

To: New Mexico Tech Retirees Enrolled in Health Plan

From: Human Resources Department

Subject: Important Information Regarding Upcoming Changes

Date: August 10, 2022

The purpose of this memorandum is to explain some upcoming changes in the premiums for the NMPSIA Health Care Plan. This October (2022), the cost of the premiums will increase and the changes in the cost of premiums to NMT Retirees will be as follows:

Plan Name	<b>Increase in Premium</b>
Blue Cross/Blue Shield High/EPO Option Blue	6.0%
Cross/Blue Shield Low Option Cigna High	3.2%
Option	6.0%
Cigna Low Option	3.2%
Presbyterian High Option	6.0%
Presbyterian Low Option	3.2%
Delta Dental or United Concordia High Option	0
Delta Dental or United Concordia Low Option	0
Retiree Life	0

Since we deduct premiums the month prior to the insurance coverage, the new premiums will be deducted September 1, 2022 - https://www.nmt.edu/hr/index.php

Open Enrollment allows Retirees time to make changes to their Health Plan Coverage. The Open Enrollment Period is the **only** opportunity to make changes to your coverage unless you have a "qualifying event" such as birth of a child, marriage, divorce, etc. The Open Enrollment period begins October 1, 2022 through November 11, 2022. A form is **not required** if no changes are made. If you have questions or want to make changes to your current coverage, please contact Angie at 575-835-5643 or at angie.gonzales@nmt.edu.



## Human Resources Department October 1, 2022 Retiree Monthly Rates

			D	lue Cross Blue S	hield				
			В	Single Premiu					
	Single No			Single with	Single with				
	Medicare Retiree	Medicare Employer	Total Monthly	Medicare Retiree	Medicare Employer	Total Monthly			
Medical Plan and Carrier	Premium	Premium	Premium	Premium	Premium	Premium			
High Option Plan	\$430.20	\$430.20	\$860.40	\$381.25	\$381.25	\$762.49			
Low Option Plan	\$298.26	\$298.26	\$596.52	\$264.32	\$264.32	\$528.64			
EPO Option Plan	\$387.17	\$387.17	\$774.34	\$343.11	\$343.11	\$686.22			
				2 Party Premiu			Torra Donator	Torre Books	
	Two Party No	Two Party No		Two Party One on	Two Party One on		Two Party with	Two Party with	
	Medicare	Medicare		Medicare	Medicare		Medicare	Medicare	
Madical Dlan and Carrier	Retiree Premium	Employer	-	Retiree Premium	Employer	Total Monthly	Retiree	Employer	Total Month
Medical Plan and Carrier  High Option Plan	\$818.15	Premium \$818.15	Premium \$1,636.30	\$769.20	Premium \$769.20	Premium \$1,538.39	Premium \$762.49	Premium \$762.49	Premiu: \$1,524.9
Low Option Plan	\$567.26	\$567.26	\$1,134.52	\$533.32	\$533.32	\$1,066.64	\$528.64	\$528.64	\$1,057.2
EPO Option Plan	\$736.32	\$736.32	\$1,472.64	\$692.26	\$692.26	\$1,384.52	\$686.22	\$686.22	\$1,372.4
		1	ı	Family Premiu	m	I.			
				One Medicare	One Medicare		Two Party	Two Party	
	Family No	Family No		Two or More	Two or More		with	with	
	Medicare	Medicare		No Medicare	No Medicare		Medicare	Medicare	
Medical Plan and Carrier	Retiree Premium	Employer Premium	Total Monthly Premium	Retiree Premium	Employer Premium	Total Monthly Premium	Retiree Premium	Employer Premium	Total Month Premiur
High Option Plan	\$1,092.74	\$1,092.74	\$2,185.48	\$1,043.79	\$1,043.79	\$2,087.57	\$994.83	\$994.83	\$1,989.6
Low Option Plan	\$757.68	\$757.68	\$1,515.36	\$723.74	\$723.74	\$1,447.48	\$689.80	\$689.80	\$1,379.5
EPO Option Plan	\$983.40	\$983.40	\$1,966.80	\$939.39	\$939.39	\$1,878.78	\$895.33	\$895.33	\$1,790.6
				Cigna					
			ı	Single Premiu			ı		
	Single No	Single No	T-4-1 84	Single with	-	T-4-1 844-1.			
Medical Plan and Carrier	Medicare Retiree	Medicare Employer	Total Monthly Premium	Medicare Retiree	Medicare Employer	Total Monthly Premium			
High Option Plan	\$410.77	\$410.77	\$821.54	\$364.03	\$364.03	\$728.05			
Low Option Plan	\$286.13	\$286.13	\$572.26	\$253.57	\$253.57	\$507.14			
•				2 Party Premiu	m		1		
	Torre Development	Torre Denter No.		Two Party	Two Party		Two Party	Two Party	
	Two Party No Medicare	Two Party No Medicare		One on Medicare	One on Medicare		with Medicare	with Medicare	
	Retiree	Employer	<b>Total Monthly</b>	Retiree	Employer	Total Monthly	Retiree	Employer	Total Monthl
Medical Plan and Carrier	Premium	Premium	Premium	Premium	Premium	Premium	Premium	Premium	Premiun
High Option Plan	\$792.96	\$792.96	\$1,585.92	\$746.22	\$746.22	\$1,492.43	\$728.05	\$728.05	\$1,456.1
Low Option Plan	\$552.35	\$552.35	\$1,104.70	\$519.79	\$519.79	\$1,039.58	\$507.14	\$507.14	\$1,014.2
				Family Premiu	m				
				One Medicare	One Medicare		Two Medicare	Two Medicare	
	Family No	Family No		Two or More	Two or More		One or more	One or more	
	Medicare Retiree	Medicare Employer	Total Monthly	No Medicare Retiree	No Monthly Employer	Total Monthly	No Medicare Retiree	No Medicare Employer	Total Month
Medical Plan and Carrier	Premium	Premium	Premium	Premium	Premium	Premium	Premium	Premium	Premiur
High Option Plan	\$1,062.83	\$1,062.83	\$2,125.66	\$1,016.09	\$1,016.09	\$2,032.17	\$969.34	\$969.34	\$1,938.6
Low Option Plan	\$740.34	\$740.34	\$1,480.68	\$707.78	\$707.78	\$1,415.56	\$675.22	\$675.22	\$1,350.4
				Presbyterian	1				
				Single Premiu	m				
	Single No	Single No		Single with	Single with				
	Medicare Retiree	Medicare Employer	Total Monthly	Medicare Retiree	Medicare Employer	Total Monthly			
Medical Plan and Carrier	Premium	Premium	Premium	Premium	Premium	Premium			
High Option Plan	\$347.88	\$347.88	\$695.76	\$308.29	\$308.29	\$616.58			
Low Option Plan	\$241.23	\$241.23	\$482.46		\$213.78	\$427.56			
	Two Party No	Two Darty N-		2 Party Premiu			Two Party	Two Party	
	Medicare	Two Party No Medicare		One on	One on		iwo Party with	i wo Party with	
	Retiree	Employer	Total Monthly	Medicare	Medicare	Total Monthly	Medicare	Medicare	Total Monthl
Medical Plan and Carrier	Premium	Premium	Premium	Retiree	Employer	Premium	Retiree	Employer	Premiur
High Option Plan	\$730.51	\$730.51	\$1,461.02	\$690.92	\$690.92	\$1,381.84	\$616.59	\$616.59	\$1,233.1
Low Option Plan	\$506.51	\$506.51	\$1,013.02	\$479.06 Family Premiu	\$479.06 m	\$958.12	\$427.56	\$427.56	\$855.1
				One Medicare	One Medicare		Two Medicare		
	Family No Medicare	Family No Medicare		Two or More No Medicare	Two or More No Monthly		One or more No Medicare	One or more No Medicare	
	Retiree	Employer	Total Monthly	Retiree	Employer	Total Monthly	Retiree	Employer	Total Month
Medical Plan and Carrier	Premium	Premium	Premium	Premium	Premium	Premium	Premium	Premium	Premiur
High Option Plan	\$974.09		\$1,948.18	\$934.50	\$934.50	\$1,869.00	\$894.92	\$894.92	\$1,789.8
Low Option Plan	\$675.38	\$675.38	\$1,350.76	\$647.93	\$647.93	\$1,295.86	\$620.48	\$620.48	\$1,240.9
			Delta D	ental or United	Concordia				
			_	Two Party	Two Party			Family	
Dental Carrier	Retiree Premium	Employer Premium	Total Monthly Premium	Retiree Premium	Employer Premium	Total Monthly Premium	Family Retiree Premium	Employer Premium	Total Month Premiu
High Option Plan	\$14.30		\$28.60	\$27.22	\$27.22	\$54.44	\$42.77	\$42.77	\$85.5
Low Option Plan	\$7.16			\$13.63	\$13.63	\$27.26	\$21.39	\$21.39	\$42.7
	720	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				,			Ţ
				Davis Vision Pl	ail				
	Retiree		Total Monthly	Two Retiree			Family Retiree	Family	Total Month
Vision Carrier	Premium	Premium	Premium	Premium	Premium	Premium	Premium	Employer	Premiur
Davis Vision	\$3.13	\$3.13	\$6.26	\$5.24	\$5.24	\$10.48	\$7.07	\$7.07	\$14.1