



NEW MEXICO
RETIREE
HEALTH CARE
AUTHORITY

your Benefit Messenger

NMRHCA 2017 Newsletter Vol. 2 ~ Winter Edition

EXECUTIVE DIRECTOR'S UPDATE

WE SUGGEST BREATHING DEEPLY IN COMING YEAR

Happy New Year! While 2016 brought NMRHCA both good and bad news, I think we should all take stock and a deep breath as an uncertain 2017 kicks off.

THE GOOD

- NMRHCA was able to make deposits into its long term investment account of about \$35 million this last fiscal year.
- Measurements of NMRHCA's long-term viability have consistently shown progress.
- Health plans offered by NMRHCA remain predictable and stable.
- Over 60,000 retired educators and public employees and their family members are now able to take advantage of the value NMRHCA offers. If you doubt that value, take a look at what individual health insurance costs for someone in their 60s.

THE BAD

- NM's Legislature reduced current (\$50 million over the next 5 years) and future (\$350 million over the life of the trust fund) revenue to the program during October's Special Ses-

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SB 7 HAS 4-YEAR IMPACT ON NMRHCA SOLVENCY

During the recent State Legislature Special Session that addressed the state's budget issues, Senate Bill 7—Public Fund Distribution Changes—was introduced to increase general-fund revenues.

The bill permanently removed a \$3 million annual payment to New Mexico Retiree Health Care Authority, and it removed an annual 12 percent increase in transfers from the general fund to NMRHCA, effective Jan. 1, 2017-June 30, 2019. Beginning July 1, 2019, the 12 percent increase resumes.

SB7 passed through both the Senate and the House of Representatives, and the Governor signed it on October 7, effectively reducing revenues the program receives by nearly \$350 million over the next 15 years.

This reduction is projected to shrink NMRHCA's solvency period (our positive trust-fund balance) from 2036 to 2032. While the impact of SB7 is significant, NMRHCA Board of Directors will continue to evaluate ways to ensure the long-term viability of the fund.

Because of the state's financial outlook, NMRHCA will not ask for an

increase in the contribution levels of active employees and their employers during the 2017 legislative session, which it had done the previous four years.

NMRHCA had asked for the increase to account for health-care costs that continue to increase at a rate higher than public payroll.

Instead, NMRHCA will present a memorial to acknowledge the importance of the program to not just its over 60,000 current members but also the 100,000 active employees currently making contributions.

It also will acknowledge the actions taken to improve the solvency over the past several years, the negative impact of the most recent special session on projected future revenues, and will propose that we continue to work together to ensure the program's long-term viability.

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KNEE PAIN? GLUCOSAMINE, SULFATE AREN'T GOOD REMEDIES

Many people with osteoarthritis have knee pain. They often try over-the-counter treatments to help the pain and to avoid knee surgery. In 2012, Americans spent \$813 million on supplements glucosamine and chondroitin sulfate, according to the Nutrition Business Journal.

The knee pain is caused by the breakdown of the cartilage. Glucosamine and chondroitin are building blocks of cartilage. But they are not good for pain relief.

Studies show that glucosamine and chondroitin sulfate don't help to relieve arthritic knees. People report less pain or swelling of their joints. But they get similar results with a placebo—a “sugar pill.” Pain-relieving drugs, such as acetaminophen and ibuprofen, help more.

Glucosamine and chondroitin are not harmful by themselves but can interact with other medicines. The supplements can increase the effect of warfarin (Coumadin and generics) on blood clotting. This increases the risk of bruising and serious bleeding. Problems with warfarin cause one-third of emergency room visits among seniors in the U.S.



You will spend about \$130 a year if you take a glucosamine/chondroitin supplement every day.

Also, often the labels on the bottles are misleading. In 2013, Consumer Reports tested 16 joint pain supplements and found that seven had less chondroitin than the label listed.

More effective ways to relieve arthritic knee pain are:

- Physical therapy
- Losing weight

Easing Osteoarthritis Pain Options

Lose excess weight. Losing a pound of excess weight can take about four pounds of pressure off your knees when walking.

Physical activity. Do strength training, especially of the quad muscles on the front of the thigh. Aerobic exercise builds strength and can reduce pain. Stretching can help prevent stiffness. Ask a local “Y” or gym about exercise programs for people with arthritis.

Mechanical aids. A cane, crutch or walker can take a load off painful knees. Insurance may cover them if they are medically necessary.

Heat and cold. A heating pad can ease ongoing stiffness and soreness in joints. For acute pain and swelling, switch to ice packs.

Massage. Deep-tissue massage got high marks in a 2010 survey of Consumer Reports online readers. Half of them said that it “helped a lot” with their osteoarthritis.

Use drugs carefully.

- Ibuprofen (Advil and generics) and naproxen (Aleve and generics) can ease pain and inflammation. But they may cause stomach bleeding and high blood pressure if taken over a longer time. Try to use them only for short periods.
- Acetaminophen (Tylenol and generic) can also help reduce pain, but high doses can damage your liver. Make sure you take less than 3,000 mg a day.
- Acetaminophen (Tylenol and generic)
- Ibuprofen (Advil and generic)
- Naproxen (Aleve and generic)

If these don't help, you can talk to your doctor about treatments such as injections or surgery.

NMRHCA AT A GLANCE

UNDERSTANDING MEDICARE

To help our Medicare retirees manage their health care, NMRHCA will offer Medicare Informational Sessions in 2017. Sessions will take place on the first or second Wednesday in each month in at our offices in Albuquerque (9:30 a.m.) and Santa Fe (1:30 p.m.) starting March 8.

The other meeting times are:

- April 5
- May 10
- June 7
- July 5
- August 9
- September 6
- November 8
- December 6

Additional meetings tentatively are planned for the Las Cruces, Las Vegas and Roswell areas. NMRHCA will announce those meetings when they have been scheduled.

DIABETES SUPPORT

If you or someone close to you has diabetes, you have resources available to help your situation. The Solutions Group, a division of Presbyterian Health Services, is offering four Diabetes Academies for NMRHCA members in 2017. Go to <https://www.research.net/r/HKGCLXN> to sign up.

More diabetes information from the Centers for Disease Control and Prevention, the New Mexico Department of Health, or UNM Hospitals Center for Diabetes Education is available on our website's Wellness page (<https://www.nmrhca.state.nm.us/Pages/Wellness.aspx>).



Health & Wellness
P.O. Box 26666
Albuquerque, NM 87123-6666

This is an image of the envelope that will contain your \$50 Visa gift card.

NMRHCA WELLNESS PROGRAM RETURNS FOR 2017, WITH SOME ADDED FEATURES

The good news is that New Mexico Retiree Health Care Authority is continuing its Wellness Incentive Program.

The better news is we've streamlined the process so that members can fill out the form online if they wish.

More than 300 members took advantage of NMRHCA's Wellness Incentive Program, in which medical plan participants earn a \$50 gift card for completing two structured wellness programs.

We want to grow that number in 2017. To that end, we have set up a form on our wellness page that allows our members who have completed two wellness programs to fill their forms online. You will be able to attach verification to your forms.

You still may email, hand-deliver or mail your forms back to us with proof of completed programs.

We will notify you to let you know whether your completion form has been approved.

If you have successfully completed your form, you can expect to receive your \$50 gift card in 6-8 weeks.

PLEASE LOOK for an envelope from The Solutions Group (last year,

we had some members accidentally destroy or throw away their gift cards because they did not recognize the envelope for the gift card).

NMRHCA again will provide links to wellness program ideas on the wellness page on its website as well as provide available program on its home page calendar of events.

Remember, by “structured” program, we mean a program or a course with an instructor, trainer or group leader.

For example, it's not enough just to have a gym membership. We ask that our members participate in a regimen or class to achieve a certain level of physical fitness, for physical therapy, to alleviate a back problem or strengthen core muscles, etc., under the direction or supervision of an instructor or trainer.

Or if you participate in lifestyle programs such as Good Measures or Change Is Possible, you will work with a registered dietitian.

If you have any questions about the Wellness Incentive Program or whether a certain program qualifies, you can call your health provider or call us at 1-800-233-2576.

EXECUTIVE DIRECTOR'S UPDATE

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- sion, eliminating much of our solvency gains in recent years.
- Prescription drug costs continue to escalate with no clear-cut remedy on the horizon.
- Public payroll from which NMRHCA draws contributions continues to remain stagnant.

THE UNCERTAIN

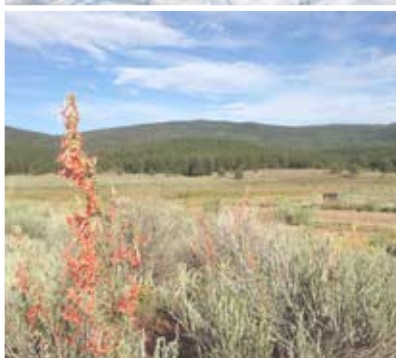
- The state's bleak budget environment for the foreseeable future continues to represent a threat to the program.
- Volatility in the health insurance market as a result of changes to, or the complete repeal of, the Affordable Care Act (AKA Obamacare) may impact the health care system as a whole.
- The President-elect's administration disposition toward Medicare is unclear at the federal level.

NMRHCA's Board of Directors and the agency's staff will continue to roll up our sleeves and administer your benefit in the most efficient manner possible. We will face these long-standing head winds and new challenges the same as we always have: TOGETHER.

As for me...my wife and I still haven't had a cigarette since New Year's Eve 2014, though it still crosses my mind. I still try to get up off the couch when I can. In fact, I logged over 750 miles of walking during 2016 and even managed to drop a few pounds. I'm still working on my goals for 2017, and I hope you are thinking about how to make your next year as healthy as possible as well.

Wishing you and your family the absolute best in 2017.

— Mark Tyndall
Executive Director



NMRHCA CONTACT INFORMATION

4308 CARLISLE BLVD NE, SUITE 104
ALBUQUERQUE, NM 87107-4849

33 PLAZA LA PRENSA
SANTA FE, NM 87507

800.233.2576 (TOLL FREE)
505.476.7340 (SANTA FE)
505.884.8611 (FAX)

8:00AM TO 5:00PM
MONDAY—FRIDAY

PLEASE VISIT US ONLINE
AT WWW.NMRHCA.ORG

CONTACT YOUR HEALTHCARE PROVIDERS DIRECTLY

Blue Cross Blue Shield

BCBSNM 800-788-1792
BCBSNM Medicare Advantage 877-299-1008
www.bcbsnm.com

Express Scripts

Express Scripts Medicare 800-551-1866
Express Scripts Non-Medicare .. 800-501-0987
www.express-scripts.com

Presbyterian Health Services

Presbyterian Health Plan 888-275-7737
Presbyterian Medicare Advantage 800-797-5343
www.phs.org

Humana 866-396-8810
www.humana.com

New Mexico Health Connections ... 877-210-8239
<http://www.mynmhc.org/nmrhca>

United Healthcare 866-622-8014
www.uhcretiree.com

United Concordia Companies 888-898-0370
www.ucci.com

Delta Dental 877-395-9420
www.deltadentalnm.com

Davis Vision 800-999-5431
www.davisvision.com

Standard Insurance 888-609-9763
www.standard.com/mybenefits/newmexico_rhca