required (Submits to Employer Benefits Office for approval)

When the Domestic Partnership Ends



Employee completes an Affidavit of Termination of Domestic Partnership and executes with a Notary Public witness



Employee submits this document with a completed change request to the Employer for approval **within 31 days of the Termination of Domestic Partnership**



New Mexico Public Schools Insurance Authority
Eligibility Administrative Office: Erisa Administrative Services, Inc. • P. O. Box 9054 • Santa Fe, NM 87504
Phone: (800) 233-3164 or (505) 968-4674 • Fax: (505) 968-8943

[RESET FORM](#)

AFFIDAVIT OF TERMINATION OF DOMESTIC PARTNERSHIP

Return this form to your employer within 31 calendar days from the date the domestic partnership terminated.

I , hereby notify the New Mexico Public Schools Insurance Authority that my former partner, , and I are no longer "domestic partners" as defined in the regulations of the New Mexico Public Schools Insurance Authority (6.50.1.7 NMAC) and I wish to terminate the domestic partnership benefits I now receive through the New Mexico Public Schools Insurance authority effective: .

Fill out this part only if the termination is caused by death or marriage of the domestic partner; otherwise leave this blank and skip to the signature section below.

If the termination is caused by the death or marriage of the domestic partner, please provide the date of the death or marriage (provide proof of marriage): (Month/Day/Year)

I declare, under penalty of perjury, that the above statements are true and correct. (Sign this Notice in the presence of a Notary Public.)

Employee Signature Print Name Date

Mailing Address City State Zip Code

STATE OF NEW MEXICO }
COUNTY OF ss.
(County Name)

SUBSCRIBED AND SWORN to this day of , by (Month/Year)

(Print Employee's Name)

Notary Public Notary Seal:

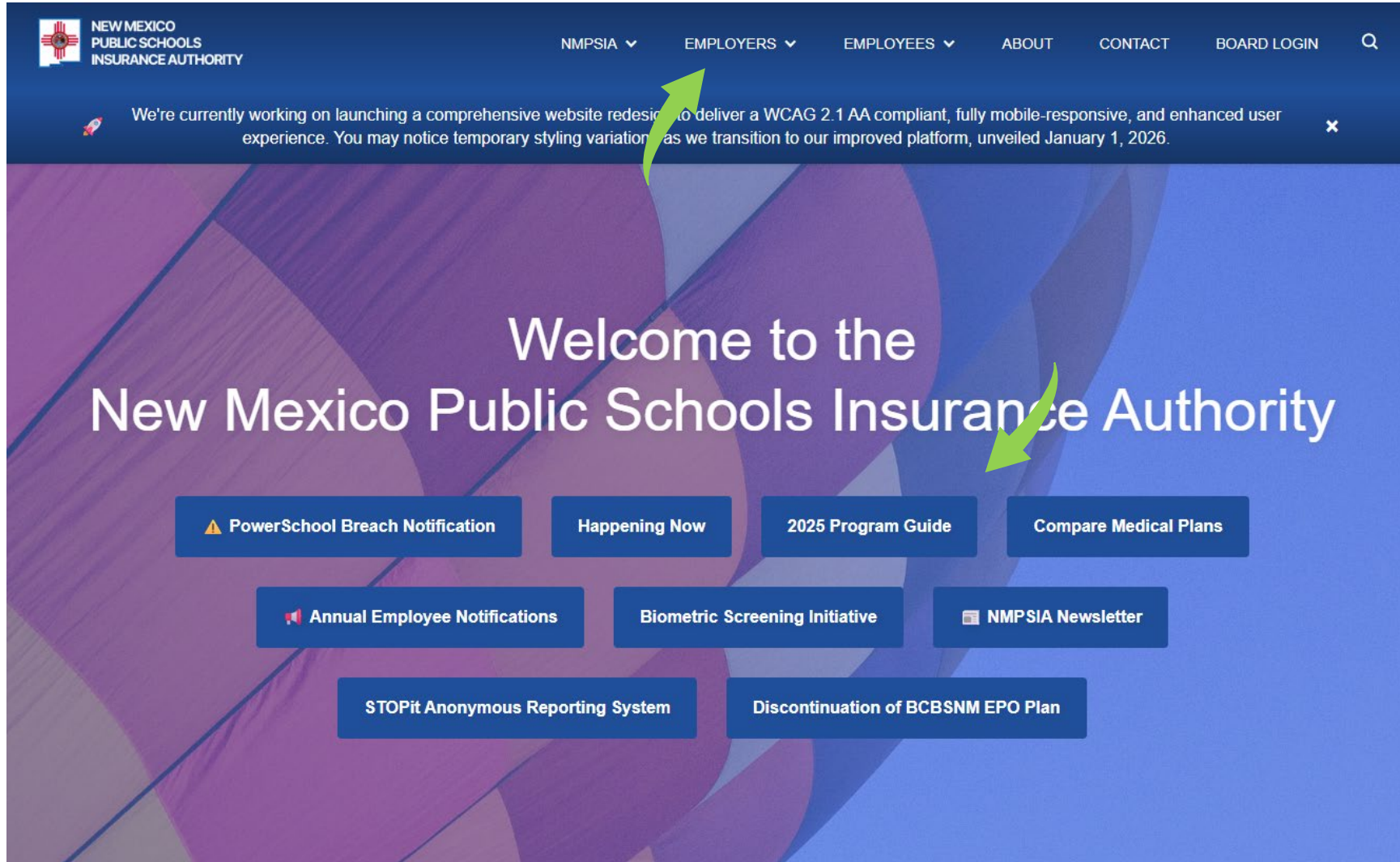
My Commission Expires:

Visit [Important Documents and Forms](#)

Appendix

NMPSIA Resources





The screenshot shows the homepage of the New Mexico Public Schools Insurance Authority (NMPSIA). The header is dark blue with the NMPSIA logo on the left and navigation links (NMPSIA, EMPLOYERS, EMPLOYEES, ABOUT, CONTACT, BOARD LOGIN) on the right. A banner below the header states: "We're currently working on launching a comprehensive website redesign to deliver a WCAG 2.1 AA compliant, fully mobile-responsive, and enhanced user experience. You may notice temporary styling variations as we transition to our improved platform, unveiled January 1, 2026." The main content area has a purple and blue background with the text "Welcome to the New Mexico Public Schools Insurance Authority". Below this, there are seven blue buttons with white text: "PowerSchool Breach Notification", "Happening Now", "2025 Program Guide", "Compare Medical Plans", "Annual Employee Notifications", "Biometric Screening Initiative", and "NMPSIA Newsletter". At the bottom, there are two more buttons: "STOPit Anonymous Reporting System" and "Discontinuation of BCBSNM EPO Plan". Two green arrows are overlaid on the image: one pointing from the banner to the "2025 Program Guide" button, and another pointing from the "Welcome to the New Mexico Public Schools Insurance Authority" text to the "Compare Medical Plans" button.

NEW MEXICO
PUBLIC SCHOOLS
INSURANCE AUTHORITY

NMPSIA ▼ EMPLOYERS ▼ EMPLOYEES ▼ ABOUT CONTACT BOARD LOGIN

We're currently working on launching a comprehensive website redesign to deliver a WCAG 2.1 AA compliant, fully mobile-responsive, and enhanced user experience. You may notice temporary styling variations as we transition to our improved platform, unveiled January 1, 2026.

Welcome to the New Mexico Public Schools Insurance Authority

⚠ PowerSchool Breach Notification

Happening Now

2025 Program Guide

Compare Medical Plans

📢 Annual Employee Notifications

Biometric Screening Initiative

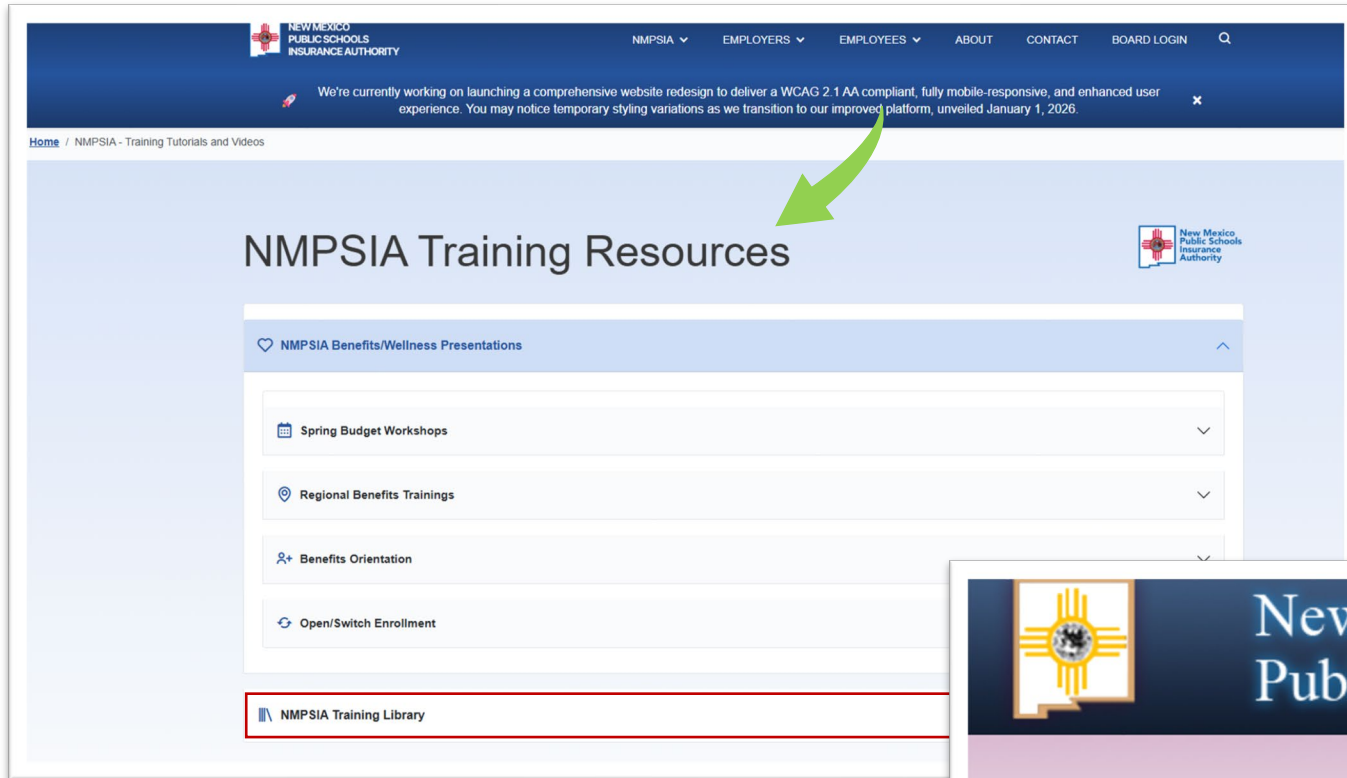
📧 NMPSIA Newsletter

STOPit Anonymous Reporting System

Discontinuation of BCBSNM EPO Plan

[Program Guide](#) & [Medical Plan Side-By-Side Comparison](#)

Employers Tab & User Login



The screenshot shows the NMPSIA Training Resources page. At the top, there is a dark blue header with the NMPSIA logo and navigation links: NMPSIA, EMPLOYERS, EMPLOYEES, ABOUT, CONTACT, and BOARD LOGIN. A notification banner below the header states: "We're currently working on launching a comprehensive website redesign to deliver a WCAG 2.1 AA compliant, fully mobile-responsive, and enhanced user experience. You may notice temporary styling variations as we transition to our improved platform, unveiled January 1, 2026." The main content area is titled "NMPSIA Training Resources" and features a list of resources under the heading "NMPSIA Benefits/Wellness Presentations":

- Spring Budget Workshops
- Regional Benefits Trainings
- Benefits Orientation
- Open/Switch Enrollment

At the bottom of the list, there is a link to the "NMPSIA Training Library". A green arrow points from the "EMPLOYERS" tab in the header to the "NMPSIA Training Resources" title.



The screenshot shows the login page of the New Mexico Public Schools Insurance Authority. The header features the NMPSIA logo and the text "New Mexico Public Schools Insurance Authority". Below the header, there is a "Sign In..." section with three login options:

- Employee Login**
You are an Employee.
- Employer Login**
You are an Employer.
- Manager Login**
You are a Manager.

A green arrow points from the "Employee Login" button to the "Employer Login" button.

Appendix

Benefit Resources Knowing Basic Health Benefits

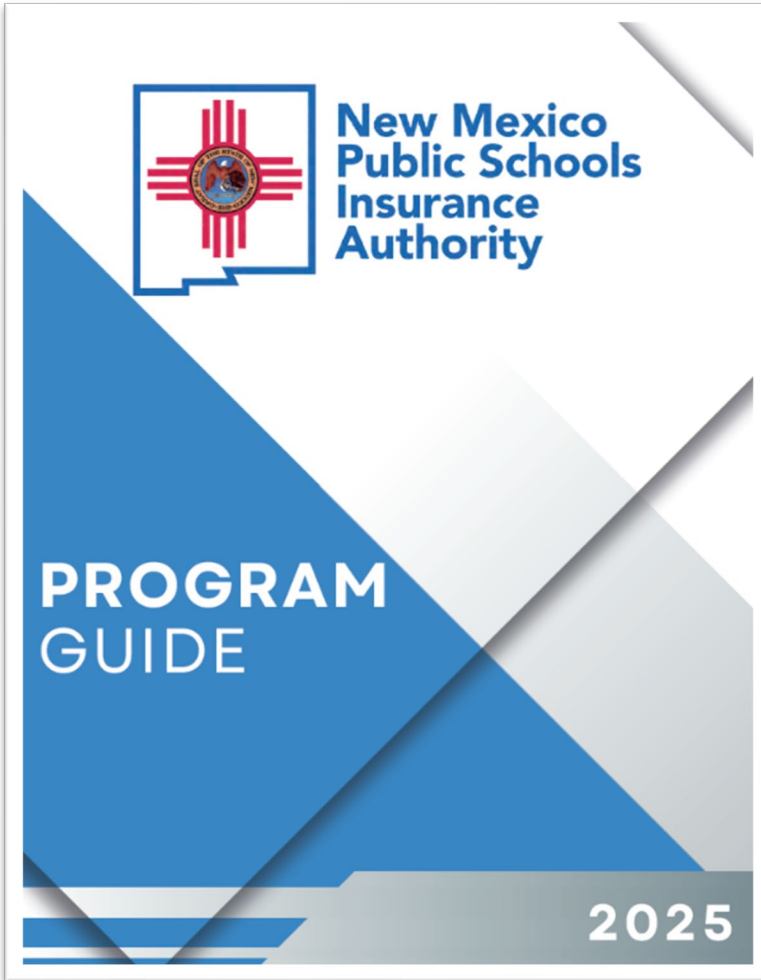


Medical Side-by-Side Comparison Chart

New Mexico Public Schools Insurance Authority Side-by-Side Medical Plan Benefit Comparison Chart				
These are only summaries that list the member cost-sharing amounts and provides a brief description of NMPSIA Health Plan medical benefits. The High and Low Option Plans are available under BlueCross BlueShield of New Mexico (BCBSNM) and Presbyterian Health Plan. <i>The Summary Plan Descriptions supersede any information outlined in this summary.</i>				
NMPSIA Health Plan Benefits There is no overall lifetime maximum benefit. However, certain services have maximum annual limits. <i>(Deductible applies unless specified as "deductible waived")</i>	High Option PPO Benefits Member's Share of Covered Charges		Low Option PPO Benefits Member's Share of Covered Charges	
See below:	In-Network Provider	Out-Of-Network Provider	In-Network Provider	Out-Of-Network Provider
Calendar Year Deductible				
Individual	\$825	\$3,000	\$2,200	\$6,000
Family	\$1,650	\$6,000	\$4,400	\$12,000
Member Coinsurance	25% coinsurance	50% coinsurance	30% coinsurance	60% coinsurance
Annual Out-Of-Pocket Limit <i>(Includes copayments, coinsurance, and deductibles)</i>				
Individual	\$4,500	\$10,000	\$5,500	\$10,000
Family	\$9,000	\$20,000	\$11,000	\$20,000
Office Visit/Exam Charge				
Office and Home Visits/Exams or Consultation	Office Visit Copay <i>(deductible waived)</i>		Office Visit Copay <i>(deductible waived)</i>	
Primary Preferred Provider Office/Home Visit	\$30	50% coinsurance	\$35	60% coinsurance
Specialist/Office/Home Visit	\$55	50% coinsurance	\$70	60% coinsurance
Telehealth <i>(Virtual video visit access) * No charge when utilizing a nationwide network of providers for non-urgent healthcare.</i>	\$0*	Not Covered	\$0*	Not Covered
Urgent Care <i>(Includes all services and supplies, in facility x-rays, labs, physician fees)</i>	\$55 copay <i>(deductible waived)</i>	50% coinsurance	\$70 copay <i>(deductible waived)</i>	60% coinsurance
Emergency Room Treatment	\$550 copay <i>(deductible waived)</i>		\$550 copay	
Physician and other professional provider charges				
Ambulance Service:	\$55 copay <i>(deductible waived)</i>		30% coinsurance	
Ground and Emergency Air Transport				
Ambulance Services: Inter-facility Transport	\$0 <i>(deductible waived)</i>		\$0 <i>(deductible waived)</i>	
Routine/Preventive Services <i>(included but not limited to the following)</i>				
Routine Annual Physicals, Well Member Screenings, and Routine Tests	Plan pays 100% <i>(deductible waived)</i>	50% coinsurance <i>(deductible waived)</i>	Plan pays 100% <i>(deductible waived)</i>	60% coinsurance <i>(deductible waived for routine testing only)</i>
Colonoscopy				
Gynecological Exams and Mammograms Health Education Counseling				
Family Planning <i>(birth control devices and therapies; in office surgical sterilization)</i>				
Immunizations <i>(including travel immunizations)</i>				
Well-Child Care <i>(Routine Vision or Hearing Screenings through age 19)</i>				
Lab, X-Ray, and other Basic Diagnostic Tests				
No charge for Professional Interpretation & Reading - non-routine <i>(Office/Freestanding Lab or Radiology Facility)</i>	Up to \$30 copay, per day <i>(deductible waived)</i>	50% coinsurance	Up to \$35 copay, per day <i>(deductible waived)</i>	60% coinsurance
Lab, X-Ray, and other Basic Diagnostic Tests				
No charge for Professional Interpretation & Reading - non-routine <i>(Outpatient Department of Hospital)</i>	Up to \$60 copay, per day <i>(deductible waived)</i>	50% coinsurance	Up to \$70 copay, per day <i>(deductible waived)</i>	60% coinsurance
High Tech Imaging: MRI, MRA, CT Scan, PET Scan				
No charge for Professional Interpretation & Reading <i>(No charge for breast imaging)</i>	Up to \$600 copay, per day <i>(deductible waived)</i>	50% coinsurance	Up to \$700 copay, per day <i>(deductible waived)</i>	60% coinsurance

Visit <https://nmipsia.com/benefits.html#comparisonChart>

Program Guide Benefits



HIGH OPTION - SUMMARY OF BENEFITS
This is only a summary that lists member cost-sharing amounts and provides a brief description of NMPISA High Option PPO Health Plan benefits. This plan is available under BlueCross BlueShield of New Mexico and Presbyterian Health Plan. The Summary Plan Description governing this information is subject to the authority of the insurer.

NMPISA High Option Health Plan Benefits <i>However, certain services have maximum annual limits. See below.</i>	Member's Share of Covered Charges <i>(Deductible applies unless specified as "deductible waived")</i>	
	In-Network Provider	Out-Of-Network Provider
Calendar Year Deductible		
Individual	\$100	\$1,500
Family	\$100	\$3,000
Annual Out-Of-Pocket Limit (includes copayments, coinsurance, and deductibles)		
Individual	\$4,100	\$8,500
Family	\$8,200	\$15,000
Office Visit/Exam Charge Office and Home Visits/Exams or Consultation (Other services received during the office visits listed below such as therapy are subject to deductible, coinsurance, and/or copayment as stated in the rest of the summary.) Primary Preferred Provider Office/Home Visit Specialist/Office/Home Visit	Office Visit Copay (deductible waived)	
	\$25	40%
	\$50	40%
	\$0*	Not Covered
Telehealth (Virtual video visit access. *When accessing a national network of providers. Cost varies dependent on specific plan details - see your health plan for more information.)	\$0*	Not Covered
Office Surgery (including casts, splints, and dressings)	20%	40%
Allergy Injections (single), Extract Preparation	No Charge (deductible waived)	40%
Therapeutic Injections, Allergy Testing	Office Visit Copay	40%
Preventive Services Routine Adult Physicals and Gynecological Exams, Routine Tests (including Pap Tests, Cholesterol tests, Urinalysis, Human Papillomavirus (HPV) Screening), Colonoscopies (are covered at 100% annually regardless of diagnosis after in-network) Screenings (no charge for breast imaging) Health Education Counseling (including diabetes and smoking cessation counseling) Family Planning (including insertion/removal of birth control devices, surgical sterilization in office, birth control and therapeutic injections) Immunizations (including travel immunizations) Well-Child Care, Routine Vision or Hearing Screenings	No Charge (deductible waived)	40% (deductible waived)
Acupuncture and Massage Therapy (when medically necessary) (Covered rate: benefit of 30 visits/calendar year)	\$50 copay (deductible waived)	40%
Neuropathy and Rolfing (when medically necessary) (Covered rate: benefit of 20 visits/calendar year)		Neuropathy and Rolfing Not Covered
Chiropractic (Spinal Manipulation) (when medically necessary) (Covered rate: benefit of 30 visits/calendar year)	\$25 copay (deductible waived)	40%
Ambulance Service: (Ground and Emergency Air Transport)	\$50 copay (deductible waived)	
Ambulance Services: Inter-facility Transport	\$0 (deductible waived)	
Autism Spectrum Disorder Applied Behavioral Analysis (ABA) (Specialist includes outpatient physical therapy, occupational therapy & speech therapy)	No Charge	40%
Back/neck (For specified medical conditions only)	\$50 copay (deductible waived)	40%
Cardiac and Pulmonary Rehabilitation (Office/Outpatient)	\$50 copay (deductible waived)	40%
Dental: Facial Accident, Oral Surgery & TMJ/CBCT Services	Varies by Services	40%
Emergency Room Treatment Physician and other professional provider charges	\$400 copay (deductible waived)	
Hearing Aids and Related Services (Age 21 & older - Routine exams/fitting not covered) Hearing Aids and Related Services (Under age 21: Even fitting subject to usual cost-sharing)	Hearing Aids: No Charge up to \$200; thereafter you pay 80% coinsurance in any 36-month period. Hearing Aids: No Charge up to \$2,200 per hearing impaired ear; thereafter you pay 80% coinsurance in any 36-month period.	40%
Home Health Care/In-home V.N. Services Limitations	20% Unlimited	120 visits per calendar year
Hospice Services Including respite care (limited to 10 days for each 6-month per hospice period - 7 periods per benefit) Bereavement (counseling limited to 7 sessions during the hospice benefit period)	No Charge (deductible waived)	40%
Infertility: Diagnostic Testing Only - No Treatment	Varies by services	40%
Lab, X-Ray, and other Basic Diagnostic Tests - non-routine (Office/Outpatient Lab or Radiology Facility)	\$50 copay or actual allowable amount, whichever is less per day (deductible waived)	40%
Lab, X-Ray, and other Basic Diagnostic Tests - non-routine (Outpatient Department of Hospital)	\$50 copay or actual allowable amount, whichever is less per day (deductible waived)	40%

New Mexico Public Schools Insurance Authority

MONTHLY CONTRIBUTIONS EFFECTIVE OCTOBER 1, 2024
NEW MEXICO PUBLIC SCHOOLS INSURANCE AUTHORITY

THE STANDARD: BASIC LIFE
ACCIDENTAL DEATH & DISMEMBERMENT
Employer pays 100% of premium

	Person's Age	Rate per \$1,000
\$10,000 Life/AD&D	24 & under	\$0.06
\$25,000 Life/AD&D	25 - 39	\$0.08
\$50,000 Life/AD&D	40 - 44	\$0.10
	45 - 49	\$0.14
	50 - 54	\$0.24
	55 - 59	\$0.38
	60 - 64	\$0.56
	65 - 69	\$0.84
	70 & over	\$1.10
	Child(ren)	\$0.26/mo.

THE STANDARD: ADDITIONAL LIFE (Employee, Spouse, & Children) and AD&D (Employee Only)
Employee pays 100% of premium

THE STANDARD: LONG TERM DISABILITY
Employer contributes premium

	30 Day Wait	60 Day Wait	90 Day Wait
\$0.58 per \$100 payroll	\$0.58 per \$100 payroll	\$0.38 per \$100 payroll	\$0.30 per \$100 payroll

HEALTH COVERAGES
Employer contributes premium (see reverse side)

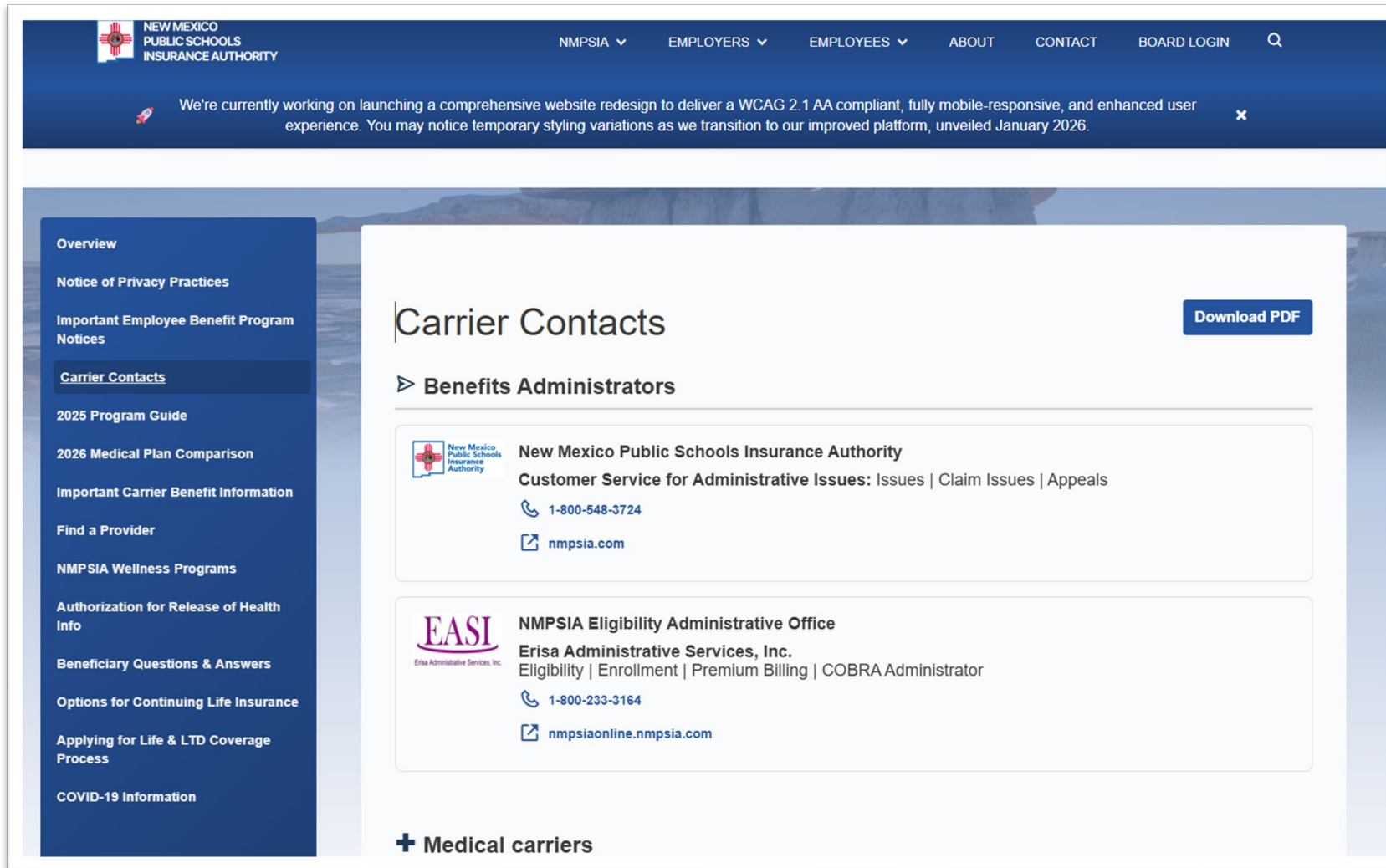
	Single	Two-Party	Family
Blue Cross Blue Shield New Mexico - High Option	\$1,014.98	\$1,930.26	\$2,578.10
Blue Cross Blue Shield New Mexico - Low Option	\$703.70	\$1,338.34	\$1,787.60
Blue Cross Blue Shield New Mexico - Exclusive Provider Organization (EPO) Option* Ends 12/31/2025	\$913.44	\$1,737.20	\$2,320.24
Presbyterian - High Option	\$820.76	\$1,723.48	\$2,298.16
Presbyterian - Low Option	\$569.14	\$1,195.00	\$1,593.42
Blue Cross Blue Shield Dental - High Option (1/1/2025)	\$27.74	\$52.80	\$82.96
Blue Cross Blue Shield Dental - Low Option (1/1/2025)	\$13.90	\$26.44	\$41.48
Delta Dental - High Option	\$28.06	\$53.40	\$83.90
Delta Dental - Low Option	\$14.06	\$26.74	\$41.96
United Concordia Dental - High Option	\$31.52	\$59.98	\$94.24
United Concordia Dental - Low Option	\$15.78	\$30.04	\$47.14
Davis Vision Plan	\$6.46	\$10.80	\$14.56

* EPO Plan - A managed care plan where services are covered only if you go to providers (doctors, specialists, hospitals, etc.) in the plan's network (except in an emergency).

10% increase on High, Low and EPO medical options
5% increase with varying Plan schedule on Basic and Comprehensive Dental
3% increase on Vision

Visit <https://nmpsia.com/benefits.html#programGuide>

NMPSIA Website Benefits Carrier Information Page



The screenshot displays the NMPSIA website's "Carrier Contacts" page. At the top, a dark blue navigation bar contains the NMPSIA logo, the text "NEW MEXICO PUBLIC SCHOOLS INSURANCE AUTHORITY", and links for "NMPSIA", "EMPLOYERS", "EMPLOYEES", "ABOUT", "CONTACT", and "BOARD LOGIN". A search icon is also present. Below the navigation bar, a blue banner with a rocket icon contains a message about a website redesign. The main content area features a left sidebar with a list of links: "Overview", "Notice of Privacy Practices", "Important Employee Benefit Program Notices", "Carrier Contacts" (highlighted), "2025 Program Guide", "2026 Medical Plan Comparison", "Important Carrier Benefit Information", "Find a Provider", "NMPSIA Wellness Programs", "Authorization for Release of Health Info", "Beneficiary Questions & Answers", "Options for Continuing Life Insurance", "Applying for Life & LTD Coverage Process", and "COVID-19 Information". The "Carrier Contacts" section is titled "Carrier Contacts" with a "Download PDF" button. Below the title, a section titled "Benefits Administrators" lists two entities: the New Mexico Public Schools Insurance Authority (with phone 1-800-548-3724 and website nmpsia.com) and the NMPSIA Eligibility Administrative Office (Erisa Administrative Services, Inc., with phone 1-800-233-3164 and website nmpsiaonline.nmpsia.com). At the bottom of the page, a section titled "Medical carriers" is partially visible.

Carrier Contacts [Download PDF](#)

➤ **Benefits Administrators**

 **New Mexico Public Schools Insurance Authority**
Customer Service for Administrative Issues: Issues | Claim Issues | Appeals
☎ 1-800-548-3724
🌐 nmpsia.com

 **NMPSIA Eligibility Administrative Office**
Erisa Administrative Services, Inc.
Eligibility | Enrollment | Premium Billing | COBRA Administrator
☎ 1-800-233-3164
🌐 nmpsiaonline.nmpsia.com

➕ **Medical carriers**

Visit <https://nmpsia.com/benefits.html#assocCarrCons>

Wellness Offerings

Video Visits/Telehealth

Behavioral Health

Dental Health

Diabetes Prevention & Management

Eye Health

Gym Membership

Health Kits/Wellness Newsletters

Hypertension

Weight Management

Become a Wellness Ambassador

Ergonomic Health

Be Your Best Self Tips/Webinars

Maternity/Pregnancy/Parenthood

Wellness Program Offerings by Carrier

NMPSIA - Wellness Programs



The New Mexico Public Schools Insurance Authority (NMPSIA) has a variety of wellness offerings and programs available to you!

Learn more about these programs by selecting any of the topics on the left, or select a category from the grid below to find what you're looking for. Wishing you wellness!

 Video Visits/Telehealth

 Behavioral Health

 Dental Health

 Diabetes Prevention & Management

 Eye Health

 Gym Membership

 Health Kits/Wellness Newsletters

 Hypertension

 Weight Management

 Become a Wellness Ambassador

 Ergonomic Health

 Be Your Best Self Tips/Webinars

 Maternity/Pregnancy/Parenthood

 Wellness Program Offerings by Carrier

Mental Health	 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 resilience-building resources	Learn to Live: Digital programming with lessons, activities and one-to-one support.

Online Platforms	 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.	Well onTarget: Online Member Wellness Portal with several tools and resources to assist you in a personalized health & wellness journey.
	Mobile App:  Virgin Pulse	Mobile App:  Always On

Incentives & Discounts		 PRESBYTERIAN	
	Rewards	NMPSIA Wellness Rewards: Earn up to \$75 in Amazon.com gift cards by participating in wellness activities.	Blue Points: Redeem points in the online Shopping mall with over a million products.
	Gym Memberships	Fitness Pass Membership	Fitness Programs- Unlimited access to tiered national gym network including digital programs.
	Discounts	Presbyterian MemberPerks	Blue 365 Health & Wellness Discounts

Weight Loss	 PRESBYTERIAN	
	Health Coaching through The Solutions Group Health Coaching through Good Measures Noom: App that is a Psychology-based program to help individuals make healthier choices.	Wondr Health Obesity & Metabolic Syndrome Reversal Program

Visit <https://nmpsia.com/wellness.html>

NMPSIA Employee Benefits Administration

Erisa Administrative Services, Inc. (EASI)

P.O. Box 9054

Santa Fe, NM 87504-9054

Santa Fe: (505) 988-4974 • Toll Free: (800) 233-3164

Email: sf@easitpa.com

Kathy Payanes: kpayanes@easitpa.com

Contact EASI for assistance with:

NMPSIA rules of enrollment and administrative practices,
enrollment, eligibility, premium billing, premium collection and
employer & employee online system

NMPSIA

**410 Old Taos Highway
Santa Fe, New Mexico 87501
Phone: 505.988.2736 or 1.800.548.3724
Fax: 505.983.8670
Website: <https://nmpsia.com/>**

Contact Us

Organization	Name	Title	Email
NMPSIA	Patrick Sandoval	Executive Director	Patrick.Sandoval@psia.nm.gov
NMPSIA	Martha Quintana	Deputy Director	Martha.Quintana@psia.nm.gov
NMPSIA	Kaylei Jones	Benefits/Wellness Manager	Kaylei.Jones@psia.nm.gov
NMPSIA	Kaylynn Roybal	Benefits/Wellness Coordinator	Kaylynn.Roybal@psia.nm.gov
NMPSIA	Leslie Martinez	Benefits Analyst	Leslie.Martinez@psia.nm.gov