

Effective Date
(mm/dd/yyyy)



New Mexico Public Schools Insurance Authority
NM TECH RETIREE CHANGE CARD

District/Entity Name

District/Entity #

Eligibility Administrative Office (505) 988-4974 (800) 233-3164 FAX (505) 988-8943

1 Social Security Number Name (Last, First, Middle) Date of Birth

Mailing Address City State Zip Code Home Phone Number

Marital Status Gender Preferred E-Mail Address Work Phone Number Cell Phone Number

REASON FOR CHANGE: Answer questions below

2 ENROLLMENT What is your current enrollment status? Check One: ADD COVERAGE CANCEL COVERAGE SWITCH ENROLLMENT

MEDICAL: Blue Cross Blue Shield of NM Cigna Presbyterian Decline Medical

DENTAL: Delta Dental: High Option (Default) Low Option United Concordia: High Option (Default) Low Option Decline Dental

VISION: Davis Vision (2 year enrollment required) Decline Vision

ADDITIONAL LIFE: The Standard \$10,000 Decline Retiree Additional Life

3 DEPENDENT INFORMATION List all dependents you wish to enroll. Table with columns: Med, Dntl, Visn, Dependent's Name, Social Security Number, Date of Birth, Gender, Relationship, Proof of Marriage.

4 RETIREE AUTHORIZATION STATEMENT I hereby apply to the Authority for the coverage offered to myself and dependents shown above. RETIREE SIGNATURE DATE

5 NEW MEXICO TECH CERTIFICATION FORM MUST BE SIGNED BY NEW MEXICO TECH.

I attest that to the best of my knowledge that this applicant is a retiree of New Mexico Tech and meets the eligibility requirements for NMPSIA benefits

Please read the NMPSIA Program Guide (provided to you by your benefits office) as you complete this form.

NMPSIA's Program Guide outlines the NMPSIA Eligibility Rules and administrative guidelines for enrollment. If you do not have this Guide, you can obtain a copy from your benefits office or at <https://nmpsia.com>.

ELIGIBILITY

The effective date for all your other lines of coverage is determined NM Tech. This effective date can never be made retroactive (prior to the date you officially apply).

ENROLLMENT

You may only apply for the lines of NMPSIA coverage offered by NM Tech.

Please keep the following in mind:

- You may enroll as single only for any line of NMPSIA coverage.

Indicate the status (*retiree only, two-party, or family*) for each line of coverage.

If both you and your spouse have coverage with NM Tech or under another NMPSIA affiliated employer, you and your spouse cannot double insure each other and your dependents under the NMPSIA Group Plan for any line of NMPSIA coverage.

Coverage for your dependents will begin on your effective date of coverage.

Medical and Prescription Drug Coverage – If you enroll in the medical plan, you are automatically enrolled in the Prescription Drug Program. You will receive a separate ID card from the NMPSIA Prescription Drug Manager to purchase your prescription drugs.

Additional Life Coverage - If you enroll for Additional Life coverage, you will qualify for the Retiree \$10,000 life amount.

CONFIRMATION OF ENROLLMENT

Once your enrollment has been processed, the NMPSIA Eligibility Administrative Office will email you or mail you a Confirmation of Enrollment Notice to your *home (and to NM Tech)*. Please review this confirmation notice carefully and report any discrepancies to New Mexico Tech Benefits Office or to the NMPSIA Eligibility Administrative Office at 1 (800) 233-3164.

If you do not provide NM Tech with all of the appropriate documentation necessary to finalize your enrollment request, you will be contacted for the appropriate documentation. Please be sure to adhere to all deadlines associated with this request.