

beWellnm Board Meeting

Friday July 17, 2020

Digitally/Telephonically

Public Dial-In: 1-888-537-7715

Participant Code: 78154952#

join.me/243-887-474



NEW MEXICO HEALTH INSURANCE EXCHANGE



1. Welcome, Roll Call, & Confirmation of Quorum

Chairman David Shaw



2. Approval of Agenda

Chairman David Shaw



3. Approval of Minutes of the May 22, 2020 beWellnm Board Meeting

Chairman David Shaw



4. Chairman's Remarks

Chairman David Shaw



5. Matters from the CEO

Mr. Jeffery Bustamante, CEO



Update



- Today's Agenda
 - Plan of Operations
 - Budget
 - COVID-19 Update
 - Outreach Strategy
- Federal Update
 - Supreme Court Case
 - Legislation

6. Committee Reports



a. Matters from the Native American Committee

Director Teresa Gomez, Committee Chair



Outreach and Enrollment



Outreach and Enrollment



State Health and Value Strategies - Weekly Covid-19 Digest

- beWellnm's Native American program has been featured in this piece. They are highlighting some of the best practices for outreach education and enrollment across the nation.
- <https://www.shvs.org/addressing-equity-through-covid-19-response-communications-approaches-in-states/>

Outreach and Enrollment



- **Native American Professional Parent Resources, Inc.**
 - Care packs distributed to Native American families
 - BeWellnm *New rack card
- **First Nations**
 - Bag distribution to Native American families
 - BeWellnm *New rack card, Collab Flyer & Pens

Health insurance benefits for Native Americans.

Because you just never know.

Need help signing up for health insurance?
BeWellnm is here to help. Call us, go online or visit an agent, broker or enrollment counselor located conveniently near you. We're making it easy and affordable to get the health insurance you need.



Help is here

Call our customer care center to find out more information or to get enrolled today.

1.833.ToBeWell (842.3935)



and here

By going online, you'll find easy-to-use forms to get enrolled anytime, day or night. You can even live chat with one of our friendly Enrollment Counselors. And, with our plan comparison tool, you can quickly find out if you qualify for financial assistance.

Learn more at beWellnm.com.



and here

Get free 1 on 1 assistance from an agent, broker or enrollment counselor. Please call us or go online to find a location near you.



Follow us on Facebook:
[BeWellnm for Native Americans](https://www.facebook.com/BeWellnmforNativeAmericans)

beWellnm.com

Enroll in health insurance Now!

- Native Americans can enroll at any time during the year. The sooner you enroll, the sooner you can have peace of mind knowing you and your family have expanded access to care.
- Take care of yourself, your family and your community.
- There are a variety of plans to choose from to meet your needs, budget and provider requirements.
- Health insurance covers emergency and specialty care outside of Indian Health care systems.
- Depending on annual income, Native Americans may not have to pay certain out-of-pocket costs.
- Support Indian Healthcare systems because health insurance can pay for your care.



MARK DILLON

Native American Advisory Committee



Native American Advisory Committee

- NAAC meets quarterly
- NAAC Calendar developed and sent to all appointees and partners
- Last meeting June 9, 2020

NATIVE AMERICAN ADVISORY COMMITTEE 2020 SCHEDULED MEETINGS

BEWELLM	NATIVE AMERICAN PROGRAM	OFFICE: 505.314.5261	EMAIL: JYAZZIE@NMHIX.COM
JULIET YAZZIE	NATIVE AMERICAN LIAISON MANAGER	MOBILE: 505.252.7299	FAX: 505.314.5353
7601 Jefferson NE, Suite 120 Albuquerque, NM 87109		Dial in: 1-888-537-7715	Participant Code: 78594427#

QUARTERLY MEETINGS	STARTING	ENDING
TUESDAY, MARCH 10, 2020	1:00 PM	3:00 PM
TUESDAY, JUNE 9, 2020	1:00 PM	3:00 PM
TUESDAY, SEPTEMBER 1, 2020	1:00 PM	3:00 PM
TUESDAY, DECEMBER 1, 2020	1:00 PM	3:00 PM

JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30
JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

Native American Advisory Committee



- Discussion on new FAQ sheet or marketing piece to help consumers understand the difference in coverage types
- Discussion on hosting a Native American focused event similar to OE kickoff
- Next NAAC meeting scheduled for Tues. Sept. 1, 2020

Marketing



Marketing



Full Page front and back.
Native American focused
COVID-19 response flyer.

Information on beWellnm
and NM Medicaid. FPL
income chart provides
visual to help consumers
identify what health
coverage option they may
qualify for.

Complement Indian Health Service with a no to low-cost health plan.

During the Pandemic, **EVERYONE QUALIFIES** for coverage.
We will help you and your family get covered for free or at
a low-cost to you.

Why should I get health insurance when I can go to IHS?

- **Complement your IHS coverage** while you travel. Coverage through Medicaid or beWellnm can be used outside of tribal territories. Because you just never know...
- **Receive care anytime.** No need to wait on a referral from IHS if you are already covered.
- Through Medicaid or beWellnm you have **access to specialists** that may not be available through IHS.
- Coverage through Medicaid or beWellnm will help **support your IHS clinics** by adding more funds to facilities so more people stay healthy.

Start Here

Do you qualify for Medicaid?

Depending on your income and family size, you may qualify for Medicaid. To apply, call **1-855-637-6574** or apply online at the YES New Mexico portal.

1-855-637-6574 • yes.state.nm.us

Are you eligible to enroll in a plan through beWellnm?

Native Americans can enroll year round, call **1-833-862-3935** to see if you qualify for extra savings.

1-833-862-3935 • beWellnm.com

No matter what, Native Americans can get covered.





beWellnm

THE PLACE TO SHOP, COMPARE AND BUY HEALTH INSURANCE. *Affordably.*

How to qualify for coverage.

Federal Poverty Level (FPL) is a measure of income used to determine eligibility for Medicaid and the Children's Health Insurance Program (CHIP), as well as premium subsidies and cost-sharing reductions [cost-sharing subsidies] in the exchange, and other federal programs.
Green = Could qualify for a premium tax credit and cost-sharing reduction.
Dark Green = Could qualify for Medicaid coverage.

What is your monthly household income? (FPL = Federal Poverty Level)							
 	boWellnm Native Americans with incomes under 300% FPL DO NOT pay co-pays or deductibles				boWellnm with Premium Assistance	boWellnm without Premium Assistance	
	Medicaid for Kids (age 0-5)						
	Medicaid for Kids (age 6-18)						
	Medicaid for Adults (age 19-64)						
How many people are in your household?	0-100% FPL	138% FPL	139% FPL	250% FPL	300% FPL	400% FPL	Over 400% FPL
Individuals	\$1,064	\$1,468	\$1,469	\$2,658	\$3,190	\$4,253	\$4,253+
Family of 2	\$1,437	\$1,983	\$1,984	\$3,592	\$4,310	\$5,747	\$5,747+
Family of 3	\$1,810	\$2,498	\$2,499	\$4,525	\$5,430	\$7,240	\$7,240+
Family of 4	\$2,184	\$3,013	\$3,015	\$5,458	\$6,550	\$8,733	\$8,733+
Family of 5	\$2,557	\$3,529	\$3,530	\$6,392	\$7,670	\$10,227	\$10,227+
Family of 6	\$2,930	\$4,044	\$4,045	\$7,325	\$8,790	\$11,720	\$11,720+
Family of 7	\$3,303	\$4,559	\$4,560	\$8,258	\$9,910	\$13,213	\$13,213+
Family of 8	\$3,667	\$5,074	\$5,075	\$9,192	\$11,030	\$14,707	\$14,707+

The FPL amounts are valid through March 31, 2021. If you think you qualify or are unsure what you qualify for, give us a call so we can help!



1-855-637-6574 • yes.state.nm.us



1-833-862-3935 • beWellnm.com

Full Page front and back.
Native American focused
COVID-19 response flyer.

Information on beWellnm and NM Medicaid. FPL income chart provides visual to help consumers identify what health coverage option they may qualify for.



**Beetsj' yisht'izhii bits'íis
biká'aná'áwo'jí bik'i'disdziít
t'áá 'ayahígo bééso 'ach'ánaa'níligíí
binahat'áhígíí.**

Díí díkos ntsaagígíí díí k'ad naatnihígíí t'áá'aníltsoxoo bee haaz'áago nihik'ézti' dooleet. Díí koodóo nihikáá'adilwoot dóó t'áá'oonéetígíí éí áájíik'é nihik'ésti' dooleet. Éí doodai t'áá'ayahígo nich'i' báhahíji dooleet.

Há'ííla biniiyé bééso 'ach'á na'níligíí nisin lá koji bitsi' yishtłizhii bits' iis biká'aná'áwo'jí sháá hóót'iid.

- [illegible]

Kwe'é.
Ndaats'í Medicaid ná'ahoót'í?
Hádííhego dí bich'í hodííh 1-855-637-6576 éí doo dail
hádííh ná'ahoót'í ná'ahoót'í ná'ahoót'í YES New Mexico.

1-855-637-6574 • ves.state.nm.us

Ákoish beWellnm 'ats'iis
bik'esti'igii éish 'aáji haadí
léehgoosh náá'ahóót'i'.

Bitfyteltilizhi fán nín shāng hǎo de 1-833-862-9335
lǐ shāng de nǎ hǎo? Tān biān de fán shāng de fán jī.

1-833-862-3935 • bewellnm.com

Nizhándi bitsj' yishttízhii bééso 'ach'á na'nílígíí bik'ésti' dooleet.



be well nm

be well nm®




THE PLACE TO SHOP, COMPARE AND BUY HEALTH INSURANCE. *Allerdaily*

**Haaláit'áo díí bik'ési'ígíí
ná'ahóót'i'do.**

Medicaid dóó 'Alchini yázhí bits'ís bééso 'ach'áana'nílgí (Children's Health Insurance Program, CHIP) dóó dí 'Ach'tahwí'náo 'at'k'í hwo déet'í'lgí (Federal Poverty Level, FPL) éi bééso bóhónee áagoo éi bik'ehgo 'áahzoozoo. Ako dí hwo'dahoo bééso bich'í hwo ní'ihígí 'áik'tee níi bééso bich'í hwo ní'ihígí dóó báahínílgí 'atts'í' 'at'k'í'zgo yáahóyaalgí baahílgí 'atts'í' 'at'k'í'zgo bééso bich'í hwo ní'ihígí. Dí 'at'naá'nílgí dóó la'ílgí Washindoon dóo bee 'ak'a'ndí' áwó'ílgí.

Daat'izh = ligo dóo hahinilíe 'ak' izen vaah'íníílaaííí éí daats' ná'íhóót'í doollee

Yāng Dooft'izh = Medicaid bik'ēst'ing daats' nā'āhōōt' dōoles

Nahidzildgo dikwii béso naahindééh? (FPL = Federal Poverty Level)							
	beWellnm Bits'a yishitshii 'ayahigo táá'di neezmáadin fích'i go FPL éi doo nda néedáan é'i doo iinigi éi doo yik'éi nít soólké da				beWellnm éi doo bee hee 'áa' aná'áwo' ig'i	beWellnm éi doo bee iinigo áká 'aná'áwo' ig'i áag'idé	
 	Átchíni yáshí bi Medicaid (názháas dóo 'ashd'áji' binaa'haigiil) Átchíni yáshí bi Medicaid (hástááji dóo tseebítshí kádashí' binaa'haigiil)						
	Hóyáani bi Medicaid (náhást'áits'áada dóo hástáájin dóo bi'qan díj'i' binaa'haigiil)						
Nighan ha'áaggi dikwii la bíl daanighan?	0-100% FPL	138% FPL	139% FPL	250% FPL	300% FPL	400% FPL	Over 400% FPL
T'áásh'á'iságyi	\$1,064	\$1,468	\$1,469	\$2,698	\$3,190	\$4,253	\$4,253+
Naaki nizhidlt'áo	\$1,437	\$1,983	\$1,984	\$3,592	\$4,310	\$5,747	\$5,747+
Táájt'áo	\$1,810	\$2,498	\$2,499	\$4,525	\$5,430	\$7,240	\$7,240+
Díjilt'áo	\$2,184	\$3,013	\$3,015	\$5,458	\$6,550	\$8,733	\$8,733+
'Ashda'jilt'áo	\$2,557	\$3,529	\$3,530	\$6,392	\$7,670	\$10,227	\$10,227+
Hastáájt'áo	\$2,930	\$4,044	\$4,045	\$7,325	\$8,790	\$11,720	\$11,720+
Tsoots'idájt'áo	\$3,303	\$4,559	\$4,560	\$8,258	\$9,910	\$13,213	\$13,213+
Tseebítsh'áo	\$3,667	\$5,074	\$4,075	\$9,192	\$11,030	\$14,707	\$14,707+

Wóòzhch'í d'táidin t'átsáy naaki dimlí naadin t'átsáy éi FPL baahilínígí' áaj' bee haz'áá dooleet. Dí baanitsínkeeso ná hót'idgo éi doodaii háidigishí ná ahót'io dooleet. Nibich'í hwélinih' áin ná áts'áts'á ts'iláant.



1-855-637-6574 • yes.state.nm.us



1-833-862-3935 • bewellnm.com

Media



Media

- Op-Ed by Teresa Gomez, Vice Chair beWellnm Board of Directors and Chair of Native American Committee ran in 3 publications
 - Indianz.com
 - Isleta Pueblo newsletter
 - Gallup Independent



Media

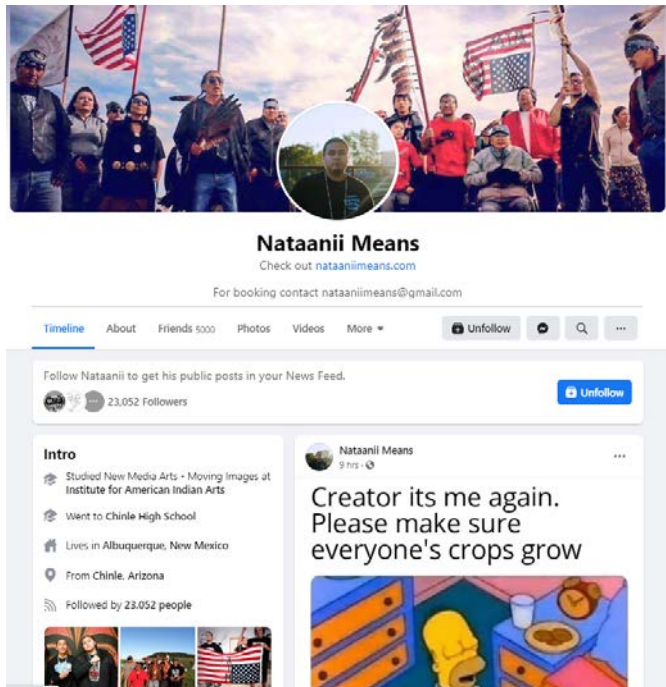
- Native American specific publication ads
 - Gallup Sun
 - Gallup Independent
 - Navajo Times
 - Laguna Town Crier



Social Media



Social Media – Native American Influencer



BeWellnm partnered with social media influencer Nataanii Means to help get the word out and share the importance of health insurance during this difficult time.

Nataanii Means currently has over 23,000 followers on FB*

be well nm®

Social Media – FB Live

BeWellnm for Native Americans hosted 3 Facebook Live discussions with Board Member Teresa Gomez

- Sunday, June 7, 2020
- Tuesday, June 16, 2020
- Thursday, June 25, 2020



b. Matters from the Operations Committee












Director David Leachman, Committee Chair



Weekly Status Dashboard



Schedule		Risks		Resources	
Status	Trending	Status	Trending	Status	Trending
R	↓	R	↓	G	↔

Key Milestones	Due Date	Status	Summary							
FSD Batch-1 reviews complete	3/20/20	R	<div><ul style="list-style-type: none">Overall project – 27% completehCentive DDI Execution<ul style="list-style-type: none">Requirements – 92% completeDesign Phase – 77% completeDevelopment – 19% completebeWellnm Operational Tasks – 24% complete</div> <div><ul style="list-style-type: none">FSDs submission and review schedule to be adjustedSIT Start – 10/1/20 (now 4/1/21)UAT Start – 4/16/21 (now 5/17/21)Status expected to move back to Green after project is re-baselined.</div> <div><table><tr><td>Trending Scale:</td><td>Improving </td><td>No Change </td><td>Worsening </td></tr></table><div><div> Task Complete</div><div> 1+ Week Behind Schedule</div></div></div>				Trending Scale:	Improving 	No Change 	Worsening 
Trending Scale:	Improving 	No Change 					Worsening 			
FSD Batch-2 reviews complete	4/24/20	R								
FSD Batch-3 reviews complete.	5/22/20	R								
RTM Complete	5/28/20	R								
Submit declaration letter to CCIIO	6/15/20	C								
Content review	7/2/20	G								
Second IV&V health check complete	7/10/20	G								
Submit Final Blueprint to CCIIO	8/15/20	G								
Print Vendor Templates sent to Optum	9/25/20	G								



- **Actions**

- Approved change request to extend the requirements and design phase and compress the System Integration Testing (SIT) phase
 - Necessary because HSD had to focus resources on the Covid-19 response
 - SIT start moves from 10/1/20 to 1/4/21 with no change in technical approach
 - Risk to project increases as 'slack' in the schedule is consumed
 - See next slide for updated schedule

- **Accomplishments**

- 12 of 31 FSDs approved; 3 of 13 ICDs approved; Content review on schedule for July approval
- Print vendor notices content review and engagement underway
- IV&V health check #2 interviews completed
- Bi-weekly CCIO/Security & Privacy meeting held 6/15. No major issues identified
- Bi-weekly CCIO/SMIPG meeting held on 6/17. No major issues identified



NMHIX Updated Schedule

Requirements & Design Jun 1 - Jul 31

Development Jul 1 - Nov 30

Pre SIT Nov 15 - Dec 18

SIT Cycle 1 Jan 4 - Feb 5

SIT Cycle 2 Mar 15 - Apr 9

Buffer - SIT Cycle 3 Apr 26 - Apr 30

UAT Cycle 1 May 17 - Jun 11

UAT Cycle 2 Jul 9 - Jul 30

Functional Requirements - Macro Level

Jun 30

Technical Design - Micro Level

Jul 10

Development Complete

Nov 30

Soft Launch

Sep 1

Go Live

Oct 1

2020



Today

2021

bewellnm®

“No Wrong Door” Design Update

- Designed so that applicants can attain health coverage no matter where they apply – with HSD or with beWellnm – without having to re-enter application information
 - Improved customer experience from Healthcare.gov
 - Today, Healthcare.gov is not well integrated with HSD eligibility system (ASPEN)
 - SBE will leverage Medicaid real-time eligibility (RTE) service to achieve a Medicaid eligibility decision in a single user session
 - Update SBE application to collect data necessary for Medicaid application (ex. on next slide)
 - SBE Individual dashboard can be used to provide a coordinated set of information for applicants, including Medicaid
 - Some information (e.g., notices) will be maintained in each system
 - Initial design is to coordinate and share applicant information but have two accounts (one at beWellnm, one at HSD)
 - Discussing features for future integration to further streamline process – e.g. single account management, including single applicant ‘dashboard’.
- More tightly integrated than other recent SBM launches (e.g., Nevada) but not designed as a “single door” for Medicaid or QHP coverage.



Medicaid Specific Questions on HIX system

Collecting data for Medicaid eligibility decisions will speed up process for applicants (draft and proposed)


Application Year 2020
Start Your Application
Family & Household
Income
Additional Questions
Review & Sign

Additional Medicaid Questions

When you see a star (*) you must complete the field.
When you see an ⓘ, roll over it with mouse or select it by pressing tab with keyboard to get definitions and learn more.

Based on your interest to share the information with State Medicaid System, please provide the answers for the following few questions. This will help us transfer the required information to State Medicaid System for quick determination of your Medicaid program.

Managed Care Organization (MCO) Selection


Managed Care Organization (MCO) (If you are applying for Medicaid on or after December 1, 2013) This section will ONLY apply if you are found to be eligible for Medicaid.
Beginning January 1, 2014 Medicaid services will be provided by the four Managed Care Organizations (MCOs) listed below. You have a choice of which MCO provides your services.
If you do not choose an MCO by January 1, 2014, you will be automatically assigned to an MCO by the State. Once you are enrolled with an MCO, you will have the option to change the MCO within 90 days of enrollment.

Special information for Native Americans about Managed Care Organizations
If you are Native American, you are not required to choose an MCO. If you are in need of long-term care services or have Medicare, you will be required to choose one.

Select a Managed Care Organization (MCO) for Jack Sherman
Blue Cross Blue Shield (BCBS)

Select a Managed Care Organization (MCO) for Jill Sherman
Blue Cross Blue Shield (BCBS)

Select a Managed Care Organization (MCO) for Sean Sherman
Blue Cross Blue Shield (BCBS)

Living Arrangements

What is the current living arrangement of Jack Sherman? *

Jail

What is the current living arrangement of Jill Sherman? *

Jail

What is the current living arrangement of Sean Sherman? *

At Home

Living Arrangements

What is the current living arrangement of Jack Sherman? *

Jail

What is the current living arrangement of Jill Sherman? *

Jail

What is the current living arrangement of Sean Sherman? *

At Home

Additional Information Needed

Based on the information provided on the "Is Someone in Jail or Prison?" screen, following member(s) were attested to be in Jail. Please provide additional information against these member(s).

Jack Sherman

Facility Information *

Otero County Prison Facility

Enter the Date of Release (MM/DD/YYYY) *

08/25/2022

Jill Sherman

Facility Information *

Roswell Correctional Center

Enter the Date of Release (MM/DD/YYYY) *

12/19/2021

Save and Continue

Back

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Individual Portal – Mixed Household Dashboard on HIX system

- Ex: Parents with QHP, kids in Medicaid/CHIP (draft and proposed)

Dashboard
Benefits and Coverages
Payments
Local Help
Documents
Message Center

Dashboard
Report a Change
Alerts

James Smith
Account Reference Id: RefID_1464765374013

Contact Information
View/Edit Profile

Email Address
james1980@mailinator.com

Phone Number Ext.
(876) 565-6775 --

Home Address
148567, 57
Belen, NM, 87002

Mailing Address
148567, 57
Belen, NM, 87002

Household Members

Name	Relationship
James Smith	Self
Jade Smith	Spouse
Jill Smith	Child
Terry Smith	Child

Annual Household Income

Name	Income
James Smith	\$20000.04 Self-Attested

Premium Amount Due

Qualified Health Plan	Due Date	Jun 23, 2020 7 Days Left
\$478.18	Make Payment	Last Payment
		Paid On --

If you have just completed an enrollment or made a recent payment, the new amount will be updated after the payment is successfully processed by us which may take up to a couple of days.

Show More Details

What I need to do

Existing Application

Go To Eligibility Application

2020 Eligibility Application

Task	Due Date
See if I Can Change	Jul 30, 2020 45 Days Left

Request for Information
Verification Documents

Member	Task	Due Date
James Smith DOB: Feb 19, 2007	Provide Proof of Income	Sep 13, 2020
Jade Smith DOB: Jan 14, 2015	Provide Proof of Income	Sep 13, 2020

Jill Smith Child
Terry Smith Child

Annual Household Income

Name	Income
James Smith	\$20000.04 Self-Attested
Jade Smith	\$32000.00 Self-Attested
Jill Smith	\$0.00 Self-Attested
Terry Smith	\$0.00 Self-Attested

Request for Information
Verification Documents

Member	Task	Due Date
James Smith DOB: Feb 19, 2007	Provide Proof of Income	Sep 13, 2020
Jade Smith DOB: Jan 14, 2015	Provide Proof of Income	Sep 13, 2020

My Eligibility and Enrollment

Click on the eligibility and plan links to view details.

Member	Eligibility and Enrollment	Start Date
James Smith DOB: Jan 01, 1980	Qualified Health Plan + Advance Pre... Medical: True Bronze Dental: BESTOne Basic Silver	Jul 01, 2020 Jul 01, 2020 Jul 01, 2020
Jade Smith DOB: Jan 03, 1982	Qualified Health Plan Medical: Core Care Bronze 2 Dental: BESTOne Basic Silver	Jul 01, 2020 Jul 01, 2020 Jul 01, 2020
Jill Smith DOB: Feb 26, 2007	Medicaid	Jun 01, 2020
Terry Smith DOB: Jan 15, 2015	Medicaid	Jun 01, 2020

[Info to be added]

Additional Integration Work (current scope)

- Aligning data verification – i.e., trusting data from HSD and SBE – to avoid asking applicants to verify information more than once
- Coordinating notices to avoid sending duplicate letters to applicants
- System integration with ASPEN during the SBE application process to improve real-time eligibility response*
 - *may require additional work and have additional cost
- Coordination for Medicaid and SBE call centers



Additional Integration Features

(future design, beyond current scope)

- Single account management, using HSD's master client index
 - Single sign-on functionality to operate in both systems
- Unified dashboard for Medicaid and QHP, including all notices
- Shopping functionality to choose a Managed Care Organization for Medicaid coverage

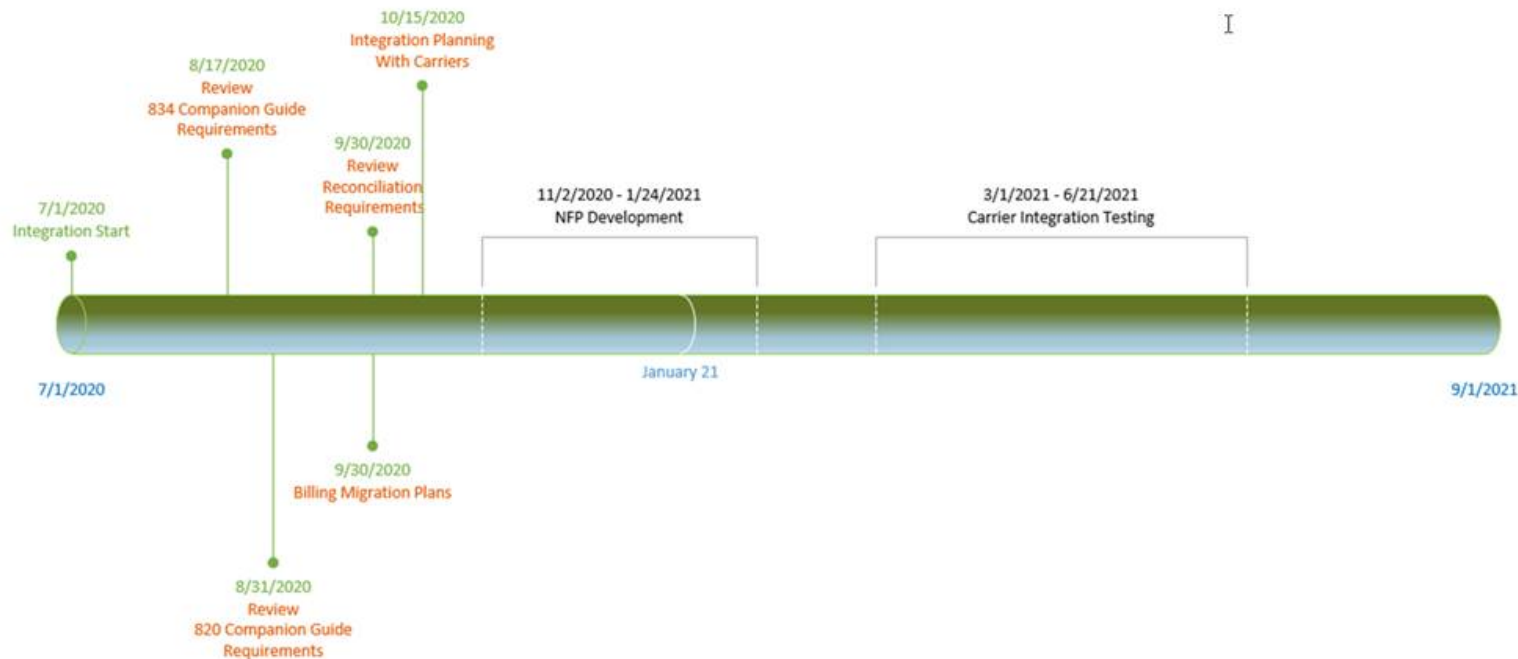


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Wrap up

- “No wrong door” approach incorporates design to speed access to health coverage and minimize ‘customer pain points’
- Future design and new features can improve this process
- Current Design phase extended to complete critical integration (i.e., account transfer) functionality (e.g., RTE)
 - Needs to be complete by mid-July to avoid another change request
 - Dependent on HSD availability, which remains constrained by COVID-19 response
 - Contingency option includes a less integrated approach (ala Nevada)
 - Risk of not completing the design in this time frame is high

NMHIX Carrier Integration Timeline



14

Months to Go Live

Soft Launch 9/1/21

Go Live 10/1/21



Plan of Operation



Revisions



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Document	Recommended Changes
Plan of Operation	<ul style="list-style-type: none">• House Bill 100:<ul style="list-style-type: none">• Add that the Exchange use best practices for state-based exchanges• Change agent/broker to “insurance producer”• Establishment of Health Benefits Plan Committee• Reporting requirements with the State-Based Exchange• Standardized Plans<ul style="list-style-type: none">• Committee with Board Members• Clear requirements to solicit public input (coordination with advocates, producers, OSI, etc.)• Public comment period required• Timeline<ul style="list-style-type: none">• Begin review approximately 14 months before Plan Year• Review proposed standardized plans by February before Plan Year• Recommendations brought forth to Board Approval at March Board Meeting before Plan Year
	<ul style="list-style-type: none">• Other Changes<ul style="list-style-type: none">• Specificity that beWellnm adheres to the State Procurement Code• Moving in-house call center under Outreach & Education



Motion



- **Motion:** Move that the Board accepts the proposed changes to the Plan of Operations and opens a Public Comment period.

c. Matters from the Outreach & Education Committee

Director Mark Epstein, Committee Chair



Outreach-Assisters



- Continued COVID-19 messaging:
 - “Get certified to help your community get covered and stay safe during this unprecedented time.”
- Agents and Brokers -Continued recruitment
 - 561 brokers contacted to get certified
 - 135 opportunities
- Enrollment Counselors
 - Conducted New Mexico Medical Insurance Pool training

Outreach-Businesses



- Continued outreach calls
 - 4117 businesses contacted
 - 445 businesses booked
- Continued the message – Small businesses can be the driver in getting New Mexicans insured: “Help yourself and your employees find coverage during this difficult time.”
 - Secondary message: “If you’ve had to furlough or lay any employees off, they might qualify for special enrollment...”
- Planned, organized, and executed a statewide tele town hall to educate business owners about health insurance options for the business and its employees including special enrollment due to loss of coverage.
 - Over 1800 participants
 - 26 callers with questions
 - 5 broker referrals
 - An average of over 8 minutes on the line from participants

Outreach- Organizations



Organizations Outreach

- Continue to call organizations statewide to circulate collaboration flyer
 - 30 churches distributed flyer to congregation
 - 26 public school districts distributed flyer to parents
 - Organized and executed a presentation in both English and Spanish on the Mexican Consulate's Facebook page through Facebook Live
 - Distributed collaboration flyers to 8 of the 14 COVID testing sites not listed on the DOH website
- Utilized chamber memberships and relationships to circulate communications to their memberships
 - 27 chambers that sent out collaboration flyer to about 4600 members
 - Participated and presented during ABQ Hispano Chamber Webinar that was also streamed on Facebook Live

Digital Programs



Digital Programs

- Continued executing social media ads:
 - COVID-19 special enrollment message
 - HSD, beWellnm, and NMMIP collaboration message
 - Recently unemployed message for those who recently lost their job
- Continued executing programmatic ads:
 - COVID-19 special enrollment message
 - HSD, beWellnm, and NMMIP collaboration message
- Continued organic posts to reach all audiences regarding COVID-19
- Continued retargeting, through pixels, both small businesses and Native Americans that have been driven to the website through digital ads

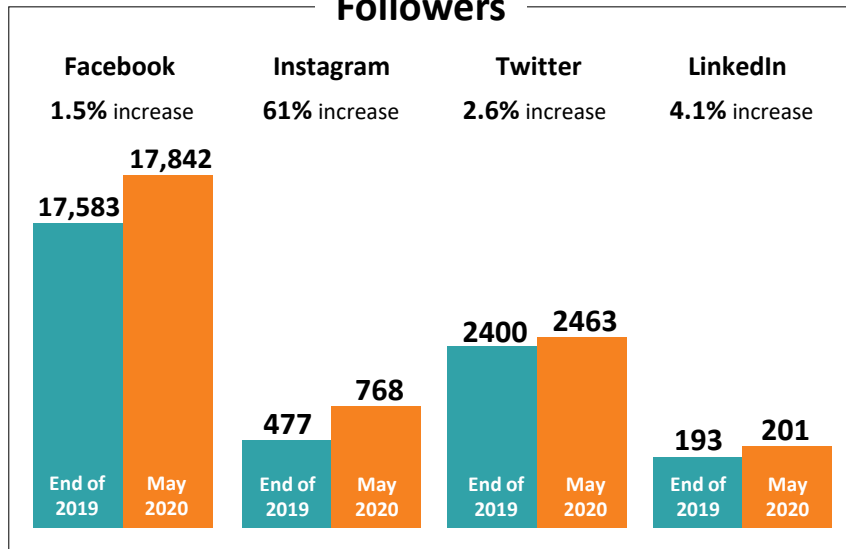
Year over Year-Digital Report

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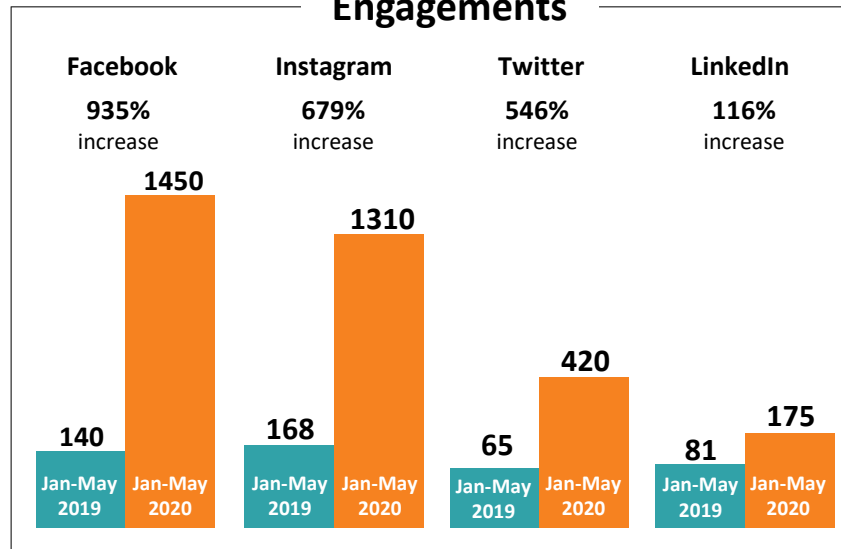


Digital Programs

Followers



Engagements



Year to Year Website Report

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Website

May Pageviews As of May 31st

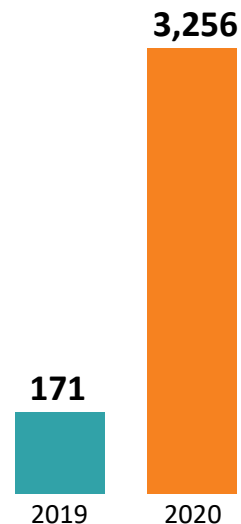
21.33%
increase



May Total Website Referrals

from Social Media
As of May 31st

1804%
increase



Earned Media

- Submitted letter to the editor for Board Member Patsy Romero tying in COVID-19 and ACA Anniversary to publications statewide
 - Published in the Los Alamos Daily Monitor and Silver City Daily Press

Contact Center



Incoming Calls

Year	May	June
2019	445	490
2020	776	1013

- An increase of 52% compared to last year.
- Top call reasons
 - Special Enrollment Period
 - Benefits
 - Broker Assistance

Outreach Contract Strategy



Outreach Contract Strategy



- BeWellnm staff have been prompted to present different options as it relates to the Outreach Strategy for 2021.
 - Four possible paths are presented in the following slides.
 - Continue with Current Contract
 - Adapt Current Contract in Two Ways
 - RFI
 - RFP
 - RFP a New Contract
 - Presented alongside these potential paths are a list of key benefits, drawbacks, and considerations.
 - The Board, upon review and discussion of these options, can opt to pursue any of the four as part of their authority. If the Board were to consider options 3 or 4, a motion would be necessary.
 - This contract in discussion is for 2021, coinciding with our technology launch.

Outreach Contract Strategy



Outreach Strategy #1 Retain Current Contract in Full	Benefits	Drawbacks	Key Considerations
Under this approach, beWellnm would seek to renew the contract with the Outreach Contract Vendor and continue feedback on strengths and weaknesses.	<ul style="list-style-type: none">• Ability to evolve contract and focus as needed• Current contract has proven successes, can emphasize areas for improvement based on feedback• Manages risk in launch year for technology platform• Allows for development in key areas without changing services that may be working well.	<ul style="list-style-type: none">• Does not entertain other offers, different perspectives.	<ul style="list-style-type: none">• Given that beWellnm is under the procurement code, this allows for the most flexibility to ensure all services are in place as required by CMS.

Outreach Contract Strategy



Outreach Strategy #2 Retain Current Contract in Full w/RFI	Benefits	Drawbacks	Key Considerations
Under this approach, beWellnm would renew the current contract but put out a Request for Information on possible support other vendors could provide within the Prime Contract. Upon evaluation, beWellnm can determine whether any of those services would be valuable to the mission and how to implement them (including bringing an organization under contract).	<ul style="list-style-type: none">• Ability to evolve contract and focus as needed• Current contract has proven successes, can emphasize areas for improvement based on feedback• Allows for development in key areas without changing services that may be working well• Manages risk in launch year for technology platform	<ul style="list-style-type: none">• Adds complexity to prime vendor relationship and adds additional contracts to manage.	<ul style="list-style-type: none">• Given that beWellnm is under the procurement code, this still allows for a high level of flexibility to ensure all services are in place as required by CMS.

Outreach Contract Strategy



Outreach Strategy #3 New RFP for Key Services	Benefits	Drawbacks	Key Considerations
Under this approach, beWellnm would remove certain parts of scope from the existing contract and RFP them. Current vendor could potentially bid and win those services.	<ul style="list-style-type: none">• Allows for development in key areas without changing services that may be working well.• Less risk than a full RFP while still entertaining the opportunities presented by respondents.• The focused nature of the RFP would mitigate some of the volume of evaluation.	<ul style="list-style-type: none">• Some requirement of staff capacity that is greatly diminished by managing ongoing work and commitment to the technology build.• Any delays in the RFP could cause key services to be put at risk.	<ul style="list-style-type: none">• Given that beWellnm is under the procurement code, any RFP and contract would receive appropriate State oversight.

Outreach Contract Strategy



Outreach Strategy #4 RFP for a New Contract in Full	Benefits	Drawbacks	Key Considerations
Under this approach, beWellnm would draw up and implement an entirely new RFP.	<ul style="list-style-type: none">• Ability to match contract with perceived needs of our first Open Enrollment with our technology solution.• Entertains proposals and potential innovations on the full suite of work that the Prime Vendor oversees.	<ul style="list-style-type: none">• High requirement of staff capacity that is greatly diminished by managing ongoing work and commitment to the technology build.• Any delays in the RFP could all services to be at risk, which would potentially prompt a response from CMS.	<ul style="list-style-type: none">• Given that beWellnm is under the procurement code, any RFP and contract would receive appropriate State oversight.

d. Matters from the Finance Committee

Treasurer Brandon Fryar, Committee Chair



affordable
health
insurance
options.

2021 Budget Proposal



Budget Proposal: Context



- The 2021 budget proposal balances the need for sufficient resources to successfully launch and operate a state-based exchange with New Mexico's current budget climate.
- With each new projection for the state-based exchange, staff have reduced the budget need, and with the economic downturn, staff further reduced the budget proposal (see next slide).
- The largest cost increases (technology) are nonrecurring, and will reduce after 2021.

Budget Proposal: Context



Budget Category	** 2021 Prior Projection	Current Proposed Budget	Difference
Additional Outreach	\$1,250,000	\$59,865	(\$1,190,135)
Additional FTE's – salaries & benefits	\$1,400,000	\$450,388	(\$949,612)
Additional Admin	\$500,000	\$73,000	(\$427,000)
Other Org Expenses	\$50,000	\$0	<u>(\$50,000)</u>
		Total Reduction to Prior 2021 Projection	(\$2,616,747)

** Prior 2021 Projection from the April 26, 2019 Special Board Meeting Presentation

Budget Considerations at a Glance:

Budget Category	Considerations
Salaries	<ul style="list-style-type: none">• FTE count projected for second half of 2020 is 27, which includes two new positions.• Adding eight (8) new positions in 2021 (one in 1st Quarter and the remainder in the 3rd Quarter).• Budgeted a 0% salary increase in 2021.
Employee Benefits	<ul style="list-style-type: none">• Budget assumes flat premiums for health insurance premiums. We will update this as rate increases are communicated.• Paid Parental Leave benefit implemented in early 2020 based on the State's implementation.
Professional Services	<ul style="list-style-type: none">• Budget reductions resulted from administrative consulting that is no longer required, including Outsourced Human Resources, Lobbyist, Research and Consumer Checkbook.• Reduced Board Expenses by \$20,000 (both 2020 and 2021).
Administrative	<ul style="list-style-type: none">• Relatively flat year over year.
Outreach & Education	<ul style="list-style-type: none">• Year-over-year budget changes include:<ul style="list-style-type: none">○ Navigators, Brokers & Enrollers increased 56.7% to \$600,000;○ Native American Outreach & Education increased 21.5% to \$237,415;○ SHOP & IND Outreach decreased 56.8% to \$300,000

Budget Considerations at a Glance:

Budget Category	Considerations
Plan Management	<ul style="list-style-type: none">• Previous Superintendent advised that a 2020 budget would not be required beyond the MOU termination date of 12/31/19; therefore we did not include this line item in the 2020 budget.• Current Superintendent requested a new MOU including reimbursement of staff salaries and actuarial expenses totaling \$350K for both 2020 and 2021.
Technology	<ul style="list-style-type: none">• DD&I costs associated with the state-based exchange are expected to total \$11.8M, which is \$4.5M higher than the scheduled 2020 payments. DD&I costs were contracted to be heaviest in the final year of DD&I, with \$3.6M of the \$4.5M increase attributed to the technology vendor, \$220 thousand increase attributed to the IV&V vendor and \$80 thousand attributed to the PMO.• SHOP M&O with the Federal User Fee for using the Federal platform are expected to total \$6.7M• Federal User Fee rate will remain flat at 2.5% in 2021, with assumed flat enrollment.
Overall	



Budget Category	New FTE for State Based Exchange Functions
Salaries/Positions	<p data-bbox="343 245 1864 322">As an SBE, beWellnm will have a range of new responsibilities. The 2021 budget proposal includes eight (8) new FTE positions (less than projected in 2019) to conduct the following functions:</p> <ul data-bbox="343 360 1893 944" style="list-style-type: none"><li data-bbox="343 360 1613 398">• Manage new IT applications, including changes, updates, and implementation of new releases.<li data-bbox="343 398 1845 475">• Oversight of customer engagement center – ensure compliance with Service Level Agreements and coordination with in-house contact center and eligibility team.<li data-bbox="343 475 1864 551">• Manage complaints, appeals and grievances – in particular, appeals of eligibility decisions will require new staff to review and make determinations.<li data-bbox="343 551 1893 786">• Assist individuals with complex applications, changes due to life events, and billing questions. Coordinate with carriers and resolve system errors. The contracted Customer Engagement Center will handle most day-to-day calls (e.g., helping someone complete an application; broker and enrollment counselor support); more complex/difficult situations are to be addressed by staff (e.g., reconciling eligibility discrepancies with carriers, issuing refunds, and oversight of the premium collection and payment application functions, including terminating coverage for nonpayment, if necessary); periodic internal audits of system controls and processes.<li data-bbox="343 786 1864 824">• Manage the outsourced print vendor, including implementation of new notifications and special printing projects.<li data-bbox="343 824 1825 900">• Additional focused outreach to ensure that individuals currently enrolled through healthcare.gov know how to enroll once we are ready to launch.<li data-bbox="343 900 1584 944">• Support for implementing House Bill 100 re: standardized plans and reporting requirements.

Budget Category	Justification
Salaries/Positions	<p>Other Exchanges:</p> <ul style="list-style-type: none">• Comparisons with other exchanges must consider: composition (outsourced or insourced functions), structure (state agency or non-profit) and state size.<ul style="list-style-type: none">• Nevada & Pennsylvania cases studies added on next slides.• Colorado: Currently an SBE, with 120 Full-Time Employees per their 2019 Annual Report.• Oregon: SBM-FP, appears to have a staff of at least 20, but website, oversight meetings, and others don't clearly list all staff.• We will continue to update the board as we collect additional information from other states. <p>Salary Study:</p> <ul style="list-style-type: none">• In late 2018, the exchange updated its compensation study first conducted in 2014; a copy was provided to the Finance Committee with this review. The study was conducted by REDW and presented to the Board in early 2019. It was based primarily on like-industries in the New Mexico market. This comp study has been used to set staff salaries, and currently, all staff are paid below the midpoint of their salary range.• In 2019, the exchange implemented a formal performance evaluation process that provided the ability to adjust increases based on each employee's contribution.

Budget Category	Justification
Case Study: Nevada	<p>Nevada transitioned from an SBE-FP to SBE, the most recent state to do so. Their costs, per their Budget Subcommittee presentation in 2019 include:</p> <ul style="list-style-type: none">• Approximately 30 employees<ul style="list-style-type: none">• As a state agency, certain services are provided by the state (e.g. HR) and do not need “exchange” staff.• Overall build budget: \$8,343,000<ul style="list-style-type: none">• ~\$838,000 9 new positions related to: policy and compliance, appeals coordination, management analysis, quality assurance analysts, reconciliation specialists• A Total Outreach Budget Of: \$3.8 Million<ul style="list-style-type: none">• This outreach budget does not include certain key line items that beWellnm’s does, such as website, reporting, and a strong emphasis on Native American outreach• Total Budget: ~\$30.8 Million for Launch Year• Net Budget: ~\$22.8 Million After Using Reserves

Budget Category	Justification
Case Study: Pennsylvania	<p>Pennsylvania is <i>currently</i> building an SBE. This case study will analyze their first full year budget. Their costs, per their Board Meeting presentation include:</p> <ul style="list-style-type: none">• 30 employees<ul style="list-style-type: none">• As a state agency, certain services are provided by the state (e.g. HR) and do not need “exchange” staff.• Overall budget: \$42,637,364<ul style="list-style-type: none">• \$4,393,500 for 30 staff• \$5,500,000 for Marketing<ul style="list-style-type: none">• Unlike Nevada, this is similar to our own overall “Outreach” budget, other than their Navigator and Broker program.• \$1,000,000 for Navigators/Brokers/Agents• This budget did not include all of their IT costs, as some of the contracts were negotiated. As such, it was likely to be higher.

Budget Justification:

Budget Category	Justification
Marketing, Outreach and Education	<p>The 2021 budget will support:</p> <ol style="list-style-type: none">1. Expanding beWellnm’s presence throughout New Mexico, particularly in traditionally underserved communities.<ol style="list-style-type: none">A. Increase awareness to existing partners, assisters, enrollment counselors , agents and brokersB. Increase assister network for enrollment counselors, Agents & Brokers.C. Training (System, Process, and any Policy Decisions)D. Expand outreach to the Hispanic, Native American, and other communities2. Picking up where healthcare.gov leaves off (e.g. Text Campaigns & emails) – existing consumers, past consumers, and others who have expressed interest in HealthCare.gov (more below)<ol style="list-style-type: none">A. Being prepared for the unexpected or unforeseen occurrences, that have a positive and or negative impact to enrollments.B. For this inaugural state-based exchange OEP, it will be imperative that any confusion is eliminated or aggressively minimized to demonstrate the benefits of a state-based exchange.



Budget Justification:

Budget Category	Justification
Technology	<p>The SBM project budget remains largely the same as previously approved and budgeted, with the following exceptions:</p> <ul style="list-style-type: none">• HSD has been committed to the COVID-19 response and unable to work on the SBM project. It is important to note that any additional delays could require a change request that may carry costs. Hold back or withhold for completion of deliverables related to work with HSD was agreed to, allowing payments for most of the work in the payment milestone (when completed), with payment for the remainder when the HSD work is completed. See note below.• The 2021 budget includes \$260 thousand for printing and mailing services for the SBM project. As an SBM, we will be mailing notices to applicants and enrollees. Budget was also added to 2020 for the DD&I costs associated with the print vendor. <p>Note: The technology vendor contract also includes a provision to withhold or reduce payments for deliverables that aren't completed satisfactorily or are late. We have not had to enforce or use this provision.</p>

2020 Projection vs. 2021 Budget Proposal

Budget Category	2019 Actual	2020 Budget Projection	2021 Budget Proposal	YOY Budget Inc/(Dec)	% YOY Inc/(Dec)
Salaries	\$1,858,687	\$2,148,441	\$2,561,704	\$413,263	19.2%
Employee Benefits	\$884,781	\$928,811	\$1,057,037	\$128,227	13.8%
Professional Services	\$634,717	\$365,484	\$245,750	(\$119,734)	(32.8%)
Administrative	\$938,559	\$953,923	\$957,218	\$3,295	0.35%
Outreach/Education	\$3,545,925	\$3,544,650	\$3,604,515	\$59,865	(9.6%)
Plan Management	\$297,268	\$360,000	\$360,000	\$0	0%
Technology DDI for SBM	\$3,060,312	\$7,352,328	\$11,840,195	\$4,487,867	61.0%
Technology (SBE-FP)	<u>\$7,531,258</u>	<u>\$6,367,573</u>	<u>\$6,654,106</u>	<u>\$286,533</u>	<u>4.5%</u>
Total	\$18,751,506	\$22,021,210	\$27,280,525	\$5,259,315	23.9%

Outreach & Education Budget Category	2019 Actual	2020 Budget Projection	2021 Proposed Budget	YOY Inc/(Dec)	% YOY Budget Inc/(Dec)
Research & Surveys	\$149,666	\$100,000	\$100,000	\$0	0%
Navigators, Brokers & Agents	\$426,018	\$382,900	\$600,000	\$217,100	56.7%
SHOP & IND Outreach	\$580,000	\$695,000	\$300,000	(\$395,000)	(56.8%)
Website & CRM/Data Management	\$105,109	\$100,500	\$200,500	\$100,000	99.5%
Organization Outreach	\$172,000	\$215,000	\$215,000	\$0	0%
Enrollment Events/Paid Booths/Sponsorships	\$147,779	\$177,600	\$177,600	\$0	0%
Digital Programs	\$656,174	\$470,000	\$545,000	\$75,000	16.0%
Earned Media & Public Relations	\$0	\$132,000	\$132,000	\$0	0%
Strategy, Reporting & Management	\$72,000	\$72,000	\$97,000	\$25,000	34.7%
Branding/Advertising	\$1,087,693	\$1,004,235	\$1,000,000	(\$4,235)	(0.4%)
Native American Outreach & Education	<u>\$149,487</u>	<u>\$195,415</u>	<u>\$237,415</u>	<u>\$42,000</u>	<u>21.5%</u>
Total Consumer & Stakeholder Engagement	\$3,545,925	\$3,544,650	\$3,604,515	\$59,865	1.7%

Proposed 2021 Technology Budget – SBM Implementation

Budget Category	2019 Actual	2020 Budget Projection	2021 Proposed Budget	YOY Inc/(Dec)	% YOY Budget Inc/(Dec)
Technology Vendor	\$2,013,112	\$3,897,767	\$7,509,868	\$3,612,101	92.7%
Program Integration with HSD	\$0	\$1,000,000	\$1,000,000	\$0	0%
System Integration with HSD	\$0	\$1,000,000	\$1,000,000	\$0	0%
Outsourced Print & Mailing Service	\$0	\$35,000	\$260,000	\$225,000	642.9%
Translation Services – Notifications/Portals	\$0	\$15,000	\$15,000	\$0	0%
Independent Validation & Verification	\$335,911	\$539,881	\$760,119	\$220,238	40.8%
Project Management Office	\$711,289	\$864,680	\$945,208	\$80,528	9.3%
Privacy & Security Audit	<u>\$0</u>	<u>\$0</u>	<u>\$350,000</u>	<u>\$350,000</u>	<u>100.0%</u>
Subtotal – Technology: SBM Implementation	\$3,060,312	\$7,352,328	\$11,840,195	\$4,487,867	61.0%

Proposed 2021 Technology Budget – Existing SBE-FP Platform

Budget Category	2019 Actual	2020 Budget Projection	2021 Proposed Budget	YOY Inc/(Dec)	% YOY Budget Inc/(Dec)
SHOP Vendor	\$715,000	\$715,000	\$715,000	\$0	0%
Data Management Reporting	\$3,209	\$3,500	\$0	(\$3,500)	(100%)
CRM for in-house Contact Center	\$44,042	\$49,200	\$49,200	\$0	0%
Federal Platform User Fee	<u>\$6,769,007</u>	<u>\$5,599,873</u>	<u>\$5,889,906</u>	<u>\$290,033</u>	<u>5.2%</u>
Subtotal – Existing SBE-FP	\$7,531,258	\$6,367,573	\$6,654,106	\$286,533	4.5%
Subtotal – SBM Implementation – previous page	<u>\$3,060,312</u>	<u>\$7,352,328</u>	<u>\$11,840,195</u>	<u>\$4,487,867</u>	<u>61.0%</u>
Grand Total – Technology	\$10,591,570	\$13,719,901	\$18,494,301	\$4,774,400	34.8%

Assessment Reduction Proposal for 2021

- The Plan of Operations requires NMHIX to maintain six-months of operating funds in reserve to demonstrate financial sustainability.
- NMHIX currently has cash and investment balances in excess of six-months of operating requirements.
- In light of the current State budget shortfall, to reduce the load on the Medicaid program which funds approximately 76% of the total assessment, we recommend drawing down \$6.0M of NMHIX's savings to reduce the 2021 assessment to carriers.
- Inasmuch as the additional assessment requirement is due to the SBM launch (a capital expenditure), it makes sense to fund such a capital expenditure with savings/investment earnings rather than entirely from assessment. The proposed amount to be drawn down from reserve more than covers the year-over-year increase in the budget, and it will result in the 2021 assessment coming in lower than the 2020 assessment by \$1.3M.



2021 Assessment Reduction Proposal

	Balance @ 5/31/2020		
Cash	\$21,263,560		
Investments	\$14,911,567		
Total Cash/Investments @ 5/31/2020		\$36,175,127	
Cash Inflows from Assessments (2020)	\$22,541,248		
Cash Outflows from Operations (thru 5/31/2020)	\$7,507,411		
Estimated Remaining Cash Required for 2020 Operations		\$15,033,837	
Cash/Investments In Excess of 2020 Operating Requirements			\$21,141,290
2021 Proposed Budget	\$27,280,525		
Reserve Requirement (50% of 2021 Proposed Budget)			\$13,640,263
Amount of Cash/Investments in Excess of Reserve Requirement			\$7,501,027
Recommended Reserve Drawdown			\$6,000,000

Motion



- **Motion:** Move that the Board accepts the 2021 Budget as proposed here today and draw's down \$6,000,000 from the reserve funds to off-set the non-reoccurring expense of the State-Based Exchange technology build.

7. Agency Reports



Agency Reports



- Matters from the Office of the Superintendent of Insurance (OSI)
 - *Superintendent Russell Toal*
- Matters from the New Mexico Medical Insurance Pool (NMMIP)
 - *Superintendent Russell Toal*
- Matters from New Mexico Human Service Department (HSD)
 - *Secretary David Scrase*

8. Public Comment



9. Other Board Business



10. Next beWellnm Board Meeting is September 18, 2020 location TBD



11. Adjournment





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