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REGULAR MEETING OF THE BOARD OF DIRECTORS



June 6, 2017

9:30 AM

**Alfredo R. Santistevan Board Room
Suite 207**

**4308 Carlisle Blvd. NE
Albuquerque, NM 87107**

New Mexico Retiree Health Care Authority
Regular Meeting

BOARD OF DIRECTORS

ROLL CALL

June 6, 2017

	Member in Attendance		
Mr. Sullivan, President			
Mr. Montañño, Vice President			
Mr. Crandall, Secretary			
Mr. Propst			
Ms. Goodwin			
Mr. Johnson			
Mr. Linton			
Ms. Saunders			
Mr. Eichenberg			
Ms. Larranaga-Ruffy			

NMRHCA BOARD OF DIRECTORS

June 2017

Mr. Wayne Propst
Executive Director
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(F) 505-827-1855

The Honorable Mr. Wayne Johnson
NM Association of Counties
Bernalillo County Commissioner
One Civic Plaza, NW
Albuquerque, NM 87102

Ms. Karen Brown
Deputy County Commissioner
Bernalillo County, District 5
kbrown@bernco.gov
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505-462-9821 (fax)

Mr. Terry Linton
Governor's Appointee
1204 Central Ave. SW
Albuquerque, NM 87102
terry@lintonandassociates.com
505-247-1530

Mr. Joe Montañó, Vice President
NM Assoc. of Educational Retirees
5304 Hattiesburg NW
Albuquerque, NM 87120
Jmountainman1939@msn.com
(H) 897-9518

Mr. Doug Crandall
Retired Public Employees of New Mexico
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The Honorable Mr. Tim Eichenberg
NM State Treasurer
2055 South Pacheco Street
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Santa Fe, NM 87505
Tim.Eichenberg@state.nm.us
(W) 505-955-1120
(Fax) 505-955-1195

Ms. Therese Saunders
NEA-NM, Classroom Teachers Assoc., & NM
Federation of Educational Employees
5811 Brahma Dr. NW
Albuquerque, NM 87120
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Mr. Tom Sullivan, President
Superintendents' Association of NM
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Albuquerque, NM 87123
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Ms. Leanne Larranaga-Ruffy
Alternate for PERA Executive Director
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Santa Fe, NM 87507
PO Box 2123
Santa Fe, NM 87504
Leanne.Larranaga@state.nm.us

Regular Meeting of the
NEW MEXICO RETIREE HEALTH CARE AUTHORITY
BOARD OF DIRECTORS

June 6, 2017

9:30 AM

Alfredo R. Santistevan Board Room

2nd Floor, Suite 207

4308 Carlisle Blvd. NE

Albuquerque, NM 87107

AGENDA

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1. Call to Order	Mr. Sullivan, President	
2. Roll Call to Ascertain Quorum	Ms. Beatty, Recorder	
3. Pledge of Allegiance	Mr. Sullivan, President	
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14. Other Business	Mr. Sullivan, President	
15. Date & Location of Next Board Meeting July 13, 2017, 9:30AM / July 14, 2017, 9:00AM Angel Fire Lodge Rooms A & B – 2 nd Floor 10 Miller Lane Angel Fire, NM 87110	Mr. Sullivan, President	
16. Executive Session	Mr. Sullivan, President	
17. Adjourn		

ACTION SUMMARY

RETIREE HEALTH CARE AUTHORITY/REGULAR BOARD MEETING

May 3, 2017

<u>Item</u>	<u>Action</u>	<u>Page #</u>
APPROVAL OF AGENDA	Approved	3
<u>APPROVAL OF MINUTES:</u> April 4, 2017	Approved	3
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<u>EXECUTIVE DIRECTOR'S UPDATE</u> Better Choices, Better Health The Pharmacy Drug Cost Puzzle Express Scripts/Anthem Sierra County Program Participation Legislative HR Updates FY18 Operating Budget	Informational	3
FY 17 3RD QUARTER BUDGET REPORT	Informational	6
FY 17-19 FINANCIAL AUDIT RFP	Approved	6
FY18 CONTRACT AMENDMENTS	Approved	6
OUT-OF-STATE TRAVEL REQUEST	Approved	7
5 YEAR STRATEGIC PLAN/2018 PLAN RECS	Informational	7
<u>EXECUTIVE SESSION: Limited Personnel Matters [p. 9]</u> No action		

MINUTES OF THE
NEW MEXICO RETIREE HEALTH CARE AUTHORITY/BOARD OF DIRECTORS

REGULAR MEETING

May 3, 2017

1. CALL TO ORDER

A Regular Meeting of the Board of Directors of the New Mexico Retiree Health Care Authority was called to order on this date at 9:30 a.m. in the in the Alfredo R. Santistevan Board Room, 4308 Carlisle Boulevard, N.E., Albuquerque, New Mexico.

2. ROLL CALL TO ASCERTAIN QUORUM

A quorum was present.

Members Present:

Mr. Tom Sullivan, President
Mr. Joe Montaña, Vice President
Mr. Doug Crandall, Secretary
Ms. Jan Goodwin
Mr. Wayne Johnson
Mr. Terry Linton
Ms. Therese Saunders
Ms. Leanne Larrañaga-Ruffy

Members Excused:

The Hon. Tim Eichenberg, NM State Treasurer

Staff Present:

Mr. Dave Archuleta, Interim Executive Director
Mr. Neil Kueffer, Director of Product Development & Health Care Reform
Mr. Greg Archuleta, Director of Communication & Member Engagement
Mr. Tomas Rodriguez, IT Manager
Ms. Charmaine Clair for Ms. Judith Beatty, Board Recorder

Others Present:

[See sign-in sheet.]

3. PLEDGE OF ALLEGIANCE

Mr. Linton led the Pledge.

4. APPROVAL OF AGENDA

Mr. Johnson moved approval of the agenda, as published. Ms. Goodwin seconded the motion, which passed unanimously by voice vote.

5. APPROVAL OF REGULAR MEETING MINUTES: April 4, 2017

Mr. Montaña moved approval of the minutes of the April 4 meeting, as submitted. Ms. Goodwin seconded the motion, which passed unanimously by voice vote.

6. PUBLIC FORUM AND INTRODUCTIONS

LFC analyst Anne Hanika-Ortiz introduced Joey Simon, her counterpart at the Legislative Education Study Committee.

7. COMMITTEE REPORTS

Chairman Sullivan reported the Executive Committee met last week to work on today's agenda with staff.

Mr. Crandall reported that the Finance Committee met earlier this week and approved the FY 2018 budget, as authorized by the board at the April meeting.

Ms. Goodman stated that the Wellness Committee is scheduled to meet on May 23. She also noted that the Audit Committee met, which will be an action item later in today's agenda.

8. EXECUTIVE DIRECTOR'S UPDATES

a. Better Choices, Better Health

Mr. Archuleta stated that information on the Better Choices, Better Health Program, a free 6-week online chronic disease self-management program, was included in the quarterly newsletter to retirees, adding that the program is of particular help to people living in rural areas. He said 16 people have signed up for the program since its rollout last month; the goal is 186, and the NMRHCA is continuing its communication efforts through its health plans and is discussing the program at wellness meetings.

Mr. Archuleta noted that in 2016, 29 participants applied for the wellness benefit for the free \$50 gift card in the MyCD Program, and participation is currently 10 people for 2017. This program is still being promoted, but there is not a significant uptick in the numbers.

Ms. Goodwin asked if there are any “best practices” they could look at to increase participation.

Mr. Archuleta responded that NMRHCA has asked Canary Health for ideas on how to improve participation, and the recommendations are to communicate through email and newsletter as well as offer the \$50 gift card as incentive. Other than making people aware of it, Canary Health has not suggested anything the NMRHCA has not already pursued.

Ms. Goodwin asked whether other states have better participation rates, and Mr. Archuleta responded that this program is relatively new and he was not aware of others with this specific program. Mr. Kueffer added that APS tried to promote a MyCD program through its own wellness coordinator and went through the same struggle. Its program is now administered through Presbyterian.

Rory Cobb, a representative from New Mexico Health Connections, stated that it is working with the same program, which was unveiled in April. There has not been much participation at this point, given that the program is only a month old, but it is not unusual for people to not take advantage of these kinds of programs.

Mr. Montaña suggested asking Segal and Mike Magdalena if they are aware of any successful wellness programs. He said he was personally disappointed that members generally were not taking advantage of NMRHCA’s wellness program.

Mr. Linton commented that there is general frustration from the Wellness Committee. He asked Mr. Archuleta to research other retiree groups to see whether NMRHCA is missing a “silver bullet” that could increase the numbers.

b. The Pharmacy Drug Cost Puzzle

Mr. Archuleta reported on details from yesterday’s meeting sponsored by the New Mexico Coalition for Health Care Value, in which a variety of perspectives and solutions were presented—much of which the board has already heard. Making improvements in transparency was an overall theme.

Chairman Sullivan noted from the report that that one out of every 10 healthcare dollars is spent on prescriptions, and the cost is rising. He asked if this is a national statistic. If so, how does that compare to New Mexico?

Mr. Archuleta responded that total PBM costs this year have risen about 3 percent, much lower than last year’s 12 percent rise, but part of that is the offset from people

moving into Medicare Advantage plans.

Ms. Saunders commented that she thought the statistics for noncompliance and non-adherence to prescription drugs were particularly shocking. Drugs are being prescribed and not used correctly, even under chronic conditions. Mr. Archuleta added that this was also true with respect to usage of insulin and syringes for people with diabetes, which the NMRHCA might find useful to focus on going forward, since this is the most costly spend.

c. Express Scripts/Anthem

Mr. Archuleta noted an article in *The Wall Street Journal* regarding the breakup of Express Scripts and Anthem. The article states that Anthem contributed 20-30 percent of Express Script's overall book of business, so this is a significant blow to Express Scripts, but the long-term impact is not yet clear. Express Scripts' contract with the NMRHCA runs through FY 2018, which ends the agency's four-year term limit on contracts. He added that NMRHCA will be issuing an RFP for PBM services as soon as its PBM consultant RFP is completed.

d. Sierra County Program Participation

Mr. Archuleta said he had reported at the last board meeting that Sierra County, with about 100 employees, was interested in joining the NMRHCA. Although Segal initially told the county that it would cost them about \$1.5 million, that estimate has been lowered to \$980,000. Sierra County's governing body is scheduled to meet on May 16 to address the question of whether they should move forward with program participation. If they do, the NMRHCA Board will formally take action at next month's meeting so participation can begin on July 1. This will bring the number of counties participating in the program to 23 out of a possible 33.

Mr. Archuleta said Sierra County's cost to the NMRHCA will be \$10,000 per month for the next 13 years.

e. Legislative

Mr. Archuleta reported that SB334 (Health Care Purchasing Disclosures, requiring notification of posting of plan comparisons and premium information) and SB354 (creating an Interagency Pharmaceutical Purchasing Council) were both pocket-vetoed by the Governor.

Mr. Archuleta said the NMRHCA has provided all of the claim information, going back to FY 2012, requested by the LFC for their health care notes analysis.

f. HR Updates

Mr. Archuleta reported that there are two vacant FTEs, both customer service

representative positions. Interviews will be conducted later this week and into next week. In addition, Financial Analyst Barbara Burns will be retiring in August, and the NMRHCA has received permission to double-fill the position so someone can be brought in for the necessary training.

g. FY18 Operating Budget

Mr. Archuleta said the operating budget for FY18, which was approved by the Finance Committee (as authorized by the board) earlier this week, was in the packet for review. He commented that expenditures were significantly less than projected in the third quarter.

9. FY 17 3RD QUARTER BUDGET REPORT

Mr. Archuleta presented this report. For the Health Care Benefit Fund, current projections show a \$36 million surplus at the end of FY 2017. For the Program Support Fund, projected expenditures are expected to remain within the total appropriation for FY 2017.

Mr. Crandall said the Finance Committee reviewed this report and had no concerns.

10. FY 17-19 FINANCIAL AUDIT RFP

Mr. Archuleta reported that four responses were received from the RFP, which was issued on March 15, 2017. Responses were received from the following firms: Moss Adams; Hinkle and Landers, CliftonLarsonAllen, and RPC. After a comprehensive evaluation of each offer, one proposal emerged as superior in terms of quality and thoroughness of the responses, description of services provided, familiarity and knowledge of GASP reporting requirements, and experience with similar organizations.

Mr. Archuleta requested approval to enter into contract negotiations with the firm that received the highest composite score, as discussed. Upon approval by the State Auditor and Department of Finance and Administration, the name of the selected vendor will be presented to the board.

Mr. Johnson so moved. Ms. Goodwin seconded the motion, which passed unanimously by voice vote.

11. FY18 CONTRACT AMENDMENTS/NEW CONTRACTS

Mr. Archuleta reviewed a list of the contracts administered through the Healthcare Benefits Administration Program (Blue Cross Blue Shield; Presbyterian; NM Health Connections; United Healthcare; Humana; United Concordia; Delta; David Vision; Express Scripts; and The Standard Insurance Group) with the amounts encumbered YTD and projected expenditures

through the remainder of the fiscal year. This information was used as a baseline to back into the approved operating budget, since fall enrollment numbers and migration numbers are not yet known. The operating budget for the next fiscal year is just over \$317 million. All contracts were initiated last year and will run through June 2020, with the exception of Express Scripts (6/30/2018) and The Standard (6/30/2019). NMRHCA will leave \$3.8 million unencumbered to make any contract adjustments before the end of the fiscal year.

Mr. Archuleta said NMRHCA went through the same exercise with Program Support and the following new and existing contracts: Segal; NEPC; Rodey Law Firm; Atkinson (financial audit); Financial Audit (GASB 74 & 75); PBM RFP Consultant; Shred-IT; Judith Beatty; POD; ABBA Technology; Real Time Solutions; and RiskSense. The amount encumbered YTD is \$570,562; FY17 projected is \$431,610; and the FY18 proposed budget is \$523,010, with an unencumbered balance of \$21,780 available for amendments/new contracts.

Mr. Archuleta requested approval of the proposed contract amendments and new contracts as listed.

Mr. Montañó said he received an inquiry on the hearing aid benefit offered by Davis Vision and asked if this is an add-on to Davis's contract with NMRHCA. Mr. Archuleta responded that the scope of services isn't being expanded and NMRHCA isn't administering a benefit on behalf of Davis Vision. He said Davis Vision is just providing access to a discount.

Mr. Crandall moved for approval of the contract amendments, as presented. Ms. Goodwin seconded the motion, which passed unanimously by voice vote.

12. OUT-OF-STATE TRAVEL REQUEST

Mr. Archuleta said this is a request for approval for Mr. Crandall to attend the Express Scripts Outcome Symposium in Dallas on June 5-8, 2017.

Mr. Johnson moved for approval. Ms. Goodwin seconded the motion, which passed unanimously by voice vote.

13. 5-YEAR STRATEGIC PLAN/2018 PLAN RECOMMENDATIONS

Mr. Archuleta presented a summary of the information that has been presented to the board over the past couple of months. With adoption of the recommendations at the upcoming July annual meeting, solvency will be extended from 13 years to 15 years, to 2032. He reviewed the list of recommended changes:

Pre-Medicare/Medicare

- Increase retiree premiums in accordance with projected medical trend for all self-insured plans based on loss ratios calculated in late May/early June.

- Expand Value Option Resources to include BlueAdvantage (BAV) Network
- Increase cost sharing/narrow network on prescription plan (pre-Medicare supplement)

Medicare

- Default folks to appropriate Medicare Advantage Plan.
- Supplement – introduce \$250 copay for inpatient stay (1 per year)
- Supplement – increase annual Part B cost sharing by \$50

Mr. Linton expressed concern that legislators were not really aware of the profound effect that SB 7 had on the NMRHCA and how it narrowed the agency’s solvency window.

Ms. Hanika-Ortiz said that, this August, the LFC will have its hearing, when the IBAC agencies (including NMRHCA) are invited to come and talk about these kinds of issues.

Chairman Sullivan commented that he shared Mr. Linton’s frustration because the NMRHCA has been “pushing a rock up a hill” for a long time, and now has slid back down. He said the question for the board between now and the retreat is whether this proposal will indeed get the agency back to the 15-year solvency window. He noted that, before the legislation, the board was looking at a 20-year solvency window. He urged board members to consider their constituencies’ concerns and get any questions for clarification or analysis to Mr. Archuleta promptly so the board can have a good discussion in June and be prepared to act in July.

Mr. Crandall said he felt the hard work of this board and the sacrifices made by the membership to accommodate the changes were not appreciated. He also expressed concern that the NMRHCA would be reaching a point of no return without an employee contribution in the next couple of years.

Mr. Archuleta responded that the agency will begin deficit spending in 2019, and he did not anticipate that there would be an employer/employee contribution before then. He said perhaps it is possible in 2020, but given the overwhelming need that the state has, most of the additional dollars will likely be absorbed by other programs. He stressed the importance of making the necessary changes to push the deficit spending date out as far as possible to avoid going downhill.

Ms. Goodwin suggested the board consider creating a list of changes to the plan in order to reach 100 percent funding in 30 to 50 years. She said this would mean sitting down with legislators and pointing out that the benefit will go away if certain changes are not made within the next five years.

Mr. Johnson wondered how well the NMRHCA is communicating with the current membership about the financial situation of the agency and its long-term challenges, and

whether the members realize that the benefit could disappear in a few years and they would have to find something else. He said the NMRHCA might consider ways of leveraging its own membership to help sell the increases on the employer/employee contribution side, and help communicate with active employees.

Mr. Montañó commented that, in his experience in speaking with groups, people seem to lack a sense of urgency about how the benefit might be lost. The agency is so well run and so responsive to the needs of the membership that there may be the impression that it can fix anything and there will never be a problem. He said he would hope that legislators are not thinking that NMRHCA is doing just fine in spite of SB7. He said the NMRHCA is going to have to sit down with the unions and talk about the crisis that the agency is going to be facing in a few years if there is no employee-employer contribution and how the NMRHCA will need their support.

Mr. Crandall agreed with Mr. Johnson's comments and suggested that the newsletter periodically contain a message from the Legislative Committee or the Board President.

14. OTHER BUSINESS

None.

15. DATE AND LOCATION OF NEXT BOARD MEETING

**June 6, 2017, 9:30 AM
Alfredo R. Santistevan Board Room
4308 Carlisle Blvd. NE, Suite 207
Albuquerque, NM 87107**

16. EXECUTIVE SESSION: 10:45 a.m.

- a. Pursuant to Section 10-15-1(H)(6) NMSA 1978 to Discuss Limited Personnel Matters**
-

Mr. Crandall moved to go into executive session for the purpose of discussing limited personnel matters. Mr. Johnson seconded the motion, which passed on the following roll call vote:

For: Chairman Sullivan; Vice Chair Montañó; Secretary Crandall; Ms. Goodwin; Mr. Johnson; Mr. Linton; Ms. Saunders; Ms. Larrañaga-Ruffly.

Against: None.

[The board came out of executive session at 11:40 a.m.]

Mr. Linton moved to come out of executive session, noting that no action was taken. Ms. Goodwin seconded the motion, which passed unanimously by voice vote.

15. ADJOURN

Its business completed, the Board adjourned the meeting at 11:45 a.m.

Tom Sullivan, President

MINUTES OF THE
NEW MEXICO RETIREE HEALTH CARE AUTHORITY/BOARD OF DIRECTORS

SPECIAL MEETING

May 23, 2017

1. CALL TO ORDER

A Special Meeting of the Board of Directors of the New Mexico Retiree Health Care Authority was called to order on this date at 9:30 a.m. in the in the Alfredo R. Santistevan Board Room, 4308 Carlisle Boulevard, N.E., Albuquerque, New Mexico.

2. ROLL CALL TO ASCERTAIN QUORUM

A quorum was present.

Members Present:

Mr. Tom Sullivan, President
Mr. Joe Montañó, Vice President
Mr. Doug Crandall, Secretary (by phone)
Ms. Jan Goodwin
Mr. Wayne Johnson
Ms. Therese Saunders
Mr. Wayne Propst

Members Excused:

The Hon. Tim Eichenberg, NM State Treasurer
Mr. Terry Linton

Staff Present:

Mr. Dave Archuleta, Interim Executive Director
Mr. Greg Archuleta, Director of Communication & Member Engagement, Board Recorder

3. EXECUTIVE SESSION

a. Pursuant to Section 10-15-1(H)(6) NMSA 1978 to Discuss Limited Personnel Matters

Mr. Propst moved to go into Executive Session for the purpose of discussing limited personnel matters. Ms. Goodwin seconded the motion, which passed on the following roll call vote:

For: Chairman Sullivan; Vice Chair Montañó; Secretary Crandall; Ms. Goodwin; Mr. Johnson; Ms. Saunders; Mr. Propst.

Against: None.

[The board came out of executive session at 10:41 a.m.]

Mr. Johnson moved to come out of executive session, noting that no action was taken. Ms. Goodwin seconded the motion, which passed unanimously by voice vote.

4. CONSIDERATION OF SELECTING A NEW NMRHCA EXECUTIVE DIRECTOR

Chairman Sullivan asked for a vote among Board Members to name Interim Executive Director David Archuleta as Executive Director.

Mr. Propst so moved. Ms Goodwin seconded the motion, which passed by voice vote.

5. ADJOURN

Its business completed, the Board adjourned the meeting at 10:45 a.m.

Tom Sullivan, President



Regular Meeting of the
NEW MEXICO RETIREE HEALTH CARE AUTHORITY

WELLNESS COMMITTEE

10:30 AM, May 23, 2017
NMRHCA
4308 Carlisle Blvd. NE, Suite 207
Albuquerque, NM

Participants Passcode: 473289
Phone Number – Toll Free: 1-888-205-5513

AGENDA

Attendees: Ms. Jan Goodwin, Chair
Ms. Therese Saunders
Mr. Terry Linton
Mr. Joe Montaña

Staff: Mr. David Archuleta, Interim Executive Director
Mr. Neil Kueffer, Director of Product Development and Health Care Reform
Mr. Greg Archuleta, Director of Communications and Member Engagement

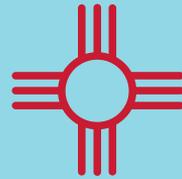
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|---------------------------------------------------------------|------------------------------------------------|
| 1. Call to Order | Ms. Goodwin, Chair |
| 2. Roll Call to Ascertain Quorum | Mr. Archuleta, Recorder |
| 3. Approval of Agenda | Ms. Goodwin, Chair |
| 5. NMRHCA Wellness Incentive Update | Mr. Neil Kueffer/Mr. Greg Archuleta,
NMRHCA |
| 5. BCBS Wellness Incentive Update | Ms. Lisa Hentz, BCBS |
| 6. Presbyterian Wellness Incentive Update | Ms. Ingrid Jorud, The Solutions Group |
| 7. Executive Director's Report | Mr. Archuleta, Executive Director |
| 9. Other Business | Ms. Goodwin, Chair |
| 10. Date and Location for the Next Wellness Committee Meeting | |
| 11. Adjourn | |

NMRHCA

2016 WELLNESS INCENTIVE REVIEW/ 2017 ONGOING ACTIVITIES

WELLNESS COMMITTEE REPORT

MAY 23, 2017



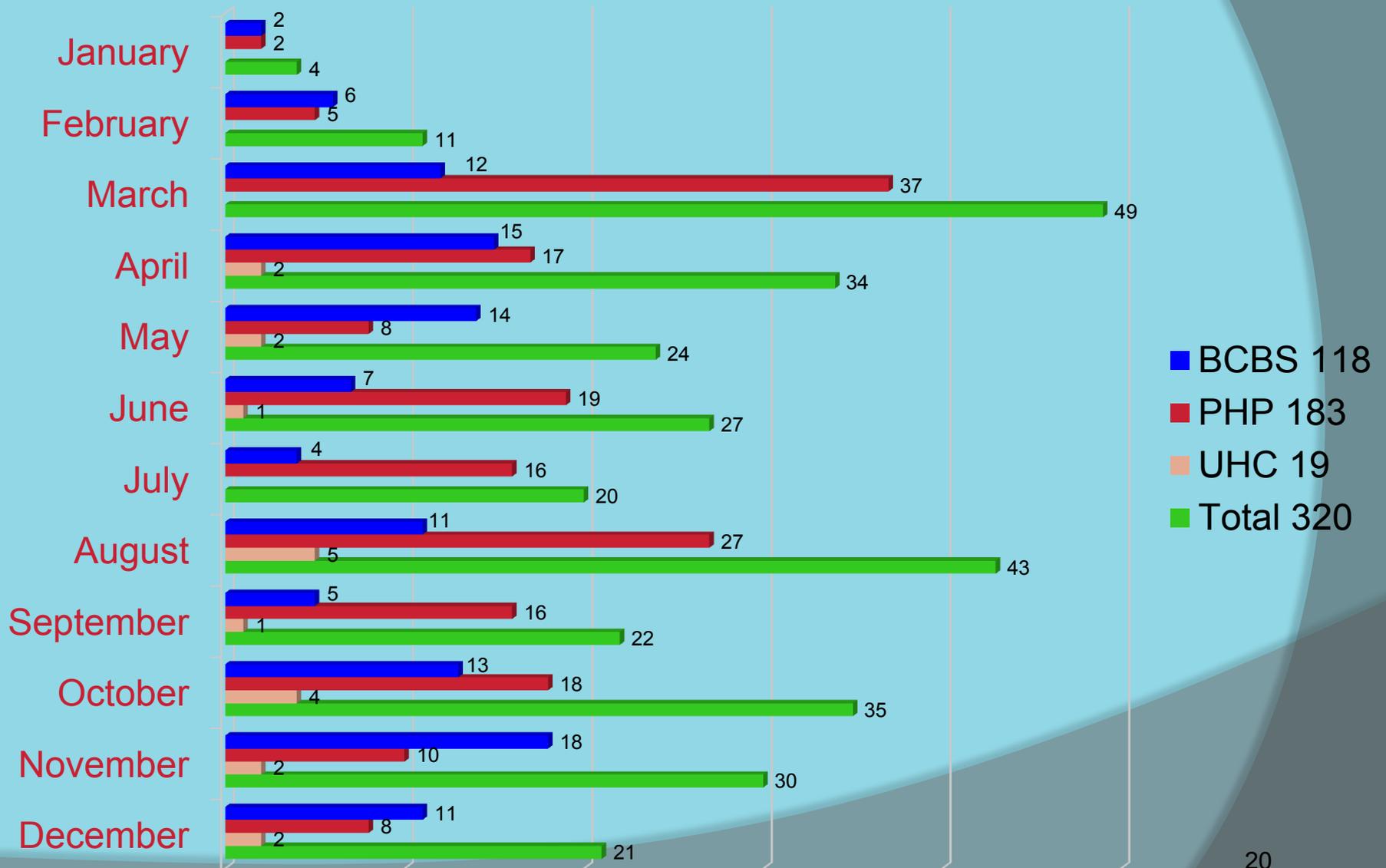
NEW MEXICO
RETIREE
HEALTH CARE
AUTHORITY

2016 WELLNESS INCENTIVE REVIEW

Quick Facts

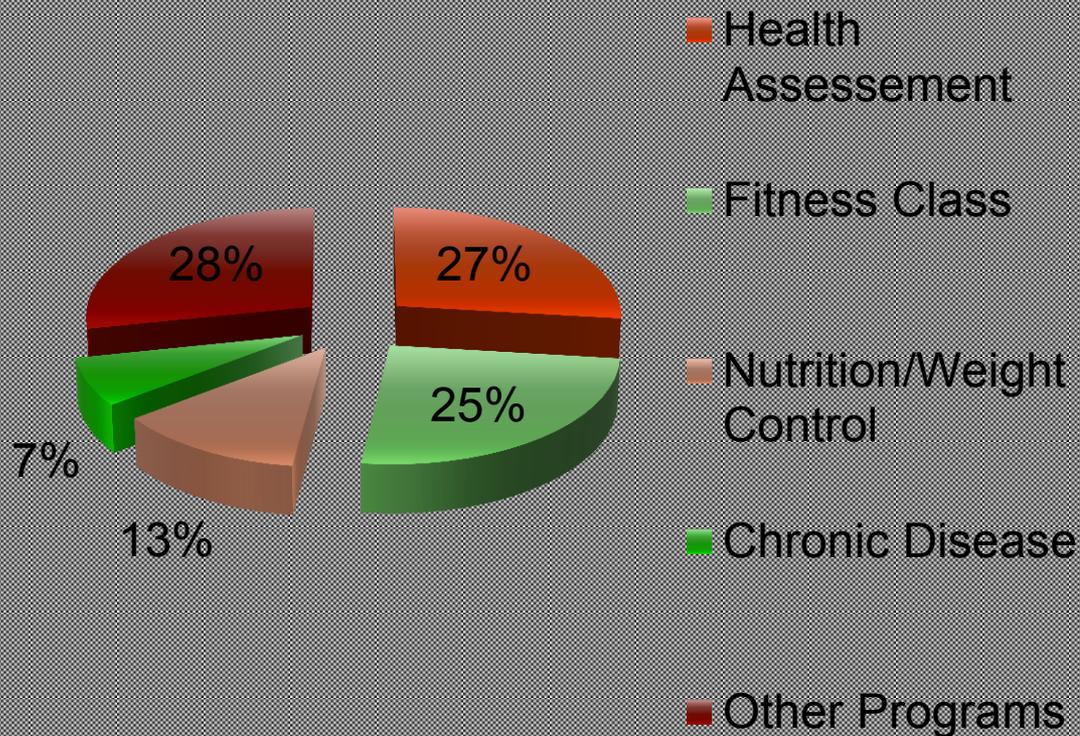
- 320 members turned in qualifying forms and earned \$50 Visa gift cards
- Presbyterian Health Plan members accounted for 57.2 percent of participants (183), Blue Cross Blue Shield 36.9 percent (118) and UnitedHealthcare 5.9 percent (19).
- Medicare members represented 41.25 percent of participants (132), Pre-Medicare 38.75 percent (124) and Medicare Supplement 20 percent (64).
- The single activity most members participated in was a Personal Health Assessment (53.75 percent, 172), followed by a fitness or exercise course (50.25 percent, 161).
- Good Measures was third with 21.6 percent (69). Chronic Disease-related activity was fourth with 14.06 percent participation rate (46).
- The three biggest months of participation came the months after an NMRHCA newsletter was published.
- Nine cards reissued (wrong address, cards accidentally thrown away or destroyed by members).

2016 CARD TOTALS BY HEALTH PLAN

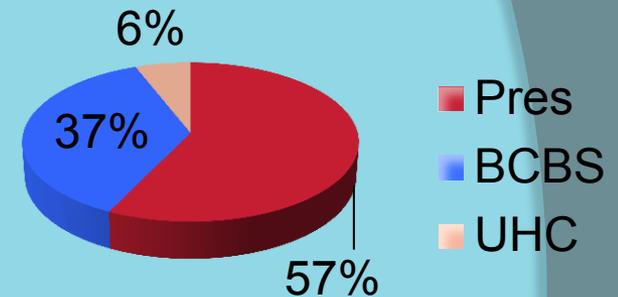


2016 COMPLETION FORM DATA

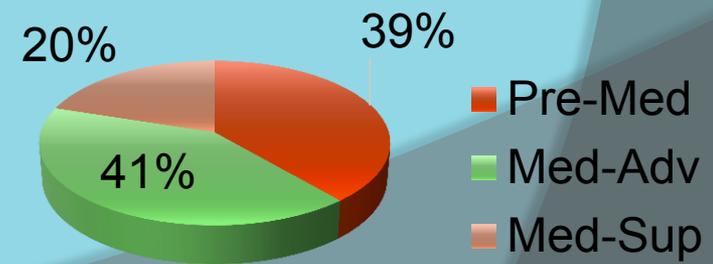
Program Types Completed



By Health Plan



Plan Types

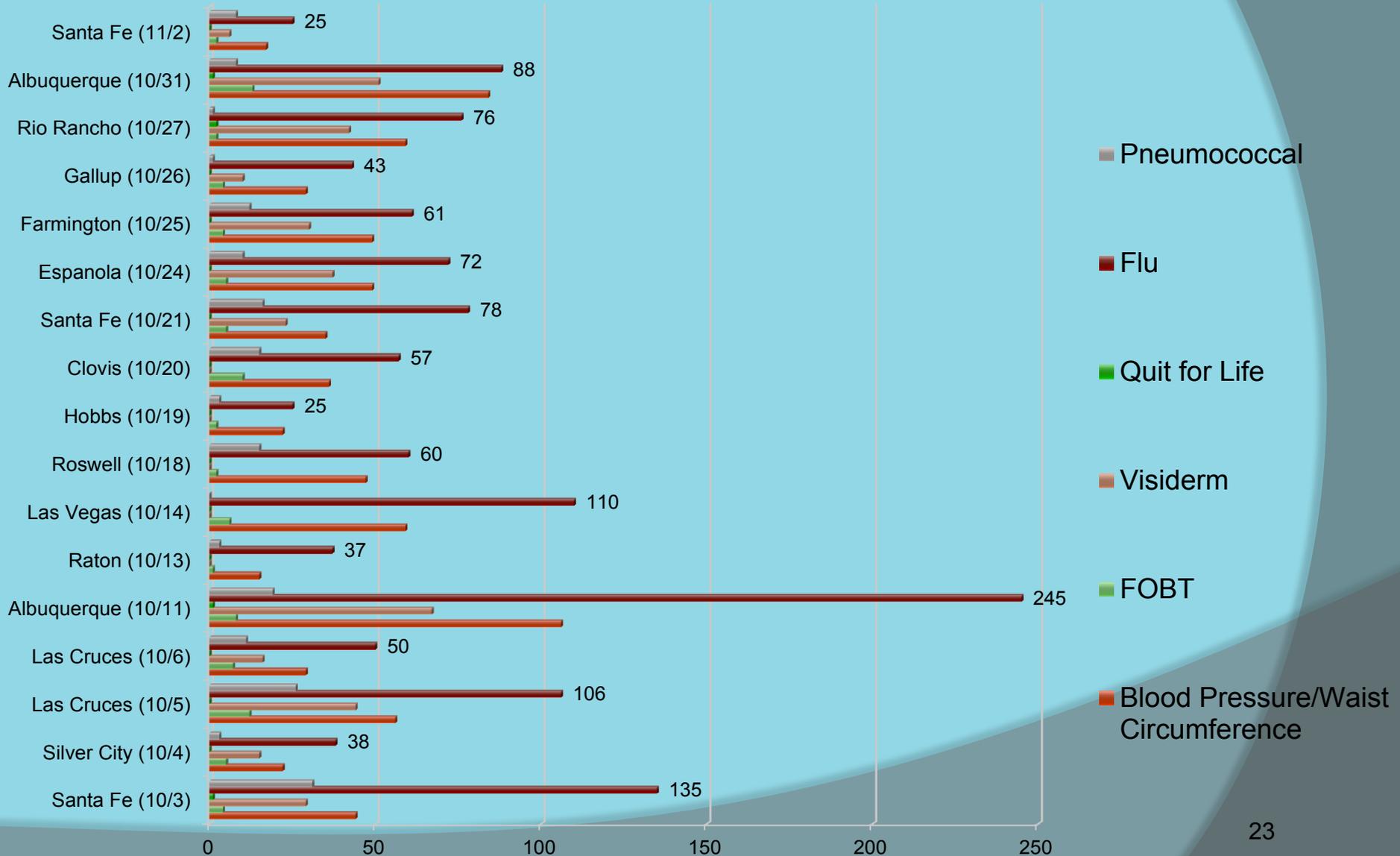


2016 CARD TOTALS BY CITY

2016



2016 SWITCH ENROLLMENT TOTALS



2016 WELLNESS INCENTIVE REVIEW

Types of Participation:

NMRHCA was purposefully flexible in the programs it allowed as acceptable wellness programs. The following categories received approval:

- ✧ Fitness (workouts, aerobics, dance classes)
- ✧ Diet/weight loss/weight gain
- ✧ Wellbeing/Healthy Living
- ✧ Chronic disease management
- ✧ Sports (pickleball, endurance running, Senior Olympics, tennis, ping-pong)
- ✧ Prevention (balance, falls, medication education, stress education)
- ✧ Seminars (single and multi-session)
- ✧ Social interaction (Sewing class, ceramics class DIY Holiday gifts seminar)
- ✧ Other education (Driving classes, HIPAA seminar, First Aid, acupuncture)

2016 WELLNESS INCENTIVE REVIEW

What We Learned:

- Several members had trouble finding programs on their own or wanted to be told two specific programs to complete.
- Some NMRHCA members had to talk to multiple people to get clarification or information on program.
- Issues over delivery of gift cards
 - Cards sent to wrong address on file
 - Members did not recognize envelopes in which the gift cards were sent and threw away or shredded cards.
- Members with issues had to wait multiple months for those issues to be resolved.
 - NMRHCA contacted only those whose completion forms had a problem.
 - Because of costs of ordering cards, NMRHCA turned in completion forms once per month. Issues that arose sometimes experienced delays because NMRHCA found out about the problems only after the members called to ask about their cards. As a result, NMRHCA didn't find out about problems until a few months after originally collecting the completion form.
 - Address issues and discarded gift cards increased late in the year (nine cards reissued in 2016, two so far in 2017).

CURRENT DATA/WHAT'S NEW AND HAPPENING IN 2017

- February 2017 was our best month ever in terms of participation (58 forms completed, 47 from Pres members). Winter Newsletter sent in January.
- 170 total cards issued through April, 2017.
- We have had 51 people so far who have repeated the incentive from 2016, some of whom have induced their spouses to participate this year.
- We searched and added programs to the website (Natural Grocers seminars, for example) as we discovered them to give members more choices in activities.
- Included a photo of the envelope for website/2016 fall newsletter to help prevent members from throwing away their cards.
- Updated the Wellness Completion Form PDF to include a space for a change of address. May consider adding a space for email address if we develop more issues in delivery.
- Created an online version on our website of the Wellness Completion Form (three people have accessed so far).
- Talked about scheduling the sending of completion forms every two weeks, rather than monthly, to cut down time of delivery as well as time to discover a possible issue.

MORE NEW INITIATIVES IN 2017

- Developed an in-house marketing strategy with addendum of further guidelines for CSRs to cut down number of phone-call transfers for members. We have posted flyers in both Albuquerque, Santa Fe offices with flyer information.
—Resistance met: Members comment if our rates are going up, why do we have program offering \$50 gift cards?
- Added more programs available through United Concordia dental seminars at RHCA and the implementation of an online version of the Chronic Disease Self-Management programs (formerly known as “MyCD.” The online version is called “Better Choices Better Health. Participation has been limited.
- Considering a phone script approach (similar to BCBS) in which a member would hear about the incentive (or other initiatives) while waiting to speak to a CSR.

ONLINE COMPLETION FORM 2017

ation

QUESTIONS RESPONSES 2

Wellness Incentive Completion Form

Fill out the information below and click on the SUBMIT button at the bottom of this form.
If you have proof of completion, (certificate of participation, receipt), please submit a copy of the certificate.

You can upload a copy, email a copy or visit one of our offices in Santa Fe or Albuquerque and drop off a copy.

* UPLOAD A COPY OF YOUR CERTIFICATES:
Click on the link below or copy and past the link into your web browser
<https://script.google.com/macros/s/AKfycbz9v3rqp-gz8A1NEp3x8TIULk1LjwZdFR6VksqK45HncPP7Ioo/exec>

* EMAIL A COPY OF YOUR CERTIFICATES:
NMRHCA.wellness@state.nm.us

* MAIL:
Retiree Health Care Authority
4308 Carlisle Blvd. NE, Suite 104
Albuquerque NM, 87107-4849

Name *

Short answer text

Email

Short answer text

Address *

Long answer text

State *

Short answer text

Zip Code *

Short answer text

Phone number

Short answer text

Last 4 digits SSN

Short answer text

First Wellness Program *

Long answer text

Second Wellness Program *

Short answer text

Check Applicable Health Plan

Blue Cross Blue Shield

Presbyterian

United Health Care

NM Health Connections

Humana

Certificate Submission *

I have uploaded a copy of my completed programs

I will email a copy of my completed wellness programs

I will mail a copy of my completed wellness programs

I will drop off a copy of my completed wellness programs

If you have any questions, please contact us at 1-800-233-2576 or email us at NMRHCA.wellness@state.nm.us

Description (optional)

Know How U Can MAKE \$50?

Did you know ...

NMRHCA retirees and spouses/domestic partners can earn a ~~\$50 Visa Gift Card~~, simply by completing two or more wellness activities?

What's a "wellness activity?" Well, it's basically any structured program that improves, maintains or contributes to your health and wellness!

After completing the two events, you can go on-line to the Wellness Page on the NMRHCA.org website and complete a form online.

You can also download a printable form (available on our Wellness Page) or call 800-233-2576 to request a form to be mailed to you. Mail the completed form back to 4308 Carlisle Blvd. NE, Albuquerque, NM, bring it back to our Albuquerque or Santa Fe locations, fax it to 505-884-8611 or email to NMRHCA.wellness@state.

Examples of wellness activities are:

- ▶ Personal Health Assessments (through your doctor, provider or online)
 - ▶ Fitness/exercise classes
 - ▶ Dance classes/walking programs or trails
 - ▶ Community health or cooking classes
 - ▶ Health or wellness webinars/online workshops
 - ▶ Department of Health programs (such as MyCD — Manage Your Chronic Disease)
 - ▶ Healthy eating/lifestyle programs (such as Good Measures, which is free!)
 - ▶ Aging and Long-Term Services programs
 - ▶ Smoking-cessation programs
 - ▶ Natural Grocers seminars
- Need more idea? Ask us!

- *Dependent children are not eligible to receive a gift card*
- *Limit one \$50 gift card per eligible individual per year*
- *Allow 4-6 weeks for delivery of \$50 gift card*

Having trouble thinking of a course or program to take?

- ❖ Talk to your doctor (or nurse practitioner if your doctor isn't available) about about a personal health assessment or possible wellness programs.
- ❖ Call your health provider (BCBS, Presbyterian, UnitedHealthcare, Humana, NM Health Connections) to see whether they offer any wellness classes or seminars.
- ❖ Call your local community centers for a possible list of activities or fitness/dance classes.
- ❖ Call Natural Grocers for upcoming seminars.
- ❖ Call your city government general number for information on senior centers and then call the senior centers for a list of possible activities.
- ❖ Call the NMRHCA (800-233-2576) if you're still stuck for activities or unsure if one qualifies.

Here is a sample of activities that the NMRHCA approved as wellness programs in 2016:

AARP driving courses

AARP nutrition and health courses

Acupuncture clinic

Anatomy classes

Anxiety/stress management classes

Arthritis self-management classes

Athletic activity:

- Pickleball
- Ping-pong
- Softball
- Tennis

Back/Spine health seminars or classes

Basic food handling seminar

Biometric screening

Brain health classes

Break free from co-dependency

Ceramics classes

Change Is Possible — Weight management and behavior change online video courses)

College physical education classes (UNM, NMSU, New Mexico Highlands, CNM, WNMU, ENMU, etc.)

Cooking for those with cancer classes

Basic life support/CPR and AED classes

Dance classes — Often offered through community centers

Diabetes care, prevention and cooking classes (Kitchen Creations through NMSU, MyCD classes)

Eating on a budget, portion control classes

Emotional health aromatherapy

Good Measures program — goodmeasuresnm.com or 888-320-1776

Falls prevention classes or seminars

Female health classes

First aid classes

Fitness classes, including yoga, learning to work out with free weights, abdominal-strengthening, UNM phys ed courses, zumba, kettleball exercise, aerobics, water aerobics

Foot care classes

Hands-health classes

Heart health classes

Healthy meals courses/vegetarian cooking classes

Kitchen Creations — Cooking classes for those with diabetes or in care of diabetics

Knee/hip pain seminar

Male health classes

Massage benefits classes

Medication safety/review — Class or directly through doctor

Meditation classes

MyCD self-management program

Natural Grocers classes — Go online to NMRHCA calendar page or call one of five Natural Grocers locations for classes.

Nutrition and weight management classes

Osteoporosis/Strong bones classes

Personal health assessments — directly with your doctor, with your health provider or online

Positive thinking seminars

Physical therapy programs (structured through your physician and/or trainer)

Running a 5K or longer

Sciatic pain management classes

Senior Olympics participation

Sewing classes

Smoking cessation (quit smoking)

Strength for balance and falls prevention classes

Volunteer work — (Helping build houses for Habitat for Humanity, for example)

Walking (a weekly routine or periodic walking of prescription trails)

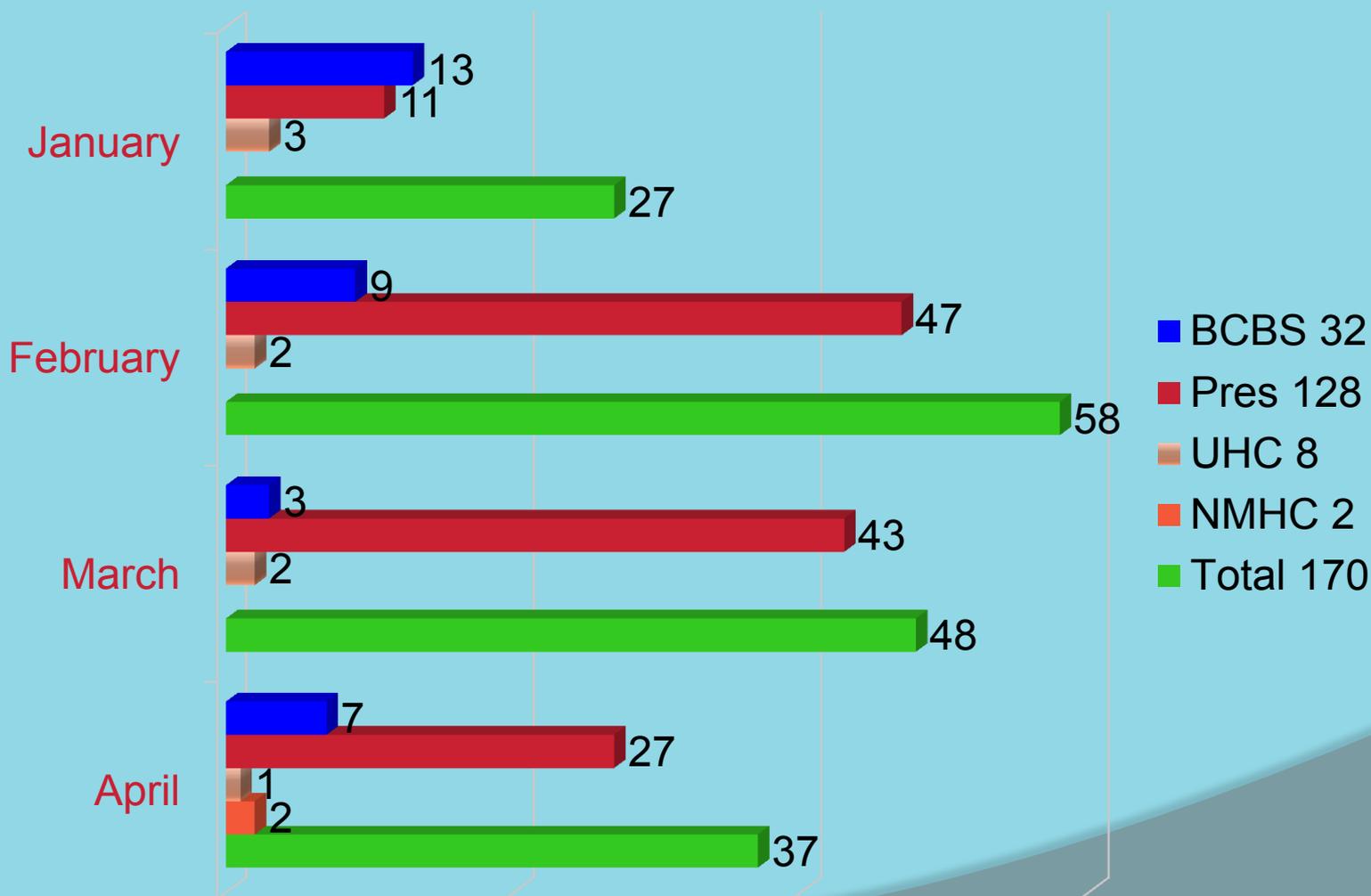
Water aerobics

Weight management classes — Including weight loss, weight modification and weight gain classes

Weight Watchers

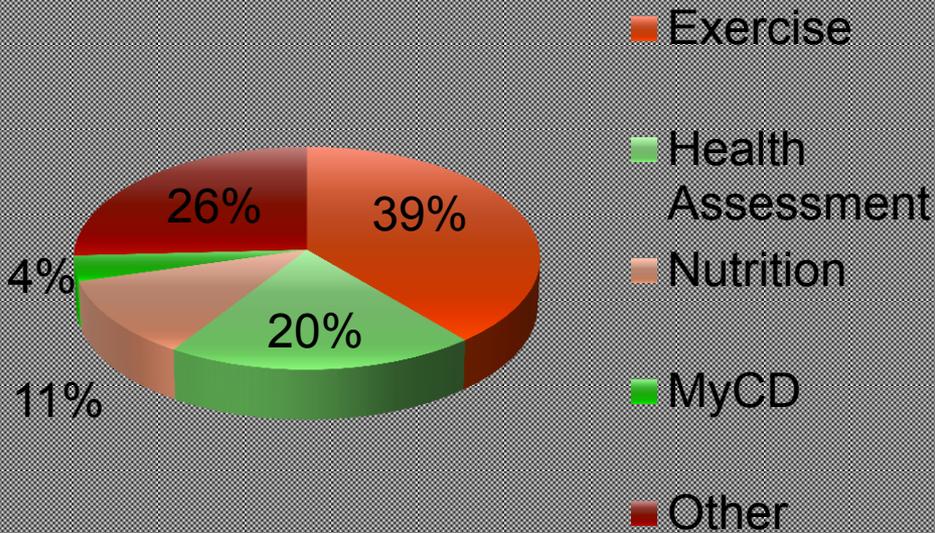
Women's Health Studies classes

2017 CARD TOTALS BY HEALTH PLAN (THROUGH APRIL)

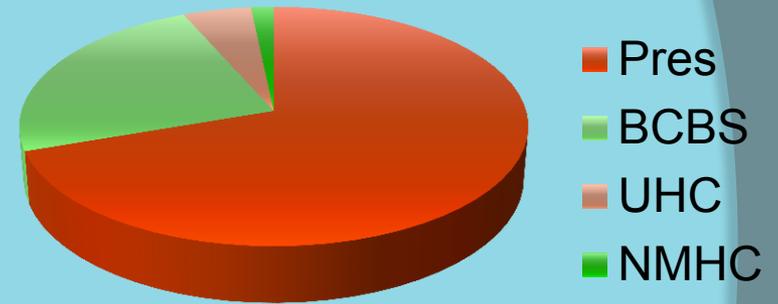


2017 COMPLETION FORM DATA

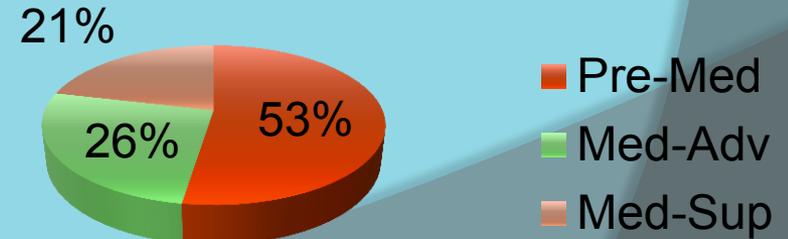
Programs Completed



By Health Plan

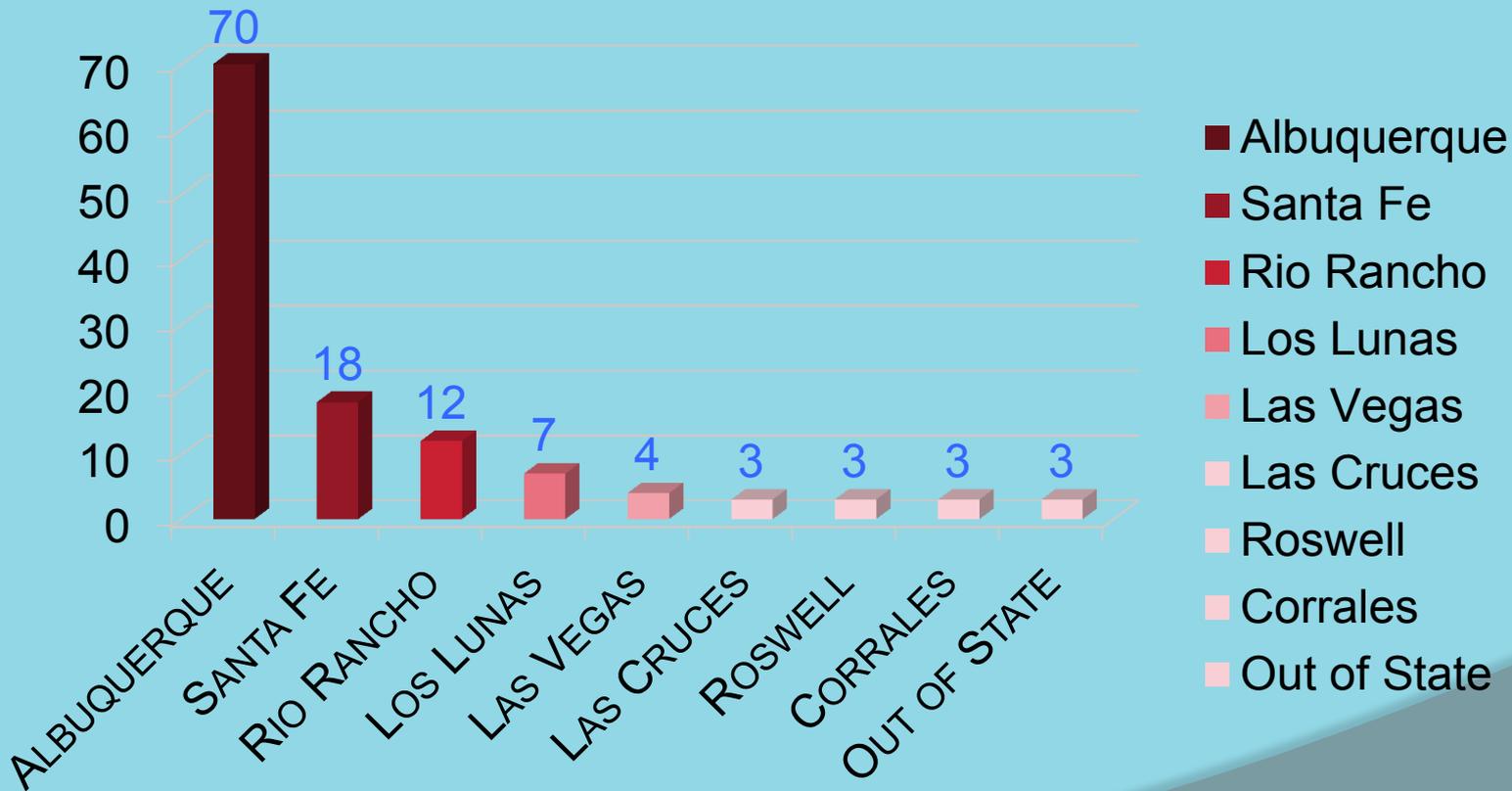


Plan Types



2017 CARD TOTALS BY CITY (THROUGH APRIL)

2017



DISCUSSION/NEXT STEPS MOVING FORWARD

- ◉ Do we begin to target or specify wellness programs that qualify?
—We have been flexible and purposefully general with the types of wellness programs we have allowed to get people engaged.
- ◉ Is the purpose to reward those already engaged or encourage others to get engaged?
—We're learning that more people who are already active in wellness activities, simply are turning in forms with programs they're already doing (they already have a gym membership and work out 3x/week).
—Some of the programs we've accepted for the purpose of social engagement technically aren't "wellness activities" (Sewing class, Understanding Medicare class, some Natural Grocers classes).
- ◉ At the same time, how do we make sure we still have ample programs available to those in less-populated or rural areas? Early numbers suggest we're starting to expand outside ABQ.
- ◉ How do we engage more members into incorporating wellness? Our efforts in the Better Choices Better Health and UCCI Dental Seminars received limited response, despite newsletter articles, website information and email blasts.
- ◉ Can we piggyback efforts on other events in which we know we will have more of an audience? Should we have a Canary Health Booth at our main Switch Enrollment presentations (Albuquerque and Santa Fe)? Do we invite UCCI to do a presentation to members at similar events?



BlueCross BlueShield of New Mexico

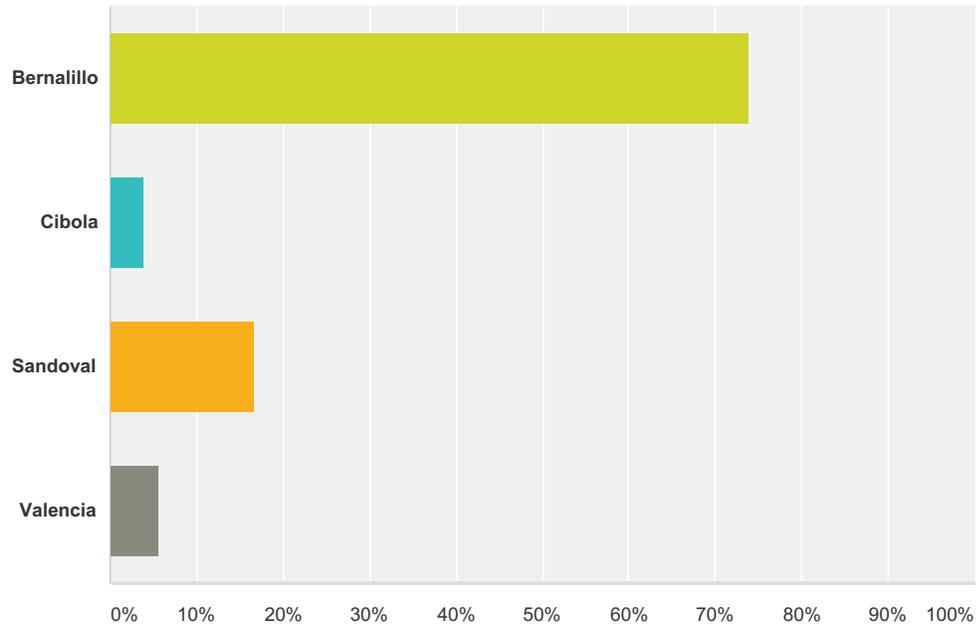
NM Retiree Health Care Authority Wellness Committee Agenda

**May 23, 2017
10:00 a.m.**

- **Welcome and Introductions**
- **Survey Results**
- **Wellness Calendar and events**
- **BlueAccess for Members – Google Home**
- **Naturally Slim**

Q1 Please choose which county you live in.

Answered: 180 Skipped: 24



Answer Choices	Responses
Bernalillo	73.89% 133
Cibola	3.89% 7
Sandoval	16.67% 30
Valencia	5.56% 10
Total	180

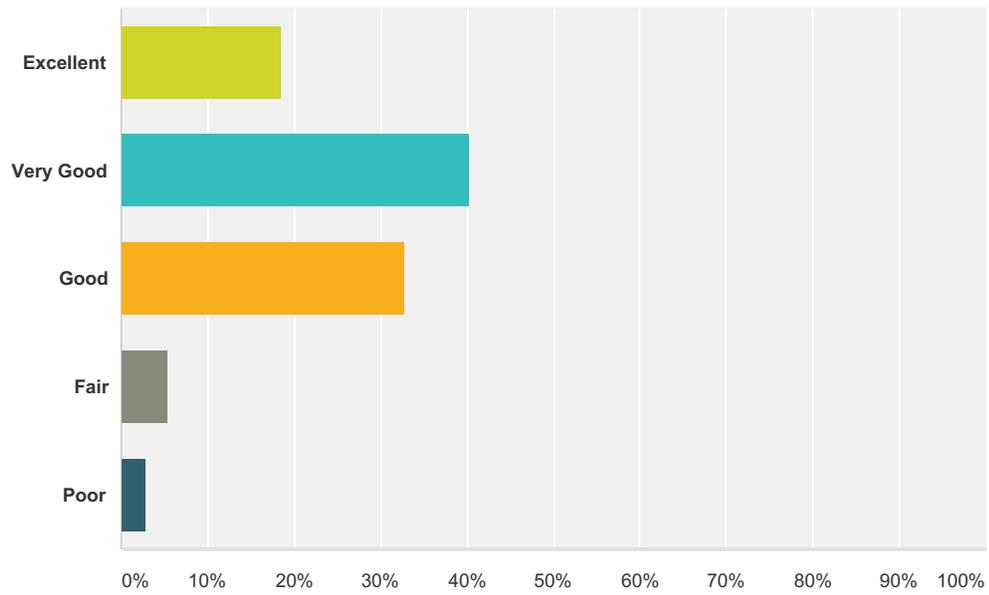
#	Other (please specify)	Date
1	Torrance	12/3/2016 3:16 PM
2	U.S.	12/1/2016 10:46 PM
3	Charleston County, South Carolina	12/1/2016 8:59 AM
4	Santa Fe county? ..	11/29/2016 9:30 PM
5	Colfax	11/29/2016 6:53 PM
6	Torrance	11/29/2016 1:51 PM
7	Santa fe	11/28/2016 5:44 PM
8	Bernalillo	11/28/2016 4:28 PM
9	torrance	11/28/2016 2:53 PM
10	Torrance	11/28/2016 12:30 PM
11	Bernalillo	11/28/2016 12:04 PM
12	Denton Count	11/24/2016 6:34 PM
13	Santa fe	11/18/2016 4:42 PM

Healthy Living Survey

14	Torrance	11/18/2016 11:54 AM
15	Valencia	11/18/2016 10:26 AM
16	Bernillo	11/18/2016 8:51 AM
17	Torrance	11/17/2016 9:43 PM
18	Santa Fe (Sheesh!)	11/17/2016 8:29 PM
19	Bernalillo	11/17/2016 6:42 PM
20	Torrance	11/17/2016 5:12 PM
21	Torrance	11/17/2016 2:05 PM
22	Torrance	11/17/2016 1:27 PM

Q2 In general, would you say your health is:

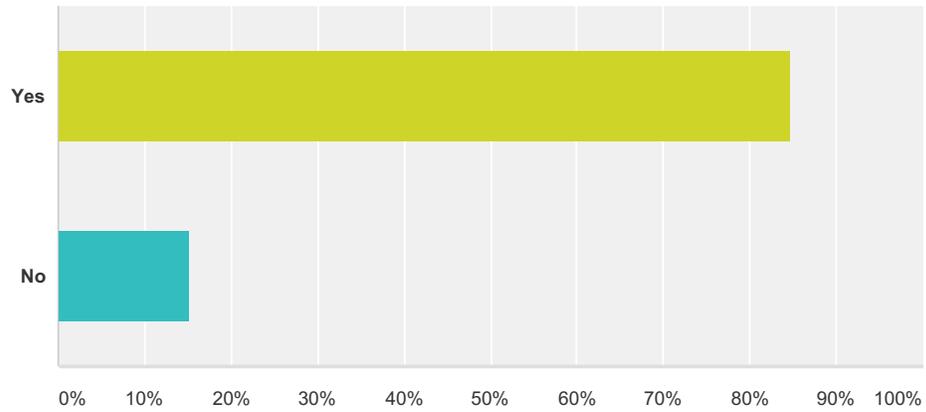
Answered: 204 Skipped: 0



Answer Choices	Responses
Excellent	18.63% 38
Very Good	40.20% 82
Good	32.84% 67
Fair	5.39% 11
Poor	2.94% 6
Total	204

Q3 Are you interested in improving your current health status?

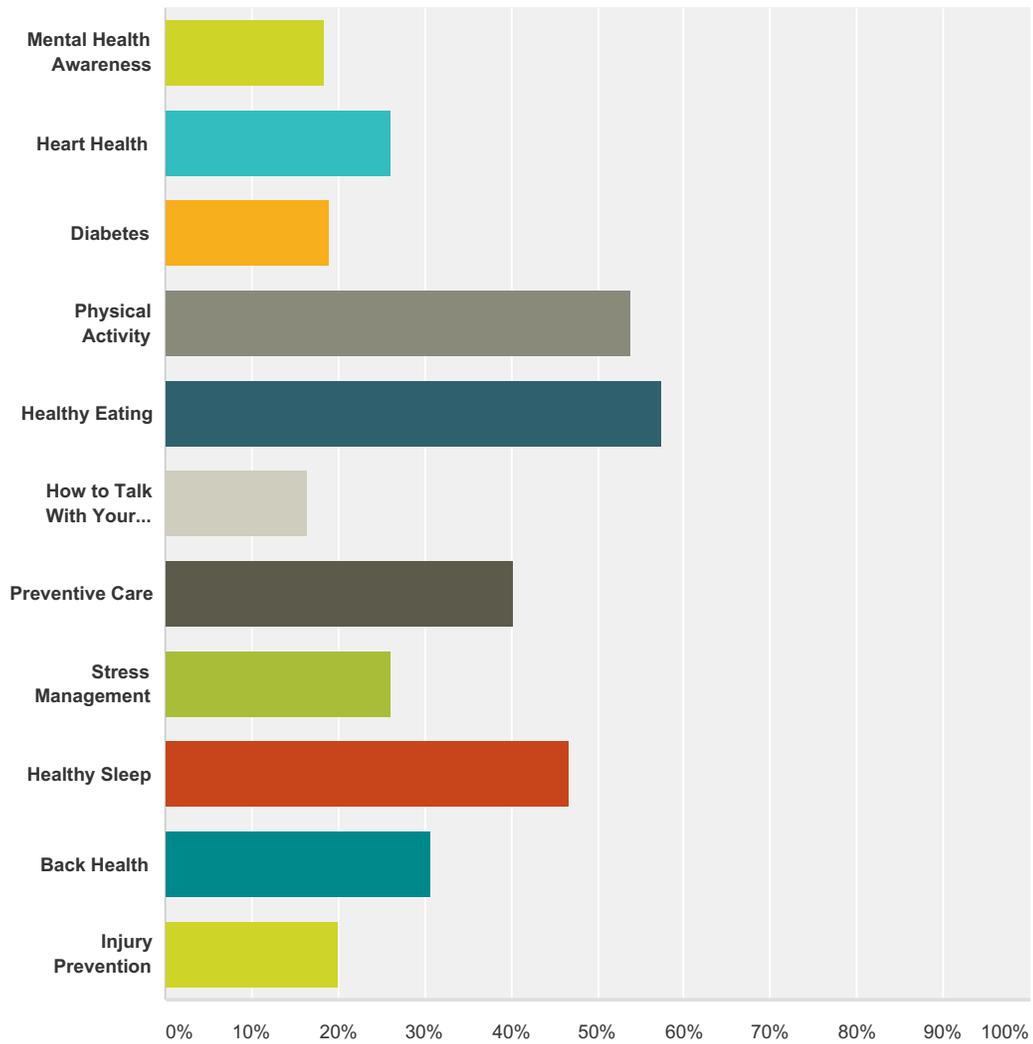
Answered: 204 Skipped: 0



Answer Choices	Responses
Yes	84.80% 173
No	15.20% 31
Total	204

Q4 I would be interested in learning more about: (check all that apply)

Answered: 169 Skipped: 35



Answer Choices	Responses	Count
Mental Health Awareness	18.34%	31
Heart Health	26.04%	44
Diabetes	18.93%	32
Physical Activity	53.85%	91
Healthy Eating	57.40%	97
How to Talk With Your Doctor	16.57%	28
Preventive Care	40.24%	68
Stress Management	26.04%	44
Healthy Sleep	46.75%	79

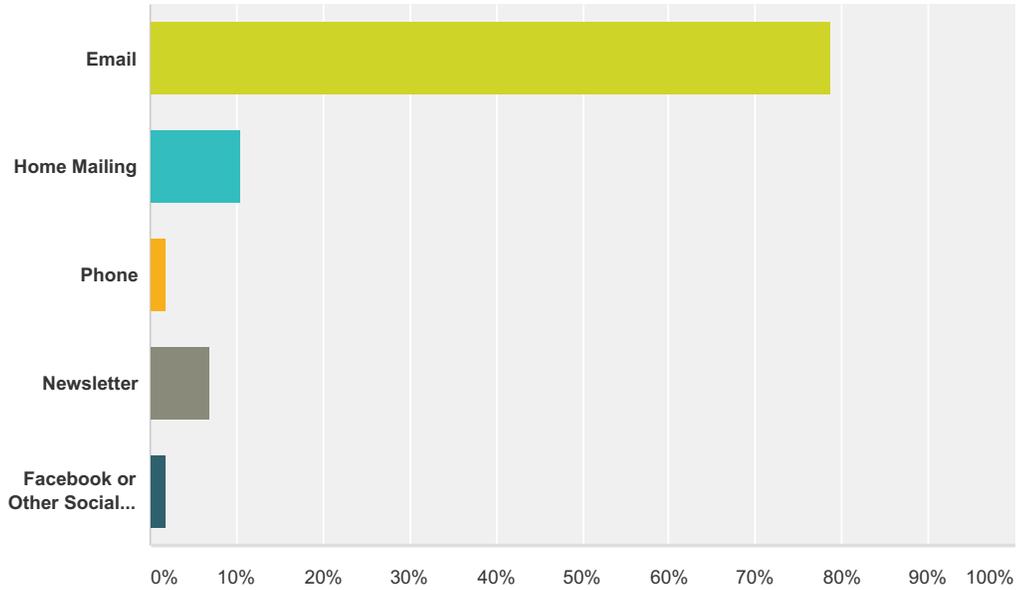
Healthy Living Survey

Back Health	30.77%	52
Injury Prevention	20.12%	34
Total Respondents: 169		

#	Other (please specify)	Date
1	Osteoarthritis	11/30/2016 2:35 PM
2	None	11/29/2016 6:53 PM
3	I've had a back injury that I've been searching to figure out the cause. I'm now seeing Dr. Evan Rivers a neurologist, who is doing trigger point injections into my spine. It seems to be helping. I don't think going through other processes will help this nerve impingement.	11/29/2016 10:42 AM
4	Supplements and vitamins.	11/28/2016 10:04 PM
5	asthma	11/28/2016 7:09 PM
6	Weight management	11/28/2016 5:17 PM
7	medications side affects	11/28/2016 4:36 PM
8	Finding a regular doctor ho knows me , my history, my family. One that looks at alternatives and doesn't push drugs.	11/28/2016 2:41 PM
9	Prostate health	11/28/2016 2:10 PM
10	asthma	11/28/2016 1:11 PM
11	I am concerned about Alzheimers as my mother had it. I want to do what I can to decrease my chances.	11/28/2016 12:24 PM
12	None	11/28/2016 11:39 AM
13	Fatty liver	11/27/2016 10:49 PM
14	mindfulness	11/25/2016 2:27 PM
15	Hemochromotosis	11/20/2016 8:21 PM
16	Living with pain.	11/18/2016 4:21 PM
17	I have cancer that is incurable, I work most on relaxing, breathing and over all eating correctly and trying to exercise.	11/18/2016 12:06 PM
18	My masters degree is in Health and Community Education, I have taught health education for over 10 years. I enjoy learning anything new in all aspects relating to health.	11/18/2016 11:54 AM
19	Actually, there are already plenty of other 'one-stop-shop' sources for all this info.	11/17/2016 8:29 PM
20	Primary care physicians who can treat for minor muskuloskeletal injuries without having to refer to an Ortho specialist (a PA, not and MD), incurring additional unnecessary cost! ABQ Health Partners are a rip off!!!	11/17/2016 7:06 PM
21	Spending less on health insurance	11/17/2016 6:42 PM
22	I am planning to join a gym again, and would be very grateful to have access to a Silver Sneakers-like benefit to help pay for my membership.	11/17/2016 3:09 PM
23	Celiac Sprue disease and eating gluten free	11/17/2016 2:23 PM
24	I would appreciate it if my supplemental plan allowed for Silver Sneakers. It is preventive. Please consider asap	11/17/2016 1:49 PM
25	Broken neck maintainence	11/17/2016 1:49 PM
26	Hair loss	11/17/2016 1:24 PM

Q5 What would be the best way for you to be notified of an upcoming program or service?

Answered: 202 Skipped: 2

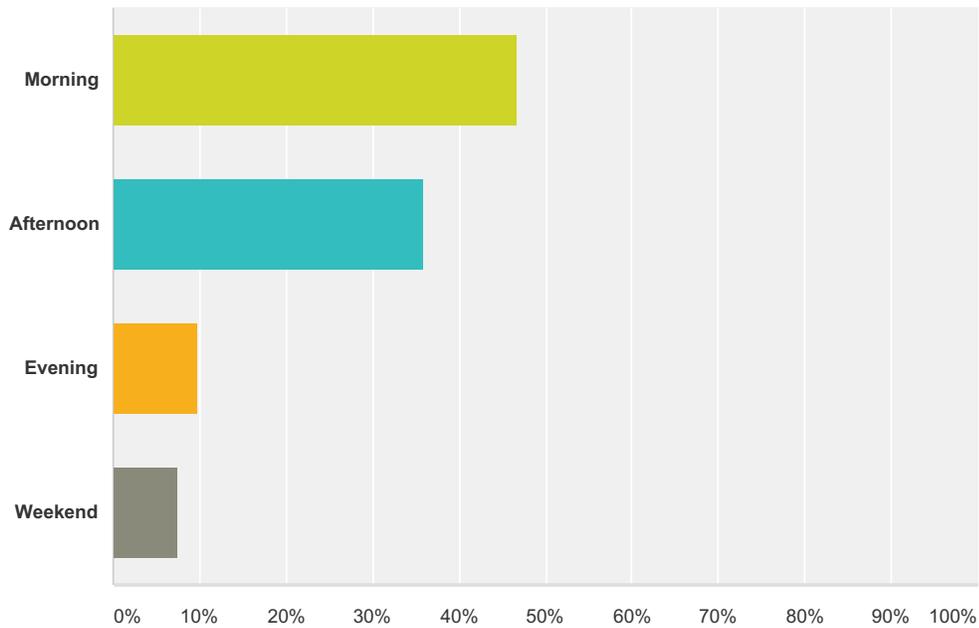


Answer Choices	Responses	
Email	78.71%	159
Home Mailing	10.40%	21
Phone	1.98%	4
Newsletter	6.93%	14
Facebook or Other Social Media	1.98%	4
Total		202

#	Other (please specify)	Date
1	None	11/28/2016 11:39 AM

Q6 What is the best time of day for you to participate in a program or service?

Answered: 184 Skipped: 20



Answer Choices	Responses
Morning	46.74% 86
Afternoon	35.87% 66
Evening	9.78% 18
Weekend	7.61% 14
Total	184

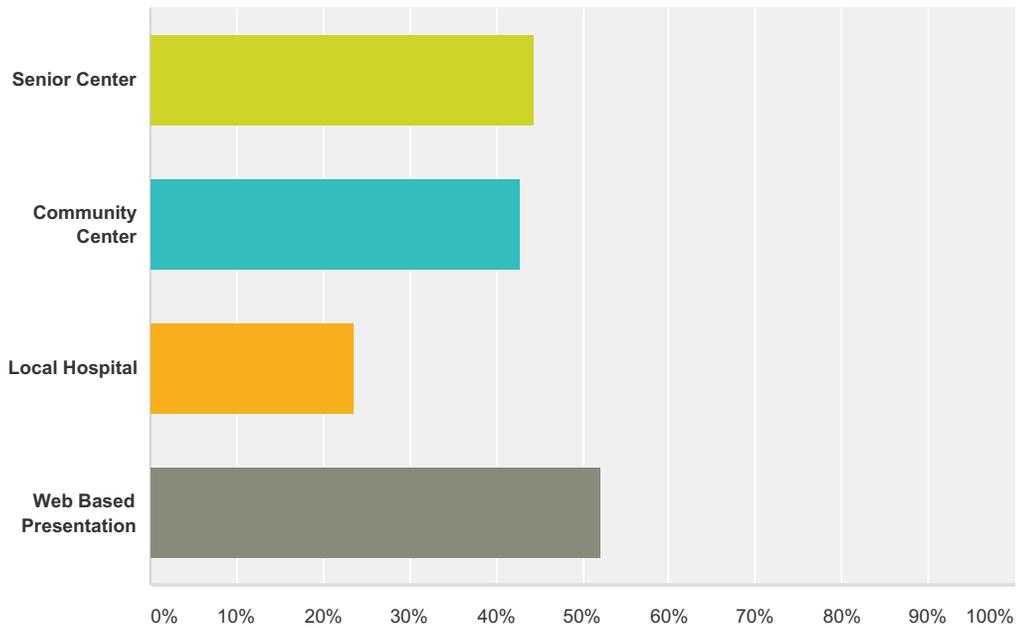
#	Other (please specify)	Date
1	If notify with time, I can accommodate my schedule to attend a program or services that interest me.	12/2/2016 4:27 PM
2	`	11/29/2016 9:30 PM
3	Electronically such as in an electronic newsletter as opposed to meetings or lectures or workshops.	11/29/2016 5:57 PM
4	This depends upon the day as regular activity is scheduled.	11/29/2016 10:53 AM
5	I do not wish to participate in a program or service due to mobility issues.	11/29/2016 9:30 AM
6	Depends on the day of the week	11/28/2016 9:25 PM
7	It varies by day	11/28/2016 4:28 PM
8	no time	11/28/2016 3:31 PM
9	Depends, any of the above, but varies by day	11/28/2016 2:41 PM
10	Weekends too	11/27/2016 10:49 PM
11	I don't think I have time to participate in a program.	11/18/2016 11:54 AM
12	Something in Grants so I don't have to travel to attend	11/18/2016 11:21 AM

Healthy Living Survey

13	Varies!	11/17/2016 5:23 PM
14	Nearly anytime will work	11/17/2016 3:28 PM
15	It varies, I have some gym classes in the AM and some in the PM	11/17/2016 1:45 PM

Q7 Where would you like to participate in a program or service? (Check all that apply)

Answered: 178 Skipped: 26



Answer Choices	Responses
Senior Center	44.38% 79
Community Center	42.70% 76
Local Hospital	23.60% 42
Web Based Presentation	52.25% 93
Total Respondents: 178	

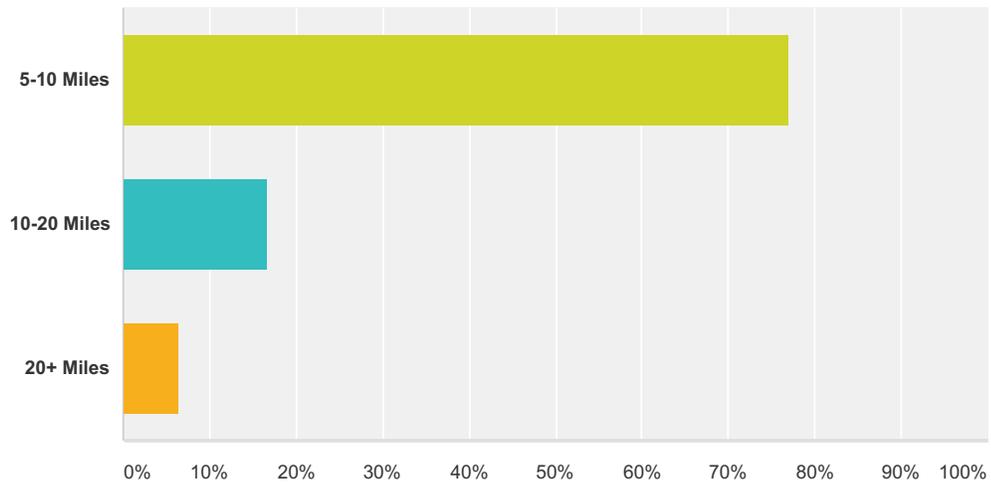
#	Other (please specify)	Date
1	Edgewood, NM	11/29/2016 9:30 PM
2	Either one of those mentioned as long as one is close to home	11/29/2016 2:05 PM
3	I am open to a variety of participation options.	11/29/2016 11:43 AM
4	I could only participate in my home. See above.	11/29/2016 9:30 AM
5	Actually, I can refer any question about my heart care to my cardiologist via patient portal.	11/29/2016 9:25 AM
6	any of the above in Rio Rancho area	11/28/2016 7:09 PM
7	Home	11/28/2016 5:57 PM
8	Local school	11/28/2016 5:44 PM
9	Not sure what is nearby.	11/28/2016 12:24 PM
10	None	11/28/2016 11:39 AM
11	I don't think I have the time.	11/18/2016 11:54 AM
12	Any place that is local	11/18/2016 11:21 AM

Healthy Living Survey

13	Re: question #8 below... ...I'm NOT willing to travel for any of the above mentioned information. But since you're MAKING me answer...	11/17/2016 8:29 PM
14	Ymca	11/17/2016 7:26 PM
15	any	11/17/2016 6:52 PM
16	Home on telephone	11/17/2016 6:42 PM
17	Not interested	11/17/2016 4:14 PM
18	Not particular	11/17/2016 3:28 PM
19	Acquatics Facility	11/17/2016 2:45 PM
20	At the gym where they have a Silver Sneakers program.	11/17/2016 1:49 PM
21	Home	11/17/2016 1:49 PM

Q8 How far are you willing to travel to attend a program or service?

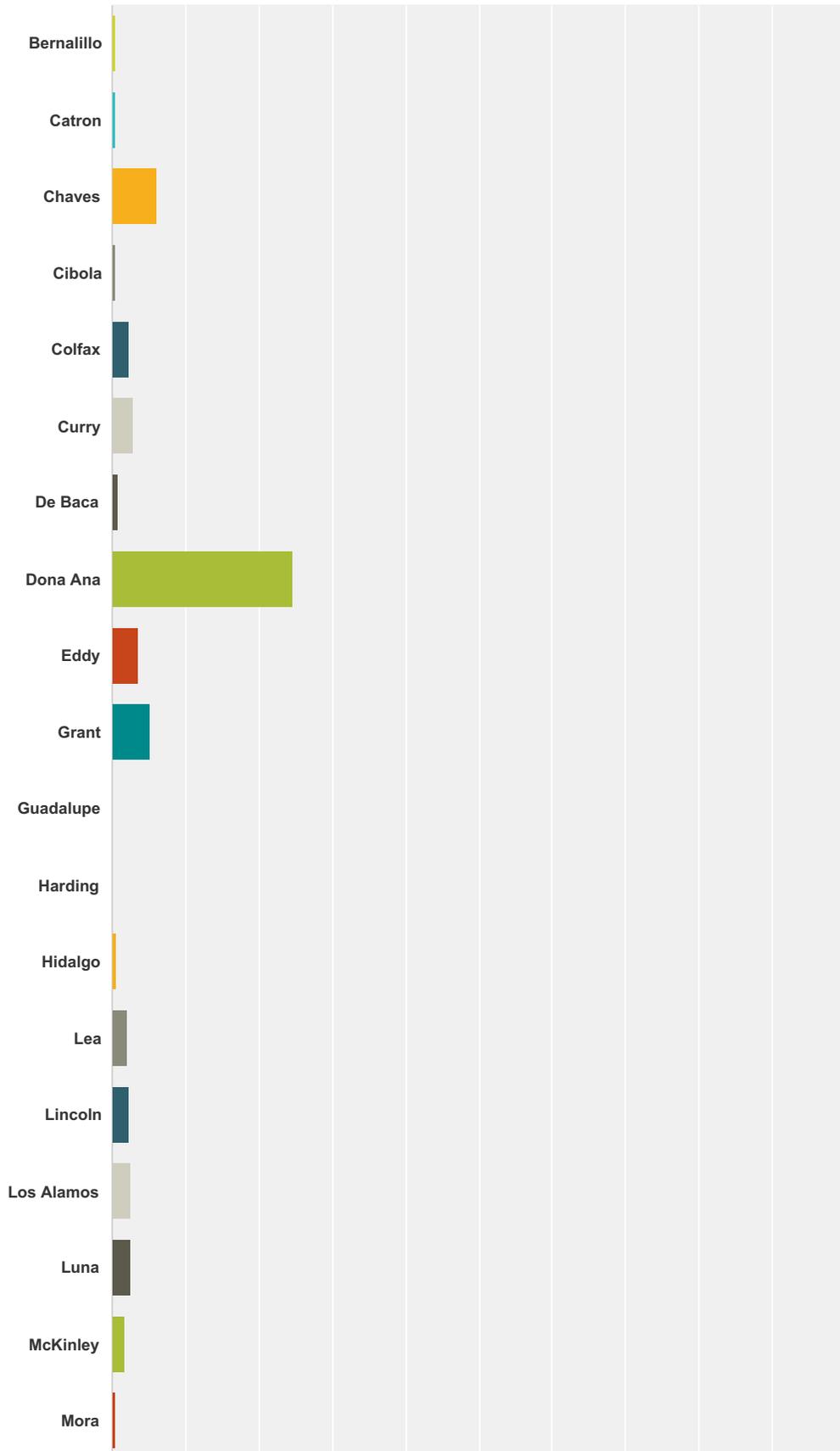
Answered: 204 Skipped: 0



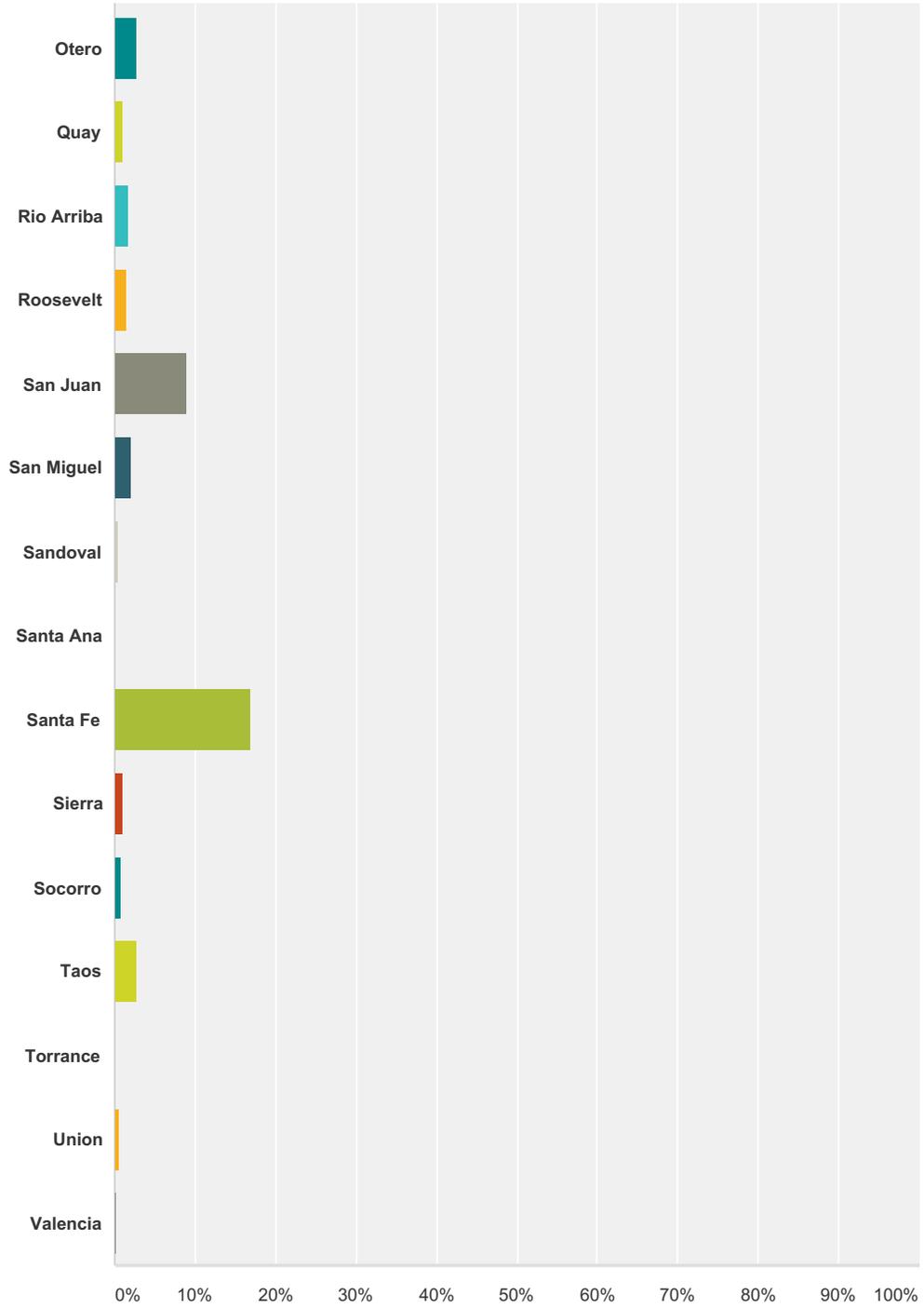
Answer Choices	Responses
5-10 Miles	76.96% 157
10-20 Miles	16.67% 34
20+ Miles	6.37% 13
Total	204

Q1 Please choose which county you live in.

Answered: 576 Skipped: 17



2017 Healthy Living Survey



Answer Choices	Responses
Bernalillo	0.52% 3
Catron	0.35% 2
Chaves	6.08% 35
Cibola	0.35% 2
Colfax	2.26% 13
Curry	2.95% 17

2017 Healthy Living Survey

De Baca	0.87%	5
Dona Ana	24.65%	142
Eddy	3.65%	21
Grant	5.21%	30
Guadalupe	0.00%	0
Harding	0.00%	0
Hidalgo	0.69%	4
Lea	2.08%	12
Lincoln	2.26%	13
Los Alamos	2.43%	14
Luna	2.43%	14
McKinley	1.74%	10
Mora	0.35%	2
Otero	2.78%	16
Quay	1.04%	6
Rio Arriba	1.74%	10
Roosevelt	1.56%	9
San Juan	9.03%	52
San Miguel	2.08%	12
Sandoval	0.35%	2
Santa Ana	0.00%	0
Santa Fe	17.01%	98
Sierra	1.04%	6
Socorro	0.87%	5
Taos	2.78%	16
Torrance	0.00%	0
Union	0.69%	4
Valencia	0.17%	1
Total		576

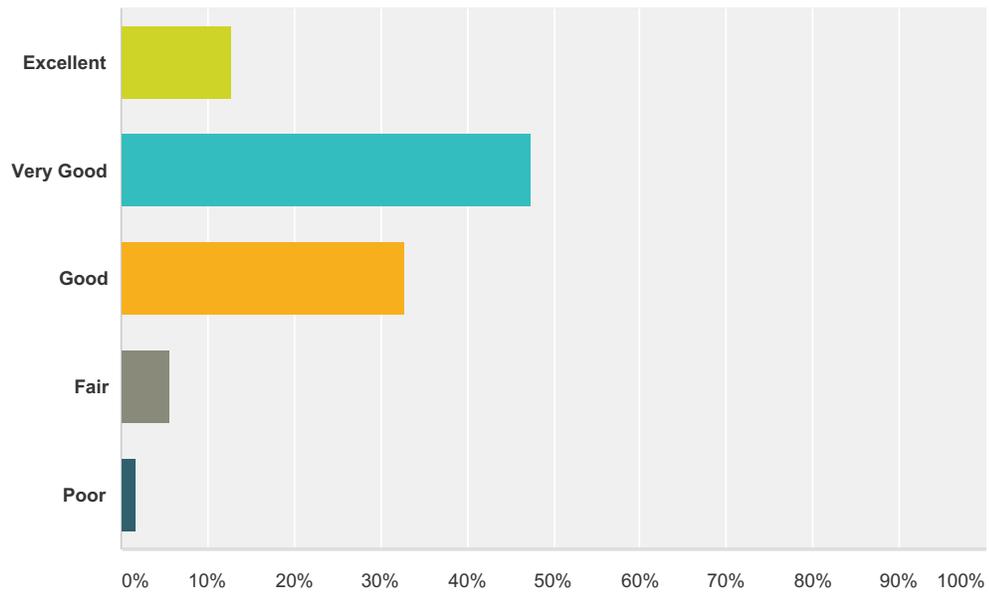
#	Other (please specify)	Date
1	Have moved to Tulsa Ok. Tulsa county	2/5/2017 8:25 PM
2	Curry	1/31/2017 11:16 AM
3	San Juan	1/30/2017 10:46 PM
4	San Juan	1/30/2017 9:33 PM
5	Lubbock county---Lubbock, Texas	1/30/2017 7:12 PM

2017 Healthy Living Survey

6	Dona Ana	1/30/2017 4:28 PM
7	San Juan	1/30/2017 2:47 PM
8	We are currently living in Texas.	1/30/2017 2:28 PM
9	Andrews County Texas	1/30/2017 1:42 PM
10	Dona Ana	1/30/2017 11:42 AM
11	I currently live in the state of Texas	1/30/2017 10:22 AM
12	currently working in Texas	1/30/2017 9:59 AM
13	Boulder County, Colorado	1/27/2017 3:28 PM
14	I also have a home in Grant county that I stay at times	1/26/2017 12:06 PM
15	Actual reside in Los Alamos; however, have a home in Santa Fe and mail at that address as well.	1/24/2017 10:20 PM
16	we are actually full time RV'rs and on the road all the time. We come through NM spring and fall for a week or so, but that is it.	1/24/2017 7:34 PM
17	Sam juan	1/24/2017 4:05 PM
18	Dona Ana	1/24/2017 11:58 AM
19	Pinellas Co. Florida	1/24/2017 11:48 AM

Q2 In general, would you say your health is:

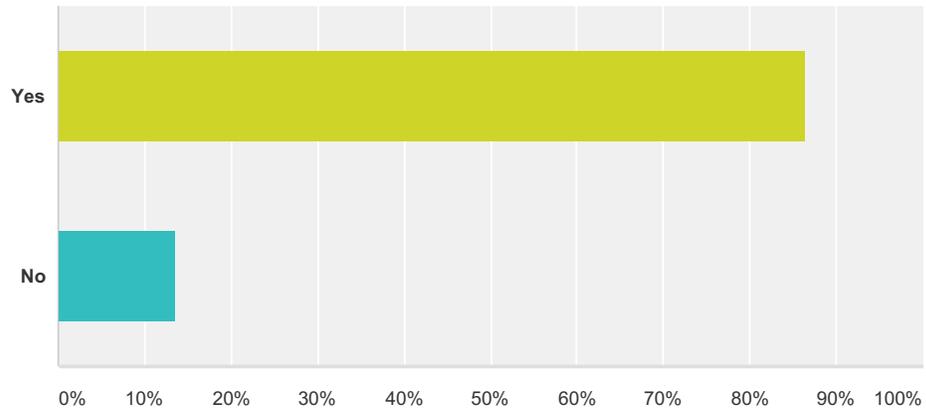
Answered: 593 Skipped: 0



Answer Choices	Responses
Excellent	12.65% 75
Very Good	47.39% 281
Good	32.72% 194
Fair	5.56% 33
Poor	1.69% 10
Total	593

Q3 Are you interested in improving your current health status?

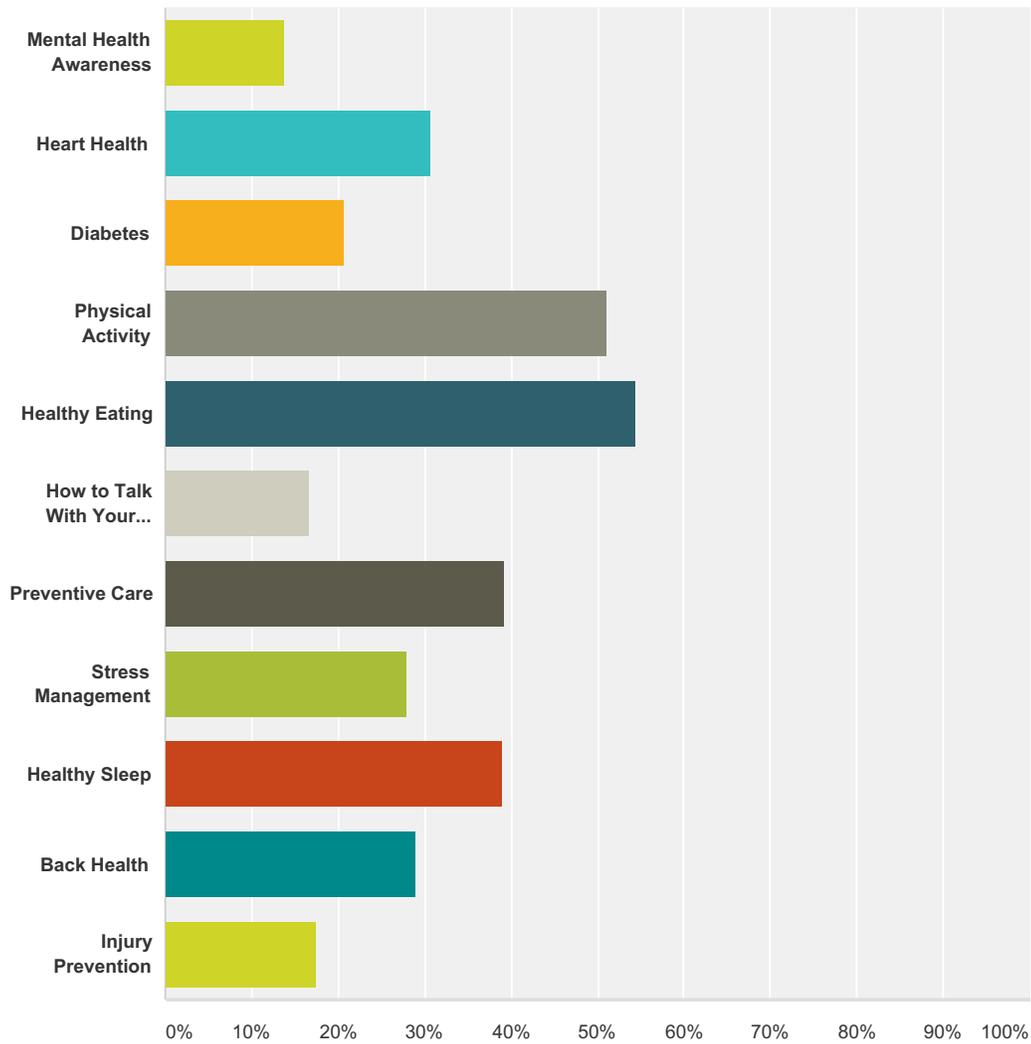
Answered: 593 Skipped: 0



Answer Choices	Responses	
Yes	86.34%	512
No	13.66%	81
Total		593

Q4 I would be interested in learning more about: (check all that apply)

Answered: 503 Skipped: 90



Answer Choices	Responses	Count
Mental Health Awareness	13.72%	69
Heart Health	30.62%	154
Diabetes	20.68%	104
Physical Activity	51.09%	257
Healthy Eating	54.47%	274
How to Talk With Your Doctor	16.70%	84
Preventive Care	39.17%	197
Stress Management	28.03%	141
Healthy Sleep	38.97%	196

2017 Healthy Living Survey

Back Health	29.03%	146
Injury Prevention	17.50%	88
Total Respondents: 503		

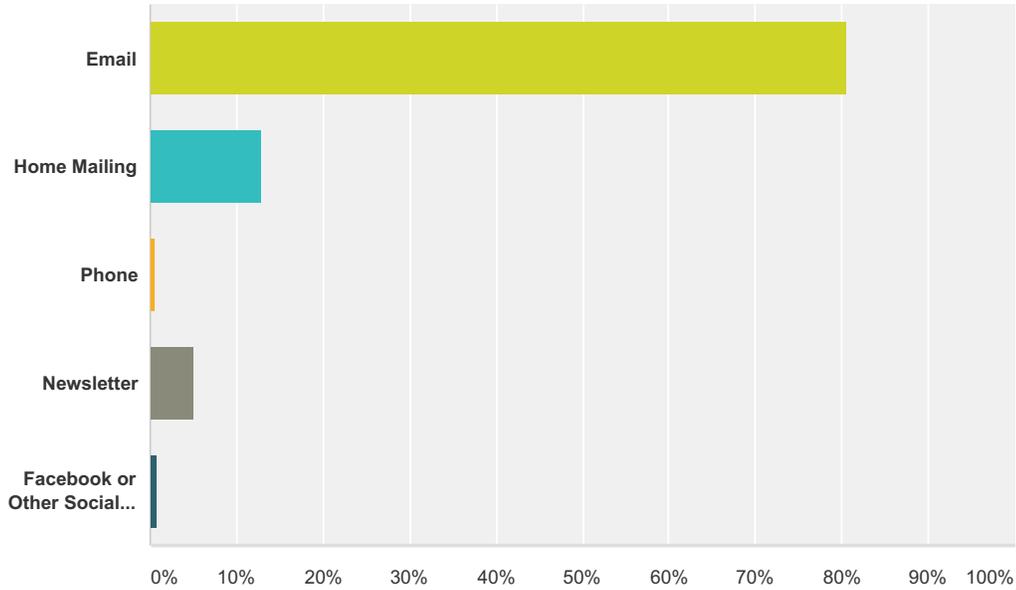
#	Other (please specify)	Date
1	Allegies causes, remedies, prevention, diagnosis.	2/3/2017 9:14 AM
2	None of above.	2/2/2017 10:24 PM
3	secliacs allergy to gluteen	2/2/2017 8:23 PM
4	I have recently been diagnosed with cancer.	2/1/2017 10:26 PM
5	Reconditioning following severe illness	2/1/2017 8:38 PM
6	I want the activity taught, not just a talk	2/1/2017 12:15 PM
7	Foot pain	2/1/2017 2:20 AM
8	I am under treatment for Multiple Myeloma. I have trouble sleeping but that is due to taking the steroid Dexamothazone.	1/31/2017 5:16 PM
9	arthritis	1/31/2017 3:45 PM
10	Hearing issues	1/31/2017 12:56 PM
11	Care giver information on support for a loved one with dementia.	1/31/2017 11:31 AM
12	I speak with my physician if I have questions about any of these.	1/31/2017 8:10 AM
13	Weight loss	1/31/2017 7:07 AM
14	prolapse uterus	1/31/2017 12:05 AM
15	Arthritis	1/30/2017 11:32 PM
16	Degenerative arthritis	1/30/2017 8:23 PM
17	Acupuncture, Myofacial trigger point therapy, massage therapy	1/30/2017 4:36 PM
18	Hypothyroid	1/30/2017 3:45 PM
19	How to keep you from send me this junk email	1/30/2017 2:41 PM
20	Nothing from my health insurer	1/30/2017 1:43 PM
21	Not at this time.	1/30/2017 1:34 PM
22	strategies for lowering blood pressure	1/30/2017 12:30 PM
23	I have my own routine.	1/30/2017 12:21 PM
24	Memory	1/30/2017 11:42 AM
25	High Blood Pressure and alternative to taking drugs to lower blood pressure.	1/30/2017 11:25 AM
26	I am "interested" in learning about all of the above, but the health care providers I deal with are my favorite sources of information, who know me better and whom I respect to listen to: my Dr., physical therapist, dentist, acupuncturist	1/30/2017 11:06 AM
27	Pain managment without narcotic medication.	1/30/2017 10:46 AM
28	Aging issues	1/30/2017 10:24 AM
29	Already involved in YMCA programs	1/30/2017 10:16 AM
30	preventing memory deficit issues	1/30/2017 10:10 AM
31	non diabetic neuropathy	1/30/2017 9:59 AM
32	All of the above and more, if you have that option.	1/30/2017 9:55 AM
33	Asthma	1/30/2017 9:52 AM
34	Presently enrolled in Exercise Maintance Program at Presbyterian Hospital.	1/30/2017 9:40 AM

2017 Healthy Living Survey

35	dealing with COPD	1/30/2017 9:36 AM
36	Functional Medicine , Alternative Health Solutions, and Integrative Approaches to better health living	1/30/2017 9:33 AM
37	I would like to know why my insurance premium went up \$130 a month. This loss of income is causing me stress.	1/30/2017 9:33 AM
38	No	1/30/2017 9:32 AM
39	Weight loss	1/30/2017 9:31 AM
40	R.A.	1/30/2017 8:56 AM
41	I am currently working with my doctor.	1/30/2017 8:55 AM
42	Arthritis management	1/29/2017 8:53 AM
43	acid reflux	1/28/2017 4:35 PM
44	Strength and balance, flexibility	1/27/2017 10:46 PM
45	Alzheimer's prevention and studies available to participate in.	1/26/2017 8:58 PM
46	Not sure what topic I am interested. None of the above seem to fit me.	1/25/2017 8:25 PM
47	migraines	1/25/2017 6:29 PM
48	Asthma	1/25/2017 6:15 PM
49	Eye health	1/25/2017 3:57 PM
50	after menopause	1/25/2017 12:14 PM
51	Healthy Cooking	1/24/2017 10:42 PM
52	Care Giving, coping with cancer,	1/24/2017 10:20 PM
53	None	1/24/2017 8:27 PM
54	Really would like access to a gym membership with my health plan. I am not on the advantage plan and do not want to switch. This should be a preventive measure to insure healthy, fit seniors.	1/24/2017 8:07 PM
55	Cancer management for those in remission	1/24/2017 6:31 PM
56	most current treatment of osteoporosis most recent/ effective treatment halting progression of osteoarthritis most recent/new research on total knee replacement types	1/24/2017 5:42 PM
57	weight loss	1/24/2017 5:34 PM
58	Would love a gym discount like you do for Medicare. I believe in working out and that is what keeps you healthy. Due to most retirees having a budget the discount would help joining a gym.	1/24/2017 5:20 PM
59	Urology care and treatment	1/24/2017 5:18 PM
60	Living with cancer.	1/24/2017 5:14 PM
61	Dementia/Alzheimer's	1/24/2017 4:39 PM
62	Silver Sneakers Program	1/24/2017 3:11 PM
63	arthritis, osteopenia, joint preservation	1/24/2017 1:38 PM
64	Extreme adventure therapy- I've been watching the returning war vets with PTSD decrease their medications for mental health (adventure therapy), I've been interested in studies associated with decreasing insulin needs of diabetics, both type 1 and 2 as a result of extreme adventure therapy (i.e. daily skiing, biking, swimming, etc...)...the study of the soldiers I witnessed reduced their prescription needs by up to 20K/ month just by visiting national parks, etc...I think it's time to start putting money into diabetics outdoor needs should thousands be able to reduce insulin dependency and save \$ on no longer needing to fill so many prescriptions (i.e. subsidize their adventure needs to reduce their prescriptions)...now run with this idea, it's all yours :)	1/24/2017 1:20 PM
65	swimming	1/24/2017 12:58 PM
66	Aging	1/24/2017 12:05 PM
67	long term recovery of cardiomyopathy	1/24/2017 11:59 AM
68	Arthritis treatment	1/24/2017 11:59 AM
69	Weight loss	1/24/2017 11:56 AM

Q5 What would be the best way for you to be notified of an upcoming program or service?

Answered: 575 Skipped: 18

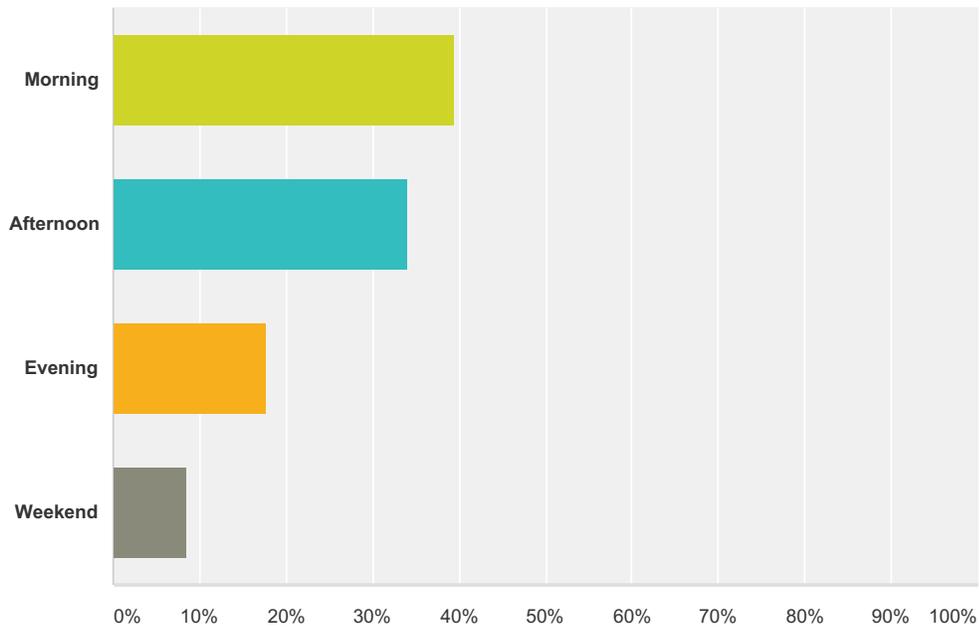


Answer Choices	Responses
Email	80.52% 463
Home Mailing	12.87% 74
Phone	0.70% 4
Newsletter	5.04% 29
Facebook or Other Social Media	0.87% 5
Total	575

#	Other (please specify)	Date
1	Don't want to be notified	2/5/2017 8:25 PM
2	I'm not interested in receiving any such information.	1/31/2017 8:10 AM
3	none i have switched companies	1/30/2017 9:41 PM
4	smoke signals	1/30/2017 2:41 PM
5	Please stop bothering me	1/30/2017 1:43 PM
6	No	1/30/2017 9:32 AM
7	I can do this on my own. I am well educated in health matters, already.	1/24/2017 7:21 PM
8	I always look at information coming from NMHCA.	1/24/2017 4:40 PM

Q6 What is the best time of day for you to participate in a program or service?

Answered: 522 Skipped: 71



Answer Choices	Responses
Morning	39.46% 206
Afternoon	34.10% 178
Evening	17.82% 93
Weekend	8.62% 45
Total	522

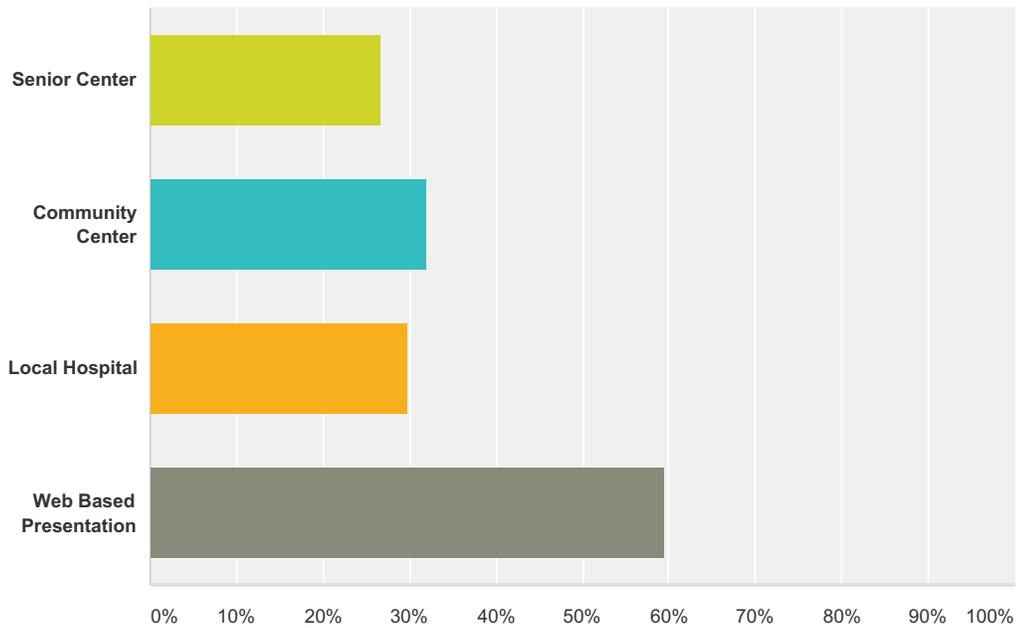
#	Other (please specify)	Date
1	I have a treadmill and work out to a video at home.	2/5/2017 8:25 PM
2	Never	2/5/2017 3:42 AM
3	No Preference	2/4/2017 3:37 PM
4	Would not participate.	2/2/2017 10:24 PM
5	Depends	1/31/2017 1:14 PM
6	It depends, I am retired, but still work for myself	1/31/2017 12:56 PM
7	no preference	1/31/2017 8:32 AM
8	I only have two afternoons open and I would rather not participate in a program. Thank You!	1/31/2017 8:20 AM
9	I'm not interested in discussing my health status with a stranger.	1/31/2017 8:10 AM
10	None	1/30/2017 8:45 PM
11	depends on day	1/30/2017 5:22 PM
12	Not interested at this time.	1/30/2017 4:01 PM

2017 Healthy Living Survey

13	NEVER	1/30/2017 2:41 PM
14	Just mailings	1/30/2017 1:54 PM
15	None, I do not wish to participate in your programs	1/30/2017 1:43 PM
16	Not at this time	1/30/2017 1:34 PM
17	My availability varies.	1/30/2017 1:25 PM
18	I'm not interested currently because I have my own routine.	1/30/2017 12:21 PM
19	N/A	1/30/2017 11:36 AM
20	Daytime	1/30/2017 10:42 AM
21	I do not want to participate at this time.	1/30/2017 10:37 AM
22	Any of the above, but that does not mean I am interested in any program.	1/30/2017 10:24 AM
23	No	1/30/2017 9:32 AM
24	Mid mirning	1/30/2017 9:22 AM
25	depends on time of year	1/30/2017 8:56 AM
26	Depends on work	1/30/2017 8:52 AM
27	depends on the day	1/29/2017 8:37 PM
28	It depends on the day.	1/25/2017 8:25 PM
29	Not interested in group activities. Just things we can do at home.	1/25/2017 3:05 PM
30	Any time	1/24/2017 10:42 PM
31	No participation is functionally applicable as we are at doctors all the time, have no energy or time for anything else than survival.	1/24/2017 10:20 PM
32	Any time if it desirable enough.	1/24/2017 8:15 PM
33	I do not care to participate	1/24/2017 7:21 PM
34	Any time; my schedule varies	1/24/2017 3:45 PM
35	anytime	1/24/2017 1:20 PM
36	Varies as I care for my grandson 3 times a week and am unavailable on those days.	1/24/2017 11:52 AM

Q7 Where would you like to participate in a program or service? (Check all that apply)

Answered: 503 Skipped: 90



Answer Choices	Responses
Senior Center	26.64% 134
Community Center	32.01% 161
Local Hospital	29.82% 150
Web Based Presentation	59.44% 299
Total Respondents: 503	

#	Other (please specify)	Date
1	I have a treadmill and work out to a video at home.	2/5/2017 8:25 PM
2	No where	2/5/2017 3:42 AM
3	No Preference	2/4/2017 3:37 PM
4	Would not participate.	2/2/2017 10:24 PM
5	Gym	2/2/2017 7:21 PM
6	Not sure	2/1/2017 4:13 PM
7	My home	2/1/2017 1:10 PM
8	health club to work on exercise	2/1/2017 12:15 PM
9	I am mostly at home. I am neutropenic and avoid crowds and gatherings.	1/31/2017 5:16 PM
10	city gym	1/31/2017 8:32 AM
11	I already participate in an exercise program three days a week at a senior center. Thank You!	1/31/2017 8:20 AM
12	I'm not interested in such a program or service.	1/31/2017 8:10 AM

2017 Healthy Living Survey

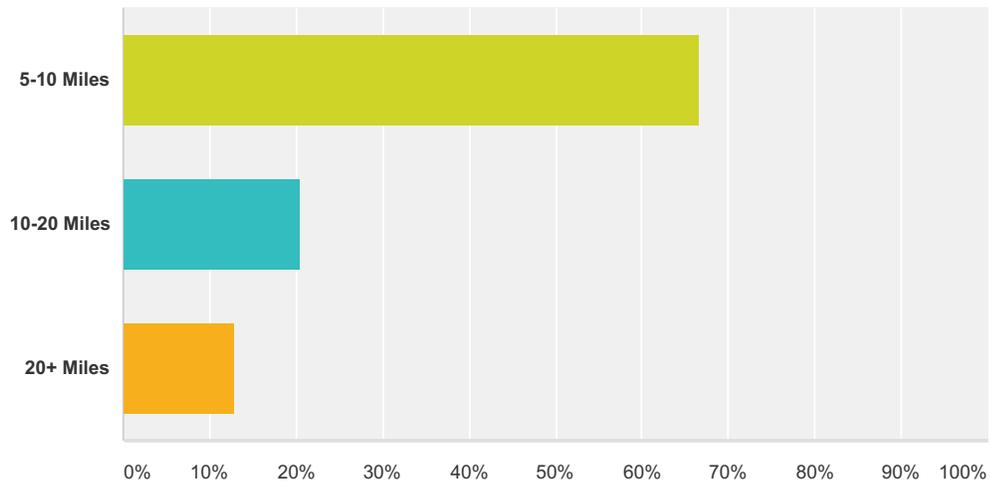
13	Home	1/31/2017 7:07 AM
14	Gym or with an outdoor group of people	1/31/2017 4:32 AM
15	home	1/30/2017 11:07 PM
16	Local gym	1/30/2017 10:46 PM
17	I do not want to participate.	1/30/2017 8:45 PM
18	in my home	1/30/2017 5:22 PM
19	Not at this time.	1/30/2017 4:01 PM
20	NO NO NO, and the NEXT answer in ZERO miles - which is not on your list	1/30/2017 2:41 PM
21	What kind of service are you talking about	1/30/2017 1:54 PM
22	No	1/30/2017 1:43 PM
23	I don't know	1/30/2017 1:42 PM
24	Not at this time	1/30/2017 1:34 PM
25	senior circle	1/30/2017 12:56 PM
26	NM Tech	1/30/2017 12:35 PM
27	I have my own routine.	1/30/2017 12:21 PM
28	N/A	1/30/2017 11:36 AM
29	I live walking distance from our hospital, but if the program were really compelling, I would travel to Albuquerque. Example: Joint issues, lack of cartilage, surgeries or what else? *(that's one I'm working on)	1/30/2017 11:06 AM
30	Mt. View Senior Circle in Las Cruces, NM	1/30/2017 10:51 AM
31	Anywhere	1/30/2017 10:42 AM
32	Home and outdoors/treadmill, cycling, hiking etc	1/30/2017 10:38 AM
33	I really don't want to be in a program	1/30/2017 10:35 AM
34	Question assumes that I am interested in participating in a program, a false assumption.	1/30/2017 10:24 AM
35	I currently don't have a good place for connecting with health care.	1/30/2017 10:22 AM
36	Already involved in YMCA services	1/30/2017 10:16 AM
37	Local yoga and other fitness or wellness centers.	1/30/2017 10:11 AM
38	I'm open	1/30/2017 10:10 AM
39	Home if possible	1/30/2017 9:34 AM
40	No	1/30/2017 9:32 AM
41	Local clinic	1/30/2017 9:28 AM
42	Home	1/30/2017 9:15 AM
43	Gym	1/30/2017 8:52 AM
44	depends	1/29/2017 8:37 PM
45	How about a low cost yoga class at our senior center cosponsored with the county	1/27/2017 10:46 PM
46	Home	1/26/2017 10:35 PM
47	any place	1/26/2017 2:26 PM
48	Mall	1/25/2017 6:29 PM
49	See 6	1/24/2017 10:20 PM
50	Community College	1/24/2017 9:17 PM
51	we have limited internet connectivity, and move every few weeks, all over the country. we are currently in florida and will be in 4 different areas between now and end of february.	1/24/2017 7:34 PM

2017 Healthy Living Survey

52	I do not care to participate in such a program.	1/24/2017 7:21 PM
53	Cancer center	1/24/2017 5:14 PM
54	Santa Fe Community College or the Higher Education building.	1/24/2017 4:40 PM
55	Silver Sneakers Program	1/24/2017 3:11 PM
56	Not as this time..... I'm unable to due to family health concerns.	1/24/2017 1:22 PM
57	any where	1/24/2017 1:20 PM
58	At home.	1/24/2017 12:17 PM
59	None	1/24/2017 11:48 AM

Q8 How far are you willing to travel to attend a program or service?

Answered: 593 Skipped: 0



Answer Choices	Responses
5-10 Miles	66.61% 395
10-20 Miles	20.40% 121
20+ Miles	12.98% 77
Total	593

New Mexico Retiree Health Care Authority (NMRHCA) Strategic Plan

Rationale

In support of NMRHCA's investment in the health of its members, BCBSNM is recommending an innovative and unique approach to provide an engagement solution. This approach allows for the creation of wellness and clinical strategies to educate, engage, and empower NMRHCA members to pursue healthy choices and engage in BCBSNM medical management programs.

Working in partnership with the BCBSNM Account Management, the wellness and clinical team will provide assistance and support with the integration of existing and future health management programs for NMRHCA members. Measurable outcomes for this initiative will be reflected in heightened participation in designated wellness and clinical activities, increased engagement rates in the Blue Care Connection Programs, and an impact on the long term cost of care for the agencies.

The evaluation of current data for all agencies is serving as the foundation for the initial strategic recommendations. The NMRHCA initiative is supported by a dedicated Wellness Coordinator and a Clinical Community Coordinator. Further strategic support is provided by the Wellness Consultant and Clinical Account Consultant assigned to the NMRHCA account.

Chronic Condition Prevalence (7/1/2016 Data)

- 1) Hypertension 36%
- 2) Diabetes 25%
- 3) Hyperlipidemia (High Cholesterol) 17%

BCBSNM Engagement and Participation rates

Blue Access for Members utilization – 25%

Health Assessment Completion- 56

Condition Management Targeted Engagement Rate- 11.5%

Strategic Recommendations

- Educational Presentations for each condition:
 - High Blood Pressure
 - Controlling Diabetes
 - Healthy Nutrition to reduce high cholesterol
- Health Fair coordination and attendance promoting all Blue Care Connection Programs
- Blue Access for Members Enrollment Training
- Promotion of Online Wellness portal and coaching programs, to include the Blue Points incentive program
- Promotion of Annual Wellness Exams and establishing a Primary Care Provider
- Promotion of Condition Management Program
- Ongoing education and promotion of NMRHCA PreMedicare incentive of \$50 gift card when two or more health and wellness activities are completed

New Mexico Retiree Health Care Authority: 2017 Communications and Events Calendar

ACTIVITIES

Month	Wellness Wednesday Monthly Webinars	Quarterly Community Trainings & Onsite Events	BCBSNM Campaigns	Communications: Health Kit Topics <small>(Can be placed on Intranet or sent to via email)</small>	Campaign Manager	eCards for Health <small>(Can be placed on Intranet or sent to via email)</small>
January		Dates: Locations:		Creating Health Habits		Family Fitness
February				Your Healthy Heart		Love Your Heart
March	*Trending in Nutrition/Well onTarget Date: March 29,2017			National Nutrition Month: eating healthy on a budget, supplement use		The Best Get Rest

April	<p>Do you have stress or does stress have you? (Hypertension)/ Care onTarget</p> <p>Date: April 25, 2017</p>	<p>Energize your Health</p> <p>/ Blue Care Connection Programs</p> <p>Date: April 22, 2017</p> <p>Locations: BCBS HQ</p>	<p>Blue Access for Members Incentive Campaign – Google Home/ Fit Bit</p>	<p>Lower Your Stress: work/life balance and stress</p>	<p>Blue Access for Members</p>	<p>The Power of Hugs</p>
May	<p>Improve your sleep</p> <p>Date:</p>		<p>Improve Your Sleep</p>	<p>Health Assessment Incentive Campaign- Google Home/ Fit Bit</p>	<p>Health Assessment Promotion</p>	<p>Sun. Play. Fun (SPF)</p>
June	<p>Sun Safety</p> <p>Date:</p>		<p>Get Unplugged! Get Outside!: home gardening, seasonal information</p>			<p>Home Safety</p>
July	<p>Mindfulness and Meditation</p> <p>Date:</p>		<p>The Power of Preventive Health Care/ Blue Care Connection Programs</p> <p>Dates:</p> <p>Locations:</p>	<p>Condition Management/ Lifestyle Management program promotion</p>	<p>Understanding Mindfulness: happiness, mindfulness in movement, eating, meditation with conditions</p>	<p>Condition Management /Lifestyle Management</p>

August	The Power of Preventive Health Care/Condition Management Date:			Lifelong Learning	Condition Management /Lifestyle Management	Signs of Stroke
September	Brain Health Date:			Managing Chronic Pain: back health, ergonomics	Preventive Care	The Flu
October	The Flu and how to protect yourself Date:	Diabetes Prevention and Control Dates: Locations:	Well onTarget Programs	Smile! Dental Hygiene: oral health	Preventive Care	Sole Mate
November	Let's not sugar coat Diabetes Date:			Diabetes Prevention: diabetes	24/7 Nurseline	Type II Diabetes Alert
December	Holiday Stress Date:			Preventive Health	24/7 Nurseline	Stress-Free Holidays

Marketing and Strategic Outreach

Wellness Wednesday Monthly Webinars

Quarterly Community Trainings & Site Visits

BCBSNM Campaigns

Communications: Health Kit Topics

(Can be placed on Intranet or sent to via email)

Campaign Manager

eCards for Health

(Can be placed on Intranet or sent to via email)



**New Mexico Retiree Health Care Authority
Onsite Wellness Clinic
April 22, 2017**

Summary

Event consisted of a series of interactive presentations focused on nutrition, physical fitness and resources available to members.

- Meggin Lorino with Oasis provided a presentation on Oasis Lifelong Adventure which is a program designed to promote healthy aging through lifelong learning, active lifestyles and volunteer engagement.
- Christina Chacon's presentation included the importance of nutrition, physical fitness, sleep, stress management and the value of having a support system in place. The presentation also included developing a balanced meal plan, an exercise demonstration utilizing water bottles as weights and a chair Zumba demonstration.
- Heather LeClerc was onsite to provide blood pressure screenings and information on blood pressure, knowing your numbers and preventive measures.
- Lisa Hentz presented information on tools and resources available through Blue Cross and Blue Shield of New Mexico and provided a question and answer forum.

Conclusion/Lessons Learned

- Although attendance was low, the 4 attendees expressed how much they enjoyed the clinic and the interactive presentations.
- Oasis did a great job engaging the attendees and providing additional information on community resources.
- Having Lisa Hentz available to provide benefit information and answer questions was well received.
- To increase attendance and participation, we will be looking to add other channels of communication with members, possible change of venue (e.g. community centers) and day of week for the clinics.

Ok Google:



Make a list of my healthy goals.

Log in to Blue Access for MembersSM by **June 23, 2017**, for a chance to win* a Google Home!

Are you looking for easy ways to get information and stay healthy? Start with [Blue Access for Members](#) – our secure member website – and get immediate access to health care benefit information and easy-to-use tools from your desktop or mobile device.

Through Blue Access for Members, you'll have online access to:

- View claims status and history
- Request a replacement ID card or print a temporary one
- Choose paperless Explanation of Benefit statements (EOBs)

Here's what you need to do to win!

Log in to Blue Access for Members at bcbsnm.com from your desktop or mobile device by **June 23, 2017.**

Not signed up? To register, you just need the group and member numbers found on your Blue Cross and Blue Shield of New Mexico ID card.

If you log in to Blue Access for Members between [May 22, 2017](#), and [June 23, 2017](#), you'll be entered automatically into a drawing to win a Google Home!

bcbsnm.com

*Google Home Promotion Details

*New Mexico Retiree Health Care Authority retirees who log in to Blue Access for Members by June 23, 2017, are entered into a drawing for a chance to win a Google Home. One Google Home Fire will be given away. Must be 18 or over to win. All entrants must be a legal U.S. resident. Your odds of winning will depend on the total number of entries received, with one entry per person. The prize value will not exceed \$150. No purchase is necessary. A purchase will not improve your chances of winning. Shipping and handling will not be the responsibility of the winner. Promotion participants must be current New Mexico Retiree Health Care Authority retirees who are current Blue Cross and Blue Shield of New Mexico members. Promotion rules are subject to change without prior notice. The drawing will be held in Chicago, Illinois between **July 10, 2017**, and **July 14, 2017**. The winner will be notified within 15 days of winning the prize. No restrictions apply. Void where prohibited. Participation in this promotion is separate from other programs or incentives your employer group may offer. This promotion is not endorsed by, affiliated with or sponsored by Google, Inc.

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Google Home is a registered trademark of Google, Inc.

Campaign Manager – rolled out 4/10/2017 – Canary Health Initiative

The New Mexico Retiree Care authority has a great new Wellness Initiative Called Better Choices, Better Health. This is an online program developed by Stanford School of Medicine Patient Education Research Center. This program is completed in the privacy of your own home. This program will help you to increase your self-management skills of chronic illnesses you may have. Results of the class can lead you to feeling more confident and more in control of your life and your health.

BCBS and New Mexico Retiree Health Authority is promoting a work shop called Better Choice Better Health through Canary Health. This is a 6-week online program that will give you great ideas to help you increase your self-management skills with chronic illnesses such as diabetes, cancer, arthritis, asthma, heart disease, high blood pressure or any other health condition. And Best of all there is no cost you. Do not Delay, the first class starts April 24, 2017 and enrollment is open to you at any time, please go on line and register at <http://enroll-nmrhca.selfmanage.org/> if you have any questions about the program you may call Canary Health (844) 384-1933

	A - NMRHCA BETTER CHOICES BETTER HEALTH (04/10/17 thru 05/08/17)
Target Contacted	967
Offered	695
% Offered	71.87%
Accepted	674
% Accepted	96.98%
COMM LATER	2
% COMM LATER	0.29%
NOT INTERESTED	19
% NOT INTERESTED	2.73%
UQ MBR Target Contacted	929
UQ MBR ALREADY RECEIVED THE INFO	
% UQ MBR Engagement Rate	72.55%

Recommendations — Naturally Slim

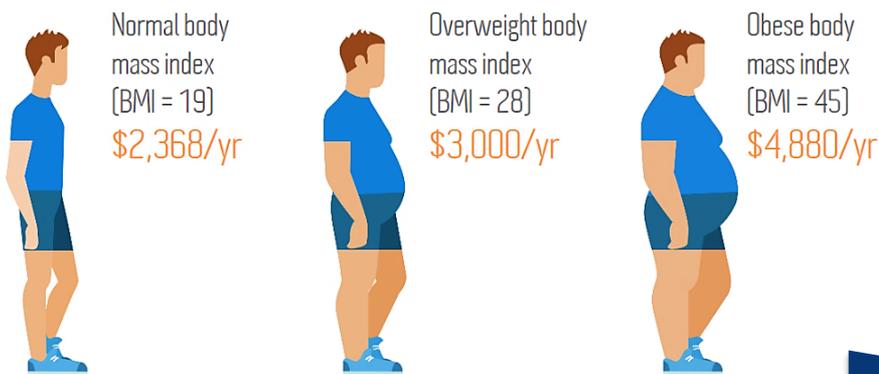


Topic	Key Observations	Opportunity to Manage Costs
<p>Naturally Slim</p>	<ul style="list-style-type: none"> Weight has proven to be a major factor in overall healthcare costs and worker productivity levels. Individuals with at least three criteria for metabolic syndrome have 60% higher annual medical costs than those without metabolic syndrome. About 5% of any employee population is responsible for 50% of the medical claims in a given year. 	<ul style="list-style-type: none"> Cost avoidance: Employees engaged in the Naturally Slim program can potentially lower their out-of-pocket expenses and future medical costs

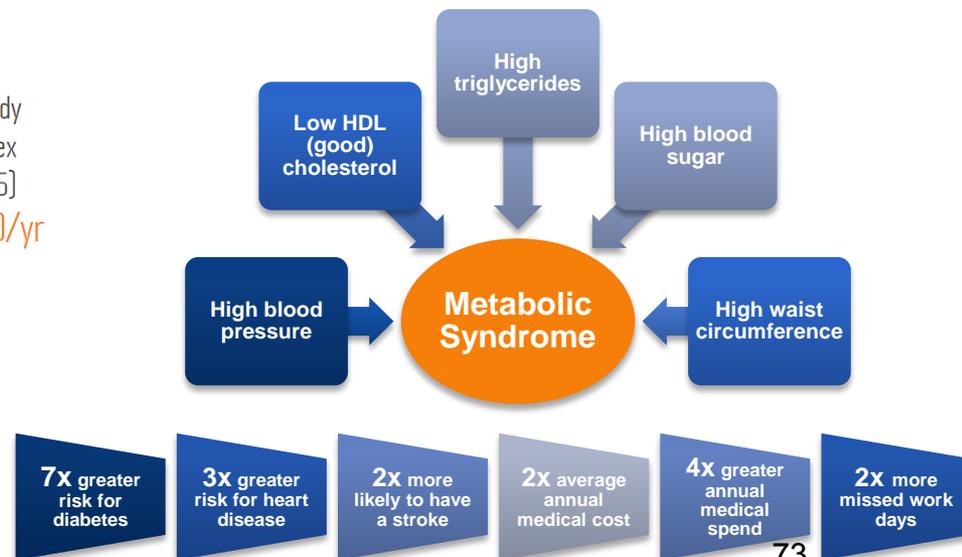
natura)(y)slim[®]

“High-value, behavior modification program proven to help your employees deliver sustainable weight loss and reverse obesity, pre-diabetes, and Metabolic Syndrome (MetS) risks”

Average healthcare costs for individuals with:



Source: Duke Medicine, December 2013



Recommendations — What is Naturally Slim?



How does the Naturally Slim program work?

- Focuses on **building behavioral skills** and **reinforcing learned skills** to promote long term health maintenance
- Full sales and implementation support
- Delivered via simple eHealth technology
- Multiple sessions are available to fit your culture



What is the cost of the program?

- Cost and administration is **paid through medical claim billing** via Blue Cross and Blue Shield
- Covered as **preventative obesity counseling**
- No **cost share** to employees, spouses, or adult dependents
- *\$282 in preventative care claims is the average per participant cost.*



What are typical results from the program?



How can the program be guaranteed?

- Over **650 employers** reduced their health care spending and measurably improve the health of their employees
- 77% of participants maintain their weight loss or continue to lose weight years after graduation

100% performance guarantee*

- **Clinical improvement**
 - **25% or more** Metabolic Syndrome reversal (Minimum of 100 employees required)
- **Weight loss**
 - Average weight loss of **5 pounds** or more for (Minimum of 30 employees required)

*Additional details regarding performance guarantees are available



NMRHCA Wellness Report 2016

Your story is our story.

Wellness at Work (January – December)

- 160 individuals have registered on the platform
- 83 individuals have completed the PHA
- Workshop Utilization
 - Nutrition Workshop
 - Diabetes Prevention
 - Diabetes (Type 2)
 - Exercise Workshop
 - Hypertension Workshop
 - Prepare for Flu Season
 - Asthma
 - High Cholesterol
 - Preventive Health (Female & Male)
 - Arthritis
 - Osteoporosis
 - Anxiety
 - Stress Management
 - Chart Your Course for Health

Good Measures

Your story is our story.

Background and Summary

- Good Measures (GM) is supporting the health and wellness efforts of the New Mexico Retiree Health Care Authority (NMRHCA) through the 2016 Wellness Incentive Program.
- GM is available to approximately 58,000 retirees and spouses/domestic partners.
- Program launched January 2016 and registration remained open until September 2016.
- Retirees receive high-touch, one-on-one support from a Registered Dietitian Nutritionist (RDN) Coach and access to digital support tools for 12 months.
- 306 total registered:
 - **89% have activated**, meaning they have logged or called/emailed with an RDN Coach at least one time. This is higher than the previous report.
 - **99% have engaged** (of those activated), meaning they used GM services.
- Retirees have benefited from:
 - 4,341 phone calls, emails, secure messages, and text messages with a Good Measures RDN Coach (excludes any automatic notifications).
 - 571 hours of consultation, support, and nutritional recommendation by a RDN Coach.

Outreach Efforts

Reach

Onsite at Wellness Events

- GM supported health fairs in Oct/Nov 2016 and Oct 2015. Collected contact information for retirees who expressed interest and also signed retirees up directly
- Will support Diabetes Academies in 2017

• ~2,000+

NMRHCA Wellness Site and Newsletter

- NMRHCA website includes link to GM in its list of Wellness Incentive Programs

• Website visits

NMRHCA Mailing

- NMRHCA sent mailing with GM brochure to retirees
- Magnets included in welcome packets



• 13,000+

Monthly Newsletter + Member story

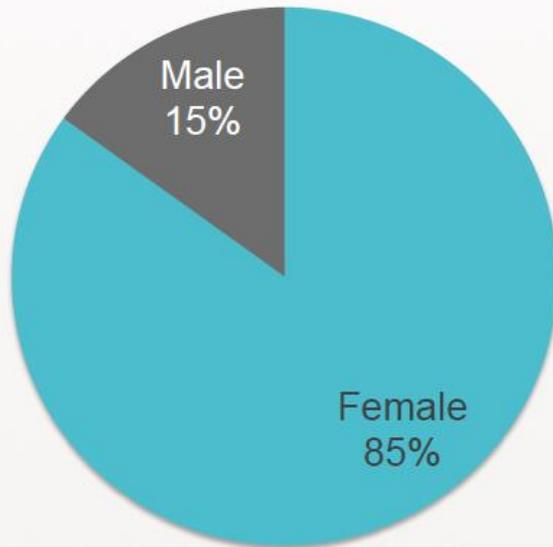
- The Solutions Group sends monthly newsletter email to ~2,700 retirees with the Presbyterian plan
- The Solutions Group, NMRHCA, and GM partnered on a member profile story, which was highlighted on the NMRHCA website and in newsletter

• 2,700 monthly
 • 13,000+

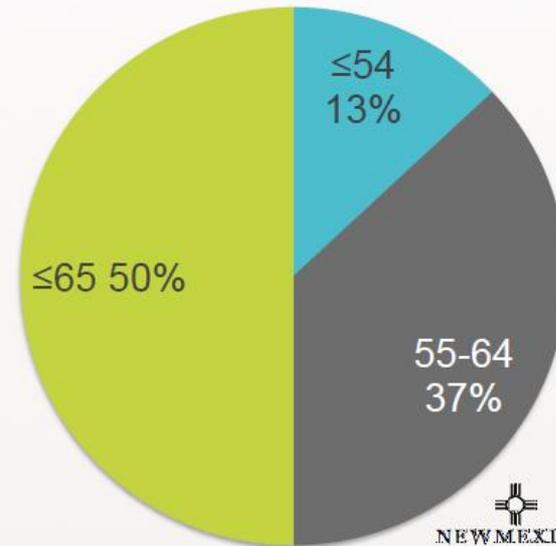
Member Profile

- Of the 306 registered, females continue to represent the majority.
- The age breakdown of those registered has remained consistent.
- 70% have used BOTH the RD services and platform/app.
 - Only 15% have used only the RD services.
 - Only 15% have used only the platform/app.

Gender



Age



N=306



The Good Measures Index (GMI) increases over time as members follow their personalized meal suggestions and create new eating patterns



Personal nutritional needs

Individual food choices

under and it matters

over and it matters

- Vitamin E
- Vitamin D
- Vitamin K
- Calcium
- Vitamin A
- Omega-3
- Calories (Weekly)
- Magnesium
- Potassium
- Folate
- Pantothenic Acid
- Vitamin B2
- Vitamin B1
- Copper
- Vitamin C

- Calories (Daily)
- Saturated Fat

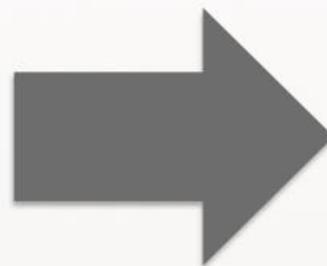
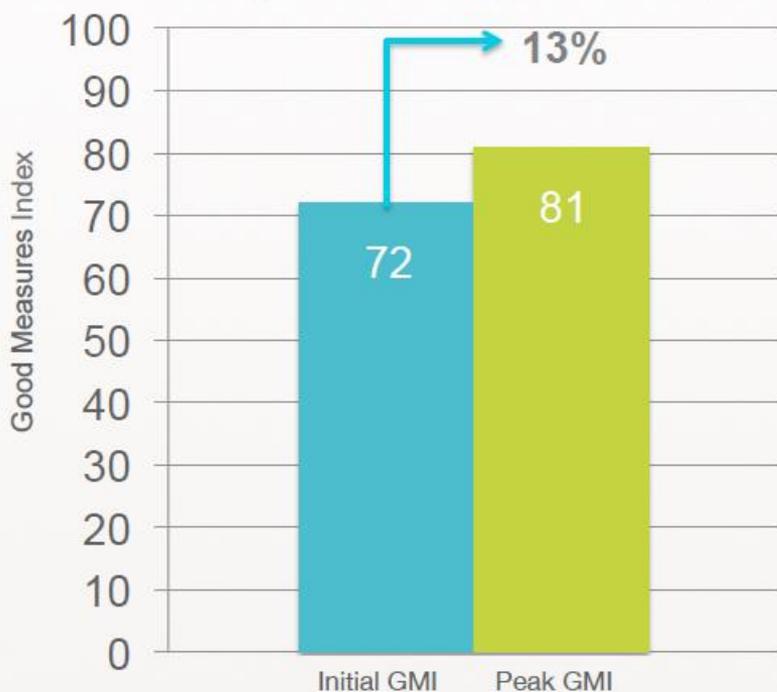


Your story is our story.

The Good Measures Index Initial to Peak

- Retirees have made significant, sustainable improvements to their nutrition status.
- The GMI reflects these positive changes with a 13% increase from the initial average to the peak average. (This is a lower percent increase compared with previous report, however, this cohort has now gone through a holiday season which we see has an impact on GMI.)

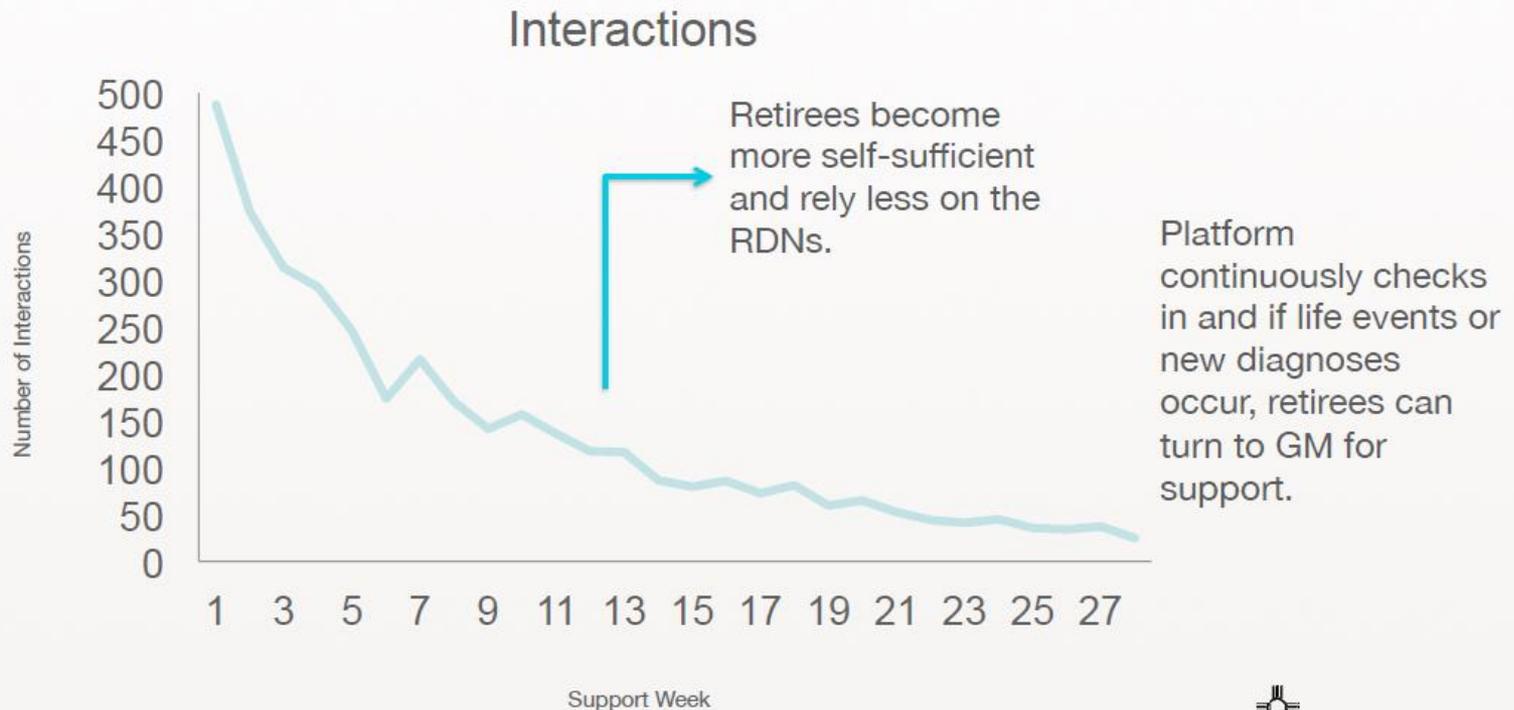
Average Initial to Average Peak GMI Improvement



Based on individual needs, retirees have moved closer to finding their unique nutritional balance.

Patient and RDN Coach Relationship

- Interactions include phone calls, emails, and secure messaging between an RDN Coach and a retiree.
- As the RDN Coach and retiree build their relationship, the number of interactions is high.
- Interactions become less frequent as the retiree becomes more self-reliant -- consistent with previous report and intent to make participants self-sufficient and confident.



N=229

 good measures™


NEW MEXICO
RETIREE
HEALTH CARE
AUTHORITY

11

Your story is our story.

 **PRESBYTERIAN**

83

9

NMRHCA 2016 Switch Enrollment Participation Numbers

		Health	Colorectal	Sun Safety	Tobacco	Immunizations	
Date	Location	Blood Pressure/Waist Circumference	FOBT	Visiderm	Quit for Life	Flu	Pneumococcal
10/3/2016	Santa Fe	44	4	29	1	135	31
10/4/2016	Silver City	22	5	15	0	38	3
10/5/2016	Las Cruces	56	12	44	0	106	26
10/6/2016	Las Cruces	29	7	16	0	50	11
10/11/2016	Albuquerque	106	8	67	1	245	19
10/13/2016	Raton	15	1	0	0	37	3
10/14/2016	Las Vegas	59	6	0	0	110	0
10/18/2016	Roswell	47	2	0	0	60	15
10/19/2016	Hobbs	22	2	0	0	25	3
10/20/2016	Clovis	36	10	0	0	57	15
10/21/2016	Santa Fe	35	5	23	0	78	16
10/24/2016	Espanola	49	5	37	0	72	10
10/25/2016	Farmington	49	4	30	0	61	12
10/26/2016	Gallup	29	4	10	0	43	1
10/27/2016	Rio Rancho	59	2	42	2	76	1
10/31/2016	Albuquerque	84	13	51	1	88	8
11/2/2016	Santa Fe	17	2	6	0	25	8
	Total	758	92	370	5	1306	84 182

Change is Possible

- 89 participants through four offerings
 - Once started course takes 9 weeks to complete.

Change Is Possible is a weight management and behavior change online video course. Using an integrated approach of nutrition and behavioral health, Change is Possible is intended to provide opportunities to make a commitment and create accountability in weight management and other health habits. Participants receive weekly emails with video links and supplemental materials relevant to the week's topic.

Newsletter Analytics

- Average 30% email open rate
- Referral links – 1.5% click rate
- Presbyterian Email List
 - 2,717 unique individuals
 - 60.6% use of mobile devices to read emails

NMRHCA Wellness Report Q1 2017

January - March

Wellness at Work (January - March)

- 264 individuals have registered on the platform
- 65 individuals have completed the PHA
- Workshop Utilization
 - Nutrition Workshop
 - Diabetes Prevention
 - Diabetes (Type 2)
 - Exercise Workshop
 - Hypertension Workshop
 - Prepare for Flu Season
 - Asthma
 - High Cholesterol
 - Preventive Health (Female & Male)
 - Arthritis
 - Osteoporosis
 - Anxiety
 - Stress Management
 - Chart Your Course for Health

Good Measures – Background and Summary

- Good Measures (GM) has been supporting the health and wellness efforts of the New Mexico Retiree Health Care Authority (NMRHCA) since January 2016 through its Wellness Incentive Program.
 - 382 have signed up since the launch in 2016.
- GM is available to nearly 60,000 retirees and spouses/domestic partners.
- Retirees receive high-touch, one-on-one support from a Registered Dietitian Nutritionist (RDN) Coach and access to digital support tools for 12 months
- First Quarter 2017 – 88 have signed up or re-engaged (3), nearly a ¼ of total sign ups
 - **95% have used Good Measures services, of those whom could be reached**, comparable to numbers seen in the annual report.
- Nine have signed up for the Diabetes Prevention Program in Q1 2017, in addition to the seven already signed up.
 - DPP participants continue to show high engagement rates and on-target weight loss.

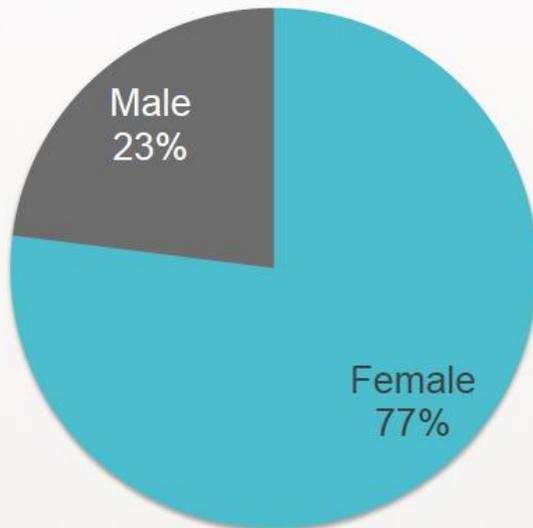
Outreach Efforts

		Reach
Onsite at Wellness Events	<ul style="list-style-type: none"> • Good Measures had a dietitian at two of the four Diabetes Academies in 2017 and provided materials at all four. 	<ul style="list-style-type: none"> • ~200+
NMRHCA Wellness Site and Newsletter	<ul style="list-style-type: none"> • NMRHCA website includes link to GM in its list of Wellness Incentive Program 	<p>Wellness at Work (April-July)</p> <ul style="list-style-type: none"> • Website visits
NMRHCA Mailing	<ul style="list-style-type: none"> • NMRHCA sent mailing to retirees, which included GM brochure • Magnets included in welcome packets 	<ul style="list-style-type: none"> • 13,000+
Monthly Newsletter + Member story	<ul style="list-style-type: none"> • The Solutions Group sends monthly newsletter email to ~2,700 retirees with the Presbyterian plan • The Solutions Group, NMRHCA, and GM are partnering on a new member story for 2017 	<ul style="list-style-type: none"> • 2,700 monthly • 13,000+

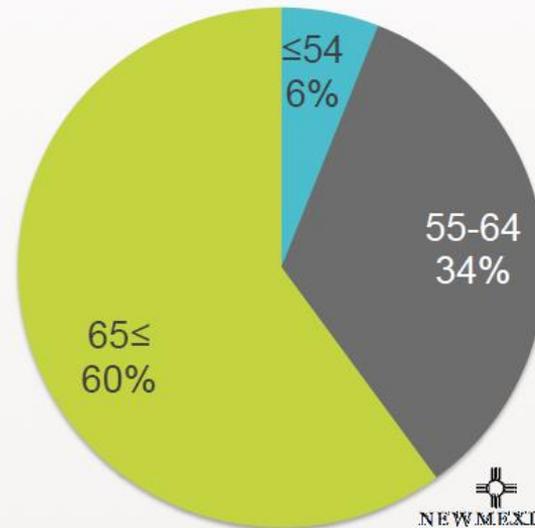
Member Profile

- Profile has shifted to a higher percentage of males – 23% up from 15% in the annual report.
- Compared with past reports, a higher percentage of this group is exclusively using the registered dietitian support
 - 70% have used BOTH the RD services and platform/app.
 - Only 15% have used only the RD services.
 - Only 15% have used only the platform/app.

Gender



Age



N=88



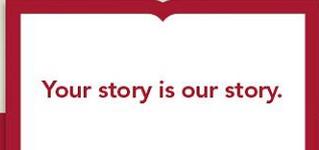
Retirees in the DPP are highly engaged and seeing positive outcomes

- The Authority is offering the Good Measures Diabetes Prevention Program to retirees. This program was highlighted at all of the Diabetes Academies.
- Participants have been engaging in group sessions, Lifestyle Coach support and GM digital tools.



**Only one person has dropped out of the DPP sighting the reason that the time was not right due to personal reasons*

***Engagement includes class completion, weight and activity tracking*

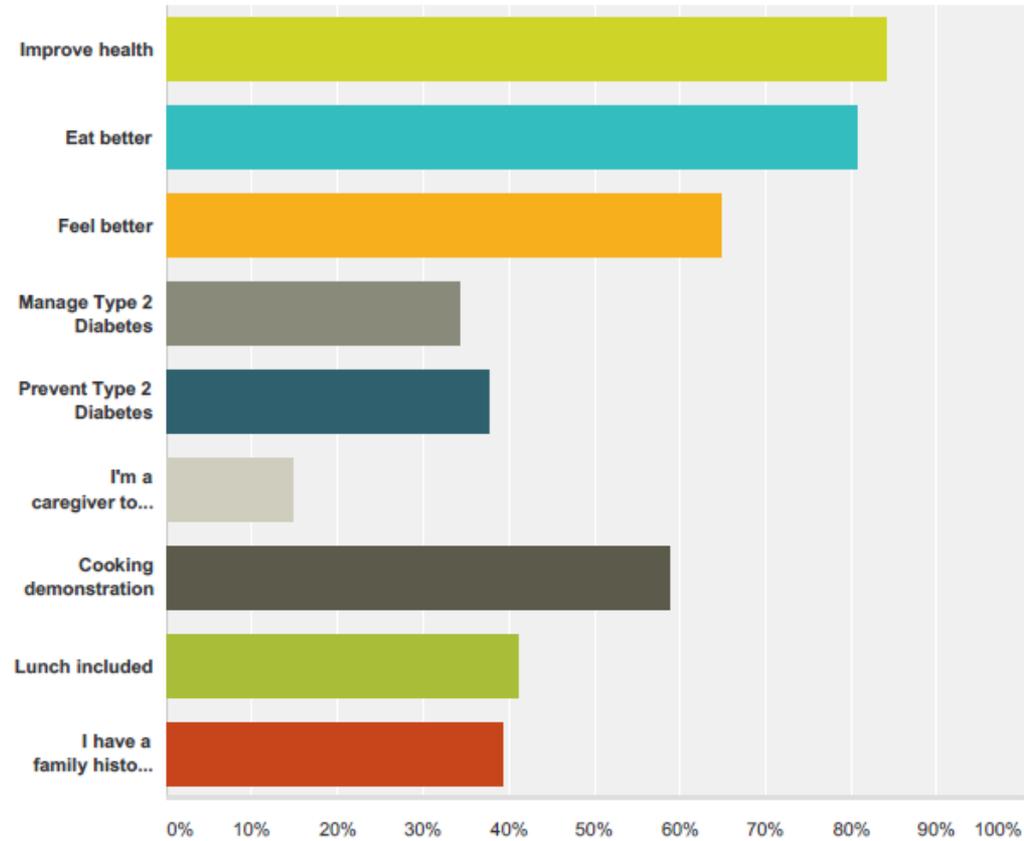


Diabetes Learning Academies

- 2 hour event that includes:
 - Educational presentation
 - Cooking demo
 - Catered lunch
 - Expert vendors
- Offered in Las Cruces, Albuquerque, Santa Fe, and Farmington
- 172 registered across four events
- 118 (68%) attended across four events

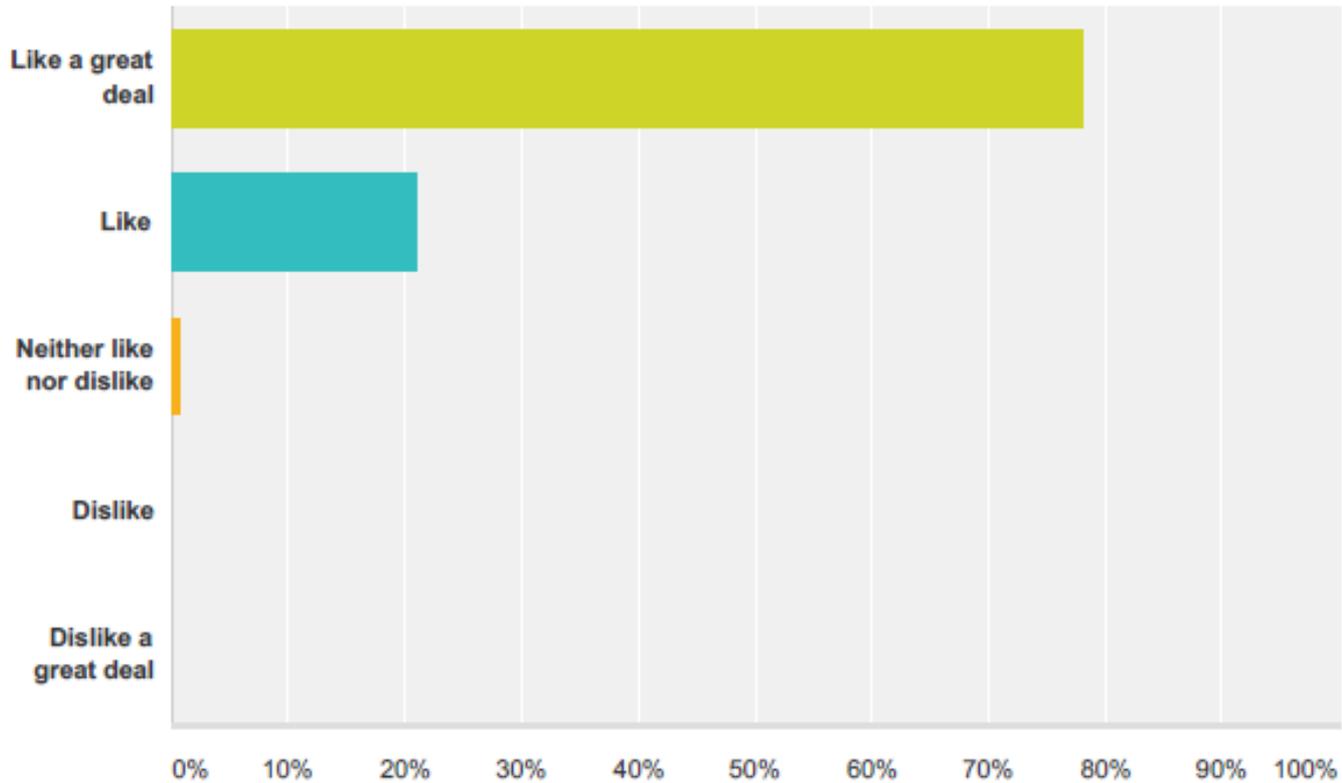
Q2 What motivated you to attend the Diabetes Learning Academy? Check all that apply.

Answered: 114 Skipped: 1



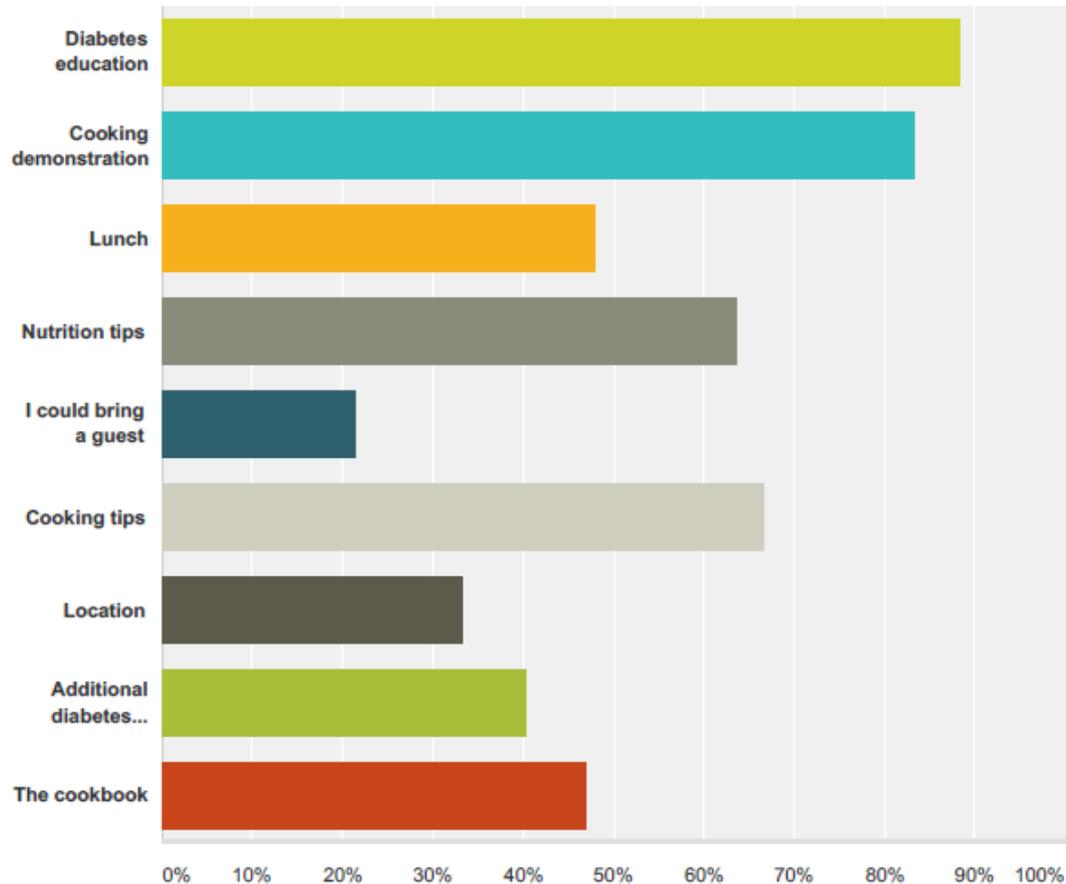
Q3 Overall, did you like or dislike the Diabetes Learning Academy?

Answered: 114 Skipped: 1



Q4 What did you like most about the Diabetes Learning Academy? Check all that apply.

Answered: 102 Skipped: 13



Better Bone Health

- 66 participants have completed full course in 2016
- 8 registered to date for 3rd offering (June 6th) offering via email
 - Once started course will take 6 weeks to complete.

Better Bone Health is a six-week program that introduces tools individuals can use at any age to build and/or maintain bone strength. This course includes six video sessions - three classes focus on nutrition for bone strength and three fitness classes focused on strength and resistance exercises. The fitness videos will give participants a chance to practice movements and provide immediate actionable steps. Participants will receive emails with video links and additional materials each week. All participants receive a resistance band mailed to their homes to use in the fitness sections.

Upheaval coming for roughly 400 state employees

By Dan Boyd / Journal Capitol Bureau Chief

Friday, May 19th, 2017 at 12:02am

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SANTA FE – A consolidation of personnel functions within New Mexico state government ordered earlier this year by Gov. Susana Martinez could mean upheaval for roughly 400 current employees.

State officials have been tight-lipped in recent weeks about exactly how many workers might be transferred or laid off, but they say any who lose their jobs could apply for new positions despite an ongoing state hiring freeze.

Meanwhile, much of the streamlining is expected to be completed by July, and a State Personnel Office spokesman said implementation of the plan is already underway in some agencies.

“The consolidation will save the state a significant amount of money and will make state government more streamlined and efficient,” State Personnel Office spokesman Joseph Cueto said. “All HR professionals in state government will be affected by the consolidation in one way or another.”

However, no exact figures have been provided as to how many of the roughly 400 employees will be transferred from their current agency to the State Personnel Office, how many will be reassigned within their current agencies and how many might be fired.

Any dismissed workers would have the ability to apply for other vacant state government jobs they’re qualified for – though there’s no guarantee they’d be hired.

Some union leaders have expressed concern the change could lead to drawn-out disputes between employees and management, since executive branch agencies will no longer have their own in-house human resources staff.

“Now it’s going to be a very autocratic system,” Miles Conway, communications director for the American Federation of State, County and Municipal Employees union in New Mexico, said in an interview this week.

Conway, whose union does not represent human resources employees, also said Martinez administration claims of cost savings likely means job losses.

It wouldn’t be the first time the state has laid off workers in recent years. The State Personnel Board last year approved a Cultural Affairs Department plan to cut 11 staff positions, and in 2011 signed off on a plan to lay off 44 employees, most of them with the Public Education Department.

Martinez, the state’s two-term Republican governor, in February ordered that all personnel functions within New Mexico executive branch agencies be consolidated within a single agency in an attempt to improve efficiency and save “millions” of dollars.

The order shifts all such duties to the State Personnel Office, which already oversees hiring and disciplinary matters for roughly 18,000 rank-and-file state employees.

But finding room to absorb a large number of new employees could prove tricky. The State Personnel Office is housed in a roughly 42,000-square foot building in Santa Fe that was constructed in 1940, and has asked to be able to adjust its budget to buy more office equipment and furniture.

In all, the state has 23 Cabinet-level departments and more than 40 administrative agencies, and for years many of them have had their own human resources offices to handle internal policies, rules and personnel directives.

Contact the writer.

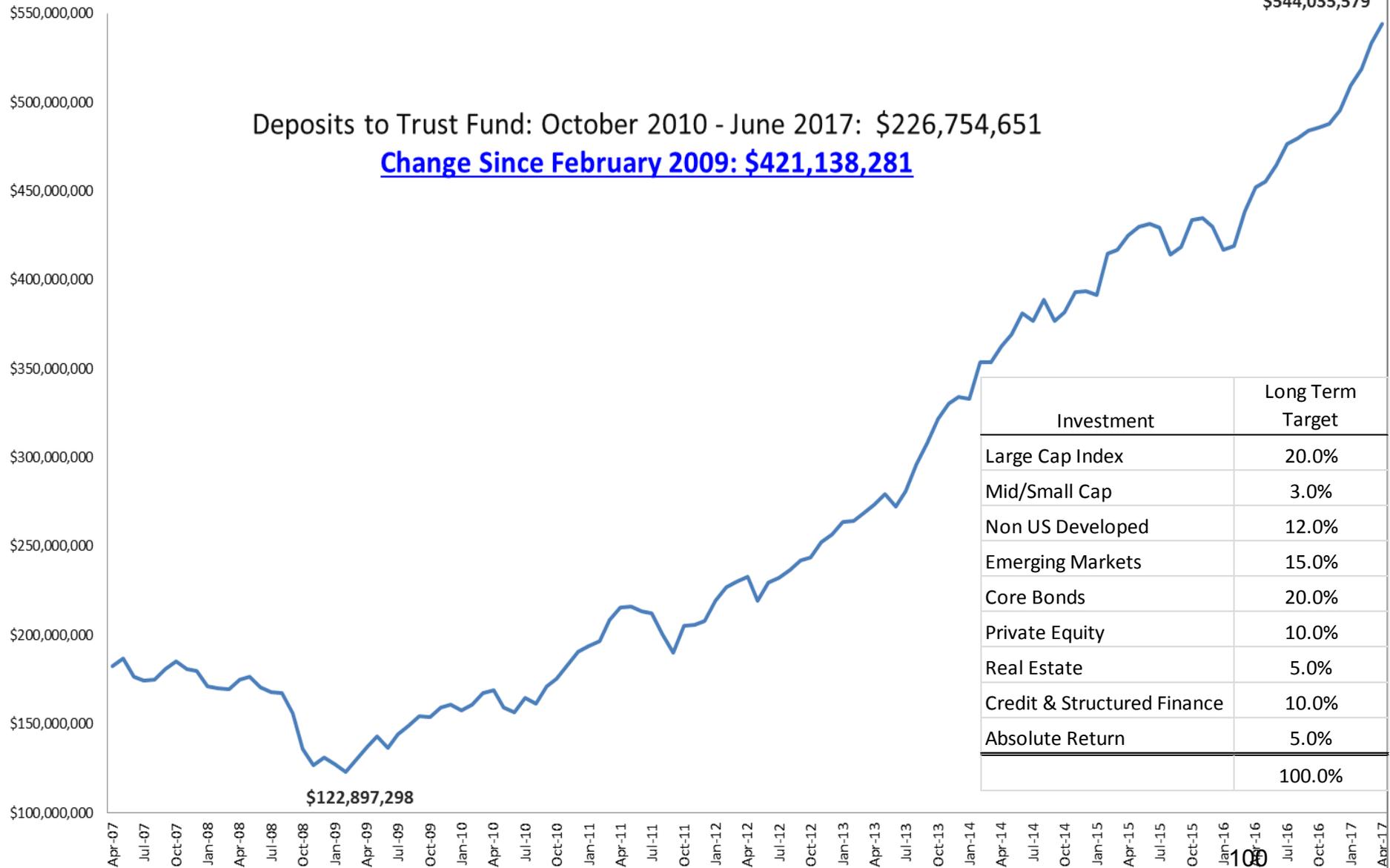
NEW MEXICO RETIREE HEALTH CARE AUTHORITY
CHANGE IN NET ASSET VALUE
FOR THE MONTH ENDED
April 30, 2017

	Core Plus Bonds	Large Cap Index	Non US Dev Index	Non US Emg Index	Small Mid Cap	Credit and Structure	Absolute Return	Private Equity	Real Estate	Total
Market Value 3/31/2017	\$103,493,198.41	\$113,933,793.69	\$59,608,517.98	\$76,065,679.38	\$15,643,728.33	\$53,564,553.66	\$24,949,237.60	\$56,465,770.94	\$29,843,122.70	\$533,567,602.69
CONTRIBUTIONS	1,000,000.00	1,000,000.00	600,000.00	750,000.00	150,000.00	500,000.00	250,000.00	500,000.00	250,000.00	5,000,000.00
WITHDRAWALS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FEES	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
INCOME EARNED	279,807.83	16,911.34	184,267.99	122,886.11	2,464.85	(10,512.69)	14.07	11,653.41	77,263.02	684,755.93
CAPITAL APPR/DEPR	688,248.22	1,195,107.25	1,334,771.49	1,438,454.78	113,314.71	246,047.61	168,184.12	(386,818.59)	(14,089.01)	4,783,220.58
Market Value 4/30/2017	\$105,461,254.46	\$116,145,812.28	\$61,727,557.46	\$78,377,020.27	\$15,909,507.89	\$54,300,088.58	\$25,367,435.79	\$56,590,605.76	\$30,156,296.71	\$544,035,579.20

NMRHCA Fund Balance History - April 2007 thru April 2017

Deposits to Trust Fund: October 2010 - June 2017: \$226,754,651

Change Since February 2009: \$421,138,281



Investment	Long Term Target
Large Cap Index	20.0%
Mid/Small Cap	3.0%
Non US Developed	12.0%
Emerging Markets	15.0%
Core Bonds	20.0%
Private Equity	10.0%
Real Estate	5.0%
Credit & Structured Finance	10.0%
Absolute Return	5.0%
	100.0%



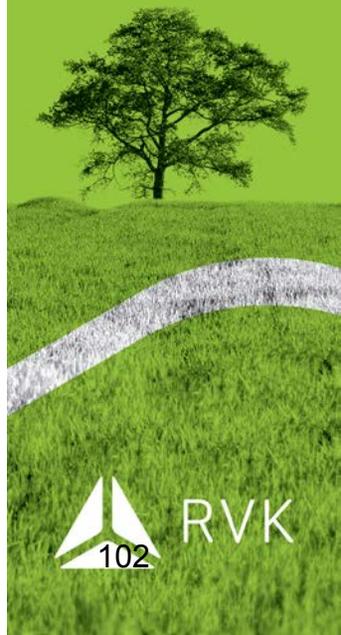
Quarterly Investment Performance Analysis

New Mexico State Investment Council

Period Ended: March 31, 2017



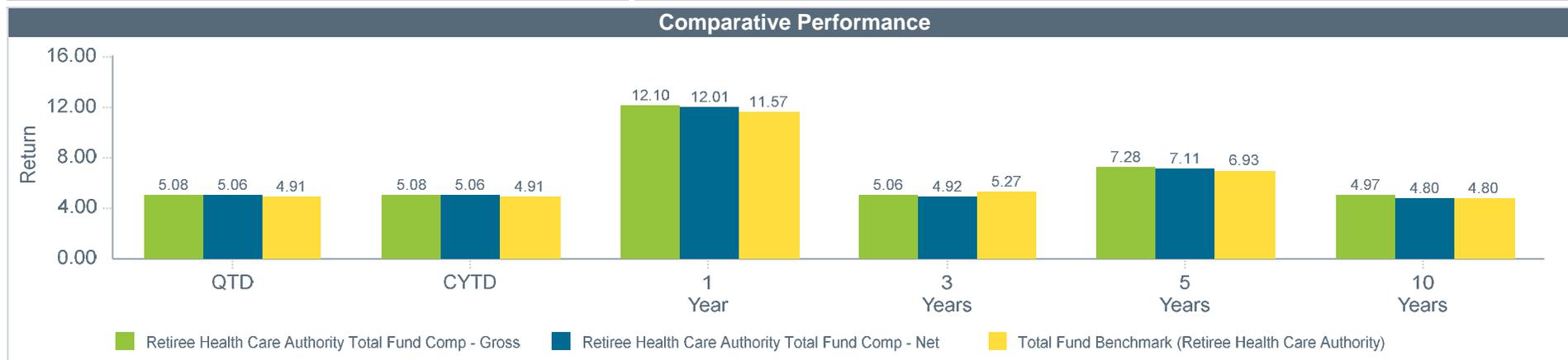
Retiree Health Care Authority



**New Mexico State Investment Council
Retiree Health Care Authority Total Fund Comp**

As of March 31, 2017

Overview	Asset Allocation vs. Target Allocation				
The New Mexico Retiree Health Care Authority (NMRHCA) was established in 1990 to provide health care coverage to retirees of state agencies and eligible participating public entities. Approximately 300 public entities including cities, counties, universities and charter schools participate in NMRHCA. The agency provides medical plans for both non Medicare and Medicare eligible retirees and their dependents as well as dental, vision and life insurance. The Authority currently provides coverage to approximately 58,000 retirees and their dependents.	Market Value (\$)	Allocation (%)	Target (%)	Difference (%)	
	Large Cap US Equity Index	113,933,781	21.35	20.00	1.35
	Small/Mid Cap US Equity Active	15,643,624	2.93	3.00	-0.07
	Non-US Developed Markets Index	59,608,435	11.17	12.00	-0.83
	Non-US Emerging Markets Index	76,065,616	14.26	15.00	-0.74
	US Core Plus Bonds	103,493,134	19.40	20.00	-0.60
	Credit & Structured Finance	53,564,554	10.04	10.00	0.04
	Absolute Return	24,949,238	4.68	5.00	-0.32
	Private Equity	56,465,461	10.58	10.00	0.58
	Real Estate	29,843,123	5.59	5.00	0.59
Total Fund	533,566,966	100.00	100.00	0.00	



Comparative Performance

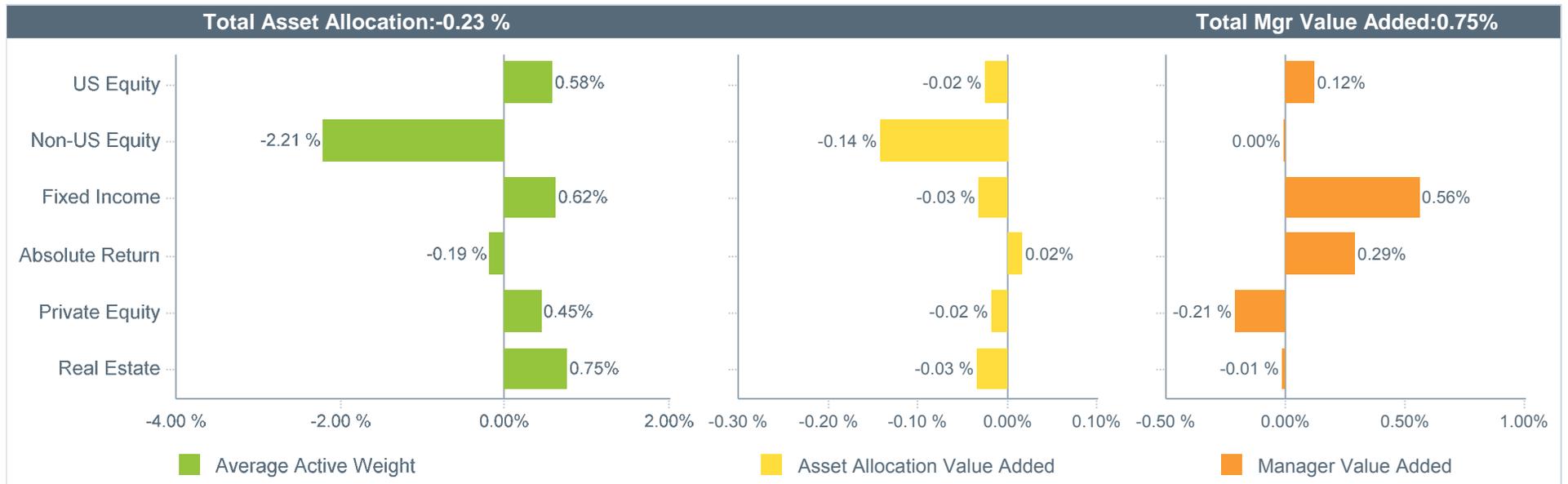
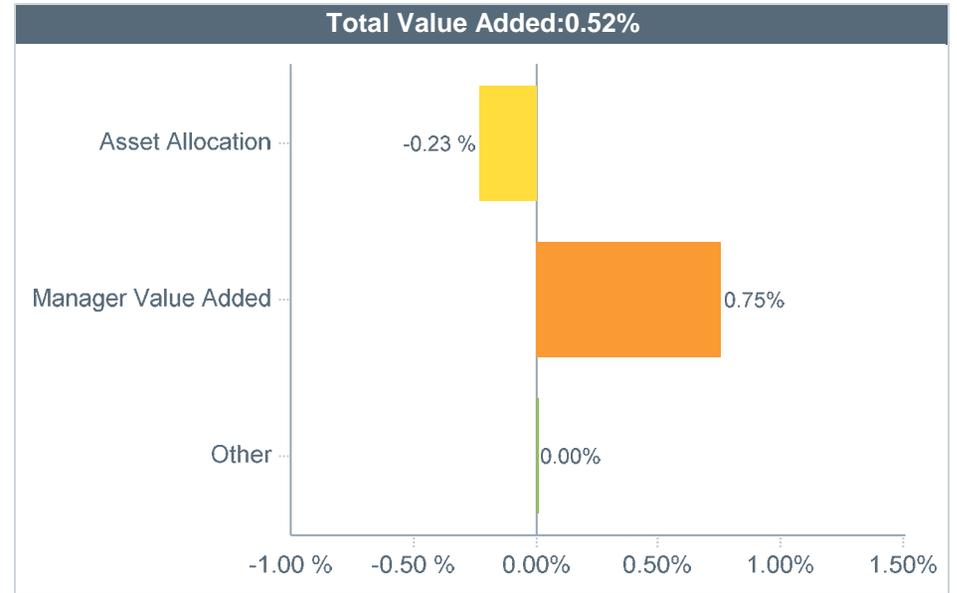
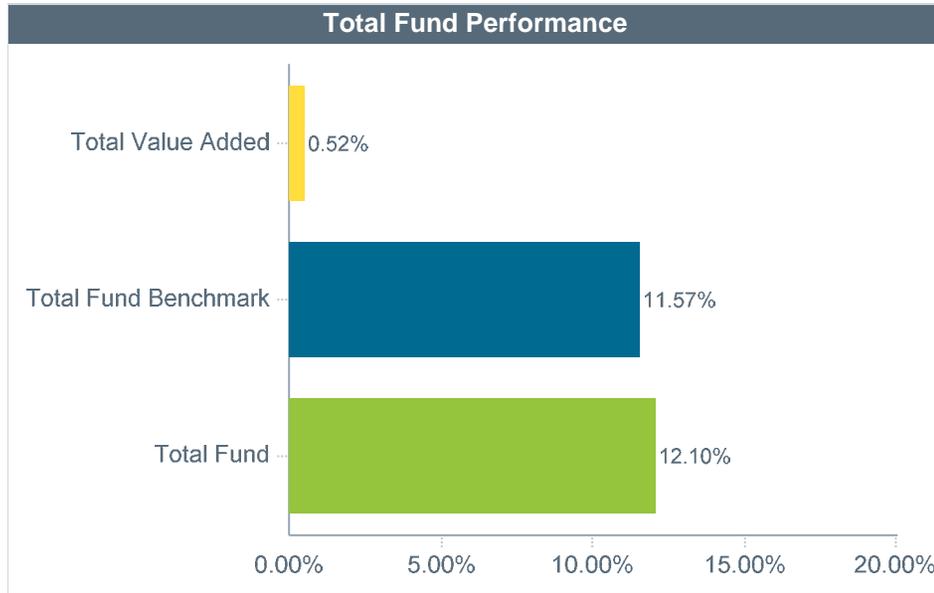
	QTD	CYTD	1 Year	3 Years	5 Years	10 Years	2016	2015	2014
Retiree Health Care Authority Total Fund Comp - Gross	5.08	5.08	12.10	5.06	7.28	4.97	8.09	-0.90	4.71
<i>Total Fund Benchmark (Retiree Health Care Authority)</i>	4.91	4.91	11.57	5.27	6.93	4.80	8.42	-0.76	4.88
Difference	0.17	0.17	0.53	-0.21	0.35	0.17	-0.33	-0.14	-0.17
Retiree Health Care Authority Total Fund Comp - Net	5.06	5.06	12.01	4.92	7.11	4.80	7.99	-1.03	4.48
<i>Total Fund Benchmark (Retiree Health Care Authority)</i>	4.91	4.91	11.57	5.27	6.93	4.80	8.42	-0.76	4.88
Difference	0.15	0.15	0.44	-0.35	0.18	0.00	-0.43	-0.27	-0.40

Schedule of Investable Assets

Periods Ending	Beginning Market Value (\$)	Net Cash Flow (\$)	Gain/Loss (\$)	Ending Market Value (\$)	% Return
CYTD	495,629,841	12,500,000	25,437,125	533,566,966	5.06

Allocations shown may not sum up to 100% exactly due to rounding. Performance shown is net of fees, except where noted otherwise.





Performance shown is gross of fees. Calculation is based on monthly periodicity. See Glossary for additional information regarding the Total Fund Attribution calculation.

New Mexico State Investment Council
 Asset Allocation & Performance - Composites & Managers

As of March 31, 2017

	Allocation		Performance (%)											Inception Date
	Market Value (\$)	%	QTD	CYTD	FYTD	1 Year	3 Years	5 Years	10 Years	2016	2015	Since Incep.		
NMSIC Total Fund Composite	21,730,939,552	100.00	4.32	4.32	9.62	11.52	5.65	7.91	5.22	7.60	0.30	5.11	01/01/2000	
US Equity														
US Equity Composite	6,288,811,647	28.94	5.61	5.61	14.92	17.85	9.05	12.51	7.83	12.02	0.63	5.98	05/01/1999	
<i>Russell 3000 Index</i>			5.74	5.74	15.04	18.07	9.76	13.18	7.54	12.74	0.48	5.73		
US Large Cap Equity Composite	5,578,231,325	25.67	5.80	5.80	14.06	16.91	9.60	12.55	8.10	10.96	1.46	5.45	05/01/1999	
<i>Russell 1000 Index</i>			6.03	6.03	14.52	17.43	9.99	13.26	7.58	12.05	0.92	5.55		
<i>IM U.S. Large Cap Equity (SA+CF)</i>			5.96	5.96	14.77	17.04	9.59	13.16	7.77	10.98	0.93	6.44		
US Large Cap Active Pool	2,037,213,325	9.37	7.06	7.06	15.74	17.34	9.52	12.07	7.75	6.98	4.11	5.04	05/01/1999	
<i>Russell 1000 Index</i>			6.03	6.03	14.52	17.43	9.99	13.26	7.58	12.05	0.92	5.55		
<i>IM U.S. Large Cap Equity (SA+CF)</i>			5.96	5.96	14.77	17.04	9.59	13.16	7.77	10.98	0.93	6.44		
Wellington Management Company	584,127,363	2.69	3.47	3.47	13.74	18.09	9.47	N/A	N/A	14.81	0.17	14.67	06/01/2012	
<i>Russell 1000 Val Index</i>			3.27	3.27	14.00	19.22	8.67	13.13	5.93	17.34	-3.83	15.28		
<i>IM U.S. Large Cap Value Equity (SA+CF)</i>			3.97	3.97	15.46	18.26	8.52	12.98	7.01	14.58	-2.30	15.22		
Brown Brothers Harriman	581,485,401	2.68	4.92	4.92	10.38	11.69	6.42	N/A	N/A	9.03	-1.68	13.25	06/01/2012	
<i>Russell 1000 Index</i>			6.03	6.03	14.52	17.43	9.99	13.26	7.58	12.05	0.92	15.39		
<i>IM U.S. Large Cap Core Equity (SA+CF)</i>			5.97	5.97	14.32	16.32	9.80	13.22	7.74	10.52	1.28	15.33		
J.P. Morgan Asset Mgmt	253,432,697	1.17	11.49	11.49	18.01	17.40	10.54	N/A	N/A	-1.15	8.43	13.77	06/01/2012	
T. Rowe Price LC Growth	618,167,859	2.84	11.00	11.00	22.36	22.37	11.48	N/A	N/A	3.40	10.58	17.73	06/01/2012	
<i>Russell 1000 Grth Index</i>			8.91	8.91	15.05	15.76	11.27	13.32	9.13	7.08	5.67	15.42		
<i>IM U.S. Large Cap Growth Equity (SA+CF)</i>			8.79	8.79	14.75	15.61	10.28	12.73	8.91	4.64	4.93	15.02		
US Large Cap Alternative Wtd Index Pool	1,351,866,080	6.22	3.61	3.61	10.90	15.44	N/A	N/A	N/A	15.84	N/A	9.39	02/01/2015	
<i>Russell 1000 Index</i>			6.03	6.03	14.52	17.43	9.99	13.26	7.58	12.05	0.92	10.14		
<i>IM U.S. Large Cap Enhanced Index Equity (SA+CF)</i>			6.00	6.00	15.33	17.41	10.43	13.77	7.91	12.45	1.01	10.23		
NT Russell Fundamental LC Index Fund	890,976,473	4.10	3.72	3.72	13.00	16.90	N/A	N/A	N/A	16.69	N/A	9.72	02/01/2015	
<i>Russell RAFI US Index</i>			3.54	3.54	13.47	17.30	9.06	13.43	8.60	17.26	-2.76	9.75		
NT FTSE RAFI Low Volatility Index	327,273,487	1.51	2.47	2.47	4.43	10.75	N/A	N/A	N/A	14.40	N/A	8.41	02/01/2015	
<i>FTSE RAFI USD Lo Vol Index</i>			2.44	2.44	4.23	10.68	9.22	13.06	9.24	14.41	-0.19	8.41		
NT Russell 1000 Equal Wtd Index	65,705,840	0.30	5.09	5.09	13.07	17.98	N/A	N/A	N/A	16.41	N/A	6.23	03/01/2015	
<i>Russell 1000 Index (Equal Wtd)</i>			5.11	5.11	12.96	17.91	7.83	12.88	9.54	16.37	-4.01	6.19		
NT Russell Top 200 Index Fund	67,910,279	0.31	6.36	6.36	15.01	17.54	N/A	N/A	N/A	11.34	N/A	10.98	02/01/2015	
<i>Russell Top 200 Index</i>			6.38	6.38	14.97	17.57	10.63	13.32	7.45	11.33	2.36	10.98		

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New Mexico State Investment Council
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	Allocation		Performance (%)										
	Market Value (\$)	%	QTD	CYTD	FYTD	1 Year	3 Years	5 Years	10 Years	2016	2015	Since Incep.	Inception Date
US Large Cap Index Pool	2,189,151,921	10.07	6.01	6.01	14.51	17.41	10.02	13.22	8.55	12.07	1.01	6.04	05/01/1999
<i>Russell 1000 Index</i>			6.03	6.03	14.52	17.43	9.99	13.26	7.58	12.05	0.92	5.55	
NT Russell 1000 Index Fund	2,189,151,918	10.07	6.01	6.01	14.51	17.41	9.99	13.25	N/A	12.06	0.93	13.46	08/01/2011
<i>Russell 1000 Index</i>			6.03	6.03	14.52	17.43	9.99	13.26	7.58	12.05	0.92	13.53	
<i>IM U.S. Large Cap Core Equity (SA+CF)</i>			5.97	5.97	14.32	16.32	9.80	13.22	7.74	10.52	1.28	13.50	
US Small/Mid Cap Equity Composite	710,580,322	3.27	4.20	4.20	23.08	26.82	5.32	11.67	N/A	21.79	-7.42	9.59	05/01/2011
<i>US Small/Mid Cap Equity Custom Index</i>			3.27	3.27	19.15	23.45	7.65	12.62	7.41	19.06	-3.79	10.22	
<i>IM U.S. SMID Cap Equity (SA+CF)</i>			4.29	4.29	17.12	20.17	7.65	12.87	8.89	16.43	-1.37	10.81	
US Small/Mid Cap Active Pool	677,913,757	3.12	4.28	4.28	23.15	26.55	4.18	11.16	6.64	22.31	-8.99	8.40	11/01/1998
<i>US Small/Mid Cap Equity Custom Index</i>			3.27	3.27	19.15	23.45	7.65	12.62	7.41	19.06	-3.79	9.09	
<i>IM U.S. SMID Cap Equity (SA+CF)</i>			4.29	4.29	17.12	20.17	7.65	12.87	8.89	16.43	-1.37	11.51	
Seizert Capital Partners	156,268,761	0.72	6.30	6.30	31.55	30.95	7.44	15.57	N/A	25.31	-10.39	17.45	01/01/2012
<i>Russell Mid Cap Index</i>			5.15	5.15	13.42	17.03	8.48	13.09	7.94	13.80	-2.44	15.06	
<i>IM U.S. Mid Cap Equity (SA+CF)</i>			5.78	5.78	15.59	17.83	8.44	12.99	8.98	12.23	-1.26	15.10	
Donald Smith & Company	180,082,759	0.83	3.33	3.33	10.91	12.47	0.15	9.53	N/A	13.87	-11.76	10.94	01/01/2012
<i>Russell 2000 Val Index</i>			-0.13	-0.13	24.03	29.37	7.62	12.54	6.09	31.74	-7.47	14.28	
<i>IM U.S. Small Cap Value Equity (SA+CF)</i>			0.77	0.77	21.75	24.57	8.67	13.70	8.43	26.14	-4.30	15.49	
BlackRock Alpha Tilts	200,177,250	0.92	3.06	3.06	23.96	28.31	8.51	14.49	N/A	23.29	-3.90	15.32	02/01/2012
<i>Russell 2000 Index</i>			2.47	2.47	21.60	26.22	7.22	12.35	7.12	21.31	-4.41	13.00	
<i>IM U.S. SMID Cap Equity (SA+CF) Median</i>			4.29	4.29	17.12	20.17	7.65	12.87	8.89	16.43	-1.37	13.81	
Cortina Asset Management	141,343,493	0.65	5.02	5.02	25.89	35.35	4.04	9.25	N/A	24.10	-5.67	12.11	01/01/2012
<i>Russell 2000 Grth Index</i>			5.35	5.35	19.17	23.03	6.72	12.10	8.06	11.32	-1.38	14.17	
<i>IM U.S. Small Cap Growth Equity (SA+CF)</i>			5.85	5.85	18.51	23.27	6.57	12.42	8.72	11.38	-0.74	14.51	
US Small/Mid Cap Index Pool	32,666,564	0.15	2.49	2.49	21.64	26.26	5.27	N/A	N/A	21.32	-4.56	13.23	12/01/2012
<i>Russell 2000 Index</i>			2.47	2.47	21.60	26.22	7.22	12.35	7.12	21.31	-4.41	14.41	
NT Russell 2000 Index Fund	32,666,564	0.15	2.49	2.49	21.64	26.26	N/A	N/A	N/A	21.32	N/A	9.94	02/01/2015
<i>Russell 2000 Index</i>			2.47	2.47	21.60	26.22	7.22	12.35	7.12	21.31	-4.41	9.93	
<i>IM U.S. Small Cap Core Equity (SA+CF)</i>			2.93	2.93	21.09	24.15	8.75	13.90	8.40	20.61	-1.36	11.33	

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	Allocation		Performance (%)										
	Market Value (\$)	%	QTD	CYTD	FYTD	1 Year	3 Years	5 Years	10 Years	2016	2015	Since Incep.	Inception Date
Non-US Equity													
Non-US Equity Composite	3,563,050,611	16.40	8.61	8.61	14.04	12.92	0.71	2.95	1.62	3.77	-5.32	5.14	05/01/1999
<i>Non-US Equity Custom Index</i>			7.99	7.99	13.78	13.01	0.62	3.73	1.79	4.41	-5.90	5.40	
Non-US Developed Markets Composite	2,930,083,374	13.48	7.90	7.90	13.74	11.89	1.82	6.57	1.81	2.48	-0.39	4.20	05/01/1999
<i>Non-US Developed Markets Custom Index</i>			7.35	7.35	13.42	11.57	0.67	5.94	1.11	1.15	-0.53	3.63	
<i>IM Int'l Equity Developed Markets (SA+CF)</i>			8.04	8.04	13.61	12.25	2.22	7.10	3.02	1.83	1.33	6.17	
Non-US Developed Markets Active Pool	1,717,511,718	7.90	8.24	8.24	15.18	12.51	2.03	N/A	N/A	3.15	-0.98	5.11	09/01/2013
<i>Non-US Developed Markets Custom Index</i>			7.35	7.35	13.42	11.57	0.67	5.94	1.11	1.15	-0.53	4.38	
<i>IM Int'l Equity Developed Markets (SA+CF)</i>			8.04	8.04	13.61	12.25	2.22	7.10	3.02	1.83	1.33	6.00	
LSV Int'l Large Cap Value	436,502,796	2.01	7.61	7.61	20.37	17.31	0.06	N/A	N/A	7.10	-8.16	3.84	09/01/2013
<i>MSCI ACW Ex US Val Index (USD) (Net)</i>			6.68	6.68	18.77	16.68	-0.51	3.81	0.68	8.92	-10.06	3.11	
<i>IM Int'l Large Cap Value Equity (SA+CF)</i>			7.72	7.72	15.48	13.25	1.48	6.73	2.37	3.51	-1.88	5.14	
T. Rowe Price Int'l Core	440,512,243	2.03	8.17	8.17	16.33	13.77	1.93	N/A	N/A	3.41	-1.83	5.59	09/01/2013
<i>MSCI EAFE Index (USD) (Net)</i>			7.25	7.25	13.33	11.67	0.50	5.83	1.05	1.00	-0.81	4.23	
<i>IM Int'l Large Cap Core Equity (SA+CF)</i>			7.75	7.75	13.31	11.51	1.58	6.78	2.40	1.19	0.33	5.26	
Neuberger Berman Int'l	173,687,922	0.80	7.58	7.58	11.52	7.78	N/A	N/A	N/A	-0.52	N/A	3.75	12/01/2015
<i>MSCI EAFE Index (USD) (Net)</i>			7.25	7.25	13.33	11.67	0.50	5.83	1.05	1.00	-0.81	5.10	
<i>IM Int'l Large Cap Core Equity (SA+CF)</i>			7.75	7.75	13.31	11.51	1.58	6.78	2.40	1.19	0.33	5.58	
MFS Int'l Large Cap Growth	305,375,050	1.41	8.20	8.20	9.41	9.71	3.08	N/A	N/A	2.96	1.46	3.57	10/01/2013
<i>MSCI ACW Ex US Grth Index (USD) (Net)</i>			9.13	9.13	9.12	9.63	1.55	4.84	1.97	0.12	-1.25	2.74	
<i>IM Int'l Large Cap Growth Equity (SA+CF)</i>			8.60	8.60	10.86	10.37	2.11	6.47	3.39	0.05	2.12	3.66	
Templeton Int'l Small Cap Equity	361,426,523	1.66	9.40	9.40	14.65	10.25	2.46	N/A	N/A	0.06	2.31	4.14	10/01/2013
<i>MSCI ACW Ex US Sm Cap Index (USD) (Net)</i>			8.78	8.78	13.25	12.26	2.46	6.68	3.04	3.91	2.60	4.45	
<i>IM Int'l Small Cap Equity (SA+CF)</i>			8.71	8.71	13.87	11.47	4.35	10.53	5.05	1.19	10.39	6.67	
Non-US Developed Mkts Alt Wtd Index Pool	709,311,654	3.26	7.54	7.54	10.66	10.45	N/A	N/A	N/A	2.12	N/A	7.03	12/01/2015
<i>MSCI EAFE IM Index (USD) (Net)</i>			7.35	7.35	13.42	11.57	0.91	6.26	1.34	1.15	0.49	5.52	
<i>IM Enhanced and Indexed Int'l Equity (SA+CF)</i>			7.62	7.62	13.97	13.49	0.92	6.24	1.65	4.52	-1.90	8.15	
BLK MSCI EAFE IMI Enhanced Val Index	168,654,078	0.78	6.48	6.48	22.03	18.57	N/A	N/A	N/A	5.77	N/A	8.36	12/01/2015
<i>MSCI EAFE IM Enhanced Value Index</i>			6.44	6.44	22.02	18.27	1.56	6.92	1.89	5.52	1.40	8.13	
BLK MSCI EAFE IMI Sector Neutral Qual Index	169,365,276	0.78	7.56	7.56	7.88	6.84	N/A	N/A	N/A	-1.47	N/A	3.97	12/01/2015
<i>MSCI EAFE IM Sect Neutral Qual Index</i>			7.52	7.52	7.81	6.63	1.71	6.76	3.66	-1.68	3.36	3.78	
BLK MSCI EAFE IMI Momentum Index	169,818,516	0.78	8.29	8.29	6.58	8.88	N/A	N/A	N/A	-0.69	N/A	6.49	12/01/2015
<i>MSCI EAFE IM Momentum Index</i>			8.28	8.28	6.66	8.88	3.20	9.29	2.69	-0.72	6.74	6.47	
BLK FTSE Developed Ex US Min Var Index	201,358,318	0.93	7.79	7.79	7.73	8.37	N/A	N/A	N/A	4.26	N/A	8.69	12/01/2015
<i>FTSE Developed Ex US Min Var Index</i>			7.83	7.83	7.58	8.11	4.48	7.68	5.05	3.90	2.11	8.53	

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	Allocation		Performance (%)										
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Non-US Developed Markets Index Pool	503,260,003	2.32	7.29	7.29	13.32	11.72	0.72	5.89	1.49	1.11	-0.07	4.01	05/01/1999
<i>MSCI EAFE Index (USD) (Net)</i>			7.25	7.25	13.33	11.67	0.50	5.83	1.05	1.00	-0.81	3.60	
<i>IM Int'l Large Cap Core Equity (SA+CF)</i>			7.75	7.75	13.31	11.51	1.58	6.78	2.40	1.19	0.33	5.34	
Alliance Bernstein MSCI EAFE Int'l Index	503,105,621	2.32	7.27	7.27	13.31	11.71	0.50	5.84	1.20	1.07	-0.80	5.31	06/01/1998
<i>MSCI EAFE Index (USD) (Net)</i>			7.25	7.25	13.33	11.67	0.50	5.83	1.05	1.00	-0.81	3.95	
<i>IM Int'l Large Cap Core Equity (SA+CF)</i>			7.75	7.75	13.31	11.51	1.58	6.78	2.40	1.19	0.33	5.49	
Non-US Emerging Markets Composite	632,967,237	2.91	11.98	11.98	15.45	17.78	0.62	-0.98	1.15	10.50	-13.49	7.99	05/01/1999
<i>MSCI Emg Mkts Index (USD) (Net)</i>			11.44	11.44	16.44	17.21	1.18	0.81	2.72	11.19	-14.92	7.82	
<i>IM Emerging Markets Equity (SA+CF)</i>			12.22	12.22	15.72	18.42	2.55	2.86	3.85	10.02	-12.71	10.34	
Non-US Emerging Markets Active Pool	502,666,893	2.31	12.24	12.24	15.28	17.93	0.63	N/A	N/A	10.34	-11.87	0.35	10/01/2013
BlackRock Emg Mkts Opp Fund	335,151,844	1.54	12.68	12.68	18.87	21.07	4.33	N/A	N/A	13.74	-11.87	3.65	10/01/2013
<i>MSCI Emg Mkts Index (USD) (Net)</i>			11.44	11.44	16.44	17.21	1.18	0.81	2.72	11.19	-14.92	1.41	
<i>IM Emerging Markets Equity (SA+CF)</i>			12.22	12.22	15.72	18.42	2.55	2.86	3.85	10.02	-12.71	2.77	
William Blair Emg Mkts	167,515,091	0.77	11.41	11.41	8.73	12.10	N/A	N/A	N/A	4.09	N/A	8.82	12/01/2015
<i>MSCI Emg Mkts Index (USD) (Net)</i>			11.44	11.44	16.44	17.21	1.18	0.81	2.72	11.19	-14.92	15.48	
<i>IM Emerging Markets Equity (SA+CF)</i>			12.22	12.22	15.72	18.42	2.55	2.86	3.85	10.02	-12.71	15.40	
Non-US Emerging Markets Index Pool	130,300,344	0.60	11.00	11.00	16.05	17.20	1.01	-0.37	1.46	11.08	-15.14	8.17	05/01/1999
<i>MSCI Emg Mkts Index (USD) (Net)</i>			11.44	11.44	16.44	17.21	1.18	0.81	2.72	11.19	-14.92	7.82	
Alliance Bernstein Emerging Markets Index	130,300,176	0.60	11.00	11.00	16.05	17.19	0.92	N/A	N/A	11.07	-15.33	1.26	11/01/2012
<i>MSCI Emg Mkts Index (USD) (Net)</i>			11.44	11.44	16.44	17.21	1.18	0.81	2.72	11.19	-14.92	1.48	
<i>IM Emerging Markets Equity (SA+CF)</i>			12.22	12.22	15.72	18.42	2.55	2.86	3.85	10.02	-12.71	3.34	
Fixed Income													
Fixed Income Composite	4,759,870,524	21.90	1.88	1.88	3.01	5.57	3.69	4.91	3.98	5.53	-0.03	5.18	05/01/1999
<i>Fixed Income Custom Index</i>			1.11	1.11	1.27	3.80	3.18	1.98	1.46	5.32	0.45	3.31	
US Core & Core Plus Bonds Composite	2,822,700,187	12.99	1.64	1.64	0.79	3.62	3.63	4.24	4.86	5.19	0.03	5.51	05/01/1999
<i>US Core & Core Plus Bonds Custom Index</i>			0.90	0.90	-1.38	0.91	2.81	2.41	1.79	3.06	0.46	3.50	
<i>IM U.S. Broad Market Core+ FI (SA+CF)</i>			1.28	1.28	0.55	3.19	3.27	3.49	5.41	4.71	0.25	5.77	

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US Core Plus Bonds Pool	1,969,418,372	9.06	2.02	2.02	1.99	5.17	4.00	4.46	4.97	6.41	-0.36	5.57	05/01/1999
<i>Bloomberg US Unv Bond Index</i>			1.09	1.09	-0.60	1.92	2.99	2.83	4.52	3.91	0.43	5.21	
<i>IM U.S. Broad Market Core+ FI (SA+CF)</i>			1.28	1.28	0.55	3.19	3.27	3.49	5.41	4.71	0.25	5.77	
PIMCO Bloomberg US Universal	779,086,777	3.59	2.29	2.29	1.99	4.88	3.92	4.21	N/A	5.27	0.30	4.39	04/01/2011
PGIM Bloomberg US Universal	596,377,553	2.74	2.08	2.08	1.79	4.82	4.24	4.90	N/A	6.35	0.06	5.59	04/01/2011
Loomis Sayles Bloomberg US Universal	593,954,042	2.73	1.59	1.59	2.24	6.02	3.83	4.35	N/A	8.19	-1.86	5.09	04/01/2011
<i>Bloomberg US Unv Bond Index</i>			1.09	1.09	-0.60	1.92	2.99	2.83	4.52	3.91	0.43	3.61	
<i>IM U.S. Broad Market Core+ FI (SA+CF)</i>			1.28	1.28	0.55	3.19	3.27	3.49	5.41	4.71	0.25	4.23	
US Core Bonds Index Pool	853,281,815	3.93	0.79	0.79	-1.82	0.35	N/A	N/A	N/A	2.64	0.53	1.83	11/01/2014
BlackRock Core Bonds Fund	853,281,815	3.93	0.79	0.79	-1.82	0.35	N/A	N/A	N/A	2.64	0.53	1.98	11/01/2014
<i>Bloomberg US Agg Bond Index</i>			0.82	0.82	-1.73	0.44	2.68	2.34	4.27	2.65	0.55	2.00	
<i>IM U.S. Broad Market Core FI (SA+CF)</i>			0.92	0.92	-1.30	1.01	2.97	2.81	4.76	3.10	0.82	2.32	
US Short Duration Fixed Income Pool	377,082,327	1.74	0.43	0.43	0.17	N/A	N/A	N/A	N/A	N/A	N/A	0.58	05/01/2016
J.P. Morgan Asset Mgmt Short Duration	377,082,327	1.74	0.43	0.43	0.17	N/A	N/A	N/A	N/A	N/A	N/A	0.58	05/01/2016
<i>Bloomberg US Gov't/Crdt: 1-3 Yr Bond Index</i>			0.41	0.41	0.04	0.71	0.96	0.93	2.34	1.28	0.65	0.57	
<i>IM U.S. Short Duration Fixed Income (SA+CF)</i>			0.52	0.52	0.26	1.00	1.35	1.35	2.73	1.59	0.93	0.79	
Credit & Structured Finance Pool	858,166,993	3.95	2.59	2.59	9.20	11.78	4.68	8.62	2.29	6.86	0.94	2.80	04/01/2006
<i>C&SF Primary Benchmark</i>			1.95	1.95	8.53	13.27	4.19	0.24	-9.58	13.64	-2.51	N/A	
<i>C&SF Secondary Benchmark</i>			1.71	1.71	5.53	9.87	4.03	0.20	-9.60	11.10	-1.87	N/A	
Unconstrained Fixed Income Pool	701,921,016	3.23	2.79	2.79	6.39	8.29	3.20	N/A	N/A	6.48	-1.32	3.09	12/01/2013
<i>ICE 3 Month LIBOR Index+2.50%</i>			0.85	0.85	2.46	3.26	2.94	2.91	3.70	3.18	2.74	2.92	
GAM Unconstrained	325,627,017	1.50	4.42	4.42	7.57	9.35	N/A	N/A	N/A	6.93	N/A	4.92	04/01/2015
<i>ICE 3 Month LIBOR Index+2.50%</i>			0.85	0.85	2.46	3.26	2.94	2.91	3.70	3.18	2.74	3.05	
PIMCO Unconstrained	153,995,241	0.71	1.73	1.73	5.15	6.65	1.87	N/A	N/A	5.17	-2.14	1.86	12/01/2013
Loomis Sayles Unconstrained	222,287,451	1.02	1.19	1.19	5.54	8.31	3.42	N/A	N/A	7.36	-0.99	3.36	12/01/2013
<i>ICE 3 Month LIBOR Index+2.50%</i>			0.85	0.85	2.46	3.26	2.94	2.91	3.70	3.18	2.74	2.92	
Cash Equivalent Composite	199,324,254	0.92	0.23	0.23	0.47	0.53	0.25	0.40	1.42	0.39	0.12	3.68	07/01/1988
<i>BofA ML 3 Mo US T-Bill Index</i>			0.10	0.10	0.28	0.36	0.17	0.14	0.68	0.33	0.05	3.33	

Performance shown is gross of fees, except for Credit & Structured Finance, Absolute Return, Private Equity, Real Estate, and Real Return investments, which are shown net of fees. Since Inception date shown represents the first full month following initial funding. Fiscal year ends June 30. RVK endorses GIPS and calculates performance for composites and investment managers using different methodologies. For other performance-related comments, please see the Addendum. For additional information, please see the Glossary. *Indicates performance is lagged 1 quarter.

New Mexico State Investment Council
Asset Allocation & Performance - Composites & Managers

As of March 31, 2017

	Allocation		Performance (%)										
	Market Value (\$)	%	QTD	CYTD	FYTD	1 Year	3 Years	5 Years	10 Years	2016	2015	Since Incep.	Inception Date
Absolute Return													
Absolute Return Composite*	887,737,561	4.09	1.13	1.13	4.98	2.66	0.86	3.48	1.31	2.20	-1.86	2.27	09/01/2005
<i>Credit Suisse Hedge Fund Index (Lagged 1 Qtr)</i>			1.14	1.14	3.53	1.26	1.23	3.52	3.41	-0.01	-0.57	4.68	
<i>HFRI FOF Comp Index (Lagged 1 Qtr)</i>			0.86	0.86	3.75	0.51	1.00	2.74	1.00	0.38	-0.99	2.33	
Private Equity													
Private Equity Composite (Ex. State)*	1,776,424,077	8.17	4.75	4.75	10.80	11.23	7.73	10.14	8.84	7.39	5.73	4.76	06/01/2001
<i>Cambridge US Prvt Eq Index (Lagged 1 Qtr)</i>			4.74	4.74	12.99	13.25	9.97	13.00	9.94	8.66	6.05	11.19	
Real Estate													
Townsend-Reported Real Estate Composite*	1,743,602,772	8.02	1.53	1.53	6.23	7.99	11.56	11.14	2.04	10.65	13.30	4.47	10/01/2004
<i>NCREIF ODCE Index (AWA) (Net) (Lagged 1 Qtr)</i>			1.88	1.88	5.72	7.79	11.04	11.16	4.84	9.08	13.86	7.13	
<i>NCREIF/Townsend Wtd Index (Lagged 1 Qtr)</i>			2.29	2.29	6.65	8.89	12.40	12.03	4.41	10.57	14.71	7.73	
Real Return													
Real Return Composite*	2,004,069,013	9.22	3.16	3.16	9.18	14.95	2.52	N/A	N/A	9.30	-8.65	4.48	06/01/2012
<i>Real Return Custom Index</i>			0.36	0.36	0.26	4.61	-0.91	0.27	2.27	6.22	-5.41	0.48	
Financial Real Return Composite	878,584,825	4.04	3.14	3.14	9.03	20.55	2.51	N/A	N/A	13.34	-10.53	3.35	06/01/2013
<i>Real Return Custom Index</i>			0.36	0.36	0.26	4.61	-0.91	0.27	2.27	6.22	-5.41	-0.07	
<i>Voya Floating Rate Bank Loans</i>	174,835,029	0.80	0.79	0.79	5.95	8.68	3.96	N/A	N/A	9.26	0.86	4.16	06/01/2013
<i>S&P-LSTA Lvg'd Loan Index</i>			1.15	1.15	6.61	9.72	3.57	4.58	4.56	10.16	-0.69	3.72	
<i>IM U.S. Bank Loans (SA+CF)</i>			1.06	1.06	6.21	8.81	3.96	5.06	4.86	9.51	0.68	4.18	
<i>Credit Suisse Floating Rate Bank Loans</i>	146,239,463	0.67	1.24	1.24	6.22	8.49	4.03	N/A	N/A	8.60	1.54	4.16	08/01/2013
<i>CS Lvg'd Loan Index</i>			1.20	1.20	6.69	9.74	3.72	4.88	4.24	9.88	-0.38	4.01	
<i>IM U.S. Bank Loans (SA+CF)</i>			1.06	1.06	6.21	8.81	3.96	5.06	4.86	9.51	0.68	4.23	
<i>Harvest MLP</i>	430,941,938	1.98	4.21	4.21	10.48	32.71	N/A	N/A	N/A	19.55	N/A	-7.30	05/01/2015
<i>S&P MLP Index</i>			2.00	2.00	4.56	25.57	-11.04	-2.90	0.49	12.47	-39.11	-17.50	
<i>Waterfall Eden Fund, LP*</i>	126,568,394	0.58	3.39	3.39	9.86	6.96	6.31	N/A	N/A	0.82	5.07	7.91	06/01/2012
<i>BofA ML US HY Master II Index (Lagged 1 Qtr)</i>			1.88	1.88	13.80	17.49	4.72	7.35	7.34	12.82	-3.56	6.48	
Townsend-Reported Real Return*	1,061,886,692	4.89	3.30	3.30	11.00	12.49	4.40	9.69	N/A	9.92	-8.00	9.68	04/01/2011
ETI													
Economically Targeted Investments	42,069,313	0.19	0.17	0.17	-1.46	4.79	4.43	2.20	-0.19	5.01	4.48	-0.97	07/01/1998
<i>BofA ML 3 Mo US T-Bill Index</i>			0.10	0.10	0.28	0.36	0.17	0.14	0.68	0.33	0.05	2.03	
Severance Tax State PE Program*	297,226,701	1.37	-1.63	-1.63	7.83	5.67	7.04	8.78	2.07	5.70	13.02	-2.86	08/01/2001
<i>Cambridge US VC Index (Lagged 1 Qtr)</i>			-0.34	-0.34	3.63	0.26	11.22	13.64	9.27	2.20	22.21	2.96	

Performance shown is gross of fees, except for Credit & Structured Finance, Absolute Return, Private Equity, Real Estate, and Real Return investments, which are shown net of fees. Since Inception date shown represents the first full month following initial funding. Fiscal year ends June 30. RVK endorses GIPS and calculates performance for composites and investment managers using different methodologies. For other performance-related comments, please see the Addendum. For additional information, please see the Glossary. *Indicates performance is lagged 1 quarter.

Santa Fe Office Lease Extension (Action Item)

Background

In September 2015, New Mexico Retiree Health Care Authority (NMRHCA) moved its Santa Fe office location from 801 W. San Mateo to 33 Plaza La Prensa, collocated with the Public Employees Retirement Association. The lease specified a two-year agreement, scheduled to expire at the end of August, with the option to renew the agreement for three additional years. NMRHCA staff has prepared a request along with supporting documentation to the General Services Department's Facilities Management Division to extend the agreement for three additional years, pending approval by the Board of Directors. The current agreement includes a monthly lease amount of \$600 and a three percent annual escalator (\$618 in FY17) compared to \$2,700 at the previous location. The proposed agreement would extend the term of the lease through August 2020 for five offices, shared office space for copiers, fax machine, storage and shared lobby and breakroom facilities.

Recommendation

NMRHCA staff respectfully requests Board approval to extend the term of the Santa Fe Office lease agreement with PERA through August 2020 under the terms listed above.



BOARD OF DIRECTORS:
TOM SULLIVAN
 CHAIR
JOE MONTAÑO
 VICE CHAIR
DOUG CRANDALL
 SECRETARY

May 25, 2017

Christopher Lee, Acting Director
 Facilities Management Division
 PO Box 6850 (87502)
 2542 Cerrillos Road, Bldg T - 187
 Santa Fe, NM 87505

Dear Mr. Lee,

This letter seeks your approval for the New Mexico Retiree Health Care Authority Board (NMRHCA) to renew its lease agreement with the Public Employees Retirement Association (PERA). This agreement has proven exceptional value for PERA's and NMRHCA's mutual clients by serving their pension and retiree healthcare needs in one location to include enhanced cooperation and collaboration between the two agencies. In addition, this arrangement has yielded in excess of \$2,000 per month in savings since September 1, 2015, or nearly \$50,000 over the term of the initial agreement.

The renewed agreement would maintain the current spatial arrangement to include use of approximately 470 square feet, with a 3 percent annual escalator as shown below:

Period	Monthly	Annual
September 2016 - August 2017 (current)	\$618.00	\$7,416.00
September 2017 - August 2018	\$636.54	\$7,638.48
September 2018 - August 2019	\$655.64	\$7,867.68
September 2019 - August 2020	\$675.31	\$8,103.72
Renewal Cost - 3 Year		\$23,609.88

Your consideration of this request would be greatly appreciated. If you need additional information or have any questions or concerns, please contact me directly at 222-6423.

Sincerely,

David Archuleta
 Executive Director

Approved by:

_____ Date: _____

Christopher Lee, Acting Director
GSD/Facilities Management Division

Cc: Wayne Propst, Executive Director, Public Employees Retirement Association
Reneda Perry-Galon, Administrative Services Director, Public Employees Retirement Association
Eric Martinez, Building Supervisor, Public Employees Retirement Association
Josefina Roberts, Chief Financial Officer Retiree Health Care Authority

Retiree Health Care Authority Act

Sierra County Program Participation (Action Item)

Background

On April 21, 2017, New Mexico Retiree Health Care Authority (NMRHCA) received notice that the Sierra County governing body planned to discuss an ordinance related to participation in the Retiree Health Care Authority Act. The Board of Commissioners met on May 17, 2017 and voted in favor of participating in the Retiree Health Care program beginning July 1, 2017.

Per Chapter 10-7C-9 NMSA 1978, Section F – Sierra County will be required to begin making the appropriate employer and employee contributions determined by the board to the fund on the July 1, immediately following the adoption of the ordinance or resolution. On the following January 1, eligible retirees of those participating employers and their eligible dependents shall have the option to receive group health insurance coverage pursuant to the provisions of the Retiree Health Care Act.

Based upon Segal's Buy-In Analysis, the buy-in cost for Sierra County's 90 active participants and five retirees totals \$939,677. For additional information related to the calculation, please see – NMRHCA Buy-In Analysis for Sierra County. NMRHCA staff has developed a monthly principle/interest payment schedule using a 7.5% interest rate (per administrative code) amortized over a 13-year period, or \$9,447.23 per month for 156 months (see amortization table).

Recommendation

NMRHCA respectfully requests Board approval of inclusion of Sierra County as a participating employer with New Mexico Retiree Health Care Authority, effective July 1, 2017. Approval of this request will allow Sierra County employees and retirees to access benefits beginning January 1, 2018.

April 3, 2017

VIA E-MAIL AND USPS

Ms. Kristin Armijo
Human Resource Director
County of Sierra
855 Van Patten
Truth or Consequences, NM 87901

Re: NMRHCA Buy-In Analysis for Sierra County

Dear Kristin:

As requested, we have prepared the actuarial valuation that serves to establish the Buy-In obligation for Sierra County. We have summarized the results in the enclosed exhibit.

We have calculated the liability as of December 31, 2016 using the data provided to us by your office. The discount rate for the buy-in calculation was 7.75%, which is not the same as the 5.00% used for the most recent GASB 43 valuation. It is our understanding that the 7.75% rate is to be used for buy-in calculations.

We projected the starting claims costs from the GASB 43 valuation forward 0.5 years from the 12-month period ended June 30, 2017 to the calendar year ended December 31, 2017, using the trends in the June 30, 2016 valuation report.

We have assumed that all members are covered under the Public Employees Retirement Association (PERA). We used Municipal Police decrement assumptions for members with Sheriff Department code, and Municipal General Decrement assumptions for all others, except for members with a matched record in the data used for the NMRHCA valuation as of June 30, 2016 that had State General entity code; we applied State General decrement assumptions

Because it is unknown which NMRHCA plans the Sierra County employees will elect, we have used the weighted average cost for current NMRHCA retirees. We have included all 90 active employees, and assumed that 75% of eligible retirees will enroll in NMRHCA at retirement. This is the same enrollment assumption as was used in the GASB 43 valuation. For current retirees, we have assumed that all 5 will enroll in NMRHCA.

Also for current retirees, we understand from correspondence with Sierra County that all 5 have a spouse and have assumed that they will all elect spouse coverage. We assumed that wives are 3 years younger than husbands are for the spouse age. Of the future retirees, we assumed 55% of males and 30% of females would elect spouse coverage at retirement.

Unless otherwise noted above, the data, assumptions and plan provisions are the same as those used in the New Mexico Retiree Health Care Authority Actuarial Valuation and Review of Other Postemployment Benefits (OPEB) as of June 30, 2016 In accordance with GASB Statement No. 43, dated October 25, 2016.

That valuation and the actuarial calculations in the enclosed exhibit have been prepared under the supervision of Thomas Bergman, ASA, and MAAA. He is a member of the Society of Actuaries and the American Academy of Actuaries and meets the "General Qualification Standards for Statements of Actuarial Opinions" to render the actuarial opinion contained herein.

If you have any questions or comments, please contact me at 602.381.4024 or gpetersen@segalco.com.

Sincerely,



Gary L. Petersen

JAC/hy
Enclosure

Sierra County**New Mexico Retiree Health Care Authority Buy-In Study****EXHIBIT**

Actuarial Accrued Liability (AAL) and Unfunded AAL (UAAL)

December 31, 2016

A. Participant Category

Current retirees and dependents	\$365,100
Current active members	<u>574,577</u>
Total	\$939,677

Effect of Retiree Contributions

B. Actuarial accrued liability before reduction for retiree contributions	\$2,453,936
Less projected retiree contributions	<u>1,514,259</u>
Net employer actuarial accrued liability	\$939,677
Actuarial value of assets	<u>0</u>
Unfunded actuarial accrued liability	\$939,677

Summary of Participant Data

December 31, 2016

Retirees

Number of retirees enrolled in medical plan	5
Average age of retirees	58.7
Number of spouses	5
Average age of spouses	60.0

Active Participants

Number	90
Average age	43.2
Average years of service	4.5
Average expected retirement age	61.0

Shelly Trujillo
County Clerk
575-894-2840

Terri Copsin
County Treasurer
575-894-3524

Keith Whitney
County Assessor
575-894-2589

Pamela Smith
Probate Judge
575-894-2840



855 Van Patten
Truth or Consequences, New Mexico 87901

Bruce Swingle
County Manager
575-894-6215, 575-894-9548 fax

Sherry Fletcher
District 1
575-894-6215

Kenneth C. Lyon
District 2
575-894-6215

Frances L. Luna
District 3
575-894-6215

Glenn Hamilton
Sheriff
575-894-9150

April 21, 2017

David Archuleta
Interim Executive Director
Retiree Health Care Authority
4308 Carlisle Blvd, NE Suite 104
Albuquerque, NM 87107

Dear Mr. Archuleta:

The County of Sierra hereby gives notice that on the day of May 16, 2017 at 10:00 am the Sierra County governing body will conduct a meeting on the question of including Sierra County in coverage by the Retiree Health Care Act.

This notice was authorized to be provided by a formal vote of the Sierra County governing body of Sierra County held on the 11th day of April, 2017.

Sincerely,

Bruce Swingle
Sierra County Manager

State of New Mexico

*Shelly Trujillo
County Clerk
575-894-2840*

*Terri Copsin
County Treasurer
575-894-3524*

*Keith W. Whitney
County Assessor
575-894-2589*

*Pamela Smith
Probate Judge
575-894-2840*



County of Sierra

*Kenneth Lyon
Chair
575-894-6215*

*Frances Luna
Vice-Chair
575-894-6215*

*Sherry Fletcher
Commissioner
575-894-6215*

*Glenn Hamilton
County Sheriff
575-894-9150*

*855 Van Patten Street
Truth or Consequences, New Mexico 87901*

*Bruce Swingle County Manager
575-894-6215 voice 575-894-9548 fax*

**BOARD OF COUNTY COMMISSIONERS
SIERRA COUNTY, NEW MEXICO
Ordinance No. 17-011**

**AN ORDINANCE ADOPTED PURSUANT TO THE RETIREE HEALTH CARE ACT,
SECTIONS 10-7C-1 ET SEQ. NMSA 1978, EXERCISING THE IRREVOCABLE
OPTION TO DETERMINE TO BE INCLUDED IN COVERAGE UNDER THE
RETIREE HEALTH CARE ACT**

WHEREAS, the Sierra County Board of Commissioners (the "Commission"), the governing body of Sierra County, New Mexico, has considered the issue of retiree health care for its employees, retirees, their spouses and dependents; and

WHEREAS, the Commission has considered the opportunity afforded by the Retiree Health Care Act (the "Act"), Sections 10-7C-1, *et seq*, NMSA 1978, to provide basic and optional retiree health coverages. The single basic plan of benefits rate may be adjusted from time to time pursuant to the Act; and

WHEREAS, the Commission has considered that pursuant to the Act, Retiree Health Care Authority participation requires participating employer and/or employee contributions to the Retiree Health Care Authority Fund in the amount determined appropriate by the New Mexico Retiree Health Care Authority Board of Directors and which may be adjusted from time to time; and

WHEREAS, the Commission determines to irrevocably include Sierra County, New Mexico, its employees and retirees in the requirements of the employer/employee contributions and retiree benefits under the Act.

NOW, THEREFORE, BE IT ORDAINED by the Board of County Commissioners, the governing body of Sierra County, New Mexico:

SIERRA COUNTY, NM
SHELLY K TRUJILLO, COUNTY CLERK
201708937
Book 2 Page 620
1 of 2
05/17/2017 02:42:34 PM
BY LAURAH 121

Section 1. Thirty days prior to the public hearing on this Ordinance, the Retiree Health Care Authority was notified by certified mail of the public hearing on this Ordinance.

Section 2. Pursuant to the terms of Act, Sierra County, New Mexico determines to be included in coverage under the Retiree Health Care Act.

Section 3. Passed, adopted and approved this 17th day of May, 2017.

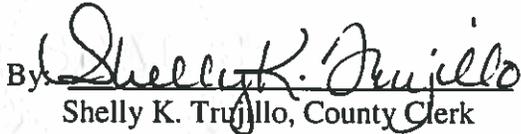
**BORAD OF COMMIONERS OF
THE COUNTY OF SIERRA, NEW MEXICO**


Kenneth Lyon, Chairman


Frances Luna, Vice-Chairman


Sherry Fletcher, Member

Attest:

By 
Shelly K. Trujillo, County Clerk

On this 17th day of May before me appeared Kenneth Lyon known to me as a duly-authorized representative of Sierra County, New Mexico and having been first sworn on his oath deposed and stated that the hereinbefore recited Ordinance was adopted by a vote of 3 in favor and 0 opposed and that the governing body of Sierra County, New Mexico consists of three members including a chairperson and that a sufficient number of them voted in favor of passage of the Ordinance that it is in effect.


Notary Public
My Commission Expires: 03/13/2021

SIERRA COUNTY, NM
SHELLY K TRUJILLO, COUNTY CLERK
201700937
Book 2 Page 621
2 of 2
05/17/2017 02:42:34 PM
BY LAURAH

Loan Amortization Schedule

Inputs

Loan Amount	\$ 939,677
Annual Interest Rate	7.50%
Term of Loan in Years	13
First Payment Date	7/1/2017
Frequency of Payment	Monthly

Summary

Rate (per period)	0.625%
Payment (per period)	\$9,447.23
Total Payments	\$1,473,769.03
Total Interest	\$534,092.03
Interest Savings	(\$0.43)
	#REF!

This spreadsheet creates a payment schedule for a fixed-rate loan, with optional extra payments. The payment frequency can be annual, semi-annual, quarterly, bi-monthly, monthly, semi-monthly, bi-weekly, or weekly. Values are rounded to the nearest cent. The last payment is adjusted to bring the balance to zero.

Note: The spreadsheet is only valid up to 780 payments.

Note: You must have the Analysis ToolPak (Tools > Add-ins...) installed to use the CUMIPMT formula.

No.	Due Date	Payment Due	Additional Payment	Interest	Principal	Balance
						\$939,677.00
1	7/1/2017	9,447.23	0.00	5,872.98	3,574.25	936,102.75
2	8/1/2017	9,447.23	0.00	5,850.64	3,596.59	932,506.16
3	9/1/2017	9,447.23	0.00	5,828.16	3,619.07	928,887.09
4	10/1/2017	9,447.23	0.00	5,805.54	3,641.69	925,245.40
5	11/1/2017	9,447.23	0.00	5,782.78	3,664.45	921,580.95
6	12/1/2017	9,447.23	0.00	5,759.88	3,687.35	917,893.60
7	1/1/2018	9,447.23	0.00	5,736.84	3,710.39	914,183.21
8	2/1/2018	9,447.23	0.00	5,713.65	3,733.58	910,449.63
9	3/1/2018	9,447.23	0.00	5,690.31	3,756.92	906,692.71
10	4/1/2018	9,447.23	0.00	5,666.83	3,780.40	902,912.31
11	5/1/2018	9,447.23	0.00	5,643.20	3,804.03	899,108.28
12	6/1/2018	9,447.23	0.00	5,619.43	3,827.80	895,280.48
13	7/1/2018	9,447.23	0.00	5,595.50	3,851.73	891,428.75
14	8/1/2018	9,447.23	0.00	5,571.43	3,875.80	887,552.95
15	9/1/2018	9,447.23	0.00	5,547.21	3,900.02	883,652.93

16	10/1/2018	9,447.23	0.00	5,522.83	3,924.40	879,728.53
17	11/1/2018	9,447.23	0.00	5,498.30	3,948.93	875,779.60
18	12/1/2018	9,447.23	0.00	5,473.62	3,973.61	871,805.99
19	1/1/2019	9,447.23	0.00	5,448.79	3,998.44	867,807.55
20	2/1/2019	9,447.23	0.00	5,423.80	4,023.43	863,784.12
21	3/1/2019	9,447.23	0.00	5,398.65	4,048.58	859,735.54
22	4/1/2019	9,447.23	0.00	5,373.35	4,073.88	855,661.66
23	5/1/2019	9,447.23	0.00	5,347.89	4,099.34	851,562.32
24	6/1/2019	9,447.23	0.00	5,322.26	4,124.97	847,437.35
25	7/1/2019	9,447.23	0.00	5,296.48	4,150.75	843,286.60
26	8/1/2019	9,447.23	0.00	5,270.54	4,176.69	839,109.91
27	9/1/2019	9,447.23	0.00	5,244.44	4,202.79	834,907.12
28	10/1/2019	9,447.23	0.00	5,218.17	4,229.06	830,678.06
29	11/1/2019	9,447.23	0.00	5,191.74	4,255.49	826,422.57
30	12/1/2019	9,447.23	0.00	5,165.14	4,282.09	822,140.48
31	1/1/2020	9,447.23	0.00	5,138.38	4,308.85	817,831.63
32	2/1/2020	9,447.23	0.00	5,111.45	4,335.78	813,495.85
33	3/1/2020	9,447.23	0.00	5,084.35	4,362.88	809,132.97
34	4/1/2020	9,447.23	0.00	5,057.08	4,390.15	804,742.82
35	5/1/2020	9,447.23	0.00	5,029.64	4,417.59	800,325.23
36	6/1/2020	9,447.23	0.00	5,002.03	4,445.20	795,880.03
37	7/1/2020	9,447.23	0.00	4,974.25	4,472.98	791,407.05
38	8/1/2020	9,447.23	0.00	4,946.29	4,500.94	786,906.11
39	9/1/2020	9,447.23	0.00	4,918.16	4,529.07	782,377.04
40	10/1/2020	9,447.23	0.00	4,889.86	4,557.37	777,819.67
41	11/1/2020	9,447.23	0.00	4,861.37	4,585.86	773,233.81
42	12/1/2020	9,447.23	0.00	4,832.71	4,614.52	768,619.29
43	1/1/2021	9,447.23	0.00	4,803.87	4,643.36	763,975.93
44	2/1/2021	9,447.23	0.00	4,774.85	4,672.38	759,303.55
45	3/1/2021	9,447.23	0.00	4,745.65	4,701.58	754,601.97
46	4/1/2021	9,447.23	0.00	4,716.26	4,730.97	749,871.00
47	5/1/2021	9,447.23	0.00	4,686.69	4,760.54	745,110.46
48	6/1/2021	9,447.23	0.00	4,656.94	4,790.29	740,320.17
49	7/1/2021	9,447.23	0.00	4,627.00	4,820.23	735,499.94
50	8/1/2021	9,447.23	0.00	4,596.87	4,850.36	730,649.58
51	9/1/2021	9,447.23	0.00	4,566.56	4,880.67	725,768.91
52	10/1/2021	9,447.23	0.00	4,536.06	4,911.17	720,857.74
53	11/1/2021	9,447.23	0.00	4,505.36	4,941.87	715,915.87
54	12/1/2021	9,447.23	0.00	4,474.47	4,972.76	710,943.11
55	1/1/2022	9,447.23	0.00	4,443.39	5,003.84	705,939.27

56	2/1/2022	9,447.23	0.00	4,412.12	5,035.11	700,904.16
57	3/1/2022	9,447.23	0.00	4,380.65	5,066.58	695,837.58
58	4/1/2022	9,447.23	0.00	4,348.98	5,098.25	690,739.33
59	5/1/2022	9,447.23	0.00	4,317.12	5,130.11	685,609.22
60	6/1/2022	9,447.23	0.00	4,285.06	5,162.17	680,447.05
61	7/1/2022	9,447.23	0.00	4,252.79	5,194.44	675,252.61
62	8/1/2022	9,447.23	0.00	4,220.33	5,226.90	670,025.71
63	9/1/2022	9,447.23	0.00	4,187.66	5,259.57	664,766.14
64	10/1/2022	9,447.23	0.00	4,154.79	5,292.44	659,473.70
65	11/1/2022	9,447.23	0.00	4,121.71	5,325.52	654,148.18
66	12/1/2022	9,447.23	0.00	4,088.43	5,358.80	648,789.38
67	1/1/2023	9,447.23	0.00	4,054.93	5,392.30	643,397.08
68	2/1/2023	9,447.23	0.00	4,021.23	5,426.00	637,971.08
69	3/1/2023	9,447.23	0.00	3,987.32	5,459.91	632,511.17
70	4/1/2023	9,447.23	0.00	3,953.19	5,494.04	627,017.13
71	5/1/2023	9,447.23	0.00	3,918.86	5,528.37	621,488.76
72	6/1/2023	9,447.23	0.00	3,884.30	5,562.93	615,925.83
73	7/1/2023	9,447.23	0.00	3,849.54	5,597.69	610,328.14
74	8/1/2023	9,447.23	0.00	3,814.55	5,632.68	604,695.46
75	9/1/2023	9,447.23	0.00	3,779.35	5,667.88	599,027.58
76	10/1/2023	9,447.23	0.00	3,743.92	5,703.31	593,324.27
77	11/1/2023	9,447.23	0.00	3,708.28	5,738.95	587,585.32
78	12/1/2023	9,447.23	0.00	3,672.41	5,774.82	581,810.50
79	1/1/2024	9,447.23	0.00	3,636.32	5,810.91	575,999.59
80	2/1/2024	9,447.23	0.00	3,600.00	5,847.23	570,152.36
81	3/1/2024	9,447.23	0.00	3,563.45	5,883.78	564,268.58
82	4/1/2024	9,447.23	0.00	3,526.68	5,920.55	558,348.03
83	5/1/2024	9,447.23	0.00	3,489.68	5,957.55	552,390.48
84	6/1/2024	9,447.23	0.00	3,452.44	5,994.79	546,395.69
85	7/1/2024	9,447.23	0.00	3,414.97	6,032.26	540,363.43
86	8/1/2024	9,447.23	0.00	3,377.27	6,069.96	534,293.47
87	9/1/2024	9,447.23	0.00	3,339.33	6,107.90	528,185.57
88	10/1/2024	9,447.23	0.00	3,301.16	6,146.07	522,039.50
89	11/1/2024	9,447.23	0.00	3,262.75	6,184.48	515,855.02
90	12/1/2024	9,447.23	0.00	3,224.09	6,223.14	509,631.88
91	1/1/2025	9,447.23	0.00	3,185.20	6,262.03	503,369.85
92	2/1/2025	9,447.23	0.00	3,146.06	6,301.17	497,068.68
93	3/1/2025	9,447.23	0.00	3,106.68	6,340.55	490,728.13
94	4/1/2025	9,447.23	0.00	3,067.05	6,380.18	484,347.95
95	5/1/2025	9,447.23	0.00	3,027.17	6,420.06	477,927.89

96	6/1/2025	9,447.23	0.00	2,987.05	6,460.18	471,467.71
97	7/1/2025	9,447.23	0.00	2,946.67	6,500.56	464,967.15
98	8/1/2025	9,447.23	0.00	2,906.04	6,541.19	458,425.96
99	9/1/2025	9,447.23	0.00	2,865.16	6,582.07	451,843.89
100	10/1/2025	9,447.23	0.00	2,824.02	6,623.21	445,220.68
101	11/1/2025	9,447.23	0.00	2,782.63	6,664.60	438,556.08
102	12/1/2025	9,447.23	0.00	2,740.98	6,706.25	431,849.83
103	1/1/2026	9,447.23	0.00	2,699.06	6,748.17	425,101.66
104	2/1/2026	9,447.23	0.00	2,656.89	6,790.34	418,311.32
105	3/1/2026	9,447.23	0.00	2,614.45	6,832.78	411,478.54
106	4/1/2026	9,447.23	0.00	2,571.74	6,875.49	404,603.05
107	5/1/2026	9,447.23	0.00	2,528.77	6,918.46	397,684.59
108	6/1/2026	9,447.23	0.00	2,485.53	6,961.70	390,722.89
109	7/1/2026	9,447.23	0.00	2,442.02	7,005.21	383,717.68
110	8/1/2026	9,447.23	0.00	2,398.24	7,048.99	376,668.69
111	9/1/2026	9,447.23	0.00	2,354.18	7,093.05	369,575.64
112	10/1/2026	9,447.23	0.00	2,309.85	7,137.38	362,438.26
113	11/1/2026	9,447.23	0.00	2,265.24	7,181.99	355,256.27
114	12/1/2026	9,447.23	0.00	2,220.35	7,226.88	348,029.39
115	1/1/2027	9,447.23	0.00	2,175.18	7,272.05	340,757.34
116	2/1/2027	9,447.23	0.00	2,129.73	7,317.50	333,439.84
117	3/1/2027	9,447.23	0.00	2,084.00	7,363.23	326,076.61
118	4/1/2027	9,447.23	0.00	2,037.98	7,409.25	318,667.36
119	5/1/2027	9,447.23	0.00	1,991.67	7,455.56	311,211.80
120	6/1/2027	9,447.23	0.00	1,945.07	7,502.16	303,709.64
121	7/1/2027	9,447.23	0.00	1,898.19	7,549.04	296,160.60
122	8/1/2027	9,447.23	0.00	1,851.00	7,596.23	288,564.37
123	9/1/2027	9,447.23	0.00	1,803.53	7,643.70	280,920.67
124	10/1/2027	9,447.23	0.00	1,755.75	7,691.48	273,229.19
125	11/1/2027	9,447.23	0.00	1,707.68	7,739.55	265,489.64
126	12/1/2027	9,447.23	0.00	1,659.31	7,787.92	257,701.72
127	1/1/2028	9,447.23	0.00	1,610.64	7,836.59	249,865.13
128	2/1/2028	9,447.23	0.00	1,561.66	7,885.57	241,979.56
129	3/1/2028	9,447.23	0.00	1,512.37	7,934.86	234,044.70
130	4/1/2028	9,447.23	0.00	1,462.78	7,984.45	226,060.25
131	5/1/2028	9,447.23	0.00	1,412.88	8,034.35	218,025.90
132	6/1/2028	9,447.23	0.00	1,362.66	8,084.57	209,941.33
133	7/1/2028	9,447.23	0.00	1,312.13	8,135.10	201,806.23
134	8/1/2028	9,447.23	0.00	1,261.29	8,185.94	193,620.29
135	9/1/2028	9,447.23	0.00	1,210.13	8,237.10	185,383.19

136	10/1/2028	9,447.23	0.00	1,158.64	8,288.59	177,094.60
137	11/1/2028	9,447.23	0.00	1,106.84	8,340.39	168,754.21
138	12/1/2028	9,447.23	0.00	1,054.71	8,392.52	160,361.69
139	1/1/2029	9,447.23	0.00	1,002.26	8,444.97	151,916.72
140	2/1/2029	9,447.23	0.00	949.48	8,497.75	143,418.97
141	3/1/2029	9,447.23	0.00	896.37	8,550.86	134,868.11
142	4/1/2029	9,447.23	0.00	842.93	8,604.30	126,263.81
143	5/1/2029	9,447.23	0.00	789.15	8,658.08	117,605.73
144	6/1/2029	9,447.23	0.00	735.04	8,712.19	108,893.54
145	7/1/2029	9,447.23	0.00	680.58	8,766.65	100,126.89
146	8/1/2029	9,447.23	0.00	625.79	8,821.44	91,305.45
147	9/1/2029	9,447.23	0.00	570.66	8,876.57	82,428.88
148	10/1/2029	9,447.23	0.00	515.18	8,932.05	73,496.83
149	11/1/2029	9,447.23	0.00	459.36	8,987.87	64,508.96
150	12/1/2029	9,447.23	0.00	403.18	9,044.05	55,464.91
151	1/1/2030	9,447.23	0.00	346.66	9,100.57	46,364.34
152	2/1/2030	9,447.23	0.00	289.78	9,157.45	37,206.89
153	3/1/2030	9,447.23	0.00	232.54	9,214.69	27,992.20
154	4/1/2030	9,447.23	0.00	174.95	9,272.28	18,719.92
155	5/1/2030	9,447.23	0.00	117.00	9,330.23	9,389.69
156	6/1/2030	9,448.38	0.00	58.69	9,389.69	0.00

Review of Board Actions 2015 - 2017

Background: The items listed below provide detailed information regarding specific actions taken by the Board of Directors, since 2014 (effective January 1, 2015) to improve the solvency of the program, reduce its unfunded liabilities and accommodate changing market conditions:

Effective January 1, 2015:

1. Increased pre-Medicare rates by 8 percent and Medicare rates by 5 percent
2. Decreased pre-Medicare spousal subsidy by 2 percent (from 40 percent to 38)
3. Instituted minimum age of 55 in order to receive subsidies (except: PERA enhanced plans) after January 1, 2020
4. Increased years of service requirement for maximum subsidy from 20 to 25 (except: PERA enhanced plans) after January 1, 2020
5. Addition to 5-year Strategic Plan: conversion of basic life insurance to supplemental life

Effective January 1, 2016:

1. Increased pre-Medicare rates by 8 percent and Medicare rates by 6 percent
2. Decreased pre-Medicare spousal subsidy by 2 percent (from 38 percent to 36)
3. Decreased pre-Medicare retiree subsidy by 1 percent (from 65 percent to 64)
4. Reduced multiple dependent subsidy by 12.5 percent (from 25 percent to 12.5)
5. Implemented timeline for phasing out subsidy of \$6,000 basic life policy beginning in 2018
6. Implemented enhanced wellness program with financial incentives

Effective January 1, 2017:

Pre-Medicare

1. Eliminated Premier Plus Plan
 - a. Near Platinum Level Plan
 - b. \$300 Deductible
 - c. \$3,000 Annual Out-of-Pocket Maximum
2. Migrated Premier Plus Participants into Premier Plan
 - a. Premier Plus Plan Membership – 4,400
 - b. Premier Plan Membership – 13,000
3. Created Value Plan
 - a. Silver Level Plan
 - b. \$1,500 Deductible
 - c. \$5,500 Out-of-pocket Maximum (includes deductible and medical copayments)
 - d. Narrow networks compared to Premier Plan
 - e. Same 1st dollar coverage as Premier Plan
 - f. Same Rx Benefit as Premier Plan
4. Adjusted rates commensurate with New Risk Pools

	2016	2017
a. Premier Plus – Retiree	\$326	NA
Premier Plus – Spouse	\$516	NA
Premier PPO – Retiree	\$175	\$225

Premier PPO – Spouse	\$331	\$400
Value HMO – Retiree	NA	\$175
Value HMO – Spouse	NA	\$331

Premier PPO: Presbyterian – NM Residents Only
 BCBS – Nationwide including NM
 Value HMO: Presbyterian – NM Residents Only
 NM Health Connections – NM Residents Only

5. Plan Enhancements

- a. Increased annual out-of-pocket maximum of Premier Plan by \$500 to \$4,500 to include \$800 deductible as well as medical copayments to maximum calculation creating net positive for high-cost members
- b. Implemented first dollar coverage (waive deductible and coinsurance) on all plans for advanced radiology services (CT, MRI and PET scans) received at free-standing imaging centers with \$100 copayment and \$125 for the Value Plan
- c. Implemented first dollar coverage (waive deductible and coinsurance) on all plans for physical therapy services as an alternative to surgery with same copayment as PCP visit with a maximum of 4 copayments per course of treatment

Medicare

- 1. Commitment to increase member awareness of Medicare Advantage offering through newsletters, website and seminars/workshops throughout 2017
- 2. All members will maintain the ability to select any eligible Medicare Plan
- 3. Members who do not make an active choice will be defaulted into the most appropriate Medicare Advantage offering when they turn 65 beginning January 2018
- 4. Increased Medicare Supplement rate by 6 percent

All Self-Insured Prescriptions Plans

- 1. Eliminated coverage for drugs available over the counter (OTC)
 - a. Primarily antihistamines (i.e. Clarinex), inhalable nasal steroids (i.e. Nasonex) and proton pump inhibitors (i.e. Nexium)

All

- 1. Eliminated Multiple Dependent Subsidy (12.5 percent in 2016)
- 2. Implemented Open Enrollment Period
 - a. Except for IRS Section 125 qualifying events enrollment into NMRHCA programs is not allowed outside of open enrollment period every other year

2018 Plan Recommendations

Goal: 15 year solvency period / 2032 (2 year gain)

Pre-Medicare/Medicare

- 1. Increase retiree premiums in accordance with projected medical trend for all self-insured plans based upon loss ratios calculated in May/June.

Preliminary estimates indicate the increase Pre-Medicare rates 8 percent and Medicare Supplement rates 6 percent – estimated impact shown below:

6/1/2017 Membership				
Plan	Retirees	Spouse/DP	Child	Total
Premier	9,326	2,924	17,321	29,571
Value	1,365	628	368	2,361
Supplement	17,651	5,681	21	23,353
Retiree Rates				
Plan	2017	2018	Monthly Difference	Annual Difference
Premier	\$ 223.56	\$ 241.44	\$ 17.88	\$ 214.62
Value	\$ 174.63	\$ 188.60	\$ 13.97	\$ 167.64
Supplement	\$ 188.64	\$ 199.96	\$ 11.32	\$ 135.82
Spouse Rates				
Plan	2017	2018	Monthly Difference	Annual Difference
Premier	\$ 424.32	\$ 458.27	\$ 33.95	\$ 407.35
Value	\$ 331.43	\$ 357.94	\$ 26.51	\$ 318.17
Supplement	\$ 282.96	\$ 299.94	\$ 16.98	\$ 203.73
Dependent Rates				
Plan	2017	2018	Monthly Difference	Annual Difference
Premier	\$ 217.00	\$ 234.36	\$ 17.36	\$ 208.32
Value	\$ 169.21	\$ 182.75	\$ 13.54	\$ 162.44
Supplement	\$ 377.28	\$ 399.92	\$ 22.64	\$ 271.64
Retiree Rates/Spouse				
Plan	2017	2018	Monthly Difference	Annual Difference
Premier	\$ 647.88	\$ 699.71	\$ 51.83	\$ 621.96
Value	\$ 506.06	\$ 546.54	\$ 40.48	\$ 485.82
Supplement	\$ 471.60	\$ 499.90	\$ 28.30	\$ 339.55

2. Expand Value Option Resources to include BlueAdvantage (BAV) Network

- HMO Network w/9,511 contracted providers or approximately 53% of PPO Network (includes UNMH)
- Statewide narrow network
- Must stay within network except for emergency services
- Does not currently include Memorial Hospital in Las Cruces

Assumes additional 2,000 members will migrate to Value Option

3. Increase Cost Sharing/Narrow Network on Prescription Plan (Pre-Medicare/Supplement)

- Voluntary Smart90 – Long-term medications
 - 3 month supply for less than cost of three 1-month supplies
 - ESI pharmacy or preferred retail pharmacy
 - Members who continue using 1-month supplies will receive communication regarding benefits of 3-month supply option

Commercial Estimated Savings - \$385,000

EGWP Estimated Savings – Not Final until August – Program will mirror Commercial Plan

• ~~Increase copays/cost sharing~~

- ~~Modeling includes savings estimates for pre-Medicare and Medicare participants~~
- ~~\$500,000, \$1 million and \$2 million savings scenario~~

Copay changes will be recommended for CY19.

Medicare

4. Default folks to the appropriate Medicare Advantage Plan (based on last year's board adoption)
 - Default criteria includes: network, prescription benefits, cost-sharing arrangements and annual out-of-pocket maximums: [Presbyterian Plan I](#), [UnitedHealthcare Plan I](#), and [Humana Plan I](#)
5. Supplement – introduce \$250 copay for inpatient stay (1 per year)
 - 2016 – 189 admits per 1,000 people/4,385 x \$250 = \$1,096,250
6. Supplement – increase annual Part B cost sharing by \$50
 - 2016 – 21,047 x \$50 = \$1,052,350 savings

Other components of solvency report:

- Investment Returns
 - Projected EOY Balance: \$509,835,356
 - End of April Balance: \$544,035,579
 - Market Check Agreement through Express Scripts
 - Pre-Medicare - \$2.8 million projected savings
 - Medicare - \$7.1 million projected savings

Projected Savings/Revenues

1. Increased retiree premiums to accommodate loss ratios: estimated [\\$7,500,000](#)
2. Expansion of Value Option Resources: [\\$1,600,000](#)
3. Voluntary Smart 90: Pre-Medicare - [\\$385,000](#) / Medicare Supplement - TBD
4. Default to MA plans: 1,000 members - [\\$1,000,000](#)
5. Medicare Supplement Copay Increase: [\\$1,096,250](#)
6. Medicare Supplement – Part B increased cost sharing: [\\$1,052,350](#)

No action necessary

1. Market Check Agreement - Pre-Medicare/Medicare combined: [\\$9.9 million](#)

[2018 Projected Savings - \\$15,000,000 \(items 2 – 6\) + Market Check Agreement](#)

[2018 Projected Retiree Contribution Increase - \\$7.5 million](#)

Plan Comparison - NM Retiree Health Care Authority, NM Public School Insurance Authority, and State of New Mexico

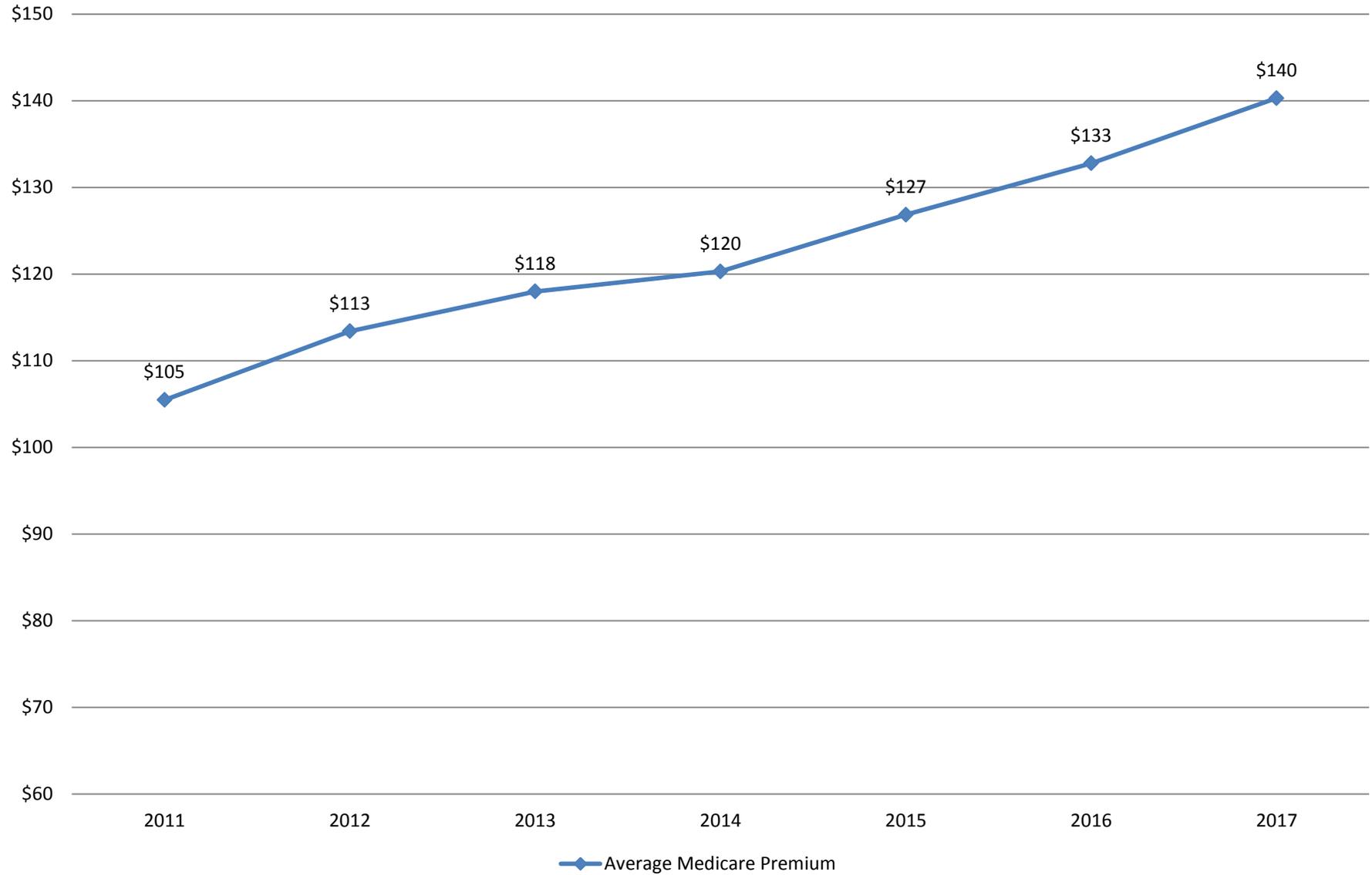
Plan Premiums for individual member per month with employer subsidy of 64%	SONM HMO - \$177.13	SONM PPO - \$206.00	Premier - \$241.44	NMPSIA High Option - \$236.13, \$190.96	NMPSIA HMO - \$212.52	NMPSIA Low Option - \$192.16, \$155.42	Value Plan - \$188.60
Annual Deductible	\$350/Individual	\$500/Individual	Premier: \$800/Individual	\$750/Individual	\$500/Individual	\$2,000/Individual	Option 1: \$1,500/Individual
Annual Out-of-Pocket Limit	\$3,500/Individual	\$3,500/Individual	Premier: \$4,500/Individual	\$3,750/Individual	\$3,250/Individual	\$3,750/Individual	Option 1: \$5,500/Individual
Office Services	Primary -\$25 Specialist - \$45	Primary -\$30 Specialist - \$55	Primary -\$30 Specialist - \$45	Primary -\$30 Specialist - \$50	Primary -\$25 Specialist - \$35	Primary -\$35 Specialist - \$60	Primary -\$35 Specialist - \$55
Preventive Services	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%
Related testing (includes routine Pap test, mammograms, colonoscopy, physicals, etc.) & immunization (deductible waived)	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%
Lab, X-Ray, and Pathology	20%	20%	Plan pays 100%	\$30 freestanding lab/ radiology or actual allowed or \$60 hospital outpatient or actual allowed, which ever is less	\$25 freestanding lab/ radiology or actual allowed or \$50 hospital outpatient or actual allowed, which ever is less	\$35 freestanding lab/ radiology or actual allowed or \$70 hospital outpatient or actual allowed, which ever is less	Plan pays 100%
Emergency Room	\$225	\$225	\$125	\$150 copay plus 20%	\$150 copay plus 20%	\$150 copay plus 25%	\$175
Urgent Care Facility	\$50	\$50	\$35	\$50	\$45	\$60	\$40
Ambulance Services	\$30 Ground/\$100 Air	20%	25%	\$30	\$25	25%	30%
High-Tech Radiology (MRI, PET & CT)	20% to max \$200 per test	20% to max \$200 per test	25% or \$100 freestanding radiology	\$600 copay or 20% per day which ever is less	\$500 copay or 20% per day which ever is less	\$700 copay or 25% per day which ever is less	30% or \$125 freestanding radiology
Rehabilitation Inpatient or Outpatient	\$500 Inpatient/\$45 Outpatient	\$1,000 Inpatient/ \$55 Outpatient	25%	\$500 copay plus 20% Inpatient/\$50 Outpatient	\$500 copay plus 20% Inpatient/\$35 Outpatient	25%	30%
Alternative (chiropractic, acupuncture, etc.)	\$45	\$55	25%	\$50	\$35	25%	30%
Hospitalization - Inpatient	\$500	\$1,000	25%	\$500 facility copay plus 20%	\$500 facility copay plus 20%	25%	30%
Surgery - Outpatient	20%	20%	25%	\$150 copay plus 20%	\$150 copay plus 20%	25%	30%
Majority of Other Covered Services	Vary	Vary	25%	Vary	Vary	25%	30%

Prescription Drug Plan

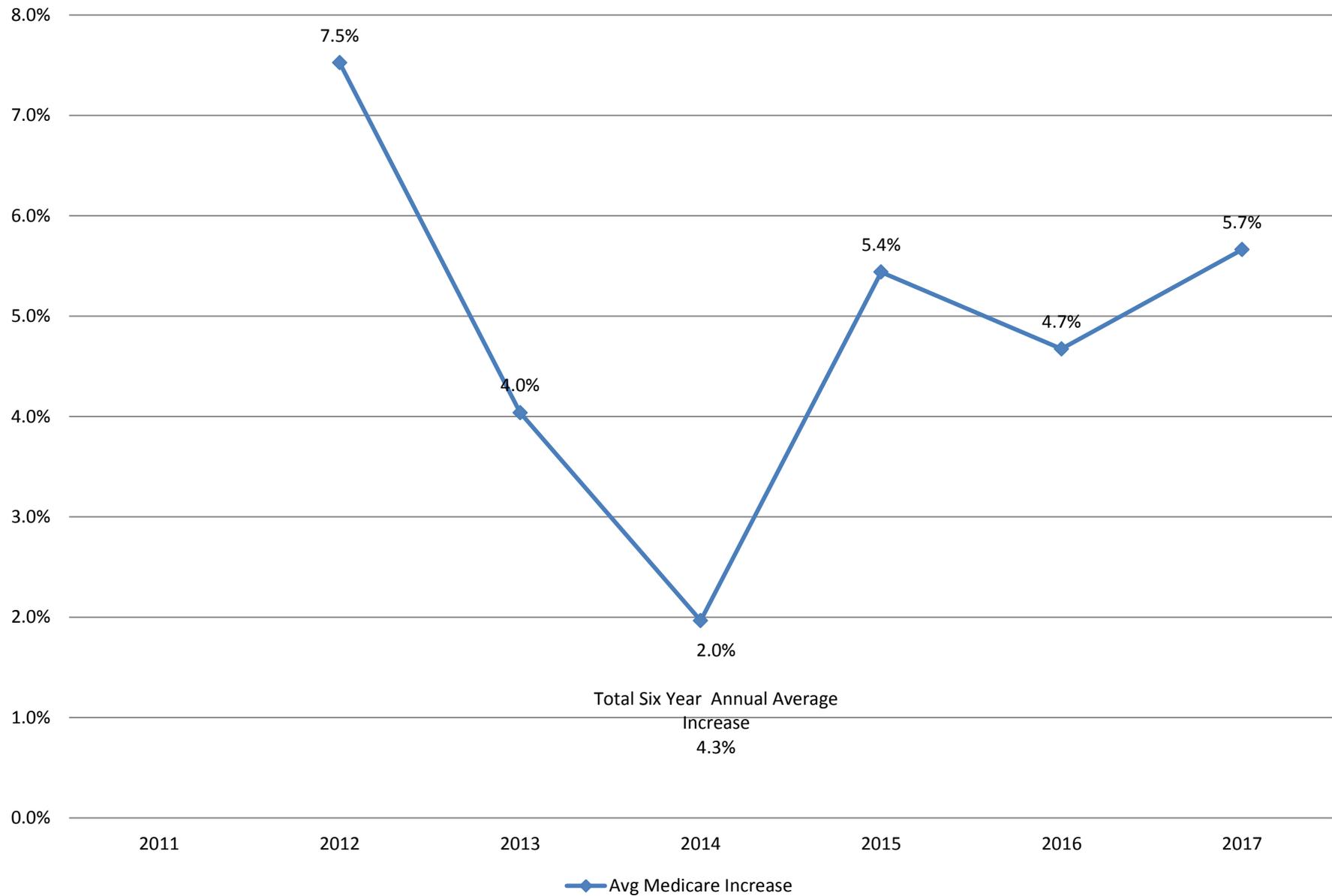
<i>Copay (Retail)</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>
Generic	\$6	\$6	\$6	\$6	\$5	\$15	\$10	\$10	\$10	\$10	\$10	\$10	\$5	\$15
Brand	\$35	\$95	\$35	\$95	\$20	\$50	\$30	\$60	\$30	\$60	\$30	\$60	\$20	\$50
Brand Non-Formulary	\$60	\$130	\$60	\$130	\$40	\$100	70%	70%	70%	70%	70%	70%	\$40	\$100
Specialty	\$60, \$85, \$125		\$60, \$85, \$125				\$75		\$75		\$75			
30 day supply	**\$50 deductible non generic, retail or mail order		**\$50 deductible non generic, retail or mail order											
<i>Copay (Mail Order)</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>	<i>Minimum</i>	<i>Maximum</i>
Generic	\$17	\$17	\$17	\$17	\$12	\$35	\$22	\$22	\$22	\$22	\$22	\$22	\$12	\$35
Preferred Brand	\$120	\$120	\$120	\$120	\$50	\$100	\$60	\$60	\$60	\$60	\$60	\$60	\$50	\$100
Non-Formulary	\$155	\$155	\$155	\$155	\$100	\$150	70%	70%	70%	70%	70%	70%	\$100	\$150
Specialty	\$60, \$85, \$125 based on tier		\$60, \$85, \$125 based on tier				\$75 until reach \$750 then \$55, \$80, \$130 based on tier		\$75 until reach \$750 then \$55, \$80, \$130 based on tier		\$75 until reach \$750 then \$55, \$80, \$130 based on tier			

90 day supply

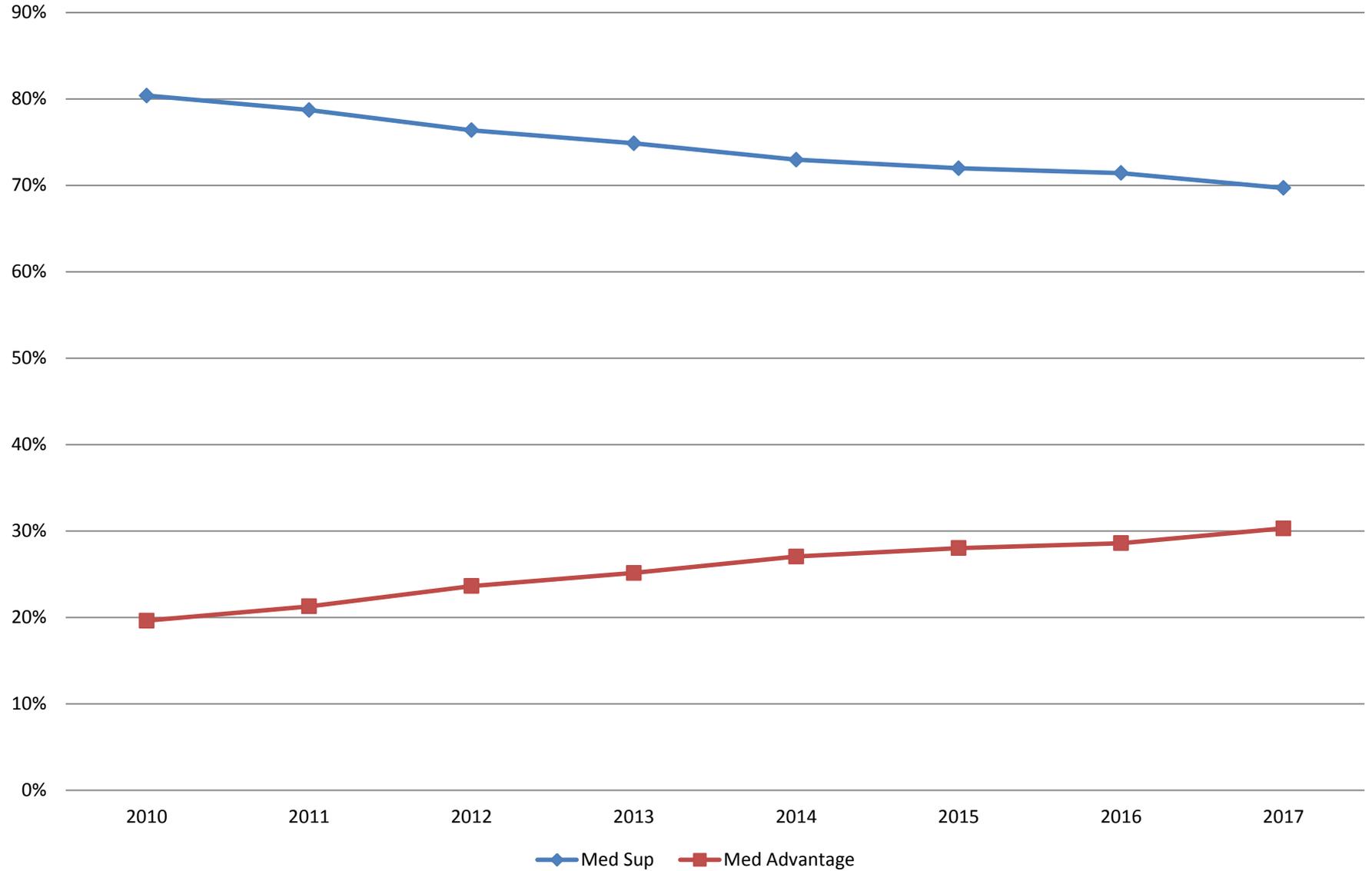
Average Medicare Premium 2010 - 2017



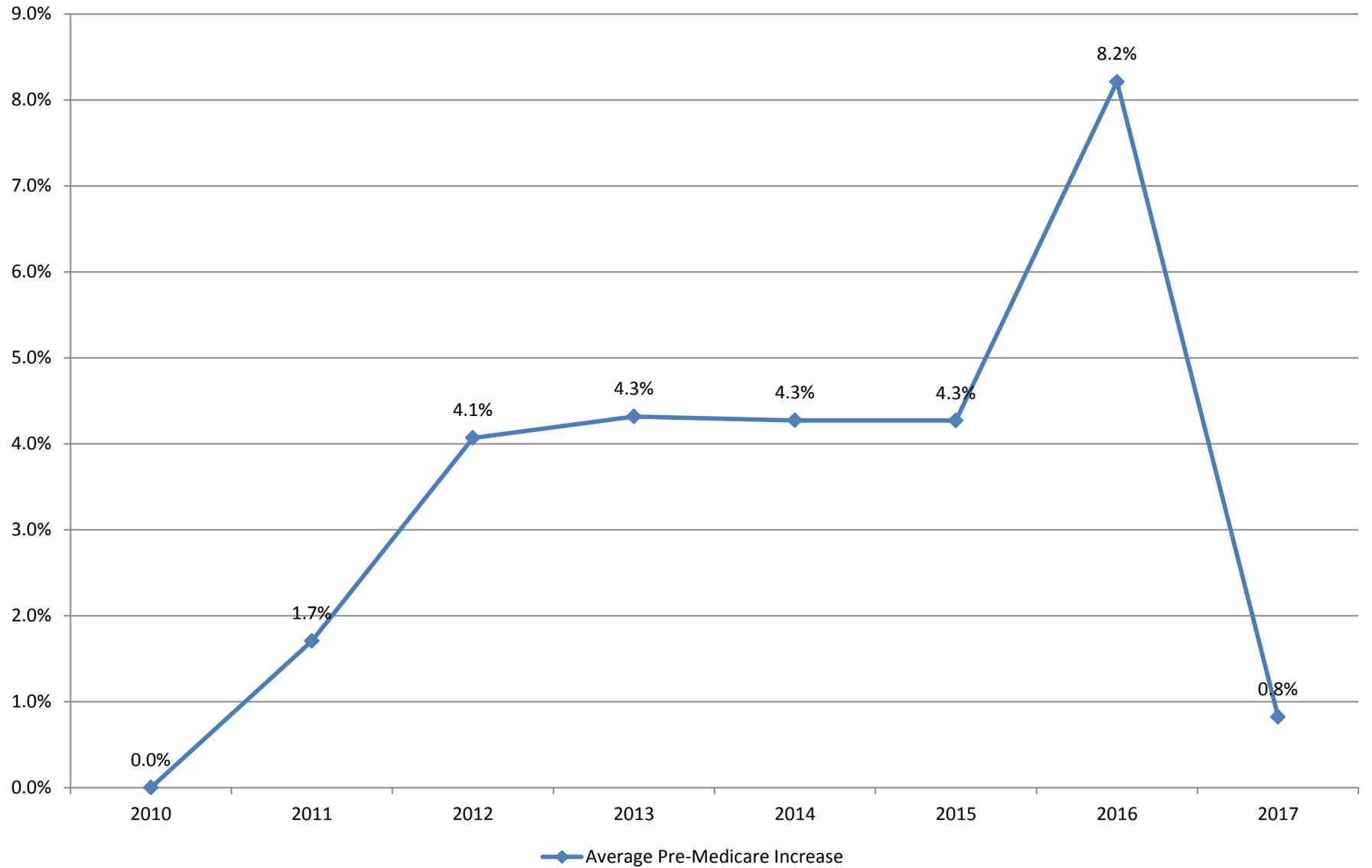
Avg Medicare Increase



Medicare Member Migration 2010 - 2017



Average Pre-Medicare Premium Increase 2010 - 2017



Annual Meeting of the
NEW MEXICO RETIREE HEALTH CARE AUTHORITY
BOARD OF DIRECTORS

July 13 & 14, 2017
9:30 AM / 9:00 AM
Angel Fire Lodge
Rooms A & B – 2nd Floor
10 Miller Lane
Angle Fire, NM 87710

AGENDA – July 13th

- | | |
|--------------------------------------------------------|-----------------------------------|
| 1. Call to Order | Mr. Sullivan, President |
| 2. Roll Call to Ascertain Quorum | Ms. Beatty, Recorder |
| 3. Pledge of Allegiance | Mr. Sullivan, President |
| 4. Approval of Agenda | Mr. Sullivan, President |
| 5. Approval of Regular Meeting Minutes
June 6, 2017 | Mr. Sullivan, President |
| 6. Public Forum and Introductions | Mr. Sullivan, President |
| 7. Election of Board Officers (Action Item) | Mr. Sullivan, President |
| a. Board Policies and Procedures | |
| b. Committee Assignments | |
| c. Code of Ethics | |
| d. Open Meetings Act Resolution | |
| 8. Committee Reports | President |
| 9. Executive Director's Update | Mr. Archuleta, Executive Director |
| 10. Provider Presentations | Mr. Archuleta, Executive Director |
| a. Express Scripts | |
| b. Presbyterian Health Plan | |
| c. Blue Cross Blue Shield of New Mexico | |
| d. New Mexico Health Connections | |
| (Recess for lunch at the pleasure of the Board) | |
| 11. Actuarial Presentations | Mr. Archuleta, Executive Director |
| a. Demographic/Utilization Review | Mr. Madalena, Data Warehouse |
| b. Solvency/GASB 74/75 | Mr. Petersen, Segal |
| 12. Review of Calendar Year 2018 Plan Changes | Mr. Archuleta, Executive Director |

(Recess until 9:00AM, July 14, 2017, in the same location)

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10 Miller Lane
Angel Fire, NM 87710

AGENDA – July 14th

- | | |
|---------------------------------------------------|-------------------------------------------|
| 1. Call to Order | President |
| 2. Roll Call to Ascertain Quorum | Ms. Beatty, Recorder |
| 3. Pledge of Allegiance | President |
| 4. Public Forum and Introductions | President |
| 5. Provider Presentations Continued | Mr. Archuleta, Executive Director |
| a. United Concordia | |
| b. Delta Dental | |
| c. Davis Vision | |
| d. The Standard | |
| 6. CY2018 Plan Year Recommendations (Action Item) | Mr. Archuleta, Executive Director |
| 7. Pharmacy Benefit Management RFP (Action Item) | Mr. Kueffer, Director of Prod, Dev, & HCR |
| 8. Other Business | President |
| 9. Date & Location of Next Board Meeting | President |
| August 24, 2017, 9:30 AM | |
| Alfredo R. Santistevan Board Rm., Suite 207 | |
| 4308 Carlisle Blvd. NE | |
| Albuquerque, NM 87107 | |
| 10. Executive Session | President |
| 11. Adjourn | |