

State of New Mexico Employee Benefits

New Hire (or Qualifying Event) Benefit Enrollment

Forms must be completed and submitted within the first 31 days of employment (or a Qualifying Event).

Forms and benefit plan summaries may be found online at www.mybenefitsnm.com. For questions regarding your benefits please contact Erisa Administrative Services, Inc., at 505-244-6000. If you are adding new dependents (spouse/domestic partner, children), you must fax required proof of dependency *documents* to Erisa at 505-244-6009 (marriage certificate, domestic partner affidavit, birth certificates).

Premium rates can also be found on the website at www.mybenefitsnm.com.

Below is a list of benefits available to employees:

Medical	Blue Cross Blue Shield Lovelace Presbyterian New Mexico Health Investment Plan (2 options - available only during Fall Open/Switch Enrollment for Jan 1 effective date)
Prescription/Pharmacy	Express Scripts
Dental	Delta Dental
Vision	Vision Service Plan
Flexible Spending Account	CompuSys/Erisa: nmflex.com
Employee Term Life (Basic Life) Additional (Supplemental) Life Accidental Death & Dismemberment Dependent Life (spouse and/or child)	The Standard
Disability Insurance	CompuSys/Erisa
Employee Assistance Plan	Deer Oaks EAP Services

If, in the future (after becoming a State employee), you have a qualifying event occur (see list below) and desire changes to benefits, enrollment changes must be made within 31 days of the event. Please contact Erisa Administrative Services, Inc., at 505-244-6000 to complete forms and submit any needed documentation for those qualifying events. More information is located on the State benefits website: www.mybenefitsnm.com

Qualifying Events (Change of Status)

- Change in job status of spouse/domestic partner resulting in loss of group coverage or gain of other coverage from new employment
- Change in job status of employee (such as reduction of hours due to FMLA, LWOP, and Disability)
- Marriage or a change in marital status, such as divorce or legal separation, resulting in a loss of coverage. This includes satisfying requirements for Domestic Partnership eligibility
- Death of a spouse or eligible dependent, resulting in a loss or change of group coverage
- Birth of a child, a court approved adoption, or legal guardianship
- Any other circumstance where the individual had other coverage and loses it due to circumstances beyond their control *must be evaluated by RMD for eligibility*

NOTE: Loss of a provider or provider group is *not* a qualifying event to change carriers

Employee Name (Print)

Employee Signature

Date

HR Representative Signature