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Notice of Reconciliation Guidance
2025 Program Year Small Business Health Insurance Premium Relief Initiative
Issued March 2, 2026

To: New Mexico Small Group Health Insurance Issuers

For the 2025 Program Year, the Health Care Authority issued [Bulletin 2025-002](#), which established requirements for an annual reconciliation process for the Small Business Health Insurance Premium Relief Initiative. The instructions for annual reporting are contained within the template. This letter provides additional details and examples of how to correctly fill out the template.

All issuers are subject to the Bulletin and must submit the following documents to the HCA using SERFF:

1. A completed version of the Annual Reporting Template.
2. An attestation to the accuracy of the submission, signed by a representative who has reviewed the data and a senior executive.

Annual Reporting Timeline

Table 1: Reconciliation Deadlines

Reconciliation Activity	Deadline
Submission of Annual Data	March 30, 2026*
HCA Notice of Reconciliation Amounts	May 5, 2026
Submission of Reconciliation Disputes	May 12, 2026
Reconciliation Payments Due	June 30, 2026

*Note: This date has been adjusted since Bulletin 2025-002.

All documents must be filed by their submission date. If an issuer wishes to dispute reconciliation amounts after the HCA Notice of Reconciliation, it must submit the dispute to the Health Care Affordability Division by May 12, 2026.

Small Business Initiative Attestation Form

The [Small Business Initiative Attestation Form](#) (link opens PDF file in browser) must be submitted with the Annual Reporting Template (see below). All issuers must upload a signed copy of the Form to SERFF by March 30, 2026, and upload an updated Form with their final data submission. A representative who has reviewed the data and a senior executive must sign the Form attesting that they have reviewed the data being submitted and believe it to be an accurate representation of payments under the program. All

information submitted through SERFF for this reconciliation process is assumed to be confidential unless otherwise stated or marked as public by the submitter.

Annual Reporting Template

The [Annual Reporting Template](#) (link downloads Excel file) must be submitted by March 30, 2026. The tab labeled “Template.Annual Reporting” includes the following required reporting categories:

- Group’s Renewal Quarter,
- HIOS Plan ID,
- Group Rating Area,
- Member Age at Last Renewal,
- Count of Billable Member Months,
- Sum of Total Plan Premium, and
- Sum of Discount/Credit as shown in Table 2.

Please note that the “Member Age at Last Renewal” should be for each member, not the subscriber.

Table 2: Annual Reconciliation Reporting Categories in the Annual Totals Tab

Group's Renewal Quarter	HIOS Plan ID	Group Rating Area	Member Age at Last Renewal	Count of Billable Member Months	Sum of Total Plan Premium	Sum of Discount/Credit
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Example

To provide issuers with a demonstration of how to fill out the Annual Reporting Template, HCA created an [example](#) (link downloads Excel file) of 100 sample enrollees, some of whom share relevant characteristics. Only one rating area was used for simplicity. Tab 1 provides sample member-level details to demonstrate how members should be grouped, and amounts should be calculated in the “Completed Report Examples” tab. Please note that issuers are not required to submit member-level data at the level of detail that is shown in this tab. Tab 1 is for demonstration purposes only. Tab 2 demonstrates how the final report will be condensed to represent the grouped totals. Tab 3 contains sample rates that were produced by HCA for demonstration purposes only.

Tab 1: Member-Level Example

The example in Table 3 shows the data of one category of members who can be grouped together for reporting purposes. You can see that these six members have the following factors in common:

Group Renewal Quarter: 1
 HIOS Plan ID: 12345NM0000001
 Group Rating Area: 1
 Member Age at Last Renewal: 21

The pertinent information from the “Category Total” row in Table 3 is the only entry from this category to be entered in Table 4. Each category will have one entry in the Completed Report.

Table 3: Member Level Example

Member Number	HIOS Plan ID	Base Premium	Age Rating Factor	Age Rated Premium	Member Age at Last Renewal	Group's Renewal Quarter	Count of Billable Member Months	Group Rating Area	Sum of Total Plan Premium	Sum of Discount/Credit
1	12345NM0000001	\$200	1	\$200	21	1	6	1	\$1,200	\$120
2	12345NM0000001	\$200	1	\$200	21	1	6	1	\$1,200	\$120
3	12345NM0000001	\$200	1	\$200	21	1	6	1	\$1,200	\$120
4	12345NM0000001	\$200	1	\$200	21	1	6	1	\$1,200	\$120
5	12345NM0000001	\$200	1	\$200	21	1	6	1	\$1,200	\$120
6	12345NM0000001	\$200	1	\$200	21	1	6	1	\$1,200	\$120
Category Total:	12345NM0000001	\$200	1	\$200	21	1	36	1	\$7,200	\$720

Tab 2: Completed Report Example

Table 4 represents how to properly report this group’s count of billable member months, sum of total plan premium, and sum of the discount/credit in the “Template.Annual Reporting” tab on the Annual Reporting Template. Each subcategory must have its own entry.

Table 4: Completed Report Example

Group's Renewal Quarter	HIOS Plan ID	Group Rating Area	Member Age at Last Renewal	Count of Billable Member Months	Sum of Total Plan Premium	Sum of Discount/Credit
1	12345NM0000001	1	21	36	\$7,200.00	\$720.00

Data Review Period: March 31, 2026, to May 5, 2026

After the issuer submits data to HCA no later than March 30, 2026, HCA will review the data and contact the issuer if any questions or issues arise. HCA will attempt to resolve any issues before the “Notice of Reconciled Amounts” is issued by May 5, 2026. If HCA completes the review and approval before May 5, it will notify the issuer.

Notice of Reconciled Amounts and Payment Process

HCA will submit the Notice of Reconciled Amounts to each issuer no later than May 5, 2026. If an issuer owes payment, the Notice of Reconciled Amounts will serve as an invoice to the issuer. The issuer must include the payment owed to the issuer or due to the HCA for the reconciled amount on the monthly invoice submitted in the first week of June 2026. Payments must be made no later than June 30, 2026. It is the responsibility of the representative listed on the organization's Attestation Form to ensure the accuracy of the organization's payment information.

If payment information needs to be updated or if you have any questions about the reconciliation process in general, please contact Jess Rosenthal, HCA's Director of Coverage Affordability and Expansion, at Jessica.Rosenthal@hca.nm.gov.