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RETIREE
HEALTH CARE
AUTHORITY

your Benefit Messenger

NMRHCA 2018 Newsletter Vol. 3 - Winter Edition

EXECUTIVE DIRECTOR'S UPDATE

2018 PROGRESS REPORT

Greetings and Happy 2018 from the New Mexico Retiree Health Care Authority (NMRHCA).

With the 2018 regular legislative session underway, NMRHCA is responsible for analyzing and responding to requests for information regarding introduced legislation that may impact services we provide or our ability to control costs through the programs we administer.

Given this year's 30-day session and limited ability to consider non-budget related matters, NMRHCA did not seek legislation to increase employee/employer contributions to the program.

However, as the state's overall economic outlook continues to improve and additional funding is made available to address competing priorities across state government, NMRHCA looks forward to developing a long-term solution to shore up funding for the program during the 2019 legislative session.

NMRHCA is also proud to report continued improvements to our overall financial well-being, including extending our solvency from 2030 in 2016 to 2035 in 2017, and increasing the funded ratio from 11.04 to 11.34 percent for the same time frame, despite more restrictive assumptions with regard

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KNOW WHEN, WHEN NOT TO GO TO EMERGENCY ROOM

It's 2018: Do you know what your lowest-cost Access of Care options are?

Part of the rising health care cost epidemic is due to patients' overdependence on emergency rooms and urgent care facilities, both of which cost more than a primary care office visit — to both the patient and the health plan.

According to a blog from Total Access Medical LLC in January of 2017, the average cost of an emergency visit is \$767, or \$580 more than the average cost of an office-based visit of \$187.

An article in the Central Penn Business Journal, which used a PwC study titled "Medical Cost Trends, Behind the Numbers 2017," added that higher use of urgent care centers not only cost more than a primary care office visit, but also can disrupt the continuity of care for patients because urgent care doctors generally lack patient-specific information that the primary care physician has to formulate a diagnosis or an action plan.

The reasons patients may seek care in an ER as opposed to other settings, Total Access Medical reports, include:

- Patients have limited access to primary care services. It can take days, weeks or even months to get in to see a primary care physician.
- The ER provides after-hours and weekend care.
- The ER offers patients immediate reassurance about their medical condition.
- Primary care providers sometimes refer patients to the ER.
- Hospitals have financial and legal obligations to treat patients in the ER.

Zakipoint Health estimates ER overuse costs \$18 billion annually, while Health Total Access Medical sees the waste to be closer to \$38 billion.

Brookwood Baptist Health suggests the following guidelines for going to the ER and urgent care facilities:

"The ER should be reserved for life-threatening emergencies or acute complications that need advanced imaging. It's the best place to go for signs or symptoms of a heart attack, stroke, or traumatic injury.

"You should (also) go to the emergency room if you have an acute trauma that includes the risk of a loss of limb, motor vehicle accidents, bro-

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PROTECT YOUR HEALTH AS YOU GROW OLDER IN 2018

By Healthfinder.gov

Take steps to stay healthy and independent as you get older.

Stay active to live longer and better.

- Reduce your risk for type 2 diabetes, heart disease, stroke, and some cancers.
- Avoid falls and other injuries.
- Live on your own longer.
- Improve your mood.
- Feel better about yourself.
- Improve your ability to think, learn, and make decisions.
- Get enough sleep.

It's never too late to start!

- Do moderate aerobic activities – like walking, swimming, or raking leaves. Aim for 2 hours and 30 minutes a week.
- Do aerobic activity for at least 10 minutes at a time and then work your way up. If it's hard for you to be active for more than 10 minutes at once, do 10 minutes of activity a few times during the day.
- Do strengthening activities 2 or more days a week.
- Do exercises for balance, especially if you are at risk of falling.
- Try stretching exercises so you can move more easily during everyday activities.

If you have a health condition, ask your doctor about the best activities for you.

Get ideas for eating healthy.

- Choose lots of vegetables and fruits in different colors.
- Make sure most of your grains are whole grains, like brown rice and whole wheat.
- Drink low-fat or fat-free milk, and eat other low-fat dairy products.
- Choose healthy sources of protein like seafood, lean meats and poultry, eggs, beans, and nuts.
- Stay away from trans fats, saturat-

ed fats, and added sugars.

- Limit the amount of salt you eat.

Stay active with your health care.

- Print a list of recommended screening tests for you (<https://healthfinder.gov/myHealthfinder/>) for your next appointment.
- Tell your doctor if you have questions or problems with your medicines, or if you think you may be depressed. Depression is treatable nothing to be ashamed of.
- If you smoke, enroll in quitnow.net/newmexico/ for free help. Ask your doctor about screening for lung cancer.

If you have Medicare, schedule your Medicare wellness visit every year.

Take other steps to prevent falls.

- Ask your doctor or pharmacist to review your medicines. Some medicines can make you dizzy or sleepy.
- Get your vision checked often. Use a Home Falls Prevention Checklist (https://www.cdc.gov/HomeandRecreationalSafety/pubs/English/booklet_Eng_desktop-a.pdf) to help you find and fix the dangers in your home.

Ensure your safety as you drive.

- Get your vision and hearing checked regularly.
- Always wear your seat belt.
- Don't use your phone while driving.
- Plan your route and drive on streets you know.

Keep a sharp mind to halt memory loss.

- Learn new things – take a class or read a section of the newspaper that you normally skip.
- Connect with other people – try sharing meals with a friend or volunteering at a local school.

If you are forgetting things more often than usual and it's getting in the way of doing everyday things, talk with your doctor or nurse.

NMRHCA AT A GLANCE

UNDERSTANDING MEDICARE SEMINARS TO CONTINUE IN '18

To help our Medicare retirees manage their health care, NMRHCA will continue its Medicare Informational Sessions in 2018.

Sessions will be at our offices in Albuquerque (9:30 a.m.) and Santa Fe (1:30 p.m.) starting February 14. The other meeting times will be as follows:

- March 14 (ABQ Only)
- April 11 (ABQ and SF)
- May 9 (ABQ Only)
- June 13 (ABQ and SF)
- July 18 (ABQ Only)
- August 15 (ABQ and SF)
- September 12 (ABQ Only)
- December 12 (ABQ and SF)

Additional meetings are planned for Farmington on March 13 at 10 a.m. in the Civic Center and Las Cruces on April 10 at 9 a.m. in the City Hall Conference Room 2007 B.

EXECUTIVE DIRECTOR'S UPDATE

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to the rate at which our assets are expected to grow. However, given these improvements, growth in health care related expenses are projected to continue outpacing the available resources used to support these programs today.

NMRHCA will continue to implement policies and procedures adopted by the Board of Directors aimed at maintaining the affordability of the program for existing and future participants. In addition, emphasis with regard to the value and importance of the programs we administer will continue to be communicated to members of the Legislature and Executive staff.

— David Archuleta
Executive Director



NMRHCA WELLNESS PROGRAM RETURNS FOR 2018, WITH SOME ADDED GUIDANCE

The NMRHCA Wellness Incentive Program returns for 2018. Members and their spouses/partners enrolled in one of our medical programs can receive a \$50 Visa gift card for completing two wellness activities (dependent children are not eligible).

A list of qualifying programs, activities and instructions on filling out the form are available at nmrhca.org/wellness-incentive.aspx. Also, we have provided a list of resources and events on the site to help you achieve your goals.

Reminders:

- If you complete a personal health assessment (PHA), we recommend that your second program associate with the assessment results. If your assessment says to exercise more, you may consider your second wellness program to be engaging in a structured exercise program. If your PHA has multiple recommendations, you may choose a path to pursue. PHAs for Medicare members soon may be available through their health plans.
- PLEASE take two separate courses for approval. For exam-

ple, if you have diabetes, you can take the Diabetes Academy offered through the Solutions Group and sign up for Kitchen Creations. You cannot attend two Diabetes Academy classes for your two programs.

- PLEASE provide proof of completion of the programs or a contact name and number of the program coordinator. For those who work out, we require an attendance sheet, or trainer/employee verification. Simply writing down the name of a gym **DOES NOT QUALIFY**.
- Biometric screenings, which are considered “preventative maintenance,” **DO NOT** qualify by themselves. If you have a screening that indicates you have high cholesterol, then we recommend participating in a program designed to lower cholesterol. An example is taking a healthy cooking class.

We’ll also ask for an email address or a telephone number (if you don’t have an email address) on your form so we can notify you when your form has been approved.

If you have any questions, please call us at 800-233-2576.

EMERGENCY ROOM: GO OR NO GO?

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ken bones, major head injuries, seizures, severe abdominal pain, severe asthma attack, unconsciousness, or uncontrollable bleeding. The ER will provide the advanced care you need, in a time-aware environment.

“Urgent care centers are useful options when you don’t have a primary care physician, or your doctor is unavailable for a timely appointment, or due to it being after-hours or on a weekend. They’re also good when you require medical attention for an acute but not life threatening emergency, such as a sprained ankle.”

If you or someone in your care visits an urgent care facility, follow up with your primary care physician.

Some NMRHCA plans offer a 24-hour nurse line that patients can call first. Check to see if you can make a video visit. Presbyterian Health Plan allows its members to access video visits through their myPres account at phs.org. They first need to fill out a medical questionnaire. Once that is done, they can schedule an online visit, enter their symptoms, and a medical provider will connect with them within 30 minutes. The provider can offer a diagnosis and advice, or send a prescription to a pharmacy.

If you must see a doctor, call your PCP in a non-emergency situation first. If your doctor can’t see you right away, a nurse practitioner often will call back and discuss your condition over the phone. If those options are unavailable, try an urgent care facility. And in an emergency, go to the ER.

Taking a proactive approach to managing your health and communicating with your PCP still is the best approach to keep costs down.



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HEALTH PLAN CONTACT INFORMATION

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

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

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>

UnitedHealthcare 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

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Please visit us online at www.nmrhca.org