Marketplace Affordability Program

State Subsidy Report Guide

Current Issue Date: December 12, 2025

Overview

This guide provides details for the new state subsidy reports that will replace the 820B (New Mexico Premium Assistance, NMPA), 820C (Native American Premium Assistance, NAPA), and 820D (Medical Transition Premium Relief, MTPR), as well as the SOPA (State-out-of-Pocket Assistance) report. The four state subsidies, administered in partnership with the New Mexico Health Care Authority (HCA), are designed to ease the financial burden of health insurance premiums and out-of-pocket costs for eligible residents and facilitate broader access to coverage. They are components of the Marketplace Affordability Program, which is funded through the Health Care Affordability Fund.[1]

Subsidy Summary

1. New Mexico Premium Assistance (NMPA)

- **Purpose**: To reduce monthly health insurance premiums.

- **Eligibility**: New Mexico residents eligible for Marketplace coverage who either meet all federal PTC criteria except the household income requirements or are lawfully present but not eligible for the federal PTC.

2. Native American Premium Assistance (NAPA)

- **Purpose**: To reduce total cost responsibility for eligible Native American individuals.

- **Eligibility**: Members of federally-recognized tribes who qualify for APTCs, with household income up to 400% of the federal poverty level.

3. Medicaid Transition Premium Relief (MTPR)

- **Purpose**: To support individuals transitioning from Medicaid to insurance coverage through the Marketplace. The one-time payment is intended to create a 'free' first month and ensure effectuation of coverage through the Marketplace.

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[1] For a more detailed description of the programs, see the "2026 Plan Year Health Insurance Marketplace Affordability Program Policy and Procedures Manual" available at https://www.hca.nm.gov/health-insurance-marketplace-affordability-program/

- **Eligibility**: Consumers who are no longer eligible for Medicaid and are enrolling in Marketplace plans, with household incomes up to 400% of the federal poverty level.

4. State Out-of-Pocket Premium Assistance (SOPA)

- **Purpose**: To provide enhanced coverage and the greatest savings on out-of-pocket costs—including deductibles, copays, and coinsurance—through specially designated Turquoise-level plans.

- **Eligibility**: New Mexico residents who qualify for APTCs, with a household income up to 400% of the Federal Poverty Level (FPL).

Presented below are tables providing the report definitions associated with the NMPA, NAPA, MTPR, and SOPA subsidy reports.

NMPA and NAPA:

Subsidy Current Month Report

File naming conventions:

NMPA_CUR_(HIOS ID)_(Date of report)

NAPA_CUR_(HIOS ID)_(Date of report)

Field	Definition	Format
Exchange Assigned Policy ID	Enrollment's Policy ID (REF*1L field)	Numeric
Invoice Month	Month of invoice generation	Date Format MM-YYYY
Exchange Assigned Subscriber ID	10-digit member ID	Numeric
Subscriber First Name	Member's first name	Text
Subscriber Last Name	Member's last name	Text
Subsidy Effective Date	Financial effective date	Date Format MM/DD/YYYY
State Subsidy Amount	Calculated state subsidy amount at the subscriber-level for the entire enrollment.	Dollars and Cents
Coverage Begin Date	First day of month covered	Date Format MM/DD/YYYY
Coverage End Date	Last day of month covered	Date Format MM/DD/YYYY
HIOS ID	Carrier's 5-digit HIOS ID	Numeric
Assigned Plan Identifier	16-digit Plan ID	Alphanumeric

Subsidy Adjustment Month

File naming conventions:

NMPA_ADJ_(HIOS ID)_(Date of report)

NAPA_ADJ_(HIOS ID)_(Date of report)

Field	Definition	Format
Exchange Assigned Policy ID	Enrollment's Policy ID (REF*1L field)	Numeric
Invoice to Adjust Month	Month for which the adjustment is made (i.e. a prior month)	Date Format MM-YYYY
Exchange Assigned Subscriber ID	10-digit member ID	Numeric
Subscriber First Name	Member's first name	Text
Subscriber Last Name	Member's last name	Text
Subsidy Effective Date	Financial effective date	Date Format MM/DD/YYYY
State Subsidy Amount	Old State Subsidy Amount	Dollars and Cents
Adjust Subsidy Amount	New State Subsidy Amount	Dollars and Cents
Delta Amount	Amount of Change from the prior amount	Dollars and Cents
Coverage Begin Date	First day of month covered	Date Format MM/DD/YYYY
Coverage End Date	Last day of month covered	Date Format MM/DD/YYYY
HIOS ID	Carrier's 5-digit HIOS ID	Numeric
Assigned Plan Identifier	16-digit Plan ID	Alphanumeric

MTPR:

Subsidy Current & Adjustment Month Report

Filename convention:

MTPR_(HIOS ID)_(Date of report)

Field	Definition	Format
Carrier Name	Issuer name	Text
Customer Code	Household ID assigned	Numeric
Subscriber Code	10-digit member ID	Numeric
Plan Code	16-digit Plan ID	Alphanumeric
Plan Variant	2-digit suffix of a 16-digit plan code	Numeric
Transaction Type	**SU –** Subsidy. **SR-** Subsidy Reversal	Text
Exchange Policy ID	Enrollment's Policy ID (REF*1L field)	Numeric
Transaction Date	System-generated date	Date Format MM/DD/YYYY
From Date	First day of month covered by MTPR	Date Format MM/DD/YYYY
To Date	Last day of Month covered by MTPR	Date Format MM/DD/YYYY
DOB	Subscriber's DOB	Date Format MM/DD/YYYY
Gender	Subscriber's gender	Text
Premium	Total MTPR applied to enrollment	Dollars and Cents

SOPA:

Subsidy Current Report

Filename convention:

SOPA_CUR_(HIOS ID)_(Date of report)

Field	Definition	Format
Enrollment Identifier	Enrollment Policy ID	Numeric
Subscriber ID	Household ID assigned	Numeric
Member ID	Individual enrollee ID	Numeric
Issuer Name	Carrier Name	Text
HIOS Plan ID	Carrier's 5-digit HIOS ID	Numeric
Enrollment Coverage Type	Type of coverage	Text
Monthly Premium Amount	Individual premium amount	Dollars and Cents
CSR Level	Cost-sharing tier	Numeric
Start Date	First day of month covered	Date Format MM/DD/YYYY
End Date	Last day of month covered	Date Format MM/DD/YYYY
Variant Type	Metal Tier Level	Text
SOPA	Assistance amount	Dollars and Cents
DOB	Individual (member) DOB	Date Format MM/DD/YYYY

SOPA:

Subsidy Adjustment Report

Filename convention:

SOPA_ADJ_(HIOS ID)_(Date of report)

Field	Definition	Format
Enrollment Identifier	Enrollment Policy ID	Numeric
Subscriber ID	Household ID assigned	Numeric
Member ID	Individual enrollee ID	Numeric
Issuer Name	Carrier Name	Text
HIOS Plan ID	Carrier's 5-digit HIOS ID	Numeric
Enrollment Coverage Type	Type of coverage	Text
Adjusted Month-Year	Month for which the adjustment is made	Date Format MM-YYYY
Monthly Premium before Adjustment	Old monthly premium amount	Dollars and Cents
Adjusted Monthly premium amount	New monthly premium amount	Dollars and Cents
Delta Monthly premium amount	Amount of change from the prior amount	Dollars and Cents
CSR Level	Cost-sharing tier	Numeric
Start Date	First day of month covered	Date Format MM/DD/YYYY
End Date	Last day of month covered	Date Format MM/DD/YYYY
Variant Type	Metal tier level	Text
DOB	Subscriber's DOB	Date Format MM/DD/YYYY
SOPA	Assistance amount	Numeric

Timeline:

1. On the 2nd of the month (or the next business day), the **Subsidy Current Month Report** is generated for the upcoming month's subsidies.

2. On the 2nd of the month (or the next business day), the **Subsidy Adjustment Month Report** is generated for any changes generated since the last Report.

3. On the 2nd of the month (or the next business day), the **SOPA Current Month Report** is generated for the upcoming month.

4. On the 2nd of the month (or the next business day), the **SOPA Adjustment Month Report** is generated for any changes generated since the last report.

5. Example:

   a. On 3/2/26, the Subsidy Current Month Report is generated for State Subsidies for the month of March.

   b. On 3/2/26, the Subsidy Adjustment Month Report is generated with changes to January and February subsidies that occurred since the 2/2/26 report was generated.

   c. On 3/2/26, the SOPA Current Month Report is generated for State Subsidies for the month of March.

   d. On 3/2/26, the Subsidy Adjustment Month Report is generated with changes to January and February subsidies that occurred since the 2/2/26 report was generated.

4. The reports will be generated by BeWell staff and delivered to the Health Care Authority for review and approval.

5. After approval by HCA, BeWell will issue the reports to the carrier and HCA will issue payments to the carrier for the monthly subsidies. [2]

6. Example:
   a. On 3/2/26, BeWell submits NMPA, NAPA, MTPR, and SOPA reports for the month of March to HCA.

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[2] For a more detailed description of approval and payment timeline, see the "HCA Bulletin 2025-001 PY25 Reporting and Payment Processes and Timeline" available at https://www.hca.nm.gov/health-insurance-marketplace-affordability-program/

    b. Payment amounts for NMPA, NAPA, MTPR, and SOPA related to March coverage will be included in the Notice of Payment.

    c. By a target date of 3/31/26, all payments for March coverage month will be disbursed to the issuers.

7. Payments are targeted for disbursement by the last business day of each month.

Sample Reports:

<u>NMPA and NAPA:</u>

NMPA_CUR.xlsx   NAPA_CUR[50].xlsx   NAPA_ADJ[72].xlsx   NMPA_ADJ[27].xlsx

<u>MTPR:</u>

Medicaid Transition
Premium Relief Repc

<u>SOPA:</u>

SOPA Adjustment   SOPA Current
Month Report.xlsx   Month Report.xlsx