State of New Mexico – Open Enrollment FAQ

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Enrollment Period: October 20 – November 20, 2025
Effective Dates: January 1 – June 30, 2026 (Short Plan Year)

HEALTH CARE
AUTHORITY

Open Enrollment is here and there are important changes that you need to know about. The biggest change is that the State of New Mexico is switching its Plan Year to align with the state's Fiscal Year. Currently, members sign up in October for plans that start in January, but premiums change in July. Once the Plan Year starts in July, you will know what your premiums will be for the entire Plan Year when you sign up for your coverage.

During the transitional period between January and June of 2026, there will be a 6-month Plan Year. During this period, the out-of-pocket maximum and deducible for your health plan will be reduced to account for the shortened period. You can learn more about what to expect below.

General Enrollment Information

Q: When is Open Enrollment?
A: October 20 – November 20, 2025. Elections made during this period will be effective January 1 – June 30, 2026.
Q: If I am already enrolled in coverage, do I need to take any actions to keep my coverage?
A: No. You will be automatically re-enrolled in your current plan if you take no action.
Q: Why is there a short Plan Year?
A: The short Plan Year (January 1 – June 30, 2026) allows the State to align benefits with the state's fiscal year starting July 1, 2026. This means future premiums will align with budget cycles and you will no longer see mid-year premium changes without being able to change your plan.
Q: Will my premiums increase during the short Plan Year?
A: No. Premiums will remain at the same level as current from January 1 through June 30, 2026.
Q: When is the next Open Enrollment after this?
A: Another Open/Switch Enrollment will take place in April 2026 for the full fiscal Plan Year (July 1, 2026 – June 30, 2027).

Medical and Prescription Drugs

Q: Which carriers are available for medical coverage?
A: Blue Cross Blue Shield of New Mexico (PPO & HMO) and Presbyterian Health Plan (HMO).
Q: Are there any plan design changes?
A: No, there are no plan design changes for the short Plan Year.
Q: What about prescription drug coverage?
A: Prescription drug coverage remains embedded in the medical plans and will continue to be administered by CVS Caremark.
Q: What happens to deductibles and out-of-pocket maximums?
A: Medical and prescription drug deductibles and out-of-pocket maximums will be cut in half to account for the shortened Plan Year.

Dental and Vision

Q: What changes are happening with dental coverage?
A: The State is now offering two dental benefit carrier options – Delta Dental of New Mexico and MetLife Dental. You can see presentations and contact information for both plans on the State Health Benefits website. Dental plan benefits remain the same, but deductibles and annual benefit maximums will be cut in half for the short Plan Year. Frequency limitations like dental cleanings and vision exams will reset January 1, 2026 and again on July 1, 2026.

Q: What changes are happening with vision coverage?
A: We have a new vision benefit carrier, Davis Vision. You can see a presentation and contact information on the State Health Benefits website. Vision plan benefits remain the same. Exam limits reset January 1, 2026 and again July 1, 2026.

Life Insurance

Q: Can I increase my life insurance coverage during this enrollment?
A: Yes. Employees may increase supplemental life insurance by $10,000 up to $150,000 guaranteed issue. Spouse/domestic partner coverage can be increased by $10,000 up to $30,000 guaranteed issue.
Q: What if I want coverage above the guaranteed issue?
A: Amounts above the guaranteed issue require Evidence of Insurability (EOI).
Q: Who administers the life insurance program?
A: The Hartford remains the administrator. Please keep your beneficiary information current.

Flexible Spending Account (FSA)

Q: Do I need to re-enroll in FSAs this year?
A: Yes. You must enroll in FSAs every year during Open/Switch Enrollment.
Q: What are the FSA limits for the short Plan Year?
A: Contributions will be capped at 50% of the annual maximum for the six-month Plan Year (January – June 2026). Full annual limits will resume for the 12-month fiscal Plan Year beginning July 1, 2026.
Q: What happens if I don't use all of my Health Care FSA funds by the end of the short Plan Year?
A: You have until August 7th for Medical FSA and June 30th for dependent care to spend the funds. Any unused money after that date will be forfeited.
Q: What happens to my Dependent Care FSA?
A: Any money left after June 30, 2026 will be forfeited. Remember that the state's Universal Child Care program begins November 1, 2025, which may impact how much you contribute. For more information visit Universal Child Care | Early Childhood Education & Care Department.
Q: What about Transit/Parking FSAs?
A: These roll over monthly and continue as usual.

Enrollment Process

Q: How do I enroll?
A: Complete enrollment online or with a fillable PDF form by 11:59 PM on November 20, 2025.
Q: Do I need to submit documentation?
A: Yes. Supporting documentation is required for newly added dependents.
Submit documents online (PDF, JPG, PNG), or send by:

- Email: SONM@easitpa.com

- Fax: 505-244-6009

Q: Will late enrollments be accepted?
A: No. Late enrollments will not be accepted.

Key Dates

- **Open/Switch Enrollment:** October 20 – November 20, 2025
- **Virtual Open Enrollment Sessions:**
  - October 21 (9–11 AM)
  - October 29 (2–4 PM)
  - November 6 (9–11 AM, ASL interpreter provided)
  - November 13 (9–11 AM)
  - November 19 (2–4 PM)
- **Benefits Effective Date:** January 1 – June 30, 2026
- **First Payroll Deduction:** January 9, 2026

State Employee Program Assistance (SEPA)

Q: Can I apply for SEPA during this enrollment?
A: Yes, if you are not currently enrolled but think you qualify, you may apply during this Open Enrollment.
Q: Can I make changes to my SEPA enrollment if I am already participating?
A: No, unless you are disenrolling. Otherwise, changes can be made July 1, 2026.

Additional General Questions

Q: Will there be changes to medical carriers or plan designs starting July 1, 2026?
A: The medical RFP is in progress – information will be shared in Spring 2026.
Q: How will I know if my elections went through?
A: Confirmation via online system or payroll deduction review in January 2026. REMEMBER to make a copy of your enrollment so that you have it if you see any inconsistencies when verifying your elections online.
Q: Where can I find help comparing plans?
A: You can find information on the SHB website Home | SoNM Group Benefits Plan, and Open Enrollment virtual sessions.
Q: Will the April 2026 enrollment allow me to change all benefits, or only medical?
A: The July 1, 2026 – June 30, 2027 Plan Year open enrollment will allow you to make changes to all benefits.
Q: What is the Premium Only Plan (POP)?
A: POP allows you to pay your share of medical, dental, and vision premiums with pre-tax payroll deductions. This lowers your taxable income and increases your take-home pay. You are automatically enrolled in the POP pre-tax benefit. You must submit a waiver if you wish to opt out during Open Enrollment.

Questions?
Contact EASI Gov, Inc. at (505) 244-6000 or toll-free (855) 618-1800.