

BeWell, New Mexico's Health Insurance Marketplace

PY26 Kickoff Meetings

September 22-26, 2025



BeWell Basics

BeWell History



- It was created by state statute in 2013.
- It is a nonprofit public corporation.
- It is not a state agency but is subject to several of the same laws state agencies are subject to (e.g., the Open Meetings Act, the Inspection of Public Records Act).
- BeWell is governed by a 13-member Board of Directors (“the Board”).
 - Members of the Board are appointed by the Governor and members of the New Mexico Legislature.
 - The Superintendent of Insurance and the Secretary of the Human Services Department (or their designee(s)) also serve on the Board.

BeWell Basics



BeWell

- www.beWellnm.com;
- Customer Service is open Monday-Friday, 7am-7pm and 9am-2pm on Saturdays during Open Enrollment. In office assistance closes at 5p.m. We can be reached at 1-833-ToBeWell: 1-833-862-3935 (TTY: 711);
- Helps connect New Mexicans with free education and enrollment assistance from agents, brokers, and enrollment counselors, collectively referred to as “assisters”;

BeWell Basics (Continued)



- Is the only place in the state that can provide advanced payments of the premium tax credit (APTC) and other state subsidies to reduce monthly premiums:
- Provides Form 1095-A to consumers as a tax record of their coverage and any federal financial assistance (e.g., APTC) they may have received toward their premium; and
- BeWell works with carriers daily by transferring enrollment information.

BeWell Does Not



- Negotiate rates between health insurance carriers and providers.
- Oversee, regulate, or manage health insurance carriers.
- Operate as a state agency or regulatory body.
- Regulate or set insurance laws.
- Regulate agents and brokers.
- Administer or oversee Medicaid.
- Pay or negotiate commissions.
- Create, print, or provide health insurance ID cards.
- Determine provider networks or plan pricing.

Our Regulatory Partners

The Centers for Medicare and Medicaid Services



- The Centers for Medicare and Medicaid Services (CMS) is the federal agency that runs Medicare, Medicaid, Children's Health Insurance Programs (CHIP), and the federally-facilitated Marketplace (FFM).
- CMS, through the Center for Consumer Information and Insurance Oversight (CCIIO), is responsible for the oversight and monitoring of state-based marketplaces (SBM).
- SBMs are required to conduct a defined set of oversight activities to track and monitor how they are meeting Patient Protection and Affordable Care Act (referred to as PPACA or ACA) requirements.
 - SBMs are required to comply with exchange-related policy and operational requirements set forth in statute, regulations, and federal guidance.

New Mexico Office of Superintendent of Insurance



- The New Mexico Office of Superintendent of Insurance (OSI) is the oversight and regulatory agency for insurance products in New Mexico OSI:



- Oversees individuals and agencies who sell insurance in New Mexico;
 - Approves and certifies, with BeWell the health plans offered on BeWell;
 - Advocates for policy changes to improve consumer protections;
 - Helps process consumer complaints and grievances;
 - Investigates inquiries against insurance producers and entities, and takes enforcement action if there is a violation of insurance code.
 - Combats insurance fraud by investigating insurance issues and reporting criminal behavior; and
 - Collaborates with BeWell and the HCA but does not oversee BeWell or manage the HCAF and affordability initiatives in New Mexico.
- See www.osi.state.nm.us for more information

OSI's Regulatory Authority



Company and Producer Licensing

OSI is responsible for licensing and compliance review of companies, individuals and business entities.

Forms, Rates and Managed Health Care Compliance

OSI reviews the forms and rates for all individual, small and large group plans in the fully insured market including but not limited to reviewing forms, rates, network adequacy, operational plans such as utilization management and drug formularies.

- OSI performs plan management functions for BeWell.
- OSI has the same regulatory oversight responsibilities to fully insured plans sold off-exchange.

Financial and Regulatory Oversight

Fiscal audits and compliance review.

OSI's Regulatory Authority



Managed Health Care Consumer Assistance

For all individual, small and large group plans in the fully insured market.

- Member complaints/grievances – when a consumer has a concern about an adverse or administrative complaint/grievance against a carrier.
- Provider complaints/grievances – when a provider has a complaint/grievance against a carrier.
- Managed Health Care Compliant Form - <https://www.osi.state.nm.us/en/mhcb-complaint/>.

The Civil Investigations Bureau

Handles the investigation of insurance producers and entities for possible infractions, and the civil enforcement of Insurance Code violations.

2026 Rates, Cost Drivers and Consumer Protections



- Premium Trends:
 - Significant increases across most carriers with an average increase of 35.7%
- Primary Cost Drivers in the individual market:
 - Medicaid Redeterminations
 - 2024 Adverse Experience
 - Rising Medical and Pharmaceutical Costs
 - Sicker Population
 - Adverse Selection
- Consumer Protection Reminder
 - Excepted benefit products do not replace major medical coverage
 - They lack essential health benefits & ACA protections
 - Should be used only as supplemental coverage, not as a substitute for medical coverage

OSI Contacts



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QUESTIONS?