



New Mexico Health Insurance Exchange

2024 BeWellnm Kickoff Meeting



Welcome to the 2024 BeWellnm Kickoff Meeting!

To get us started, some housekeeping items.



New Mexico Health Insurance Exchange



Today's Agenda

Time	Topic	Presenter
7:30 - 8:05am	Light breakfast	All
8:05 - 8:20am	BeWellnm Welcome and Housekeeping	Tonya Bruno, BeWellnm Director of Outreach
8:20 - 8:35am	New Mexico Office of Superintendent of Insurance (OSI)	Cynthia Cisneros, Public Outreach Coordinator, Life & Health Division
8:35 - 9:00am	Ambetter from Western Sky Community Care, Inc.	Jeff Donegan, Sales Manager
9:00 -9:25am	Presbyterian Health Plan, Inc.	Lenore Foreman, Account Manager
9:25 - 9:50am	United Healthcare, Inc.	Timothy Patterson, Market and Sales Manager
9:50 - 10:15am	Blue Cross Blue Shield of New Mexico	Manuel Gelabert, Sr. Producer Sales Consultant
10:15 - 10:40am	Molina Healthcare	Gene Wedgeworth, Marketplace Sales Manager
10:40 - 10:55am	New Mexico Human Service Department	Jeanelle Romero, Acting Bureau Chief - Communication & Education Bureau
10:55 - 11:10am	New Mexico Medical Insurance Pool	Elizabeth Quirante, Program Manager
11:10 - 11:30am	Questions	All
11:30 - noon	Networking	All



New Mexico Office of Superintendent of Insurance (OSI)

Cynthia Cisneros, Public Outreach Coordinator, Life & Health Division

New Mexico Office of Superintendent of Insurance



Open Enrollment PY24

or,

How the Health Care Affordability Fund
Will Continue to Lower 2024 Costs on beWellnm

Presented by:

Cynthia C Cisneros, Public Outreach Coordinator



Major benefits for New Mexicans in 2024

The Inflation Reduction Act is still in effect and will continue to lower premiums for New Mexicans.

New Mexico's Health Care Affordability Fund will maintain existing cost savings plans and introduce new initiatives to benefit Wellness enrollees.

Clear Cost plans is the latest initiative that will be available for people searching for accessible and affordable health care they can understand.



New Mexico Premium Assistance

Who is eligible?

- Individuals and families up to 400% FPL who qualify for federal premium tax credits on beWellnm

What does it do?

- Provides no-cost premium options up to 200% FPL
- Reduces premiums for those between 200-400% FPL
- Provides no-cost premium options for Native Americans up to 300% FPL who qualify for beWellnm and reduced premiums between 300-400% FPL



New Mexico's Premium Sliding Scale

Federal Poverty Level 1	NM Sliding Scale (Premium as % of income)	ACA/IRA Sliding Scale (Premium as % of income)
Up to 150% FPL	0%	0%
150-200% FPL	0%	0-2%
200-250% FPL	0-2%	2-4%
250-300% FPL	2-5%	4-6%
300-400% FPL	5-8.5%	6-8.5%
400%+ FPL	8.5% (no state funds)	8.5%



State Out-of-Pocket Assistance (SOPA)

Who is eligible?

Individuals and families up to 300% FPL who qualify for federal premium tax credits on beWellnm

What does it do?

Reduces deductibles, maximum out-of-pocket limits, copays, and coinsurance for certain plans

To benefit from SOPA, consumers must select a **Turquoise Plan.**



TURQUOISE PLANS

Turquoise Plans are plans that have extra savings on out-of-pocket costs that are provided by the State of New Mexico.

Consumers will see a “Turquoise Plan” banner when shopping for a health plan. This easily identifies the plans that qualify for extra savings.

There are three levels of Turquoise Plans, based on household income.

Enrollees under 200% FPL must pick a Silver plan to get SOPA and enrollees between 200-300% FPL must pick a Gold plan to get SOPA. During the shopping process, these plans will be labeled as “Turquoise Plans.”



TURQUOISE PLAN UPDATES FOR 2024

- Turquoise 4 (85% AV) enrollees (250-300% FPL) will now qualify for Turquoise 3 (90% AV).
- For Turquoise Plans, primary care and generic drugs must use co-pays and a deductible cannot apply to these services.
- MOOP limit adjustments
 - Reduced MOOP limits for Turquoise 1 Plans
 - Turquoise 2-3 MOOP limits adjusted based on federal requirements, resulting in slight increase
- The out-of-pocket design for all Turquoise Variants must reflect features of the underlying plan.



[Click here](#) to review the 2024 guidance

NEW for PY24

Clear Cost Plans

A new way to compare plans on beWellnm

Designed to make it easier to understand and choose a health plan that better fits their needs.

Every insurer offering coverage in the Marketplace must offer:

- 1 Silver,
- 1 Gold, and
- Turquoise variants.



What Makes Clear Cost Plans Different?

- Co-pays, not coinsurance
- Most services – no deductible
- Medical services are organized into simple low/mid/high- cost categories
- It offers the same cost-sharing options and pre-deductible coverage from each carrier
- Clear Cost Plans will be clearly marked when people enrolling see their options on beWellnm.com



The Small Business Initiative

- Initiative still available through HCAF
- Businesses up to 50 employees
- 10% discount on premiums

- No longer available on beWellnm
- Available off-exchange
- Offered by BCBSNM, Presbyterian Health Plan, and United Healthcare



Contact Us

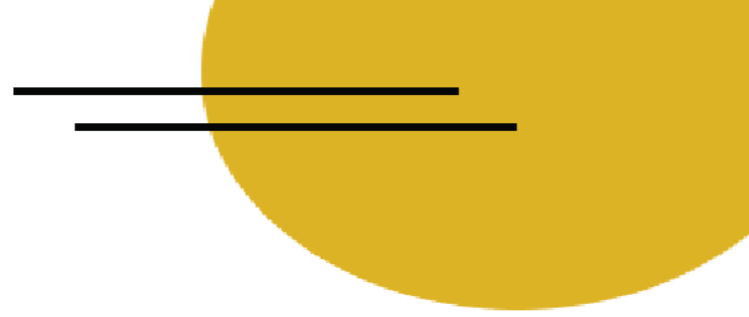
Colin Baillio

505.490.3178

colin.baillio@osi.nm.gov



Questions?



Ambetter from Western Sky Community Care, Inc.

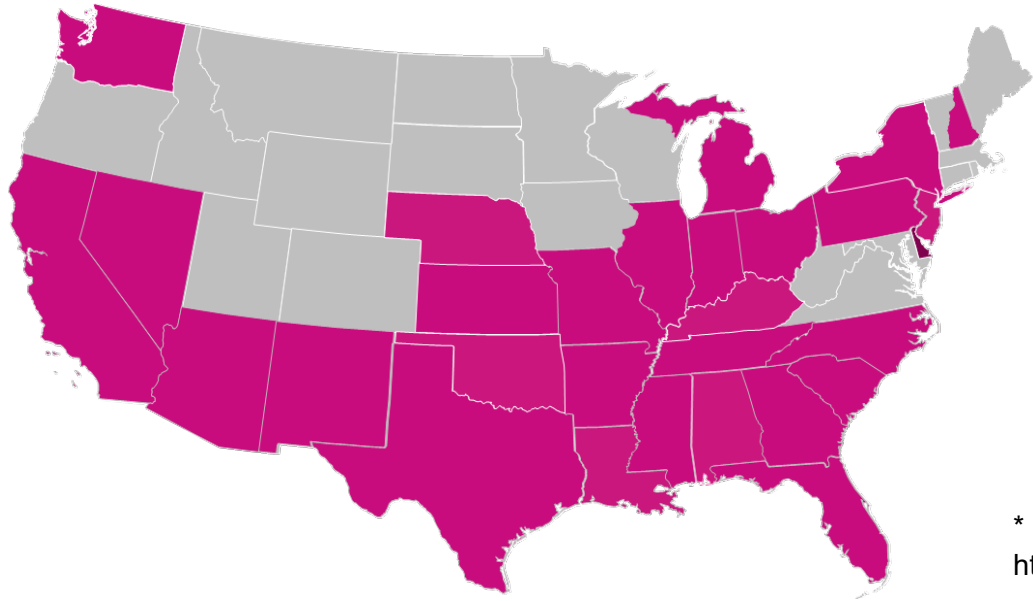
Jeff Donegan, Sales Manager

Who We Are

Est. 2013

Ambetter is available in
28 states across the country

Ambetter is offered by
Centene Corporation and
its **State Health Plans**
including **Western Sky
Community Care, Inc.**



Centene is a
Fortune 25
company on the 2023 Fortune 500
with over
30 years
in the managed care
industry*

**Ambetter
is available
28 states**

* Source: FORTUNE 500® LIST (2023)
<https://fortune.com/company/centene/fortune500/>

Ambetter from
Western Sky
Community Care, Inc.
is

**certified as
a Qualified
Health Plan
issuer**

on the Health
Insurance Marketplace

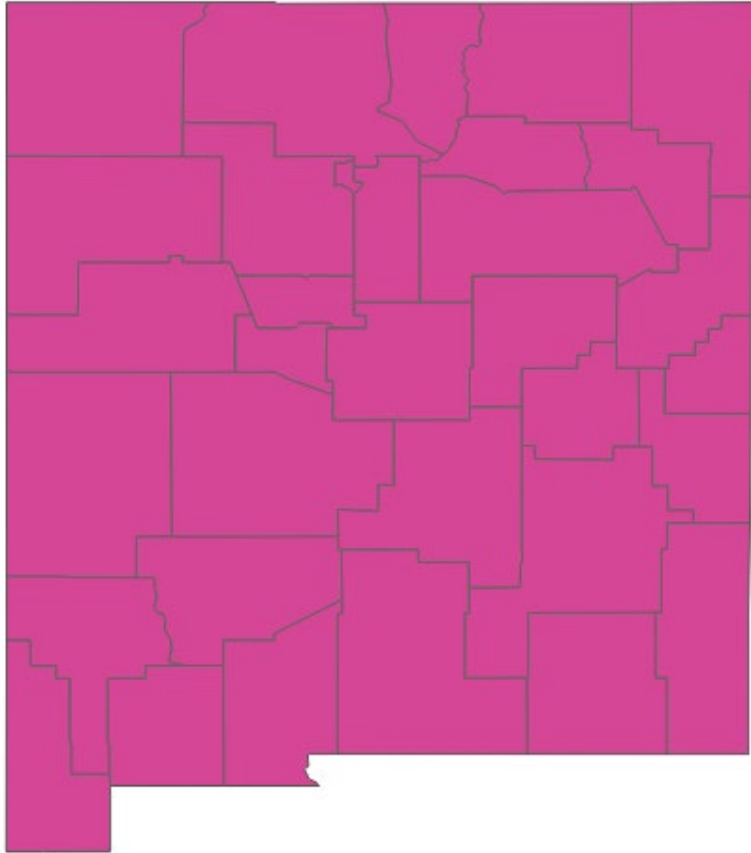
Plans are designed to deliver
**high-quality,
locally-based
healthcare**
to members



New Mexico Health Insurance Exchange



Service Areas



In 2024, Ambetter from Western Sky will continue to cover New Mexico, including all 33 counties in the Land of Enchantment!

PY2024

2024 New Mexico Big Picture

- Open enrollment dates for On Exchange are November 1, 2023 - January 15, 2024.
- Open enrollment dates for Off-Exchange plans are November 1, 2023- December 15, 2023.
- State & Federal health insurance subsidies will continue in PY2024.
- Ambetter members may be eligible for available subsidies if they qualify based on income and purchase a plan from beWellnm.
- Behavioral Health and Substance Use Disorder must be offered at no cost for all plans, this includes inpatient, outpatient, Urgent Care and Prescription Drugs.
- UNM Hospitals in network.

PY2024 Offerings

New Mexico Ambetter Portfolio Overview

Bronze | Silver | Gold (Core) Portfolio

- Features Ambetter's broadest provider network
- Choose Bronze | Silver | Gold network when searching Ambetter Guide
- Members can visit any in-network primary care provider (no referrals needed)
- Referrals may be required for specialist providers (except for OB/GYNS)
- Available statewide in New Mexico

PY 2024 Offerings

Gold

Complete Gold

- Complete Turquoise 3 with EXTRA SAVINGS

Clear Cost Gold

- Clear Cost Turquoise 3 with EXTRA SAVINGS

Silver

Focused Silver

- Focused Turquoise 1 with EXTRA SAVINGS
- Focused Turquoise 2 with EXTRA SAVINGS

Clear Cost Silver

- Clear Cost Turquoise 1 with EXTRA SAVINGS
- Clear Cost Turquoise 2 with EXTRA SAVINGS

- Ambetter's broadest provider network
- Plans available statewide in NM.
- Plans do not have vision and dental offering for adults
 - Plans do offer pediatric vision for children under 19.
- Lowest cost Silver w/copays: Focused Silver
- New Plans: Clear Cost Gold and Clear Cost Silver

Clear cost plans are new standardized plans with standardized copays for most covered services, to ensure lower out of pocket costs.

You can help clients find in-network providers with the online Ambetter Guide <https://guide.ambetterhealth.com/>

Turquoise plans are variants of the base Clear Cost, Complete Gold and Focused Silver plans and are available through beWellnm to those who qualify. These are plans that offer state out of pocket assistance to lower costs.

Note: 2024 Ambetter Health plan and portfolio is pending CMS guidance. Information provided may change after August 25, 2023.



PY 2024 Offerings

Focused Silver (2024)

Turquoise Plans

	Base	73%AV	95% AV	99% AV
Deductible	\$7,000	\$5,100	\$0	\$0
Max Out of Pocket	\$8,300	\$6,950	\$1,100	\$80
Coinsurance	50%	50%	30%	30%
Telehealth/Virtual Care	No Charge	No Charge	No Charge	No Charge
PCP Visits	\$45	\$35	\$0	\$0
Specialist Visits	\$100	\$85	\$5	\$3
Lab	\$50	\$40	\$0	\$0
Preferred Generic/Generic Rx	\$3/\$25	\$3/\$20	\$0/\$0	\$0/\$0
Preferred Rx	\$75	\$70	\$20	\$20
Urgent Care/Virtual UC*	\$60/\$0	\$50/\$0	\$10/\$0	\$5/\$0

PY 2024 Offerings

Clear Cost Silver (2024)

Turquoise Plans

	Base	73%AV	95% AV	99% AV
Deductible	\$5,000	\$4,500	\$100	\$0
Max Out of Pocket	\$8,950	\$7,450	\$1,000	\$200
Coinsurance	0%	0%	0%	0%
Telehealth/Virtual Care	No Charge	No Charge	No Charge	No Charge
PCP Visits	\$50	\$40	\$5	\$0
Specialist Visits	\$100	\$90	\$10	\$3
Lab	\$100	\$90	\$10	\$3
Preferred Generic/Generic Rx	\$35/\$35	\$30/\$30	\$3/\$3	\$0/\$0
Preferred Rx	\$50	\$45	\$10	\$3
Urgent Care/Virtual UC*	\$100/\$0	\$90/\$0	\$10/\$0	\$3/\$0

PY 2024 Offerings

Complete Gold Turquoise 3 (2024)

Plan Highlights	Price
Deductible	\$850
Max Out of Pocket	\$1,600
Coinsurance	20%
PCP Visit	\$15
Telehealth/Virtual Care	No Charge
Specialist Visit	\$35
Lab	\$15
Preferred Generic/Generic RX	\$3/\$15 Copay
Preferred RX	\$30
Urgent Care/Virtual UC*	\$35/\$0

PY 2024 Offerings

Clear Cost Gold Turquoise 3 (2024)

Plan Highlights	Price
Deductible	\$850
Max Out of Pocket	\$1,600
Coinsurance	20%
PCP Visit	\$15
Telehealth/Virtual Care	No Charge
Specialist Visit	\$35
Lab	\$15
Preferred Generic/Generic RX	\$3/\$15 Copay
Preferred RX	\$30
Urgent Care/Virtual UC*	\$35/\$0

Additional Benefits

All Ambetter Health Plans Include

- Comprehensive major medical coverage
 - Ambulatory patient services (outpatient services)
 - Emergency services
 - Hospitalization
 - Pregnancy, maternity, and newborn care
 - Prescription drugs
 - Rehabilitative and habilitative services and devices
 - Laboratory services
 - Preventive and wellness services and chronic disease management
 - Pediatric services, including oral and vision care
- Medical management programs
- Behavioral Health and Substance Use Disorder must be offered at no cost for all plans, this includes inpatient, outpatient, Urgent Care and Prescription Drugs
- No exclusions for pre-existing conditions
- Local health plan staff

Additional Information

Renewal Letters - Continuance

- Members will be informed their plan is staying the same – plan coverage and benefits remain the same.
- New ID Cards for 2024 Ambetter plans will be mailed in December.
- Members will receive plan change renewal letters if they have been automatically enrolled in a similar plan due to plan consolidation or termination.

ambetter | western sky community care

P.O. Box 25408
Little Rock, AR 72227

[Member First Name] [Member Last Name]
[Address 1]
[Address 2]
[City], [State] [Zip Code]

[DATE]
Dear [Member First Name],

Ambetter Health is on a Mission for Better and that means better coverage and better benefits for you. Keep your Ambetter from Western Sky Community Care coverage for 2024 and enjoy special savings and member perks.

GREAT COVERAGE AND BENEFITS JUST FOR YOU

As an Ambetter Health member, you have access to:

- **A Trusted Provider Network.** Find your in-network list of doctors and hospitals at Guide.AmbetterHealth.com.
- **My Health PaysSM Program.*** Rewards you for making healthy choices. Use your rewards to help with utilities, childcare, transportation and more. Access My Health PaysSM through your member portal account.
- **Prescription Pharmacy Benefits.** Brand, generic and delivery options. Sign up for mail order prescriptions at express-scripts.com/rx starting on January 1, 2024.
- **Virtual 24/7 Care.**** Get the care you need anytime, anywhere.
- **Ambetter Member Perks Discount Program.** Save on health-focused products and services. Register at Ambetter.Abenity.com using Registration Code: MemberPerks.
- **Autopay and Paperless Billing.** Make your Ambetter Health premium payment on time, every time.

Find all these details in your member portal account at Member.AmbetterHealth.com.
View your Summary of Benefits and Coverage at ambetter.westernskycommunitycare.com/brochures.

Thank you for being our member. We look forward to serving you with the same great coverage and benefits you have come to expect from us.

Sincerely,
Ambetter from Western Sky Community Care
1-877-288-9172 (TTY 711) – Monday – Friday, 8 a.m. to 8 p.m. local time

Ambetter from Western Sky Community Care is underwritten by Western Sky Community Care, Inc., which is a Qualified Health Plan Issuer in the New Mexico Health Insurance Marketplace.

*Funds expire immediately upon termination of insurance coverage.
**Funds known as Ambetter TeleHealth. Cost sharing may apply when using Virtual 24/7 Care. \$0 Virtual 24/7 Care cost share does not apply to HSA plans and the deductible is met and is only applicable when used through the Virtual 24/7 Care program. Ambetter Health does not provide medical care. Medical care is provided by individual providers who are independent contractors and not agents of Ambetter Health.

This is a notification for insurance. © 2023 Western Sky Community Care, Inc. All rights reserved.
AMH23-NM-C-0067

HELPFUL RENEWAL TIPS

- Visit: ambetter.westernskycommunitycare.com/RenewToday to learn more.
- **Remember,** payment is required to keep your coverage active.
- **In December,** watch for your new 2024 Welcome Packet with ID Card or January invoice.

Need Assistance or Have Questions?

- Call us at 1-877-288-9172 (TTY 711) or contact your broker directly.
- To review your plan, visit: Member.AmbetterHealth.com
- Remember to check Ambetter Health's 2024 Preferred Drug List for all covered drug updates. Visit: ambetter.westernskycommunitycare.com/resources/pharmacy-resources.html

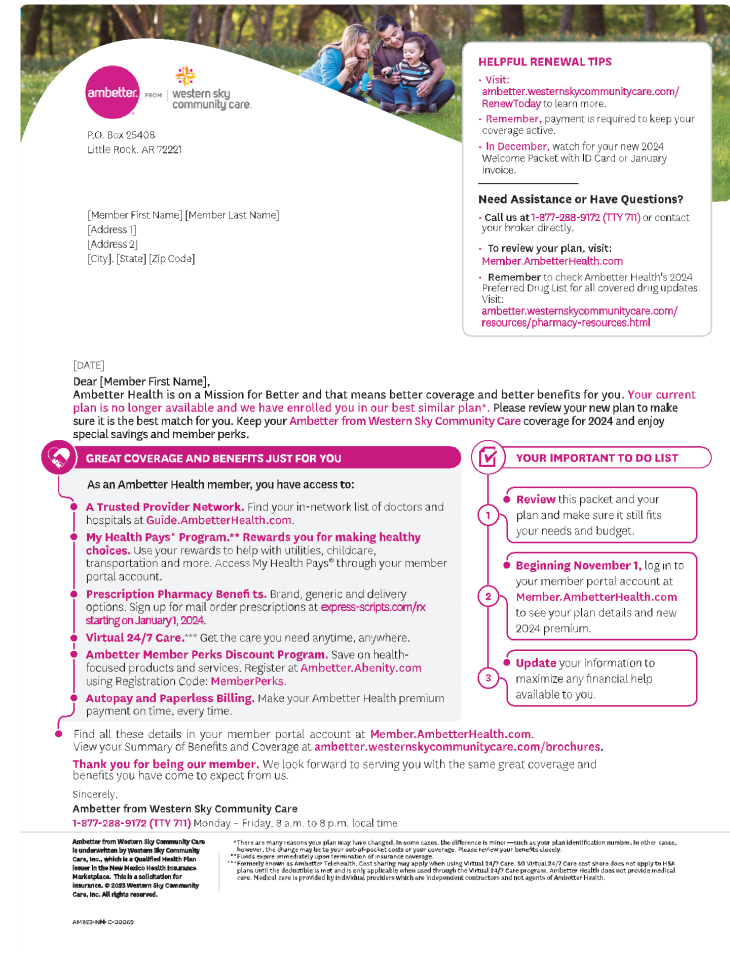
YOUR IMPORTANT TO DO LIST

- 1 Review this packet and your plan and make sure it still fits your needs and budget.
- 2 Beginning November 1, log in to your member portal account at Member.AmbetterHealth.com to see your plan details and new 2024 premium.
- 3 Update your information to maximize any financial help available to you.

Additional Information (Continued)

Renewal Letters – Plan Change

- Members will be informed their plan is changing to a similar plan
 - benefits and cost sharing may be different, so members should check to make sure the new plan meets their needs and budget.
- New ID Cards for 2024 Ambetter plans will be mailed in December.



Additional Information (Continued)

Renewal Letters – Auto Renewals

- Members who do not want or need to take any action on their plan
 - No life changes to report
 - No income changes to report
 - Keep paying premium
- Renewal letters will mail by October 31, 2023
- If members have life/income changes, they can make updates through beWellnm.

ambetter FROM **western sky community care**

P.O. Box 25408
Little Rock, AR 72221

[Member First Name] [Member Last Name]
[Address 1]
[Address 2]
[City], [State] [Zip Code]

[DATE]

Dear [Member First Name],
Ambetter Health is on a Mission for Better and that means better coverage and better benefits for you. Your **current plan is no longer available and we have enrolled you in our best similar plan***. Please review your new plan to make sure it is the best match for you. Keep your **Ambetter from Western Sky Community Care** coverage for 2024 and enjoy special savings and member perks.

GREAT COVERAGE AND BENEFITS JUST FOR YOU

As an Ambetter Health member, you have access to:

- **A Trusted Provider Network.** Find your in-network list of doctors and hospitals at [Guide.AmbetterHealth.com](#).
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*There are many reasons your plan may have changed. In some cases, the difference is minor—such as your plan identification number. In other cases, however, the change may be to your out-of-pocket costs or your coverage. Please review your benefits closely.
**Point-of-purchase and delivery program. Limitations of coverage apply.
***Primarily for use during off-peak hours. Not for use during peak hours. Some services may not be available in all areas. Ambetter Health does not provide medical care. Medical care is provided by individual providers who are independent contractors and not agents of Ambetter Health.

HELPFUL RENEWAL TIPS

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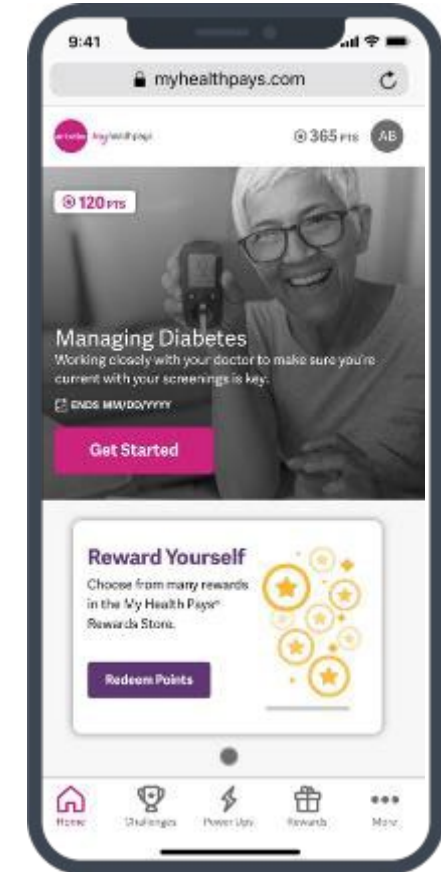
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- 3 **Update** your information to maximize any financial help available to you.

AM82-104-D-00069

Value Added Offering

My Health Pays

- Earn points by completing specific health screenings and participating in fun and easy activities
- **Clinical Rewards**
 - Onboarding & Wellbeing Survey
 - PCP Wellness Exam
 - Comprehensive Diabetes Screenings
 - Quality Measures:
 - Childhood Immunizations (*Children*)
 - Vision Screening (*Children*)
 - Cervical Cancer Screening (*Women*)
 - Breast Cancer Screening (*Women*)
 - Cholesterol Screening (*Men*)
 - Colorectal Cancer Screening (*Men*)
 - Blood Pressure Screening (*Adult*)
- Focus on eating right, moving more, being well and saving smart
- Use points to shop our online rewards store
- These are not benefits and can be discontinued at any time



My Health Pays® rewards cannot be used to pay premiums or for cost sharing purposes in NM.

*Restrictions apply. Visit Member.AmbetterHealth.com for more details. Funds expire immediately after termination of insurance coverage. Rewards program is subject to change.



New Mexico Health Insurance Exchange

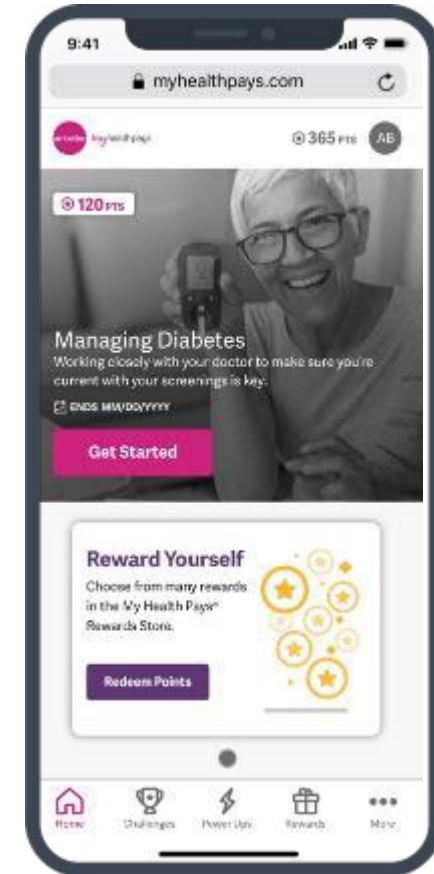


Value Added Offering (Continued)

My Health Pays

Monthly Bills:

- Utilities (gas, water, electric)
- Telecommunications (Cellphone bill)
- Transportation
- Education
- Rent



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New Mexico Health Insurance Exchange



Value Added Offering (Continued)

My Health Pays Rewards

NEW MEXICO		
REWARD ACTIVITIES:	POINTS	\$ VALUE
Onboarding	500	\$50
Annual Wellness Exam & Preventive Screenings	Up to 2000	Up to \$200
Health Management (e.g.-diabetes management)	Up to 1000	Up to \$100
Online Activities	Up to 2000	Up to \$200
REWARDS CAN BE USED FOR:		
Monthly Bills: Utilities (gas, electric, water), Telecommunications (cell phone bill), Transportation***, Education, Rent, Childcare		
Merchandise		
Purchases at the My Health Pays Online Store		

Visit
Member.AmbetterHealth.com
 for more details.

My Health Pays® rewards cannot be used to pay premiums or for cost sharing purposes in NM.

* Some restrictions apply



New Mexico Health Insurance Exchange



Resources for Brokers/ECs

Broker Portal Resources



Quick Pay

Enroll a Client Now

Find a provider

HOME POLICIES COMMISSIONS SUB-PRODUCERS **RESOURCES**



Resources

3 items • Sorted by Last Activity



Frequently Asked Questions

- > Does my client's Ambetter Plan cover COVID-19 Testing/Screening/Treatment services?
- > Will my clients be responsible for any out-of-pocket cost for COVID-19 Testing/Screening/Treatment services?
- > Is prior authorization required for COVID-19 Testing/Screening/Treatment Services under my client's Ambetter plan coverage?
- > Where do I go for information and updates on the Coronavirus crisis?
- > My client got a letter from HealthCare.gov about renewing their health coverage. Do they have to update their income?

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New Mexico Health Insurance Exchange



Resources for Brokers/Ecs

How to Find A Provider Tool



More



Sign up

Log in

ENGLISH ▾

Ambetter Guide

Find nearby in-network care

Log in for the most accurate results

Logging in helps us find you the most accurate results for your plan.

Log in

Search without logging in

Choose one of these options:

Your home state >

Ambetter member ID number >

Last 6 digits of your SSN >

Don't have a plan?



New Mexico Health Insurance Exchange

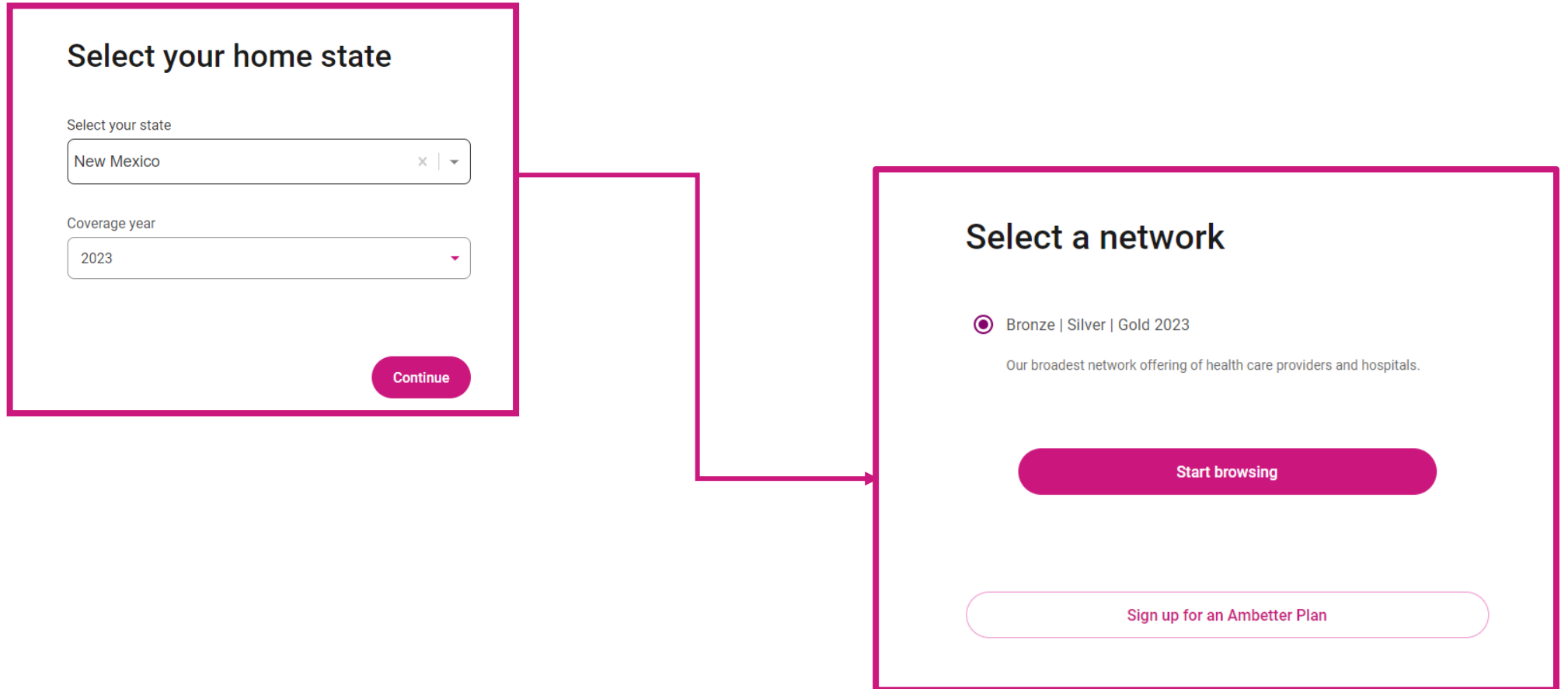


Resources for Brokers ECs

How To Find A Provider Tool



[← Back](#)


ENGLISH ▾





Resources for Brokers ECs

How To Find A Provider Tool


  [Find Care](#) [Advanced Search](#) [Saved Providers](#) [Sign up](#) [Log in](#)

State: **New Mexico** | Network Year: **2023** | Provider Network: **Bronze | Silver | Gold** [EDIT](#) [ENGLISH](#) 


Find nearby in-network care

Search by name, specialty, NPI, procedure (required)  Address, city, county, or zipcode (required)  [Search](#) [Advanced Search](#)


Talk to a medical professional now

 **Ambetter Telehealth**

Talk to a provider virtually for the same price as a regular copay for Ambetter members.

Powered by  **TELADOC**

[Connect Now](#)

 **Talk to a nurse**

Use Ambetter's 24/7 Nurse Advice Line to connect with Nurse Practitioners. Our nurses are waiting to chat with you about symptoms, and offer advice on what to do next.

[Connect Now](#)

Resources for Brokers ECs

How To Find A Provider Tool

State: **New Mexico** | Network Year: **2023** | Provider Network: **Bronze | Silver | Gold** [Edit](#)

| | | | | | | Hide map

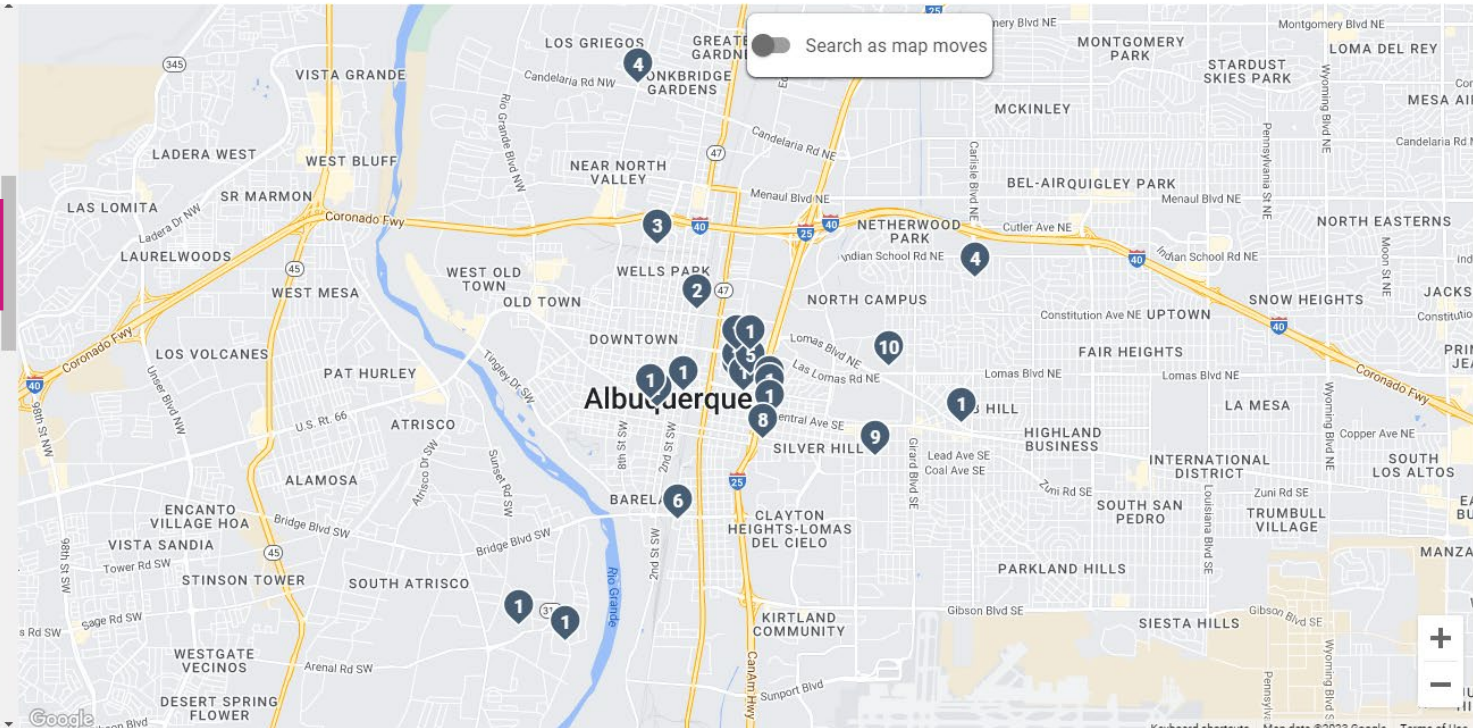
Providers with a specialty of "Primary Care Provider"

75 results | Last Updated: 08/17/2023 | Sorted by **Best Match** | [Print page](#) | [Export Results](#)

Marcus T. Higi, MD 0.4 mi. away [Bookmark](#)
Family Medicine
4123 Montgomery Boulevard, PO Box 8, Albuquerque, NM, 87109
 Accepting new patients In network
(505) 226-2300
[View profile](#)

Devang R. Butani, DO 0.4 mi. away [Bookmark](#)
Hospitalist, Internal Medicine
601 Dr Martin Luther King Jr Avenue Northeast, Albuquerque, NM, 87102
 Accepting new patients In network
(505) 727-8000
[View profile](#)

Nemoli Y. McCartney, CNP 0.4 mi. away [Bookmark](#)
Nurse Practitioner: Family
601 Dr Martin Luther King Jr Avenue Northeast, Albuquerque, NM, 87102
 Accepting new patients In network



Resources for Brokers ECs

How To Find A Provider Tool

More **ambetter** Guide Find Care Advanced Search Saved Providers Sign up **Log in**

Marcus T. Higi, MD

Family Medicine
ABQ Integrative Family Medicine, LLC

Accepting new patients In network

[Search on Google](#) [Website unavailable](#) [Directions](#) [Save](#)

(505) 226-2300

Office Details

- 4123 Montgomery Boulevard, PO Box 8, Albuquerque, NM, 87109
0.4 mi. away
- (505) 226-2300
- Languages spoken: Spanish
- Open Weekends: No
- Age Limitations: 0 yr(s) - 120 yr(s)
- Office Hours: [View hours](#)

Provider Details

- Male
- Family Medicine
Board Certification: Unknown [View Details](#)
- Hospital Affiliations:
Presbyterian Hospital
- University of North Carolina at Chapel Hill School of Medicine 1995
Bayfront Medical Center 1996
Bayfront Medical Center 1998
- NPI: 1437125200

Resources for Brokers ECs

Formulary List

The screenshot shows the top navigation bar of the Ambetter website. On the right side of the bar, there are links for 'Pay Now', 'Need Help?', 'Login', and 'ES'. To the right of these are accessibility icons 'AAA' and a search icon. The main navigation menu includes 'Our Health Plans', 'Join Ambetter', 'For Members', 'For Providers', 'For Brokers', and 'Shop Our Plans'. The 'For Members' menu is open, displaying a list of options: 'Pay Now', 'Find a Doctor', 'Drug Coverage' (highlighted with a red box), 'Forms and Materials', 'Ways to Pay', 'New Members', 'Better Health Center', 'The Better Bulletin', and 'Member News'. A 'Member Login' link is also present, with a sub-menu listing: 'Find everything you need in the member online account', 'View your claims', 'Review your plan benefits', 'Print your ID card', and 'View rewards points total'. Below the navigation is a large banner with a background image of a man and a woman. On the left of the banner is a pink box with the text 'Get the health coverage you deserve.' and 'Make your first payment to access great benefits.' Below this is a yellow button that says 'Activate your Coverage'. At the bottom of the banner are four icons in pink circles: a dollar sign, a caduceus, a laptop, and a checkmark. Below each icon is a text label: 'Pay your', 'Find doctors,', 'Need health', and 'What you need to'.

Resources for Brokers ECs

Formulary List



[Our Health Plans](#) [Join Ambetter](#) [For Members](#) [For Providers](#) [For Brokers](#)

[Shop Our Plans](#)

Pharmacy Resources

We are committed to providing appropriate, high-quality, and cost-effective drug therapy to all Ambetter members.

- [2023 Formulary/Prescription Drug List\(PDF\)](#)
- [2023 Formulary Changes \(PDF\)](#)
- [2022 Preferred Drug List \(PDF\)](#)
- [CoverMyMeds](#)
- [90-Day Extended Supply Medications \(PDF\)](#)
- [Extended Day Supply Pharmacies are now listed in our Find a Provider tool](#)
- [Prescription Claim Reimbursement Form \(PDF\)](#)

Non-formulary drugs and exception to step therapy requests. You have the right to request coverage for drugs not on the formulary or to request exemption to our step therapy criteria. To exercise this right, please speak to your provider. Your provider can request coverage of non-formulary drugs or an exemption to our step therapy criteria through our regular Prior Authorization process.

Save Money and Get Your Prescriptions Delivered to Your Door!

CVS Mail Order

As an Ambetter member, you can maximize your pharmacy benefits by filling your prescriptions with CVS Caremark Mail Service Pharmacy, the only in-network mail order pharmacy. Eligible members pay only 2.5x* their regular copay for a three-month fill. Delivery is free and can be to your home, workplace, or any address you choose.



New Mexico Health Insurance Exchange



Resources for Brokers ECs

Formulary List

ambetter. FROM western sky community care.

2023 Formulary

Effective January 1, 2023

Ambetter.WesternSkyCommunityCare.com

Type CTRL + F > Search

ibuprofen 2/9

AMJEVITA SOSY 20 MG/0.4ML	4	QL(0.029 ml daily); MP; PA	Gold Compounds
HUMIRA PSKT	4	QL(0.143 ea daily); MP; PA	RIDAURA 3 QL(3 ea daily); MP
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	4	1 rti pack lmt amt; 180 rti pack lmt day(s); 1 mail pack lmt amt; 180 mail pack lmt day(s); MP; PA	Interleukin-1 Blockers
HUMIRA PEN PNKT 80 MG/0.8ML	4	QL(0.072 ea daily); MP; PA	ARCALYST 4 QL(0.286 ea daily); SP; MP; PA
HUMIRA PEN PNKT	4	QL(0.143 ea daily); MP; PA	Interleukin-6 Receptor Inhibitors
HUMIRA PEN-CD/UC/HS STARTER PNKT 40 MG/0.8ML	4	QL(0.143 ea daily); MP; PA	ACTEMRA SOLN 4 SP
HUMIRA PEN-CD/UC/HS STARTER PNKT 80 MG/0.8ML	4	1 rti pack lmt amt; 180 rti pack lmt day(s); 1 mail pack lmt amt; 180 mail pack lmt day(s); MP; PA	KEVZARA SOAJ 4 QL(0.082 ml daily); MP; PA
HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT	4	1 rti pack lmt amt; 180 rti pack lmt day(s); 1 mail pack lmt amt; 180 mail pack lmt day(s); MP; PA	KEVZARA SOSY 4 QL(0.082 ml daily); MP; PA
HUMIRA PEN-PS/UV STARTER PNKT	4	QL(0.143 ea daily); MP; PA	Nonsteroidal Anti-inflammatory Agents (NSAIDs)
			celecoxib 1B QL(2 ea daily); ST; MP
			diclofenac potassium tabs 50 mg 1B MP
			diclofenac sodium tbec 1B MP
			diclofenac sodium tb24 1B MP
			diclofenac w/ misoprostol tbec 1B MP
			etodolac caps 1B MP
			etodolac tabs 1B MP
			fenoprofen calcium tabs 1B QL(4 ea daily); ST; MP
			flurbiprofen tabs 1B MP
			ibuprofen tabs 400 mg, 600 mg 1A MP
			ibuprofen tabs 800 mg 1B MP
			ibuprofen susp 100 mg/5ml 1B RX/OTC
			indomethacin cpcr 1B MP

Ambetter New Mexico Formulary Updated August 1, 2023

3

Point of Contact for Brokers/ECs

Contact Information

Broker Sales Support:

Research member inquiries

- Enrollment status
- Paid to dates
- ID card requests

Commissions

- Statement requests
- Research commission discrepancies
- EFT enrollment assistance

Broker Web Support Tool

- Education on broker web tools
- Password resets
- Troubleshooting (i.e. missing members, web tools not working properly)

Find a Provider Assistance

Broker Demographic Changes

Contracting follow-up

855.700.7985 Option 2

ambetterbrokers@centene.com

Broker Sales:

- Currently appointed Agency looking to contract new Agents
- Education of the commission structure and bonus programs
- Product Training and Training new Agents on Ambetter tools
- Marketing collateral request
- Open Enrollment planning and strategic development

855.700.7985 Option 3

ambetersales@centene.com

Member Services: 833.945.2029

Website:

ambetter.westernskycommunitycare.com



Point of Contact for Brokers/ECs

Contact Information

Jeff Donegan - Sales Manager

Phone: 602-883-3064

Email: Jeffrey.H.Donegan@centene.com

Darren Colledge - Account Executive III

Phone: 602-883-3032

Email:

Darren.M.Colledge@centene.com

Megan Walsh – Account Executive II

Phone: 312-619-3094

Email: Megan.Walsh@centene.com

Paulina Vasquez – Account Executive II

- Phone: 480-482-4134

Email: Paulina.Vasquez@centene.com

Grace LaFrossia – Account Executive II

- Phone: 619-541-3632

Email: Grace.LaFrossia@centene.com



Contact Information

Website: ambetter.westernskycommunitycare.com

Member Services: 833-945-2029

The benefits, rates and costs in these advertisements are available. A person should not send money to the issuer of the health benefit plan in response to the advertisement. A person cannot obtain coverage under the health benefit plan until the person completes an application for coverage. This policy has exclusions, limitations, reduction of benefits, and terms under which the policy may be continued in force or discontinued. This policy has provisions relating to renewability, cancellability, and termination. For costs and complete details of the coverage, call or write your insurance producer or the company, whichever is applicable.



Questions?



New Mexico Health Insurance Exchange



Presbyterian Health Plan, Inc.

Lenore Foreman, Account Manager

Who We Are

PRESBYTERIAN Health Plan, Inc.

- Founded in New Mexico in 1908, Presbyterian Healthcare Services is a locally owned healthcare system of nine hospitals, a medical group, and a health plan.
- Presbyterian's health system serves New Mexico residents in our clinics, hospitals, and as members of our health plan.
- Owned by Presbyterian Healthcare Services, **Presbyterian Health Plan, Inc.** was formed in 1985.
- **Sources:** Presbyterian Health Plan membership data as of June 2023 and www.phs.org



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New Mexico Health Insurance Exchange



Who We Are

 **PRESBYTERIAN** Health Plan, Inc.



Our Integrated System

As part of an integrated healthcare system, Presbyterian offers patients throughout New Mexico access to dedicated primary care providers, as well as highly specialized care, including cancer care, heart and vascular care, and behavioral health.

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New Mexico Health Insurance Exchange



Standardized and Turquoise Plans



- **What is a Standardized Plan?**

- A Standardized Plan offers consumers a simplified and streamlined shopping experience. Standardized Plans are designed to improve cost predictability and encourage use of certain high-value health services, such as primary care, by lowering out-of-pocket costs for those services.
 - **Source:** beWellnm Standardized Health Plan Requirements for the PY2024, pg. 1

- **What is a Turquoise Plan?**

- A Turquoise Plan, or State Out-of-Pocket Assistance (SOPA) plan, is designed to reduce cost-sharing, or out-of-pocket costs. Turquoise plans have lower out-of-pocket maximums, deductibles, copayments, and coinsurance applied to essential health benefits (EHB) provided by in-network providers, compared to the base plan. For PY2024, there are 3 levels of Turquoise plans: Level 1 and Level 2 for Silver Plans, and Level 3 for Gold Plans. The beWellnm application will automatically apply the correct variant based on the consumer's income. For PY2024, the maximum out-of-pocket limit for Turquoise Plans cannot exceed \$500 (\$1,000 for families) for households up to 150% Federal Poverty Limit (FPL), and \$3,150 (\$6,300 for families) for households between 150.01-300% FPL.
 - **Source:** beWellnm Essentials PY2024 training, Lesson 4, Part 3 - Understanding Eligibility

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New Mexico Health Insurance Exchange



2024 Plan Offerings

 **PRESBYTERIAN** Health Plan, Inc.



Gold Plans

Clear Cost Gold Plan
Clear Cost Gold Plan – Limited Service Area
Gold Select w/GYM – Limited Service Area
Gold+ w/TytoHome and GYM – Limited Service Area



Silver Plans

Clear Cost Silver Plan
Silver Qualified HDHP Plan w/GYM
Silver 5000 w/GYM
Clear Cost Silver Plan – Limited Service Area
Silver Select 5000 w/GYM – Limited Service Area
Silver Select 7000 w/GYM – Limited Service Area



Bronze Plans

Bronze Select 6800 w/GYM – Limited Service Area
Bronze 9450 plan w/GYM

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New Mexico Health Insurance Exchange



Plan Offerings

 **PRESBYTERIAN** Health Plan, Inc.

- The Clear Cost Plans - Clear Cost Gold Plan, Clear Cost Gold Plan– Limited Service Area, Clear Cost Silver Plan, and Clear Cost Silver Plan – Limited Service Area
 - Standardized Plans
 - Easily comparable with cost predictability
 - Pediatric Vision
 - Low out-of-pocket costs for services (i.e., copays)
 - Encourages Primary and Preventive Care
 - Offered in both of our networks
- Source: beWellnm Final Proposed Standardized Health Plan Requirements

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New Mexico Health Insurance Exchange



Additional Plan Benefits

 **PRESBYTERIAN** Health Plan, Inc.

- The **Non-Standardized Plans** - Gold Select w/GYM – Limited Service Area, Gold+ w/TytoHome and GYM – Limited Service Area, Silver Qualified HDHP Plan w/GYM, Silver 5000 w/GYM, Silver Select 5000 w/GYM – Limited Service Area, Silver Select 7000 w/GYM – Limited Service Area, Bronze Select 6800 w/GYM – Limited Service Area and Bronze 9450 plan w/GYM plans include:
 - Free Gym/Fitness Center Membership
 - Adult and Pediatric Vision
 - Talk Space
 - Assist America*
 - TruHearing*

**Disclaimer: Value added products and services are not insurance benefits and may be discontinued at any time.*

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Services

 **PRESBYTERIAN** Health Plan, Inc.

- All plans include:
 - Telehealth
 - Pres RN Nurse Advice Line
 - Clickotine
 - Wellness at Work Platform
 - Mail Order Pharmacy Service
 - Local Customer Service
 - myPRES
 - MyChart
 - Personalized Provider Directory



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Service Areas



Plan options for residents of any New Mexico County.

- These plans use the Individual and Family or Group HMO/POS network:
 - Clear Cost Gold Plan
 - Clear Cost Silver Plan
 - Silver Qualified HDHP Plan w/GYM
 - Silver 5000 w/GYM
 - Bronze 9450 plan w/GYM

Limited Service Area plan options for residents of Bernalillo, Sandoval, Valencia, Tarrant, and Santa Fe Counties.

- **Limited Service Area** plans use the **Individual Select HMO** network:
 - Clear Cost Gold Plan– Limited Service Area
 - Gold Select w/GYM – Limited Service Area
 - Gold+ w/TytoHome and GYM – Limited Service Area
 - Clear Cost Silver Plan – Limited Service Area
 - Silver Select 5000 w/GYM – Limited Service Area
 - Silver Select 7000 w/GYM – Limited Service Area
 - Bronze Select 6800 w/GYM – Limited Service Area

The benefit information provided is a brief summary, not a comprehensive description of benefits, limitations and/or exclusions. For more information, contact us 1-866-869-7737 or refer to the Subscriber Agreement and/or Summary of Benefits Coverage, which can be found online at www.phs.org/formsanddocuments.

Learn more about Presbyterian's Nondiscrimination Notice and Interpreter Services - <https://www.phs.org/Pages/nondiscrimination.aspx>

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Service Areas

 **PRESBYTERIAN** Health Plan, Inc.

Individual and Family or Group
HMO/POS network

 **PRESBYTERIAN**
Medical Group

Optum

 **CHRISTUS.
ST. VINCENT**
Health System

Limited Service Area plans use the
Individual Select HMO network:

 **PRESBYTERIAN**
Medical Group

Optum

And many more, use our Provider Directory to search provider groups and independent providers in both networks online at www.phs.org/find-a-doctor

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New Mexico Health Insurance Exchange



Point of Contact for Brokers/ECs



- Lenore Foreman
 - Individual Plan Account Manager
 - Phone: (505) 923-8537
 - Email: lforeman@phs.org
- Karen Bailey
 - Broker Operations Manager
 - Email: Producerinfo@phs.org
- Individual and Family Plans Sales Contact Center
 - Phone: 1-866-869-7737, option 4 (toll-free)
 - Email: iplan@phs.org
 - Website: www.phs.org/iplan

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New Mexico Health Insurance Exchange



The Egg

 **PRESBYTERIAN** Health Plan, Inc.



OUR PURPOSE
Presbyterian exists to ensure all of the patients, members and communities we serve can achieve their best health.

OUR VISION
Earning the letter through the Presbyterian Promise:
Dear Presbyterian,
Thank you for respecting me as an individual and supporting my health journey by providing compassionate, safe, high-quality care and coverage. Presbyterian makes healthcare easy and affordable for me and my family.
– Patients and Members

OUR CULTURE
How we work matters here. Built on a legacy of CARES Commitments, together, we create a reliable and just culture where every person belongs, contributes, feels safe, is respected and experiences joy. We value trust, communication and each individual's dignity and well-being. We are One Presbyterian – a diverse, connected community where teamwork makes the difference.

OUR STRATEGY
Create an easier, better way for patients and members to achieve their best health by integrating and innovating healthcare and health coverage. We will lead the nation in better health and healthcare by delivering the **Promise** to patients and members, supporting our workforce to **Thrive**, and committing to **Grow** in and outside of New Mexico.

 **PRESBYTERIAN**

Presbyterian exists to ensure all of the patients, members and communities we serve can achieve their best health.

Since 1995, the Egg has helped guide our decisions and connected us to our purpose at Presbyterian. This updated Egg will continue to guide us through the challenges and opportunities of a new era, with fresh thinking and a focus on what is most important – helping our patients and members achieve their best health.

Reminder: Brokers must be contracted and appointed with all of the carriers offering health plans through beWellnm for Plan Year 2024.

MPC082363



New Mexico Health Insurance Exchange



Questions?



New Mexico Health Insurance Exchange



United Healthcare of New Mexico, Inc.

Timothy Patterson, Market and Sales Manager

Who We Are

Help people live healthier lives and to help make the health system work better for everyone

- We believe we have a distinctive role to play in the transformation that is underway in the nation's health to shape a more sustainable health system for the future. That's why we are strategically addressing these key factors to help lead the way forwards by offering:
 - **Affordable coverage:** we make health coverage more affordable by taking costs out of the system
 - **High quality, supported care:** we will transform care by delivering high quality care that supports the member at every point on the care journey

Service Areas

- Statewide Entry
 - Albuquerque (Rating Area-1)
 - Farmington (Rating Area-2)
 - Dona Ana (Rating Area-3)
 - Santa Fe (Rating Area-4)
 - Rural New Mexico (Rating Area-5)

PY2024 Offerings

- Turquoise plans are health plans that have state out-of-pocket assistance (SOPA) applied to reduce out-of-pocket costs for consumers. In plan year 2024, each Turquoise variant will closely resemble the general features of its standard variant.
- Clear Cost plans are required standardized plans that New Mexico requires all issuers to offer. These plans are available on the Gold and Silver metal tiers and have a mostly all-copay structure.

Plan Feature/Service	Silver Value	Silver Advantage	Gold Value	Gold Advantage	Silver Clear Cost	Gold Clear Cost
Annual Deductible (Individual)	\$4,250	\$2,500	\$1,500	\$950	\$5,000	\$3,000
Annual MOOP (Individual)	\$9,450	\$9,450	\$9,000	\$7,000	\$8,950	\$5,300
Default Coinsurance	40%	30%	20%	20%	N/A	N/A
PCP Office Visit	\$40	\$65	\$25	\$20	\$50	\$20
Specialist	\$85	\$110	\$50	\$50	\$100	\$60
ER	40% ✓	\$1,000	20% ✓	20% ✓	\$300 ✓	\$150 ✓
Urgent Care	\$50	\$65	\$35	\$35	\$100	\$60
Inpatient Hospitalization	40% ✓	30% ✓	20% ✓	20% ✓	\$300 ✓	\$150 ✓
Mental Health Office Visit	\$0	\$0	\$0	\$0	\$0	\$0
Surgery - Outpatient	40% ✓	30% ✓	20% ✓	20% ✓	\$300	\$125
Lab Testing – Outpatient (Office)	\$15	\$10 ✓	\$10	\$10	\$100	\$60
Lab Testing – Outpatient (Hospital)	\$75	\$100 ✓	\$100	\$65	\$100	\$60
X-Rays and Diagnostic Imaging (Office)	40% ✓	30% ✓	20% ✓	\$65	\$100	\$60
X-Rays and Diagnostic Imaging (Hospital)	50% ✓	50% ✓	40% ✓	\$100	\$100	\$60
Major Diagnostic (Office)	40% ✓	30% ✓	20% ✓	\$210	\$100	\$60
Major Diagnostic (Hospital)	50% ✓	50% ✓	40% ✓	\$350	\$100	\$60
Prescription Drug – Rx Tier 2 (Generic)	\$3	\$3	\$3	\$1	\$35	\$20
Prescription Drug – Rx Tier 3 (Non-preferred Generic, Preferred Brand)	\$30 ✓	\$60 ✓	\$50	\$45	\$50	\$30
Prescription Drug – Rx Tier 4 (Preferred Specialty Drugs)	40% ✓	40% ✓	37% ✓	30% ✓	\$100	\$75
Prescription Drug – Rx Tier 5 (Non-Preferred Brand)	40% ✓	40% ✓	37% ✓	30% ✓	\$250 ✓	\$100 ✓
Prescription Drug – Rx Tier 6 (Non-Preferred Specialty Drugs)	50% ✓	50% ✓	50% ✓	40% ✓	\$250	\$190

Check (✓) indicates that this benefit is subject to the annual deductible.

24NM00024E



New Mexico Health Insurance Exchange



Plan Details

- \$0 Virtual Urgent Care (Does not apply to Clear Cost Plans)
- \$3 or less Tier 2 (Generic) Rx (Does not apply to Clear Cost Plans)
- \$20 or less labs on all Silver Value, Gold Value, and Gold Advantage + variants
- \$0 insulin on all Silver Value and Advantage and Gold Value and Advantage + variants
- Digital Fitness Access + Member Incentives

**These value-added benefits could be discontinued at any time.

*This policy has exclusions, limitations, reductions of benefits, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, review your plan documents, call, or write your insurance agent or the company, whichever is applicable. Plan specifics and benefits vary by coverage area and by plan category. Please review plan details to learn more.

Resources for Brokers/ECs

- Access to a suite of tools and resources through Jarvis
- Stay up-to-date with relevant news and other key information
- Access your book of business and search for application status
- Access age-in reports (turning 26 and turning 65)
- Use quick links to access helpful resources such as the Jarvis getting started guide, agent toolkit and more
- Need Help? Use the Producer Help Desk's (PHD) contract information or click "PHD Chat" to start a live chat session for assistance

Point of Contact for Brokers/ECs

Timothy Patterson, Market Sales Manager

Email: timothy_patterson@uhc.com

Phone: (952) 908-8864



24NM00024E



New Mexico Health Insurance Exchange



Closing Notes

Remember to contract with United Healthcare to offer Individual and Family plans in New Mexico for plan year 2024.

24NM00024E



New Mexico Health Insurance Exchange



Reminder

Brokers must be contracted and appointed with all of the carriers offering health plans through beWellnm for Plan Year 2024.

24NM00024E



New Mexico Health Insurance Exchange



Questions?



New Mexico Health Insurance Exchange



Blue Cross Blue Shield New Mexico

Manuel Gelabert, Sr. Producer Sales Consultant

Before We Get Started...

- This presentation focuses on topics related to the individual market and on-exchange plans.
- This presentation, and the information contained within it, is current as of **September 22**. It is subject to change based on subsequent federal and state laws, regulations and guidance.
- This presentation, and the information contained within it, is being shared for informational purposes only. It does not constitute legal, compliance or tax advice. If brokers, agents, or enrollment counselors have questions, they should contact their legal, compliance or tax professionals.
- **This information is preliminary in nature and is being shared for educational and training purposes only. It may not be used for any other purposes, including marketing.**

This presentation is for educational and training purposes only. The policies mentioned contain exclusions, limitations, and terms under which they may be continued in force or discontinued. For costs and complete details of the coverage, please contact your broker or Blue Cross and Blue Shield of New Mexico (BCBSNM).

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New Mexico Health Insurance Exchange



Who We Are...



- We're Not Going Anywhere...
 - Blue Cross and Blue Shield of New Mexico has been serving New Mexico communities for **more than 80 years**
 - We offer statewide HMO plans
 - We have **59** of New Mexico's hospitals in our HMO network

Who We Are...

- And we're not standing still
 - When it comes to change, Blue Cross and Blue Shield of New Mexico (BCBSNM) has the **infrastructure**, **expertise**, and **personnel** to assess plan design, analyze the market and competition, meet consumer needs and implement regulations when needed.
 - What guides Blue Cross and Blue Shield of New Mexico through change? Our **dedication** to expanding access to high quality, cost-effective health care and to equipping our members to make the best health care decisions for themselves and their families.
 - Since Blue Cross and Blue Shield of New Mexico is **customer owned**, we can approach the critical issues affecting health care financing, access and delivery with a balanced, **long-term perspective**.

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2024 BCBSNM Highlights

- **ALL PLANS ARE RENEWING:** All of our existing QHP plans will be renewed
- **NEW PLANS: STANDARDIZED SILVER AND GOLD**
 - **Clear Cost Silver Plan**
 - **Clear Cost Gold Plan**
- **SOPA PLANS:**
 - The Clear Cost Silver Plan has two SOPA variants
 - **Clear Cost Turquoise 1**
 - **Clear Cost Turquoise 2**
 - The Clear Cost Gold Plan has one SOPA variant
 - **Clear Cost Turquoise 3**

Clear Cost Plans are brand new health plans that all insurers on beWellnm must offer starting in 2024. Clear Cost Plans have predictable copays and cover most services without a deductible. Every insurer now offers Clear Cost Plans with the same out-of-pocket costs for most covered services, making it easier to compare important differences, like which doctors and medications are covered.

Turquoise variants are the OSI prescribed cost share reduction plans. For on-exchange gold plans, issuers must offer a CSR/Turquoise variant with an 85% AV. For on-exchange silver, issuers must offer a 96% and 99% to replace the 87% and 94% CSRs typically found on silver plans.

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Actuarial Expertise in the Market = Rate Stability



- Rates fluctuate due to various factors, but our **commitment to providing you with access to high-quality, affordable healthcare coverage** remains our top priority
- Our rate increases have stayed **under 6%** in PY2023 and PY2024
 - BCBSNM's rate increases of under 6% represent an average across all rating areas weighted by population

PY 2023 Source: www.healthinsurance.org/health-insurance-marketplaces/new-mexico/

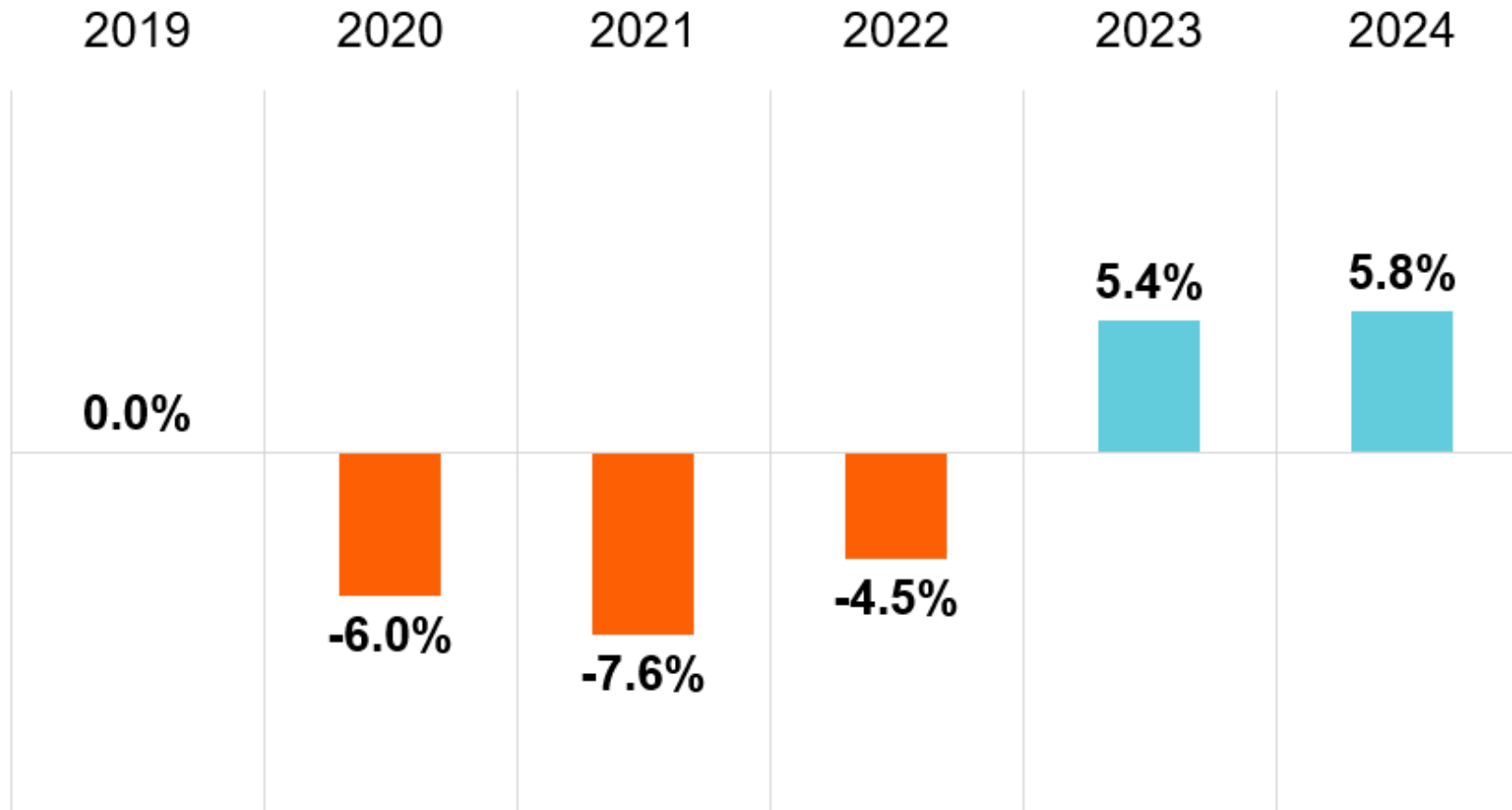
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Rate Stability (PY2019 to PY 2024)



Source: Enterprise Actuarial Rate Filings as of 6/22/2023

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BCBSNM 2024 On-Exchange Plans

Blue Community Silver HMO

- Silver Plan deductibles range from \$75-\$5,500
- Primary Care office visit copayments range from \$5-\$70
- Free MDLIVE® virtual visits

Blue Community Gold HMO

- Gold Plans deductibles ranging from \$750-\$3,000
- Primary Care Office visit copayments range from \$15-\$35
- Free MDLIVE virtual visits

PROPRIETARY AND CONFIDENTIAL This information is preliminary in nature and is being shared for educational and training purposes only. It may not be used for any other purposes, including marketing.



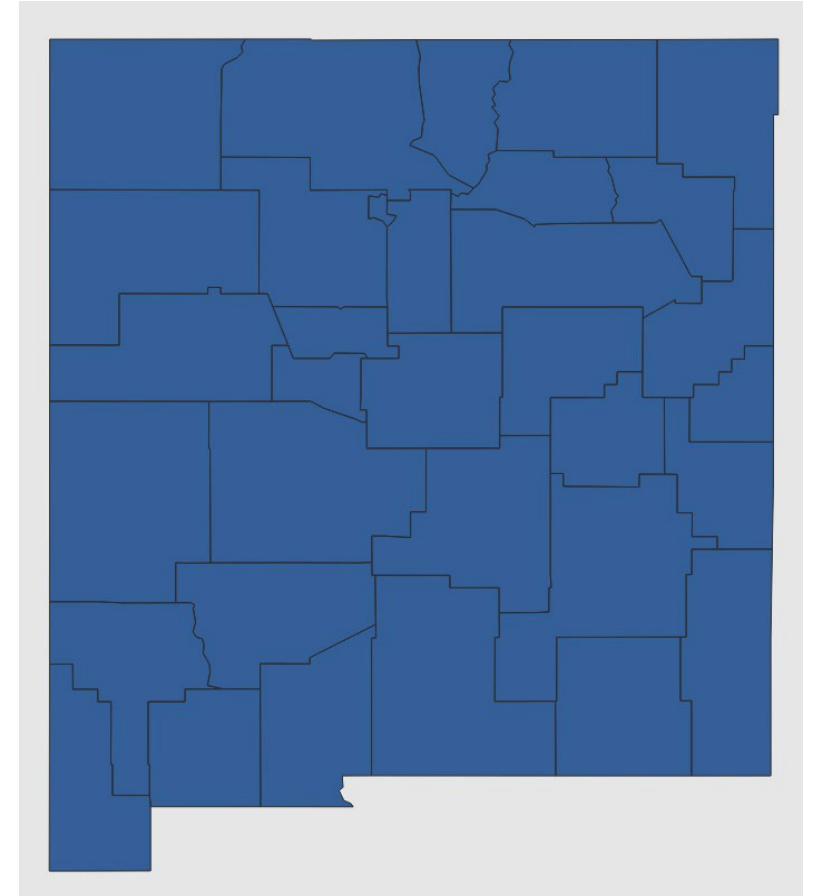
New Mexico Health Insurance Exchange



Blue Community HMO NetworkSM

- Statewide network
- Hospitals include acute care, behavioral health, rehabilitation, skilled nursing and long-term acute care hospitals
- Professionals include PCPs, BH and specialists; unique providers only
- Includes contracted providers within 100 miles of NM border (updated OSI guidelines)

Source: Network status as of 6/23/2023. Hospitals: contracted facilities in NM and contiguous Counties within 100 miles of the NM border (include acute care, BH, long-term acute care, skilled nursing, and rehabilitation); Providers: PCPs, BH, and specialist in NM and contiguous Counties within 100 miles of the NM border. Professional counts reflect unique providers only.



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New Mexico Health Insurance Exchange



Blue Community HMO Network

Market	Key Hospitals
Albuquerque	Lovelace (Downtown/Westside/Women's) UNM Hospitals
Rio Rancho	UNM Sandoval Regional Medical Center
Santa Fe	CHRISTUS St. Vincent Regional Medical Center
Farmington	San Juan Regional Medical Center
Las Cruces	Memorial Medical Center Mountainview Regional Hospital Three Crosses Regional Hospital
	Eastern NM Medical Center Lovelace Regional Hospital

Network participation status current as of 6/14/2023. Participation is subject to change.

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Blue Community HMO Network

Additional Hospitals

Alamogordo | Gerald Champion Regional

Artesia | Artesia General Hospital

Clayton | Union County General Hospital

Gallup | Rehoboth McKinley Hospital

Grants | Cibola General Hospital

Las Vegas | Alta Vista Regional Hospital

Los Alamos | Los Alamos Medical Center

Lovington | Nor Lea General Hospital

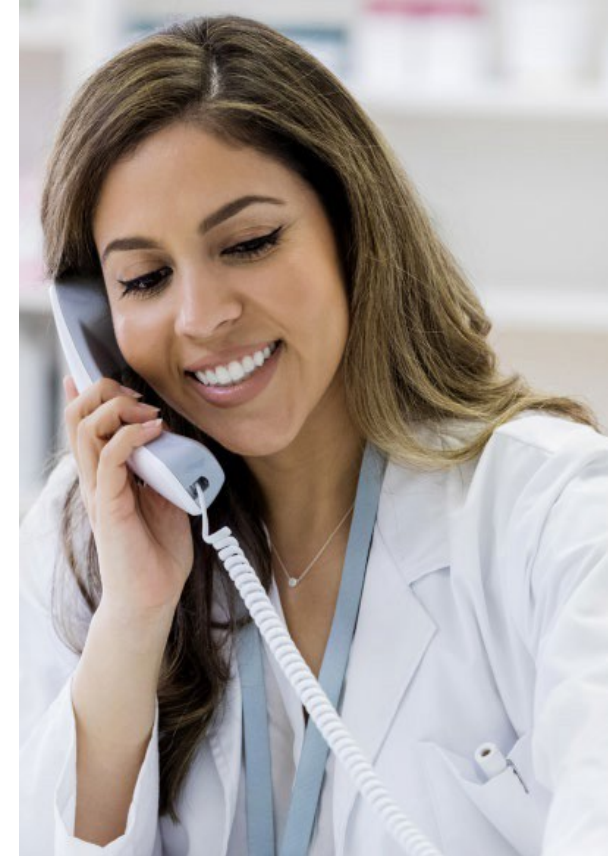
Raton | Miners Colfax Medical Center

Santa Rosa | Guadalupe County Hospital

Silver City | Gila Regional Medical Center

Taos | Holy Cross Hospital

Truth or Consequences | Sierra Vista Hospital



Network participation status current as of 6/14/2023. Participation is subject to change.

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New Mexico Health Insurance Exchange



Prescription and Pharmacy

Preferred Pharmacies

Albertsons
Independent Pharmacies
Walgreens
Walmart
Sam's Club

Retail stores in the Preferred Pharmacy Network offer members prescriptions with a lower possible cost-share amount. Pharmacies in the Preferred Pharmacy Network are subject to change.

5-Tier and 6-Tier prescription benefit structure drives utilization toward preferred generic, preferred brand and preferred specialty prescriptions

- Generic, brand and specialty drugs each have preferred and non-preferred benefit levels
- **Pharmacies fall into 3 categories:**
 1. Preferred pharmacies (listed to the left): Over 200+ throughout NM
 2. Non-preferred, but still in network. Member cost share may be higher when using a Non-preferred pharmacy than when using a Preferred pharmacy.
 3. Out of network pharmacies. There is no benefit when members use out of network pharmacies.
- **90-day supply:** Options for obtaining a 90-day supply of medications are available at 3x the 30-day retail copay from a Preferred Network pharmacy and from mail order
- **Specialty Pharmacy Program:** Self-administered products are standardly covered under the pharmacy benefit while physician-administered products are covered under the medical benefit

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New Mexico Health Insurance Exchange



5-Tier and 6-Tier Design

5-Tier	6-Tier
Generic	Preferred Generic
Preferred Brand	Non-Preferred Generic
Non-Preferred Brand	Preferred Brand
Preferred Specialty	Non-Preferred Brand
Non-Preferred Specialty	Preferred Specialty
	Non-Preferred Specialty

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MedsYourWay[®]

- MedsYourWay is a systematic program that allows pharmacies to process claims for a specific set of medications with an automatic price comparison. Members will pay the lower price between a participating drug discount card (DDC) or their plan benefit cost share at the point of sale
 - This program does not include all retail pharmacies and is not available for mail order
 - Member level opt-out is available

Example: Current State	Example: Future State
<ul style="list-style-type: none"> • Member searches for lower costs on covered medication using DDC • Member presents DDC at the retail pharmacy to obtain lower price for covered medication • Money paid out of pocket by the member for the medication is not credited to member accumulators • We do not have visibility to claims where DDC is utilized 	<ul style="list-style-type: none"> • Member presents BCBS insurance card at the retail pharmacy • MedsYourWay automatically searches available discounts and applies the DDC cost or member cost share per benefits - whichever is lower • Money paid out of pocket by the member for the medication is credited to the member accumulators • We have visibility to claims where DDC is utilized

Market Segment Impact	State Impact	Effective Date
Individual and Family Markets	NM	7/1/2024

MedsYourWay[®] is not insurance. It is a drug discount card program that compares the drug discount card price for an eligible medication at participating in-network retail pharmacies to the member's benefit plan cost share amount and then applies the lower available price. MedsYourWay[®] is administered by Prime Therapeutics, LLC. Not all retail pharmacies may participate with MedsYourWay[®] pricing.

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Additional Benefits: Telemedicine Benefits

- Member cost share for telemedicine visits are the same as in-person visits.
 - For example, if a member's cost share is \$35 for a PCP office visit, the telemedicine services cost share would be the same.
- Members will be able to access their medically necessary, covered benefits through local network providers who deliver services through telemedicine.
- Members will have to contact providers to determine if they offer telemedicine visits.
- Telemedicine visits are not limited to any particular provider type as it is a site of care.

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New Mexico Health Insurance Exchange



Additional Benefits: Virtual Visits from MDLIVE®

- MDLIVE is our **non-emergency** urgent care, behavioral health, **dermatology**, and **virtual primary care** solution (on demand or by appointment)
 - Members may select an MDLIVE PCP as their provider
- Members have convenient access to care, from redirection away from Emergency Room and Urgent Care visits
- Enables members to visit with a board-certified doctor or therapist by phone, online video or mobile app
- **Behavioral Health Services:** therapists by phone, video or mobile app 24/7/365

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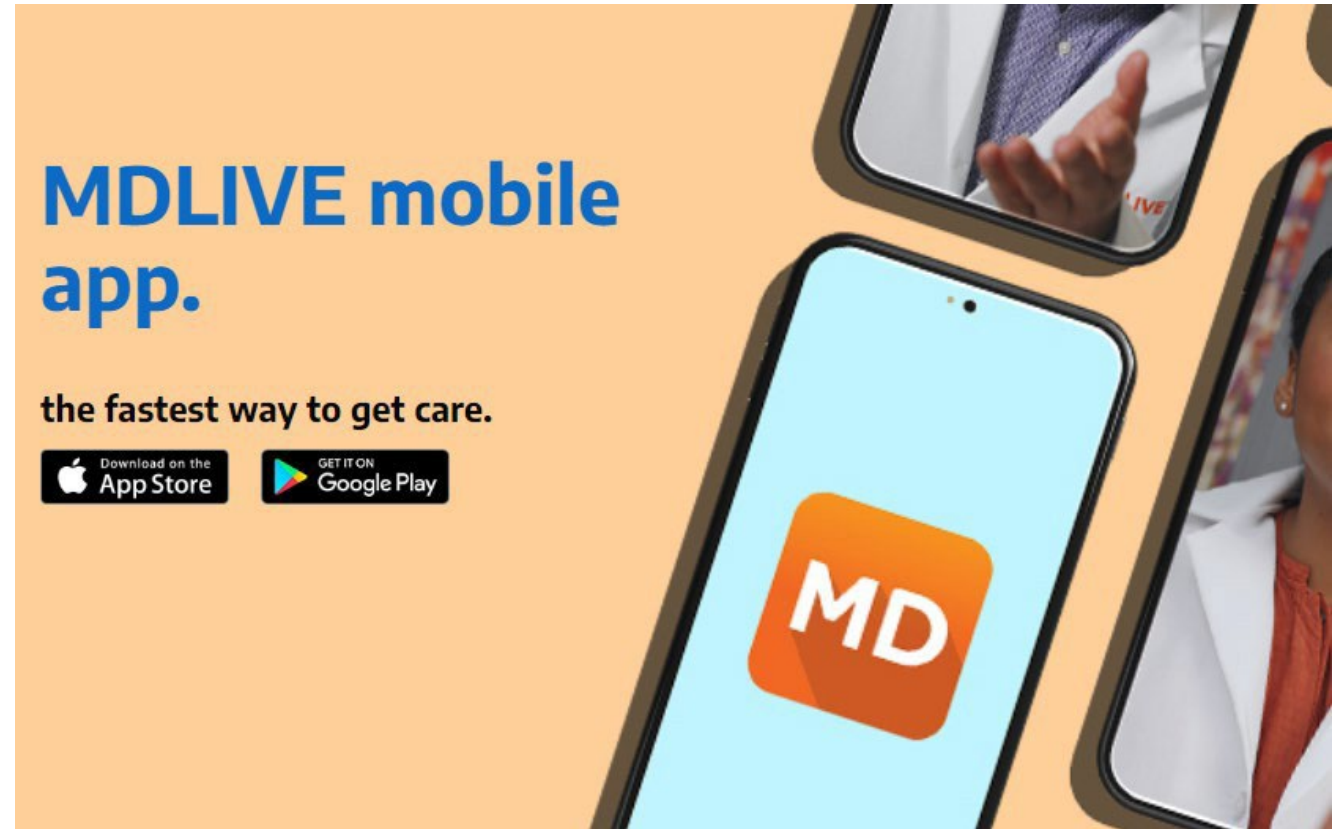


New Mexico Health Insurance Exchange



Additional Benefits: Virtual Visits from MDLIVE[®]

- Fast, hassle-free care from board-certified doctors and licensed therapists
 - Members can access MDLIVE providers via an app:
 - Google Play rating: **4.6/5** with 9,000+ reviews and 500,000+ downloads
 - Apple's App Store rating: **4.7/5** with 78,000+ reviews and 2,000,000+ downloads



For providers licensed in New Mexico and the District of Columbia, Urgent Care service is limited to interactive online video; Behavioral Health service requires video for the initial visit but may use video or audio for follow-up visits, based on the provider's clinical judgment. Behavioral Health is not available on all plans. MDLIVE is a separate company that operates and administers Virtual Visits for Blue Cross and Blue Shield of New Mexico. MDLIVE is solely responsible for its operations and for those of its contracted providers. MDLIVE[®] and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without permission. Blue Cross[®], Blue Shield[®] and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

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New Mexico Health Insurance Exchange



Additional Benefits: Virtual Visits from MDLIVE®

Availability

Ages

- Medical: All ages
 - Urgent Care
 - Virtual Primary Care
- Virtual Primary Care: 18+
- Dermatology: All ages
- Behavioral Health: 10+

Languages Available

- MDLIVE website available in English and Spanish
- National network of providers who speak a variety of languages
- Translation services available by contacting MDLIVE's call center

24/7/365

- Service availability is dependent upon where the member is physically located at the time of the consultation

Types of Care Available

Virtual Primary Care (new)

- Routine care for chronic conditions (e.g., Type 2 diabetes, high blood pressure)

Dermatology (new)

- Thousands of hair, skin, and nail conditions (e.g., acne, skin infections, suspicious spots and moles)

Behavioral Health (plan specific)

- e.g., depression and anxiety, stresses of everyday life, and marital challenges

Urgent Care

- e.g., allergies, cough, COVID-19, and UTIs

Seamless Access

Access MDLIVE portal from

- Blue Access for Members
- Mobile App
- Integrated with Provider Finder®

Warm transfers from

- BCBSNM Health Advocates
- BCBSNM Customer Advocates
- 24/7 Nurseline

Prescriptions can be sent to the member's pharmacy of choice. Controlled substances for more than a 30-day supply of prescription drugs are not available.

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New Mexico Health Insurance Exchange



2024 Stand-Alone Dental QHPs

- Members changing health plans for 2024 with a dental policy need to re-enroll for dental
- When enrolling or re-enrolling a member in medical coverage, review dental coverage carefully
- Our new BlueCare DentalSM 1C plan features the lowest rates

BlueCare DentalSM 1A & BlueCare Dental 4 KidsSM

1A:

- 100% coverage on most preventive services with in-network dentists
- Low \$25 deductible for in-network services
- Savings on all dental procedures up to annual \$1,500 max; unlimited annual max on BlueCare Dental 4 Kids 1A

BlueCare DentalSM 1B & BlueCare Dental 4 KidsSM 1B:

- Lower monthly premium (compared to 1A plans)
- Most preventive services at in-network dentists covered at 90% under BlueCare Dental and at 80% under BlueCare Dental 4 Kids
- \$50 deductible for in-network services
- Savings on all dental procedures up to annual \$1,000 max; unlimited annual max on BlueCare Dental 4 Kids 1B

BlueCare Dental 1C:

- Lowest monthly premium (compared to 1A and 1B plans)
- 80% coverage on most preventive services provided by in-network dentists
- \$50 deductible for in-network services
- Savings on all dental procedures up to annual \$1,000 max

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New Mexico Health Insurance Exchange



2024 Stand-Alone Dental QHPs: In Network Benefits

Benefits	BlueCare Dental SM 1A High Family Plan ¹	BlueCare Dental 4 Kids SM 1A High Pediatric Plan ⁴	BlueCare Dental SM 1B Low Family Plan ¹	BlueCare Dental SM 4 Kids SM 1B ² Low Pediatric Plan	BlueCare Dental SM 1C Low Family Plan
Individual Deductible (Family deductible equals 3 times individual)	\$25	\$25	\$50	\$50	\$50
Annual Benefit Maximum	\$1,500 ²	N/A	\$1,000 ²	N/A	\$1,000 ²
Diagnostic Evaluations	no charge ³	no charge ³	10% ³	20% ³	20% ³
Preventive	no charge ³	no charge ³	10% ³	20% ³	20% ³
Diagnostic Radiographs	no charge ³	no charge ³	10% ³	20% ³	20% ³
Miscellaneous Preventive Services	20%	20%	10%	20%	20%
Basic Restorative	20%	20%	30%	50%	50%
Non-Surgical Extractions	20%	20%	30%	50%	50%
Non-Surgical Periodontal	20%	20%	30%	50%	50%
Adjunctive Services	20%	20%	30%	50%	50%
Endodontics	20%	20%	50%	50%	50%
Oral Surgery	20%	20%	50%	50%	50%
Surgical Periodontal	20%	20%	50%	50%	50%
Major Restorative	50%	50%	50%	50%	50%
Prosthodontics	50%	50%	50%	50%	50%
Miscellaneous Restorative & Prosthodontics Services	50%	50%	50%	50%	50%
Orthodontics ⁶ (up to age 19)	50% ⁵	50% ⁵	50% ⁵	50% ⁵	50% ⁵
Out-of-Pocket Maximum	Applies to Pediatric Plans Only (no out-of-pocket maximums for adults)				
	1. If choosing family coverage for BlueCare SM Dental 1A, refer to BlueCare Dental 4 Kids SM 1A for plan details for dependents under age 19. If choosing BlueCare Dental SM 1B, refer to BlueCare Dental 4 Kids SM 1B for plan details for dependents under age 19. 2. Annual benefit maximum does not apply to members up to age 19. 3. Deductible is waived. 4. \$400 for 1 child / \$800 for 2+ children. 5. Unlimited maximum for medically necessary orthodontia for members up to age 19.				

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2024 Schedule of Benefits: 4 Kids 1B Plan

Program Basics	Participating Dentist	Out-of-Network Dentist **
<i>Annual Maximum Benefit</i>	Unlimited	Unlimited
<i>Out-of-Pocket Maximum</i>	1 Child = \$400 2+ Children = \$800	None
<i>Deductible (In/Out-of-Network accumulate together)</i>	\$50 Individual / \$150 Family	\$50 Individual / \$150 Family
Covered Services		
<i>Diagnostic Evaluations</i>	20%, (Deductible waived)	40%, (Deductible waived)
<i>Preventive Services</i>	20%, (Deductible waived)	40%, (Deductible waived)
<i>Diagnostic Radiographs</i>	20%, (Deductible waived)	40%, (Deductible waived)
<i>Miscellaneous Preventive Services</i>	20%, after Deductible	40%, (Deductible waived)
<i>Basic Restorative Services</i>	50%, after Deductible	70%, after Deductible
<i>Non-Surgical Extractions</i>	50%, after Deductible	70%, after Deductible
<i>Non-Surgical Periodontal Services</i>	50%, after Deductible	70%, after Deductible
<i>Adjunctive Services</i>	50%, after Deductible	70%, after Deductible
<i>Endodontic Services</i>	50%, after Deductible	70%, after Deductible
<i>Oral Surgery Services</i>	50%, after Deductible	70%, after Deductible
<i>Surgical Periodontal Services</i>	50%, after Deductible	70%, after Deductible
<i>Major Restorative Services</i>	50%, after Deductible	70%, after Deductible
<i>Prosthodontic Services</i>	50%, after Deductible	70%, after Deductible
<i>Miscellaneous Restorative and Prosthodontic Services</i>	50%, after Deductible	70%, after Deductible
<i>Implants</i>	Not Covered	Not Covered
<i>Orthodontics ¹</i>	50%, (Deductible waived)	70%, (Deductible waived)

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Resources for Brokers/ECs: Producer Readiness Microsite

- **Everything you need, all in one place**

- Medical and dental brochures
- Plan comparison charts
- Summaries of benefits and coverage (each with a link to the associated benefit booklet)
- Sizzle sheets
- And more

BlueCross BlueShield.
Illinois • Montana • New Mexico
Oklahoma • Texas

Products & Marketing Enrollment Support Retail Producer Portal Premiums & Payments Service & Support

Ready to Sell, Enroll, and Support Resources for Producers

News and Updates
Enroll Clients in Off-Exchange Dental Plans Directly on the Retail Producer Portal

Say goodbye to paper applications and hello to easy online enrollments. Now you can enroll your clients in our off-exchange BlueCare DentalSM plans directly through the Retail Producer Portal enrollment tab.

This site has everything you need to support clients in the individual and family ACA market. Access the tips, tools and training to help you market, sell, enroll and renew.

Products & Marketing
Get SBCs, plan comparison charts, brochures and more.
[Learn More](#)

Enrollment Support
Find applications, see renewal packet samples and get shopping links.
[Learn More](#)

Retail Producer Portal
Access materials on using this comprehensive sales and enrollment tool.
[Learn More](#)

Premiums & Payments
See the latest on all things payment related.
[Learn More](#)

Service & Support
Assist clients post-sale with these resources.
[Learn More](#)

Helpful Links

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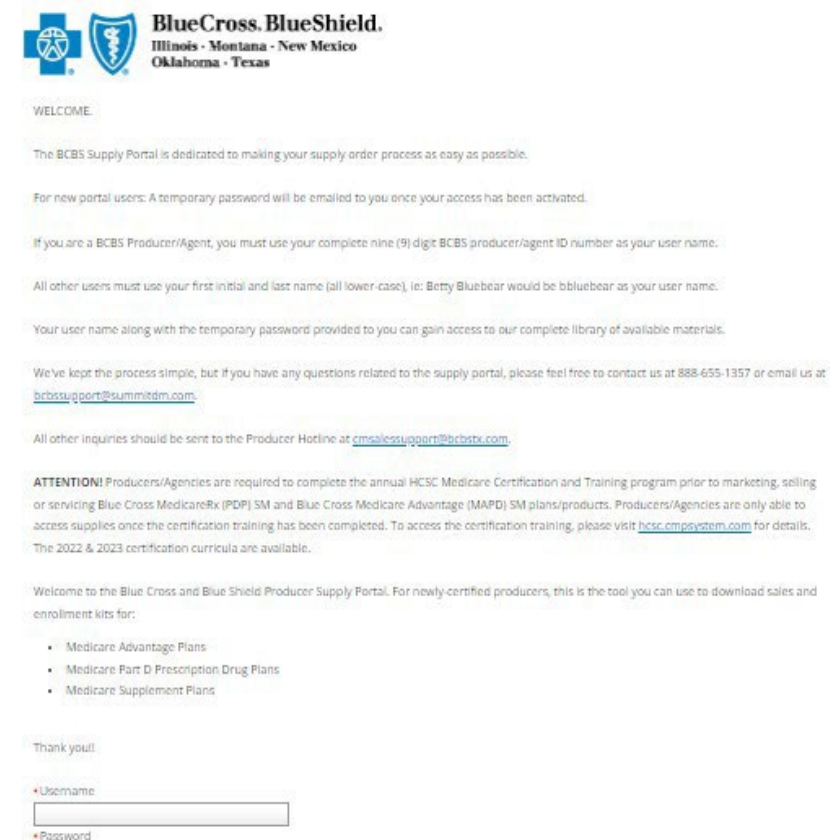


New Mexico Health Insurance Exchange



Resources for Brokers/ECs: Producer Supply Portal

- Customized materials on demand
 - Access marketing materials for
 - Under 65 ACA Market
 - Over 65
 - Medicare Supplement
 - Medicare Advantage with Prescription Drugs (MAPD)
 - Prescription Drug Plans (PDP)
- Digital only and print files available



The screenshot shows the BlueCross BlueShield logo at the top, with the text "BlueCross. BlueShield. Illinois · Montana · New Mexico Oklahoma · Texas". Below the logo, the word "WELCOME." is displayed. The main body of the page contains several paragraphs of text providing instructions for new and existing users, including contact information for support and a list of available materials. At the bottom, there is a login section with fields for "Username" and "Password".

BlueCross. BlueShield.
Illinois · Montana · New Mexico
Oklahoma · Texas

WELCOME.

The BCBS Supply Portal is dedicated to making your supply order process as easy as possible.

For new portal users: A temporary password will be emailed to you once your access has been activated.

If you are a BCBS Producer/Agent, you must use your complete nine (9) digit BCBS producer/agent ID number as your user name.

All other users must use your first initial and last name (all lower-case), ie: Betty Bluebear would be bbluebear as your user name.

Your user name along with the temporary password provided to you can gain access to our complete library of available materials.

We've kept the process simple, but if you have any questions related to the supply portal, please feel free to contact us at 888-655-1357 or email us at bcbsupport@summitdm.com.

All other inquiries should be sent to the Producer Hotline at cmsalesupport@bcbrtx.com.

ATTENTION! Producers/Agencies are required to complete the annual HCSC Medicare Certification and Training program prior to marketing, selling or servicing Blue Cross MedicareRx (PDP) SM and Blue Cross Medicare Advantage (MAPD) SM plans/products. Producers/Agencies are only able to access supplies once the certification training has been completed. To access the certification training, please visit hscs.cmsystem.com for details. The 2022 & 2023 certification curricula are available.

Welcome to the Blue Cross and Blue Shield Producer Supply Portal. For newly-certified producers, this is the tool you can use to download sales and enrollment kits for:

- Medicare Advantage Plans
- Medicare Part D Prescription Drug Plans
- Medicare Supplement Plans

Thank you!

*Username

*Password

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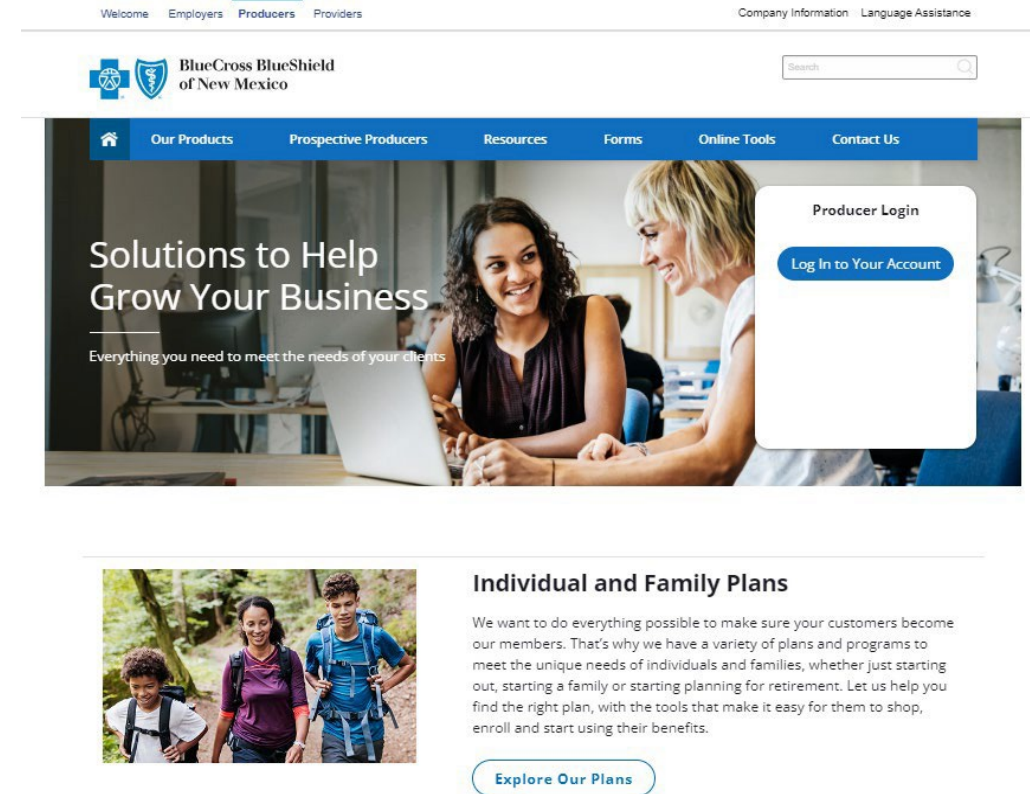


New Mexico Health Insurance Exchange



Resources for Brokers/ECs: Blue Access for ProducersSM (BAPSM)

- Tools available to keep you on track
 - Commission statements
 - Product information
 - Downloadable forms
 - Producer news and updates



The screenshot displays the BlueCross BlueShield of New Mexico website. At the top, there are navigation links for 'Welcome', 'Employers', 'Producers', and 'Providers', along with 'Company Information' and 'Language Assistance'. The main header features the BlueCross BlueShield logo and a search bar. Below the header is a blue navigation bar with links for 'Our Products', 'Prospective Producers', 'Resources', 'Forms', 'Online Tools', and 'Contact Us'. The main content area has a background image of two women working on a laptop. Text on the page reads 'Solutions to Help Grow Your Business' and 'Everything you need to meet the needs of your clients'. A white box on the right contains the 'Producer Login' section with a 'Log In to Your Account' button. Below this is a section for 'Individual and Family Plans' with a photo of a family hiking and an 'Explore Our Plans' button.

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Point of Contact for Brokers/ECs

For any questions, please reach out to Senior Producer Sales Consultant, Manny Gelabert at

manuel_Gelabert@bcbsil.com

Contacts for Producers	
Pre-Sale Support	866-446-5685
Post-Sale Support	888-222-0572
Producer Service Center	855-782-4272
Customer Service	866-236-1702
beWellnm Help Desk	833-862-3935

Please do not share contact details with consumers.

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New Mexico Health Insurance Exchange



Questions?



New Mexico Health Insurance Exchange



Molina Healthcare

Gene Wedgeworth, Marketplace Sales Manager



2024

Molina Healthcare of New Mexico, Inc.
Marketplace



Your NM Marketplace Sales Team



Gene Wedgeworth, Marketplace Sales Manager

Cell: 972-210-9437

Gene.Wedgeworth@MolinaHealthcare.com



Aldo Loayza, Marketplace Sales Manager

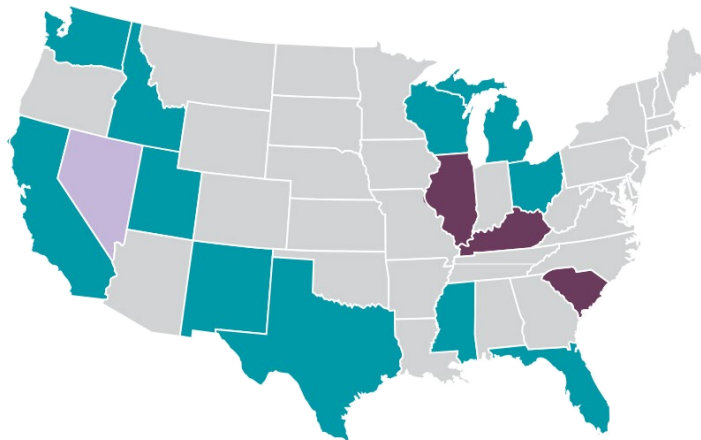
Cell: 385-522-3865

Aldo.Loayza@MolinaHealthcare.com

Para asistencia en Español

National 2024 Footprint

Service Area



- 2023 Existing States
- 2024 Existing States with Expansion County
- 2024 Expansion State

States / Market **NEW Counties Effective 2024** **2023 Existing Counties** **Total**

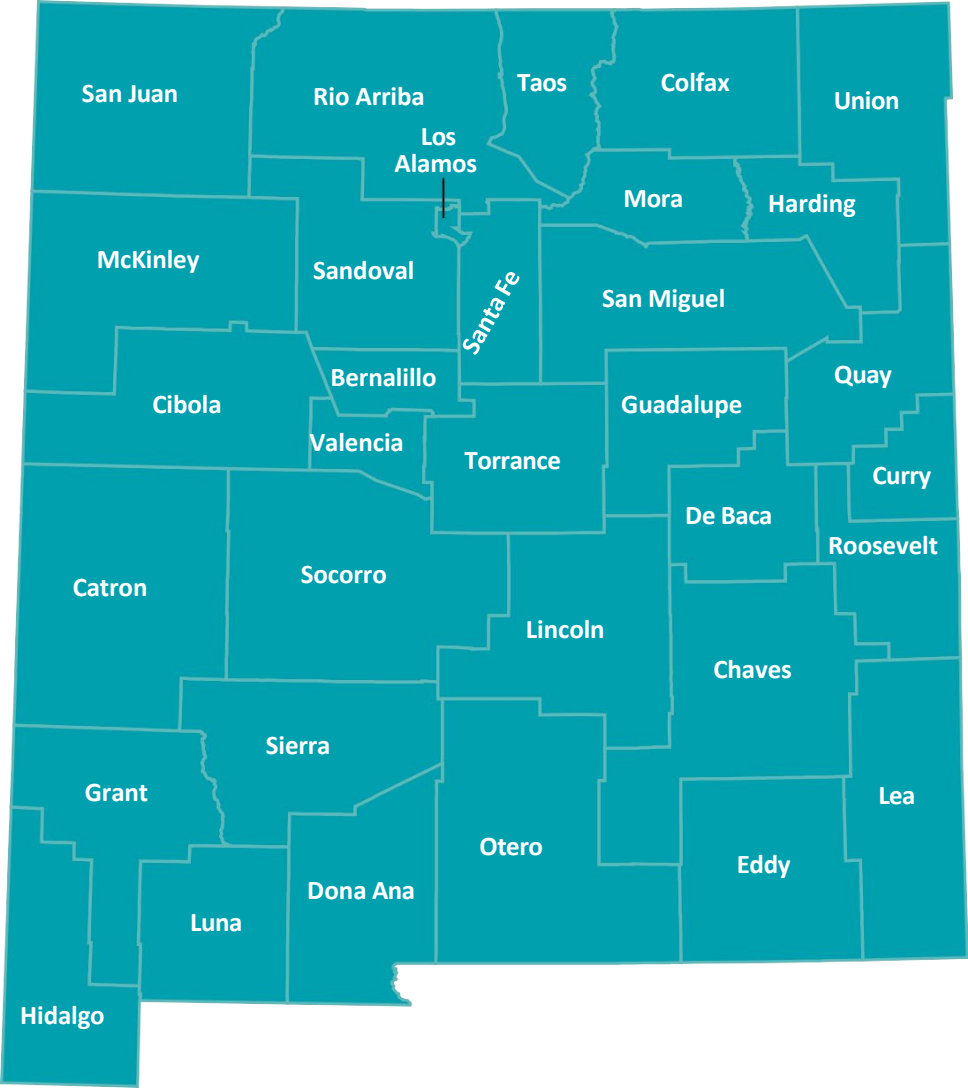
CA	0	6	6
FL	0	12	12
ID	0	7	7
IL	1	4	5
KY	22	3	25
MI	0	17	17
MS	Statewide	82	82
NM	Statewide	33	33
NV	7	0	7
OH	0	63	63
SC	2	43	45
TX	0	14	14
UT	0	13	13
WA	0	18	18
WI	0	29	29
Total	32	344	376

State Coverage:

New Mexico

Service Area:

-  Existing Footprint
-  2024 Expansion Counties



Molina Healthcare of New Mexico, Inc

Disclaimer

“This policy has exclusions, limitations and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, call your insurance agent or Molina Healthcare.”

Hospitals – New Mexico

Bernalillo County:

- Lovelace Medical Center – Downtown
- Lovelace Westside Hospital
- Lovelace Women's Hospital
- UNM Cancer Research and Treatment Center
- UNM Health Sciences Center

Chaves County:

- Eastern New Mexico Medical Center
- Lovelace Regional Hospital - Roswell

Cibola County:

- Cibola General Hospital

Colfax County:

- Miners Colfax Medical Center

Curry County:

- Clovis Plains Regional

Dona Ana County:

- Mountain View Regional Medical Center

Eddy County:

- Artesia General Hospital
- Carlsbad Medical Center
- Guadalupe County Hospital

Grant County:

- Gila Regional Medical Center

Lea County:

- Lea Regional Medical Center
- Nor Lea Hospital District

Lincoln County:

- Lincoln County Medical Center

Luna County:

- Mimbres Memorial Hospital

McKinley County:

- Rehoboth McKinley Christian Health Care Services

Otero County:

- Gerald Champion Regional Medical Center

Quay County:

- Dan C Trigg Memorial Hospital

Rio Arriba County:

- Presbyterian Espanola Hospital

Roosevelt County:

- Roosevelt General Hospital

San Juan County:

- San Juan Regional Medical Center

Sandoval County:

- UNM Sandoval Regional Medical Center

Santa Fe County:

- Presbyterian Medical Center
- Christus St Vincent Physicians Medical Center
- St Vincent Hospital

Sierra County:

- Sierra Vista Hospital

Socorro County:

- Socorro General Hospital

Taos County:

- Holy Cross Hospital

Union County:

- Union County General Hospital

Las Vegas, NM:

- Alta Vista Regional Hospital

El Paso, TX:

- El Paso Children's Hospital
- The Hospitals of Providence East Campus
- The Hospitals of Providence Horizon City Campus
- The Hospitals of Providence Memorial Campus
- The Hospitals of Providence Transmountain Campus

Turquoise Plans

- Turquoise Plans are health plans that have State Out-of-Pocket Assistance (SOPA) applied to reduce out-of-pocket costs for consumers.
- Two Turquoise plans are required to be offered with every bundle of Silver plans.
- One Turquoise plan is required to be offered with every bundle of Gold plans
- For Turquoise Variants, primary care and generic drugs must use co-pays and a deductible cannot apply to these services.
- The income limit for Turquoise 3 Variants is raised to 300% FPL. Issuers are no longer required to submit Turquoise 4 Variants.
- Issuers are required to offer the Standardized Health Plans adopted by the beWellnm Board of Directors, including Turquoise Variants.

Plan Information – New Mexico

	Gold 1		Clear Cost Silver				Clear Cost Gold	
	Gold 1 On Exchange with Low Cost Generic Drugs	Turquoise 3 with Low Cost Generic Drugs and EXTRA SAVINGS	Clear Cost Silver 73	Clear Cost Silver On Exchange	Clear Cost Turquoise 1 with EXTRA SAVINGS	Clear Cost Turquoise 2 with EXTRA SAVINGS	Clear Cost Gold On Exchange	Clear Cost Turquoise 3 with EXTRA SAVINGS
Value Basics								
Teladoc Virtual Care Visits 24/7/365	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge
Annual Wellness Visit - Adults	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge
Routine Preventive Screenings - Children & Adults	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge
Routine Vision Exams, and Eyewear - Children (Ages 0-18)	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge
Preventive Prescription Drugs	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge
24 Hour Nurse Line	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge
Benefits and Cost Share Highlights								
Deductible (Ind/Fam)	\$1,550 / \$3,100	\$500 / \$1,000	\$4,500 / \$9,000	\$5,000 / \$10,000	\$0 / \$0	\$100 / \$200	\$3,000 / \$6,000	\$500 / \$1,000
Drug Deductible (Ind/Fam)	Comb. w/Med	Comb. w/Med	Comb. w/Med	Comb. w/Med	Comb. w/Med	Comb. w/Med	Comb. w/Med	Comb. w/Med
Out of Pocket Max (Ind/Fam)	\$8,100 / \$16,200	\$3,000 / \$6,000	\$7,450 / \$14,900	\$8,950 / \$17,900	\$200 / \$400	\$1,000 / \$2,000	\$5,300 / \$10,600	\$2,400 / \$4,800
Emergency Room Facility	25%	10%	\$255 after ded	\$300 after ded	\$30	\$40 after ded	\$150 after ded	\$75 after ded
Urgent Care Services	\$20	\$10	\$90	\$100	\$3	\$10	\$60	\$20
Inpatient Services								
Inpatient Facility Fee	25% after ded	10% after ded	\$255 after ded	\$300 after ded	\$30	\$40 after ded	\$150 after ded	\$75 after ded
Inpatient Physician Fee	25% after ded	10% after ded	\$255 after ded	\$300 after ded	\$30	\$40 after ded	\$150 after ded	\$75 after ded
Outpatient Professional Office Visits Services								
Primary Care	\$20	\$10	\$40	\$50	\$0	\$5	\$20	\$7
Specialty Care	\$50	\$25	\$90	\$100	\$3	\$10	\$60	\$20
Rehabilitative and Habilitative Services	\$20	\$10	\$40	\$50	\$0	\$5	\$20	\$7
Mental / Behavioral Health Services / Substance Abuse Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Services Without Any Deductible

Note: *Mail-order is available for non-specialty drugs marked "MAIL" on the formulary. For mail-order Rx, a 90-day supply is provided at two-and-a-half times (2.5x) the 30-day retail cost-sharing amount.

31432MP24NMEN

Plan Information – New Mexico

	Gold 1		Clear Cost Silver				Clear Cost Gold	
	Gold 1 On Exchange with Low Cost Generic Drugs	Turquoise 3 with Low Cost Generic Drugs and EXTRA SAVINGS	Clear Cost Silver 73	Clear Cost Silver On Exchange	Clear Cost Turquoise 1 with EXTRA SAVINGS	Clear Cost Turquoise 2 with EXTRA SAVINGS	Clear Cost Gold On Exchange	Clear Cost Turquoise 3 with EXTRA SAVINGS
Outpatient Hospital Facility Services								
Outpatient Facility Fee	25% after ded	10% after ded	\$250	\$300	\$5	\$35	\$125	\$60
Outpatient Professional Fee	25% after ded	10% after ded	\$250	\$300	\$5	\$35	\$125	\$60
Advanced Imaging and Specialized Scanning Services	25% after ded	10% after ded	\$90	\$100	\$3	\$10	\$60	\$20
Routine X-Ray and Diagnostic Services	25% after ded	10% after ded	\$90	\$100	\$3	\$10	\$60	\$20
Laboratory Tests	\$15	10% after ded	\$90	\$100	\$3	\$10	\$60	\$20
Prescription Drugs ⁵								
Preventive Drugs	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge
Tier-1: Preferred Generic	\$15	\$5	\$30	\$35	\$0	\$3	\$20	\$5
Tier-2: Preferred Brand and Non-Preferred Generic	\$50 after ded	\$35 after ded	\$45	\$50	\$3	\$10	\$30	\$10
Tier-3: Preferred Specialty	30% after ded	20% after ded	\$95	\$100	\$10	\$25	\$75	\$50
Tier-4: Non-Preferred Brand	30% after ded	20% after ded	\$205 after ded	\$250 after ded	\$15	\$50 after ded	\$100 after ded	\$100 after ded
Tier-5: Non-Preferred Specialty	30% after ded	20% after ded	\$240	\$250	\$25	\$65	\$190	\$125

Services Without Any Deductible

Note: *Mail-order is available for non-specialty drugs marked "MAIL" on the formulary. For mail-order Rx, a 90-day supply is provided at two-and-a-half times (2.5x) the 30-day retail cost-sharing amount.

31432MP24NMEN

Provider Online Directory

- Seamless, user-friendly digital experience for members and brokers.
- Available through [MolinaMarketplace.com](https://molina.marketplace.com)
 - Select 'Find a Doctor' from the Member drop-down list

The screenshot displays the Molina Healthcare Provider Online Directory interface. At the top, there is a search bar with the text "Family Medicine" and a search icon. To the right of the search bar, there are options for "Plan/Program" (Molina Marketplace) and "City, County, State or Zip" (Imperial, CA - 92251). A "Log In" button is visible in the top right corner. Below the search bar, there is a section titled "About Family Medicine" with a description: "Diagnose and treat a wide variety of typical diseases and conditions, usually in a primary care capacity." Below this, there are several filter options: "All Specialties", "All People & Places", "All Genders", and "More Filters". There are also checkboxes for "Accepting New Patients", "Primary Care Provider", and "Board Certification", along with a "WITHIN 10 miles" filter. The main content area shows a list view of search results. The first result is for "Sunny R Richley, MD" with a "PCP" badge. Below the name, it says "Family Medicine • +2 other specialties". There are buttons for "Add to Compare" and "View Profile". The location is listed as "751 W Legion Rd Ste 103, Brawley, CA 92227" with a "Get directions (est. 6.8 miles away)" link. Contact information includes "Phone: 760-351-4400" and a checked box for "Accepting New Patients". There is also a link for "4 Affiliations" and a prompt to "Log In for personalized results".

<https://molina.sapphirethreesixtyfive.com/>

Provider Online Directory



English

Log In

Browse by Category

General Practice

Molina Marketplace

Imperial, CA – 92251

About General Practice

Diagnose and treat a wide variety of typical diseases and conditions, often in a primary care capacity.

All Specialties All People & Places All Genders More Filters

VIEW ONLY: Accepting New Patients Primary Care Provider WITHIN: 10 miles



George C Fareed, MD

General Practice • Infectious Disease

Add to Compare

View Profile

LOCATION
385 W Main St, El Centro, CA 92243
[Get directions](#) (est. 7.9 miles away)

2 Affiliations

Log In for personalized results

CONTACT INFORMATION
Phone: 760-482-9100

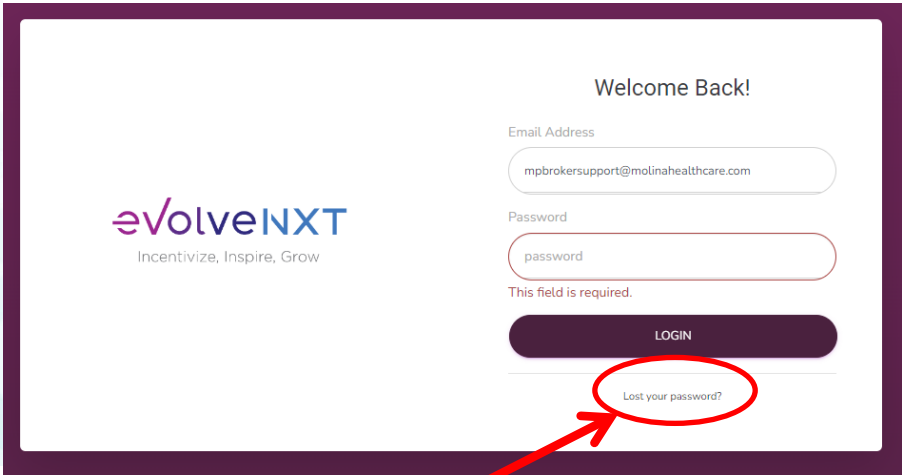
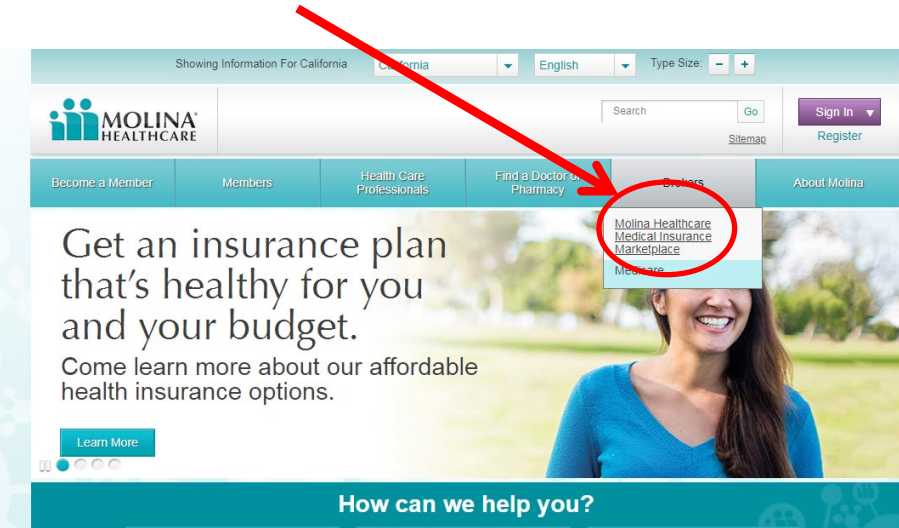
Accepting New Patients

Members can now search, view, and complete their own PCP Self-Selection via the My Molina Member Portal or New Provider Online Directory for primary subscribers



New Broker Portal!

Easy Access to Broker Support and Member Service Tools



Account.EvolveNXT.com

You can create or reset your password by using this link, your username is your email address

Book of Business Search

Book of Business Search with Member level data

Filter your Molina BoB Search by Effective Date, Grace Period Status, or Paid Thru Date

The screenshot shows the 'Book of Business Search' interface. On the left is a teal navigation sidebar with the Molina Healthcare logo and menu items: DASHBOARD, BOOK OF BUSINESS SEARCH, DOCUMENTS & RESOURCES, MY CREDENTIALS, MY ACCOUNT, MEMBER CASES, and WORKFLOWS. The main content area has a header with the title 'Book of Business Search', a notification bell, and the user name 'JACK SMITH'. Below the header is a search form with the following fields: Member First Name, Member Last Name, HIX ID, Subscriber ID, Broker NPN, Effective From, Effective To, and Paid Through Date. There are also dropdown menus for Status and State, and date pickers for DOB From and DOB To. A 'SEARCH' button and a 'DOWNLOAD' button are positioned below the form. At the bottom, a table header is visible with columns: Member First Name, Member Last Name, HIX ID, Subscriber ID, Product, Effective Date, Application Date, End Date, Status, Broker NPN, Broker First Name, Broker Last Name, Total Premium, Paid Through Date, and Net Due Amount.

Broker Resources:

Main Number: 1-855-885-3179

Hours: 6:00 AM – 6:00 PM MT, Monday – Friday

New Broker Portal: account.evolvenxt.com

Broker Services — # 1 | MPBrokerSupport@MolinaHealthcare.com

- Member access to care issues, billing discrepancies, terminations in error

Broker Care Team — # 2 | MPBrokerCareTeam@MolinaHealthcare.com

- Member access to care issues, billing discrepancies, terminations in error

Commission Team — # 3 | MPBrokerCommissionInquiry@MolinaHealthcare.com

- Broker Book of Business reconciliation for missing or unpaid policies

Contracting Inquiries — # 4 | MPBrokerContracting@MolinaHealthcare.com

- Appointment requests, E&O/license/contact information updates



Sales Managers – Western Region



Amy DeMarco — Director of Sales
Western Region (CA, ID, NM, TX, UT, WA)

Amy.DeMarco@MolinaHealthcare.com

(657) 243-7461

Sales Managers



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New Mexico & North Texas

Gene.Wedgeworth@MolinaHealthcare.com

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Andrea.Espinoza@MolinaHealthcare.com

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(385) 707-3981



Casey Meehan

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Casey.Meehan@MolinaHealthcare.com

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Sales Managers – Eastern Region



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Sales Managers



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Kristin Nickel

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Kristin.Nickel@MolinaHealthcare.com

(262) 229-0955



Lindsay Scruggs

Florida & Mississippi

Lindsay.Scruggs@MolinaHealthcare.com

(305) 587-6449

Member Resources

Important Websites

New Provider Directory | <https://molina.sapphirethreesixtyfive.com/?ci=nm-marketplace>

Brand-new provider directory platform designed to enhance the Molina member experience by enabling ease of use and ease of search to pinpoint the right provider information in order to obtain the right care.

NM Enrollment Site | <https://getcovered.bewellnm.com/individual/>

One-time payment site that does not require a member portal login and can be accessed without a subscriber ID, just last 4 of SSN, DOB, and ZIP code.

Molina Marketplace Site | <https://molinamarketplace.com>

Award-winning public website with ACA-specific content and easy-to-access resources geared toward our brokers, members, and providers.

Member Resources:

Important Member Services Numbers

State	Member Services Number
California	(888) 858-2150
Florida	(888) 560-5716
Idaho	(833) 657-1981
Illinois	(833) 644-1623
Kentucky	(833) 644-1621
Michigan	(888) 560-4087
Mississippi	(866) 472-9484
Nevada	(833) 671-0051

State	Member Services Number
New Mexico	(888) 295-7651
Ohio	(888) 296-7677
South Carolina	(855) 885-3176
Texas	(888) 560-2025
Utah	(888) 858-3973
Washington	(888) 858-3492
Wisconsin	(888) 560-2043

Thank you!

400 Tijeras Ave NW, Suite 200,
Albuquerque, NM, 87102
[MolinaMarketplace.com](https://www.MolinaMarketplace.com)

Questions?

New Mexico Human Service Department

Jeanelle Romero, Acting Bureau Chief –Communication & Education
Bureau



2024 BEWELL NM OPEN ENROLLMENT KICK OFF
JEANELLE ROMERO

ACTING BUREAU CHIEF, COMMUNICATION & EDUCATION BUREAU, MEDICAL ASSISTANCE DIVISION

SEPTEMBER 27, 2023



BEFORE WE START...

On behalf of all colleagues at the Human Services Department, we humbly acknowledge we are on the unceded ancestral lands of the original peoples of the Apache, Diné and Pueblo past, present, and future.

With gratitude we pay our respects to the land, the people and the communities that contribute to what today is known as the State of New Mexico.



Evening drive through Corrales, NM in October 2021.
By HSD Employee, Marisa Vigil



MISSION

To transform lives. Working with our partners, we design and deliver innovative, high quality health and human services that improve the security and promote independence for New Mexicans in their communities.

GOALS



We help NEW MEXICANS

1. Improve the value and range of services we provide to ensure that every qualified New Mexican receives timely and accurate benefits.



We communicate EFFECTIVELY

2. Create effective, transparent communication to enhance the public trust.



We make access EASIER

3. Successfully implement technology to give customers and staff the best and most convenient access to services and information.



We support EACH OTHER

4. Promote an environment of mutual respect, trust and open communication to grow and reach our professional goals.

HSD'S SOCIAL IMPACT: NM BENEFITS FROM MODERN AND RESPONSIVE SOCIAL SAFETY NET

HSD's programs have had the following social impact:

499,844,738 meals provided to New Mexicans through Supplemental Nutrition Assistance Program (SNAP) **over the last 12 months**



last updated: 7/26/33

934,305 individuals provided the ability to visit a doctor, afford medication and immunizations through Medicaid in **June 2023**



22,900 homes heated and cooled for New Mexico families through Low Income Energy Assistance Program (LIEAP) in **Federal Fiscal Year 2023**



7,962 families provided shelter and necessities through Temporary Assistance for Needy Families (TANF) in **June 2023**



\$124.76* per month on average through child support to help kids be happy and healthy **over the last 12 months**



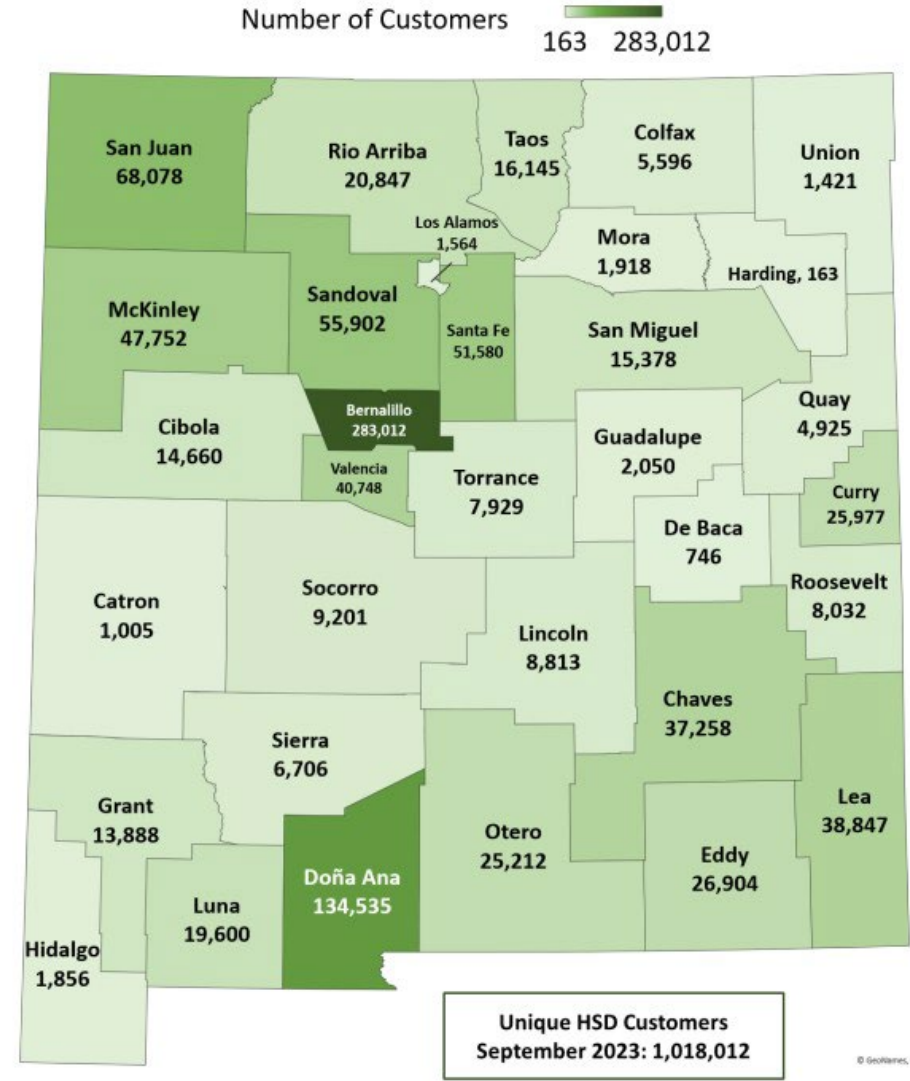
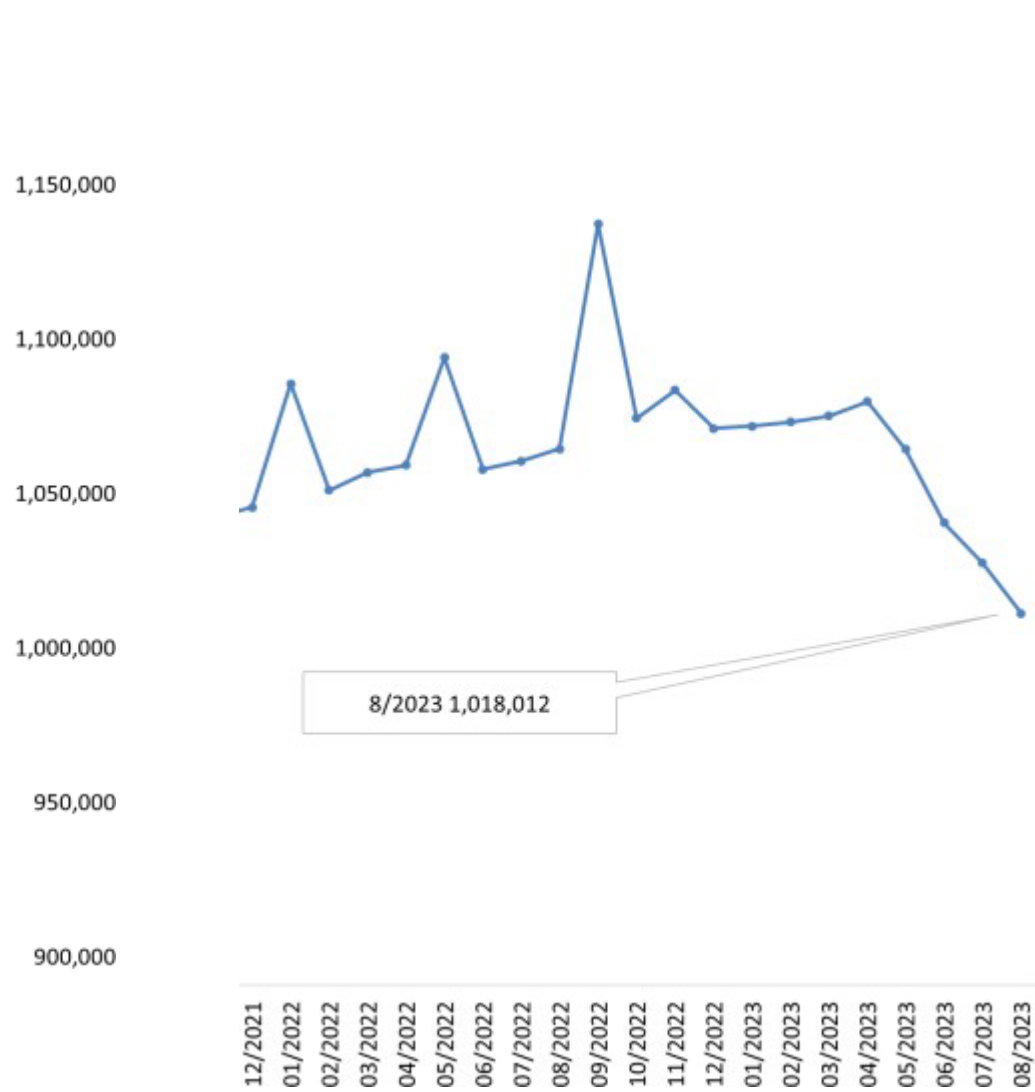
216,488 New Mexico adults supported by Behavioral Health programs and services** **from July 2022 - June 2023**



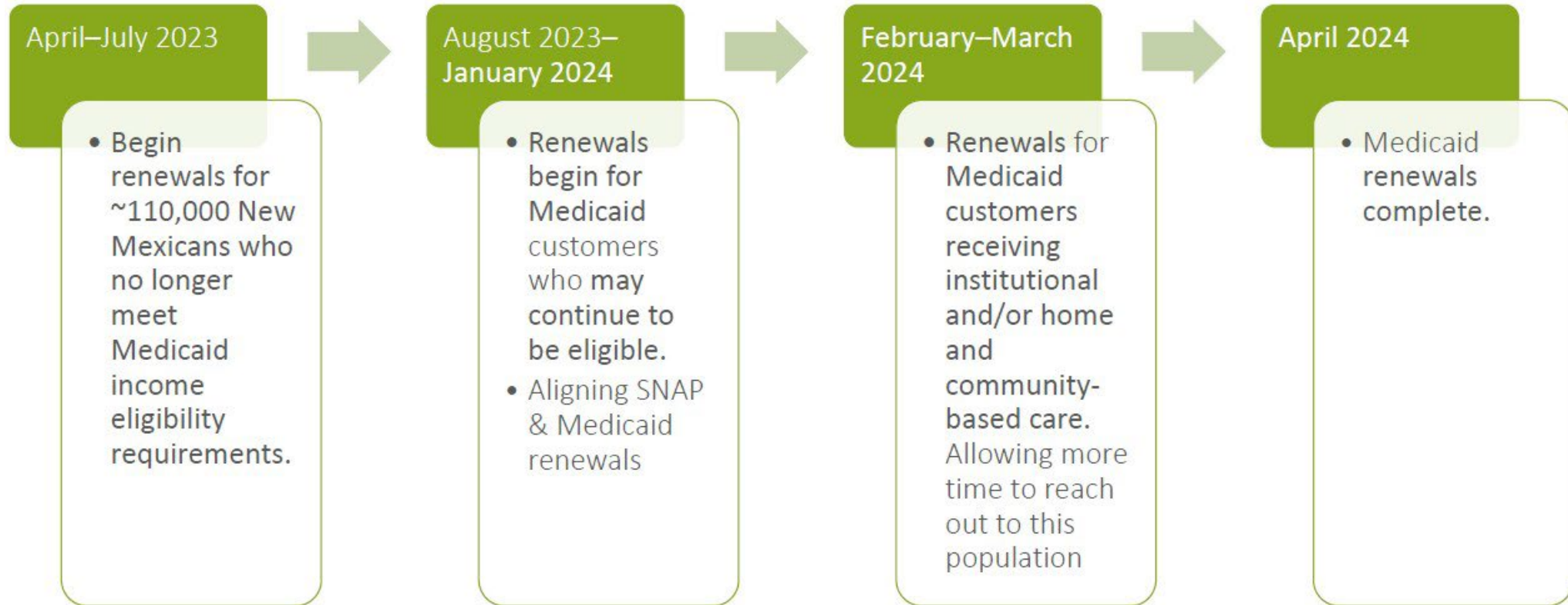
*collections include current support and arrears debt to the custodial parent and/or the state.
**BH services include those covered through Medicaid and other sources (federal and general funds). The total is affected by a 3 month claim lag and therefore this measure is updated quarterly.

<https://sites.google.com/view/nmhsdscorecard>

UNIQUE HSD CUSTOMERS SEPTEMBER 2023




HSD WILL COMPLETE ALL MEDICAID RENEWALS FROM APRIL 2023 TO APRIL 2024




It's Time to **Renew NM!**

[RENEW.HSD.NM.GOV](https://renew.hsd.nm.gov)

- **Renew NM** is a statewide public awareness and multimedia campaign that provides resources and information to HSD customers and community partners about how and when to renew Medicaid & SNAP benefits.
- **3 important steps to remember:**
 - Update your contact info.
 - Look for your Turquoise envelope.
 - Submit your renewal.


It's Time to **Renew NM!**


Get Ready to Renew!




Everyone enrolled in **Medicaid** and/or **SNAP** will need to renew when they are notified.

▶ Learn more at renew.hsd.nm.gov


3 Steps to Renew Medicaid and SNAP

- 1 **Update Your Contact Information** 

Go to yes.state.nm.us and update your contact information in the chat. We will need this information to send your renewal notice!
- 2 **Watch for Your Turquoise Envelope** 

The New Mexico Human Services Department will send your renewal notice in a turquoise envelope with instructions on how to renew.
- 3 **Complete Your Renewal Application**

When notified, log in at yes.state.nm.us click **Renew My Benefits** and complete your renewal application. The fastest way to get your renewal processed is online.



If you are no longer eligible for Medicaid, you still may have low- or no-cost health coverage options! Learn more at beWellnm.com

HOW CAN HSD CUSTOMERS RENEW THEIR BENEFITS?

- **Fastest and easiest way to renew benefits is by accessing your YESNM account at www.yes.state.nm.us.**
- Other options include:
 - By mail: to CASA, P.O. Box 830, Bernalillo, NM 87004
 - In-person at a local HSD field office:
https://www.hsd.state.nm.us/lookingforassistance/field_offices_1/
- Questions? Call 1-800-283-4465



BECOME A RENEW NM PARTNER!

- If you are a provider, health care organization, community organization, business, government employee, community member, or community leader, **we need your help.**
- HSD created Renew NM communications, posters, flyers, social media posts, text messaging, and much more.
- You can use these free and ready to use material to help keep New Mexico covered. Check out your [Renew NM Partners page](#) now.

[RENEW.HSD.NM.GOV/PARTNERS-TOOLKIT](https://renew.hsd.nm.gov/partners-toolkit)

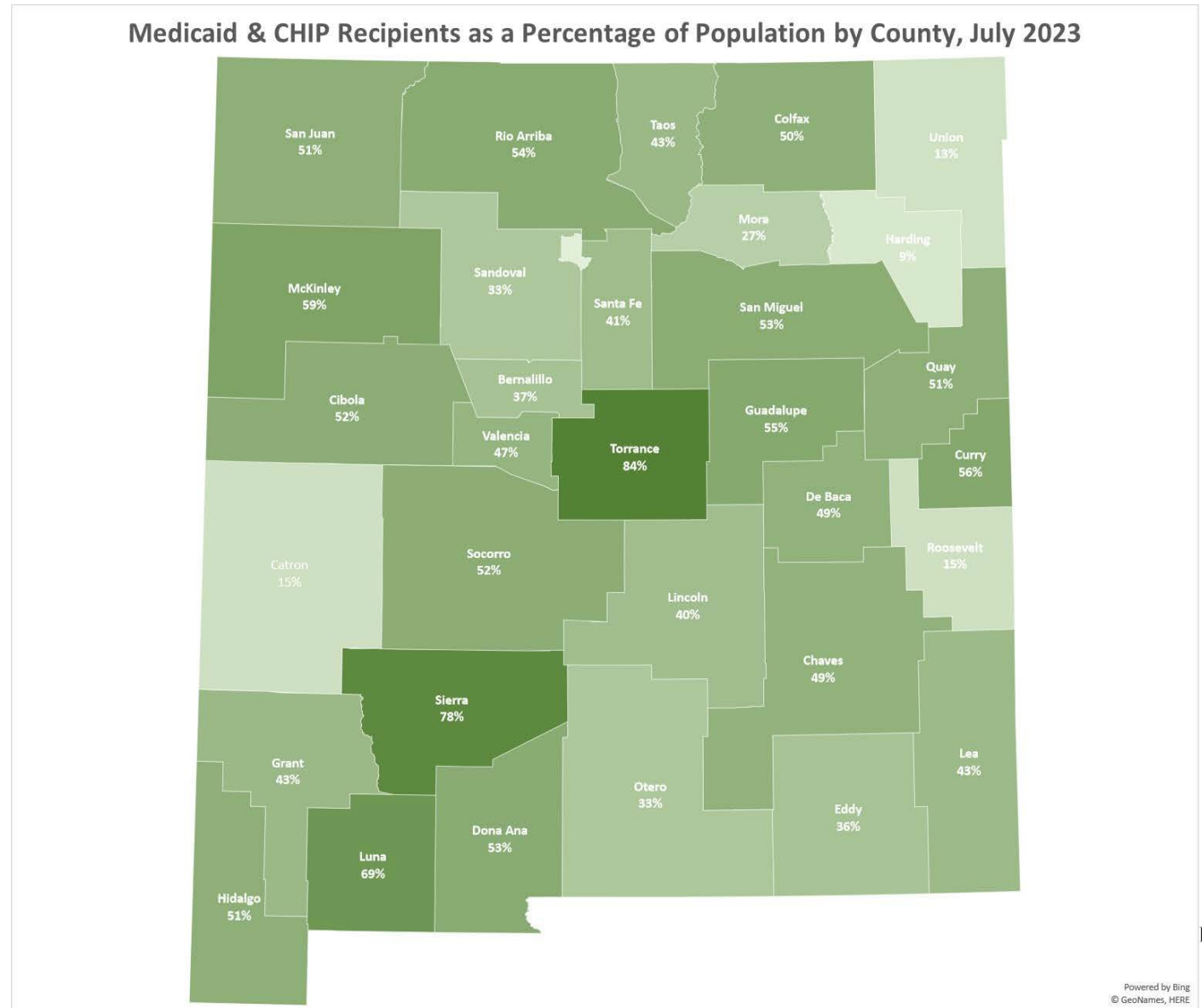
The screenshot shows the 'Renew NM Partners Toolkit' page. At the top left is the 'HUMAN SERVICES DEPARTMENT' logo, and at the top right is the slogan 'It's Time to Renew NM!'. The main content is organized into four sections, each with a distinct icon and title:

- Alert:** Medicaid & SNAP Customers (indicated by a red warning triangle icon).
- Step 1:** Visit yes.state.nm.us to Update Your Contact Information in the Chat (indicated by a green speech bubble icon).
- Step 2:** Watch For Your Turquoise Envelope (indicated by a blue envelope icon).
- Step 3:** Renew When Notified at yes.state.nm.us (indicated by an orange laptop icon).

At the bottom of the page, there are two links: 'Learn more at renew.hsd.nm.gov' and 'Questions? Call 1-800-283-4463'.

TRACKING MEDICAID ENROLLMENTS: POST-PHE HIGHLIGHTS

- Feb. 2020 835,440
- March 2023 1,001,136
- July 2023 911,126
- 43% of New Mexicans currently enrolled in Medicaid, July 2023 (48% at the March peak)
- 83% are enrolled in managed care
- 62% of New Mexicans under 21 enrolled in Medicaid-CHIP (56% pre-PHE)

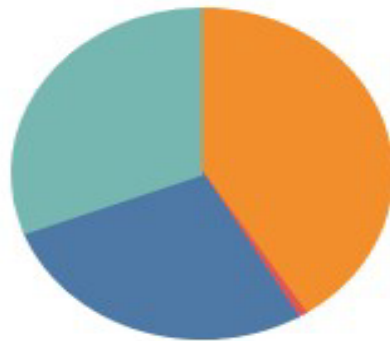


HSD UNWINDING SCORECARD

Medicaid Renewal Tracking for All 2023

Month

Enrollees with Renewals Due	Enrollees with Coverage Renewed	Enrollees Ineligible for Coverage	Enrollee Renewal Pending	Enrollees with Coverage Closed
376,185	150,859	3,110	121,194	101,022



- Status
- Enrollee with Coverage Renewed
 - Enrollees Ineligible for Coverage
 - Enrollee Renewal Pending
 - Enrollees with Coverage Closed

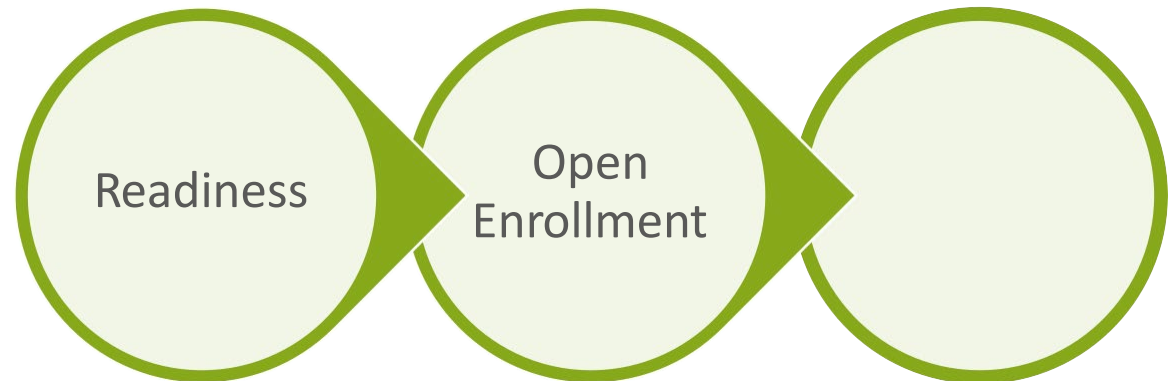
Month ✕

MCO AWARDS

Turquoise Care MCOs

- United Healthcare
- Molina
- Blue Cross Blue Shield
- Presbyterian – CISC MCO

New Contracts Effective 7/1/2024



<https://www.hsd.state.nm.us/2022-turquoise-care-mco-rfp-procurement-library/>

TURQUOISE CARE PROCUREMENT TIMELINE

Release of RFP and Procurement Library	September 30, 2022
Acknowledgment of Receipt Form due to HSD	October 17, 2022
Pre-Proposal Conferences – Morning: RFP; Afternoon: Actuarial	October 18, 2022
Deadline for submission of RFP questions for HSD response	October 28, 2022
HSD's final date to post responses to questions and Amendment(s) to RFP	November 18, 2022
Submission of Proposal – Deadline: 5:00 pm MST	December 2, 2022
Evaluation and Scoring of Proposals	December 5, 2022 – January 13, 2023
Notifications to Offerors that do not meet Mandatory Requirements	December 16, 2022
Scheduled Notice of Intent to Award	January 16, 2023
Termination of RFP	January 30, 2023

Reinstatement of RFP	August 10, 2023
Notice of Intent to Award	August 10, 2023
Send Updated Model Contract to Plans	August 31, 2023
Contract Negotiations	September 7 - September 28, 2023 MCOs to review and respond by submitting the negotiation template, due 9/18/2023
CMS Contract Approval Period	September 29, 2023 (Submit Model Contract to CMS for approval)
Signature process (Contractors and State)	September 29, 2023 - October 13, 2023
ANTICIPATED Contract Award Date	October 16, 2023
Protest period – fifteen (15) days from contract award	October 16, 2023 - October 30, 2023
Submission of Transition Management Agreement	October 31, 2023
Transition Management Agreement Effective Date	October 31, 2023
Effective Date for Readiness Period (no compensation)	October 31, 2023
Readiness Period	November 1, 2023 - June 30, 2024
Go-Live Date	July 1, 2024

Questions?



Investing for tomorrow, delivering today.

New Mexico Medical Insurance Pool

Elizabeth Quirante, Program Manager

New Mexico Medical Insurance Pool Update

**2024 OE Marketplace Kickoff Event
October 18, 2023**

Presented By:

Elizabeth Quirante, Program Manager
Sylvie Waffelaert, Clinical Manager

New Mexico Medical Insurance Pool (NMMIP)

- Legislatively created in 1987 as non-profit entity whose Purpose is:
 - “...to provide access to health insurance coverage to all residents of New Mexico who are denied adequate health insurance and are considered uninsurable.”

Governance and Administration

- Board of Directors (11 members)
 - Superintendent of Insurance (Chair), Insurance Reps (4), Physician, Statewide Health Planner, Consumers (2), and Community Members (2)
- Administration *By Contract through Procurement Process:*
 - Executive Office ~ Delta Management Group
 - Plan and Network Administrator ~ Value Health Benefit Administrators

NMMIP Board of Directors

Executive Office Delta Management Group

- General Management of the Pool
- Program planning and coordination
- Grievances/Appeals
- Board Support
- Clinical Care Team oversees care management program

NMMIP Administrator Value Health Benefit Admin

- Eligibility/Enrollment
- Customer Service
- Premium Administration
- Network Management
- Claims processing
- Reporting
- Coordinates with PBM and Medical Case Management

NMMIP Pharmacy Manager Elixir

- Manages pharmacy benefits and formulary for NMMIP Regular Plan
- Manages coordination with Part D for Medicare Carve Out Plan

NMMIP Medical Case Management CORUS

- Integrated Case Management
- Transition of Care
- Clinical Support at home/ER Diversion
- Remote Patient Monitoring

Demographics and Statistics

Active Policyholders as of 7/31/2023: 4,476

- Percentage enrolled in the Low-Income Premium Program: 75%
- Percentage sponsored by a Third Party: 15%
 - *Third Party Payors: Department of Health, American Kidney Fund, etc.*

Enrollment by plan:

- NMMIP Plan - 4,155
- Medicare Carve Out - 321

- Average age: 46

Eligibility Requirements

- Resident of NM; and
- Been Rejected for Individual Comprehensive Coverage (*Rejection of coverage = ineligible for any other coverage*), or
- If an individual has lost their previous coverage, with no gap of greater than 95 days, they can enroll.

***Individuals are not eligible** if they can be covered under a Group Insurance Plan, Medicaid, or Medicare (if they are over 65).

Premium Rates

- Based on AGE, DEDUCTIBLE and REGION. Set by the Board annually.
- Currently set at 110% of “Standard Risk Rate”
- Low-Income Premium Program offers discounted premiums for those with incomes < 400% FPL

Low-Income Premium Program

Qualifying Income Guidelines - 2023

Household Size	0-199% of Poverty	200-299% of Poverty	300-399% of Poverty
	75% Premium Reduction	50% Premium Reduction	25% Premium Reduction
1	\$27,044	\$40,634	\$54,225
2	\$36,437	\$54,747	\$73,057
3	\$45,830	\$68,860	\$91,890
4	\$49,253	\$74,003	\$98,753
5	\$64,615	\$97,085	\$129,555

Full Premium Examples 2023

Bernalillo Co.

Age	500 Deductible	1000 Deductible	2000 Deductible	5000 Deductible
0-14	\$315	\$275	\$221	\$153
20	\$399	\$349	\$281	\$194
25	\$413	\$361	\$291	\$201
35	\$503	\$440	\$354	\$244
45	\$594	\$520	\$418	\$289
55	\$918	\$802	\$646	\$446
64	\$1,235	\$1079	\$868	\$600

Medicare Carve Out Plan

- Individuals under the age of 65 and on Medicare due to a disability can apply for the Medicare Carve Out Plan through NMMIP
- Medicare A and B are primary, the Medicare Carve Out plan is a secondary plan.
- Medicare Carve Out members must enroll in a Part D plan and pay the monthly premium. NMMIP will pay the out-of-pocket costs for medications on the Part D formulary.

NMMIP Benefit Designs/Network

- The current plan design is an EPO (Exclusive Provider Organization) that utilizes the Private HealthCare Systems Network (PHCS). This plan design allows access to contracted providers out of state, but only covers out-of-network claims in urgent, emergent or “surprise billing” circumstances.

The Benefit Plans are as follows:

- \$500 Deductible/\$5,000 Max OOP
- \$1,000 Deductible/\$5,000 Max OOP
- \$2,000 Deductible/\$6,000 Max OOP
- \$5,000 Deductible/\$7,350 Max OOP

Broker Commission

- Brokers assisting a new applicant into the NMMIP are eligible to receive a one-time commission of \$300 after the policy has become effective.
- Brokers assisting a NMMIP member transitioning out of NMMIP into the Exchange or Medicaid are eligible to receive a \$300 fee.
- <https://nmmip.org/blog/broker-information/>

NMMIP's Clinical Care Management

- Integrated Intensive Care Management - Facilitate communication and help identify needs to manage patient care.
- Transition of care - discharge planning starts the date of admission by communication with the facility and the member.
- Clinical Support at Home/Emergency Room Diversion - A care plan is created that addresses the member's needs, reviews the social determinants of health and communicates among the other providers involved in the member's care.
- Remote patient monitoring - supports members at home to monitor vitals, provide video/telephonic visits and decrease the need for urgent/ER visits.

Contact Information

- **NMMIP Executive Office/Delta Consulting Group**
 - PO BOX 6726 Santa Fe, NM 87502
 - 1223 S St Francis Dr., Suite B Santa Fe, NM 87505
 - (505) 424-7105 Office
 - (505) 424-7107 Fax
 - Kristina Leeper, Executive Directory:
 - (505) 577-5739, cell
 - kleeper@nmmip.org
 - Elizabeth Quirante, Program Manager:
 - (505) 424-7105
 - equirante@nmmip.org
- **Sylvie Waffelaert, Clinical Manager**
 - 505-336-0146, cell
 - swaffelaert@nmmip.org
- **Sharon Kelly, Clinical Systems Director**
 - 505-336-0173, cell
 - skelly@nmmip.org
- **ValueHealth Benefit Administrators**
 - PO BOX 1090 Great Bend, KS 67530
 - Physical: 2015 16th St
 - 1-844-728-7896 Phone
 - 1-620-793-1199 Fax

Questions?

Questions

Networking



be well nm[®]

THE PLACE TO SHOP, COMPARE AND BUY HEALTH INSURANCE. *Affordably.*

BeWellnm.com | 1.833.ToBeWell



New Mexico Health Insurance Exchange