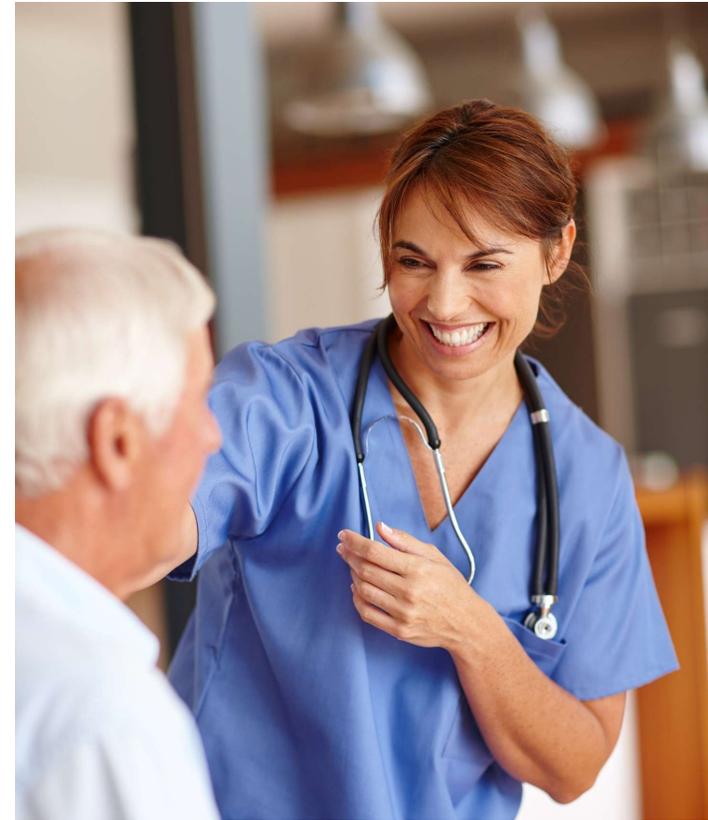




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SMALL BUSINESS PREMIUM RELIEF INITIATIVE
ANNUAL RECONCILIATION TRAINING – PROGRAM YEAR 2025

MARCH 5, 2026

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DISCLAIMERS:

The intent of the information provided is to be a general summary and does not take the place of written guidelines, laws, or regulations.



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AGENDA

- Introductions
- Reconciliation Deadlines
- Reconciliation Reporting Process and Requirements
- Required Fields for Annual Reporting
- Categorization of Rate Cell Level Inputs
- Member-Level Reporting Calculation Example
- Completed Report Example
- Updated Monthly Reports – Retroactive Adjustments
- HCA Notice of Reconciliation Amounts, Disputes, and Payments
- Questions



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RECONCILIATION DEADLINES

Reconciliation Activity	Deadline
Submission of Annual Data	March 30, 2026*
HCA Notice of Reconciliation Amounts	May 5, 2026
<i>Submission of Reconciliation Disputes</i>	<i>No Later Than May 12, 2026</i>
Reconciliation Payments Due	June 30, 2026

*Note: This date has been adjusted since the Notice of Guidance



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RECONCILIATION REPORTING PROCESS AND REQUIREMENTS

- These processes and requirements are per the Health Care Authority’s [Notice of Reconciliation Guidance](#), which established requirements for an annual reconciliation process for the Small Business Health Insurance Premium Relief Initiative.
- Issuers must submit the following documents to HCA by **March 30, 2026**, using the System for Electronic Rate and Form Filing (SERFF):
 - **Annual Reporting Template:** A completed version can be found on the Health Care Coverage Innovations “Initiatives” [webpage](#).
 - **Attestation** to the accuracy of the submission, signed by a representative who has reviewed the data and a senior executive.



REQUIRED FIELDS FOR ANNUAL REPORTING

Factors that must be included in the report are:

- 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

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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*This factor should be reported at the individual level, not the subscriber level.



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CATEGORIZATION OF RATE CELL LEVEL INPUTS

- Individual members who share some common factors ***MUST*** be grouped by category for a reconciliation Category Total.
- **Members must be matched and aggregated by the following criteria:**
 - Group Renewal Quarter
 - HIOS Plan ID
 - Group Rating Area
 - Member Age at Last Renewal



MEMBER-LEVEL REPORTING CALCULATION EXAMPLE

These 6 members have the following factors in common:

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

Member Number	Group's Renewal Quarter	HIOS Plan ID	Group Rating Area	Member Age at Last Renewal	Age Rated Premium
1	1	12345NM0000001	1	21	\$200
2	1	12345NM0000001	1	21	\$200
3	1	12345NM0000001	1	21	\$200
4	1	12345NM0000001	1	21	\$200
5	1	12345NM0000001	1	21	\$200
6	1	12345NM0000001	1	21	\$200
Category Total:	1	12345NM0000001	1	21	\$200

Sum of Total Plan Premium	Sum of Discount/Credit	Count of Billable Member Months
\$1,200	\$120.00	6
\$1,200	\$120.00	6
\$1,200	\$120.00	6
\$1,200	\$120.00	6
\$1,200	\$120.00	6
\$1,200	\$120.00	6
\$7,200	\$720.00	36



MEMBER-LEVEL REPORTING CALCULATION EXAMPLE (CONT.)

Once members are categorized by their common factors, calculate their input for a Category Total in the following columns:

1. Sum of Total Plan Premium
2. Sum of Discount/Credit
3. Count of Billable Member Months

Member Number	Group's Renewal Quarter	HIOS Plan ID	Group Rating Area	Member Age at Last Renewal	Age Rated Premium	Sum of Total Plan Premium	Sum of Discount/Credit	Count of Billable Member Months
1	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
2	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
3	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
4	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
5	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
6	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
Category Total:	1	12345NM0000001	1	21	\$200	\$7,200	\$720.00	36

Note: Issuers should not report this data to HCA. This is for demonstration purposes only.



COMPLETED REPORT EXAMPLE

- Only transfer the Category Total Information to the completed report.

Member Number	Group's Renewal Quarter	HIOS Plan ID	Group Rating Area	Member Age at Last Renewal	Age Rated Premium	Sum of Total Plan Premium	Sum of Discount/Credit	Count of Billable Member Months
1	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
2	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
3	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
4	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
5	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
6	1	12345NM0000001	1	21	\$200	\$1,200	\$120.00	6
Category Total:	1	12345NM0000001	1	21	\$200	\$7,200	\$720.00	36

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



COMPLETED REPORT EXAMPLE (CONT.)

- Example Factors: 2 Quarters, 3 Plans, 1 Rating Area, 3 Ages
- Results: 18 categories are reported after members with shared factors are aggregated by their shared factors

	A	B	C	D	E	F	G
	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							
2	1	12345NM0000001	1	21	36	\$7,200.00	\$720.00
3	1	12345NM0000001	1	40	42	\$10,735.20	\$1,073.52
4	1	12345NM0000001	1	55	42	\$18,732.00	\$1,873.20
5	1	12345NM0000002	1	21	24	\$3,600.00	\$360.00
6	1	12345NM0000002	1	40	18	\$3,450.60	\$345.06
7	1	12345NM0000002	1	55	12	\$4,014.00	\$401.40
8	1	12345NM0000003	1	21	30	\$9,000.00	\$900.00
9	1	12345NM0000003	1	40	90	\$34,506.00	\$3,450.60
10	1	12345NM0000003	1	55	66	\$44,154.00	\$4,415.40
11	2	12345NM0000001	1	21	15	\$3,075.00	\$307.50
12	2	12345NM0000001	1	40	30	\$7,859.70	\$785.97
13	2	12345NM0000001	1	55	21	\$9,600.15	\$960.02
14	2	12345NM0000002	1	21	12	\$1,860.00	\$186.00
15	2	12345NM0000002	1	40	9	\$1,782.81	\$178.28
16	2	12345NM0000002	1	55	6	\$2,073.90	\$207.39
17	2	12345NM0000003	1	21	12	\$3,660.00	\$366.00
18	2	12345NM0000003	1	40	6	\$2,338.74	\$233.87
19	2	12345NM0000003	1	55	9	\$6,121.35	\$612.14

Completed Report Example



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UPDATED MONTHLY REPORTS - RETROACTIVE ADJUSTMENTS

- Issuers must **resubmit monthly reports** with retroactive adjustments in the relevant tabs of the “Annual Reporting” template. **Only report members who were active for the month.** *Do not include Member Months that have been removed.*
- The updated totals should be reported in the tab titled, “Template. Annual Totals.”

[INSERT ISSUER NAME]			
Billing Month	Invoiced Amount	Actual Amount	Invoiced Amount Minus Actual Amount
Jan-25			
Feb-25			
Mar-25			
Apr-25			
May-25			
Jun-25			
Jul-25			
Aug-25			
Sep-25			
Oct-25			
Nov-25			
Dec-25			
Total	\$0.00	\$0.00	\$0.00



HCA NOTICE OF RECONCILIATION AMOUNTS, DISPUTES, AND PAYMENTS

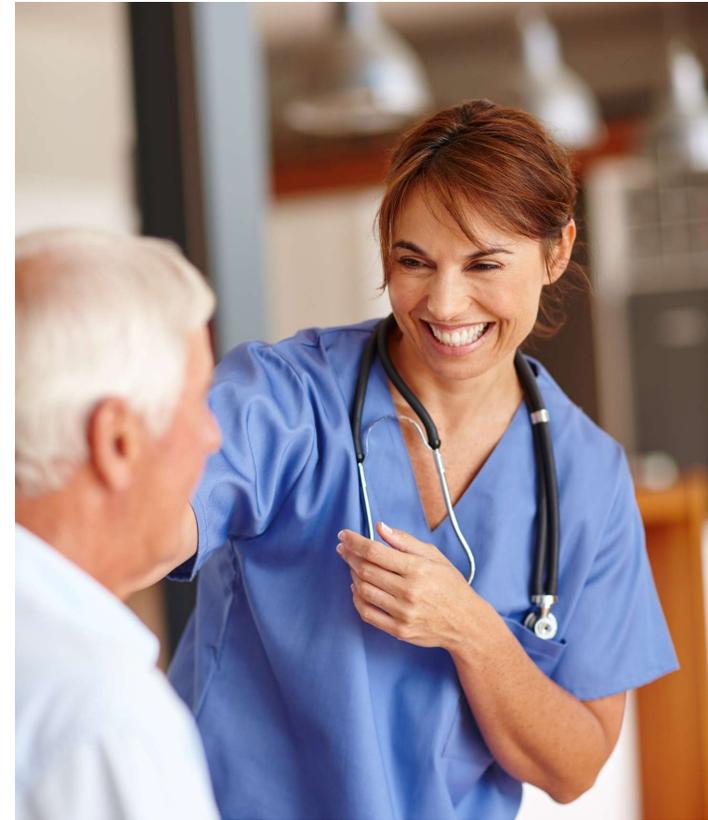
- HCA Notice of Reconciliation
 - Issued no later than **May 5, 2026**.
 - The notice will be provided through the SERFF platform. **Please note that issuers are still required to submit an invoice for payment with their June 2026 Monthly invoice. The notice is not sufficient to receive payment.**
- Reconciliation Disputes Submissions
 - Must be submitted by **May 12, 2026**.
 - Issuers must submit all reconciliation disputes per the instructions in the Program Year 2024 SBHIPRI Guidance.
- Reconciliation Payments
 - Payments should be included in the invoice submitted in **June 2026**.
 - Payments must be paid no later than **June 30, 2026**.



QUESTIONS?



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