



HEALTH CARE
AUTHORITY

State Employee Premium Assistance (SEPA) Application Form

If you have any questions about SEPA or completing this form, please contact EASI Gov, Inc. at (855) 618-1800. **Fax all forms and documentation to 505-244-6009 or email to SEPA@easitpa.com**

Part I - Applicant Profile Information			
*Employee Name (First, MI, Last)		*SHARE EMPLOYEE ID	
*Birth Date (MM/DD/YYYY)	*Home Phone	*Mobile Phone	
*Physical Street Address (U.S. address required to open an HSA)			
*City	*State	*Zip	
Alternate Mailing Street Address or PO Box			
City	State	Zip	
*Work Email Address		*Personal Email Address	
*Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	*Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single		
*Number of Eligible Dependents (Reported on most recent tax return) Spouse: _____ Children: _____		Check Here if you wish to include a Domestic Partner: <input type="checkbox"/>	
*Hire Date	*Salary	*Adjusted Gross Income by Household	

Part II – Acknowledgements		
<p>When applying for State Employee Premium Assistance, I understand and agree to the following:</p> <ul style="list-style-type: none"> I am at least 18 years old and cannot be claimed as a dependent on someone else’s tax return. I must submit proof of household income to be determined eligible for SEPA. I must submit documents to EASI Gov to confirm household income which show an income amount that closely matches the income amount reported to EASI Gov. I acknowledge that my adjusted household income must reflect 250% or less of FPL (federal poverty level) to be potentially eligible for this program. Details are available at www.mybenefitsnm.com/SEPA If a state employee knowingly misreports income to gain access to SEPA or increase the amount of assistance they get, SHB may revoke SEPA eligibility. I must report changes in my household, such as income going up or down, marriage or divorce, birth, adoption, or death in the family. If I experience any changes during the year, I will report them to EASI Gov as soon as possible to determine whether they impact my eligibility. 		
*Signature	*Print Name	*Date

Part III – Documentation Requirements

State employees must submit proof of household income to be determined eligible for SEPA. The documents state employees submit to EASI Gov to confirm household income must show an income amount that closely matches the income amount reported to EASI Gov. For example, if someone in a household has a different job than last year, the state employee should send EASI Gov recent pay stubs from their new job, instead of last year's tax return or W2. Here are types of proof of household income that state employees can submit:

- **1040 federal or state tax return.** Must contain your first and last name, income amount, and tax year. If you file Schedule 1, you must submit it with your 1040.
- **Wages and tax statement** (W-2 and/or 1099, including 1099 MISC, 1099G, 1099R, 1099SSA, 1099DIV, 1099SS, 1099INT). Must contain your first and last name, income amount, tax year, and employer name (if applicable).
- **Pay stub.** Must contain your first and last name, income amount, and pay period or frequency of pay with the date of payment. If a pay stub includes overtime, tell us the average overtime amount per paycheck.
- **Self-employment ledger documentation** (can be a Schedule C, the most recent quarterly or year-to-date profit and loss statement, or a self-employment ledger). Must contain your first and last name, company name, and income amount. If you're submitting a self-employment ledger, include the dates covered by the ledger, and the net income from profit/loss.
- **Social Security Administration Statements** (Social Security Benefits Letter). Must contain first and last name, benefit amount, and frequency of pay.
- **Unemployment Benefits Letter.** Must contain your first and last name, source/agency, benefits amount, and duration (start and end date, if applicable).

Allowable Income Standards

Employees can use the following measures of income to qualify for SEPA:

1. The annual household income in the most recent available tax return.
2. The monthly household income during the month before the employee submits a SEPA application.
3. The projected annual household income during the upcoming benefits year with an attestation letter about household circumstances.

Types of Income That Must Be Reported

For 2025, SHB will use a household's adjusted gross income (AGI) as the standard for SEPA income determinations. AGI is your total gross income from all sources minus certain adjustments listed on Schedule 1 of Form 1040. Your AGI is calculated before you take your standard or itemized deduction on Form 1040. For information about how to calculate AGI, visit <https://www.irs.gov/e-file-providers/definition-of-adjusted-gross-income#calculateagi>.

Reporting Household Changes that May Impact Eligibility

If a state employee who has been determined eligible for SEPA experiences a change that may impact SEPA eligibility, the employee must report these changes to EASI Gov as soon as possible. Changes that must be reported include:

- Increases or decreases in household income
- Adding a dependent to your household due to birth, adoption, foster care
- Marriage or divorce
- Death
- You remove a dependent from your tax household for any reason other than adoption or foster care
- You become eligible for Medicaid

Knowingly Misreporting Income

If a state employee knowingly misreports income to gain access to SEPA or increase the amount of assistance they get, SHB may revoke future SEPA eligibility.

By signing this I acknowledge that I understand the above requirements and are submitting the required documentation with this application form to EASI Gov, Inc. for review.

*Signature

*Print Name

*Date