

New Mexico Highlands University
Bi-Weekly Contribution Schedule - Rates Effective 7/1/16 - 6/30/17

EMPLOYEE ONLY

	Total BW Cost	Salary 15,000-19,999		Salary 20,000 - 24,999		Salary 25,000 & Up	
		Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross Blue Shield (PPO)	261.49	78.45	183.04	91.52	169.97	104.60	156.89
(HMO) Presbyterian & Blue Cross Blue Shield	224.83	67.45	157.38	78.69	146.14	89.93	134.90
Delta Dental	13.52	4.06	9.46	4.73	8.79	5.41	8.11
Vision Service Plan	2.51						

EMPLOYEE + SPOUSE

	Total BW Cost	Salary 15,000-19,999		Salary 20,000 - 24,999		Salary 25,000 & Up	
		Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross Blue Shield (PPO)	588.38	176.51	411.87	205.93	382.45	235.35	353.03
(HMO) Presbyterian & Blue Cross Blue Shield	505.89	151.77	354.12	177.06	328.83	202.36	303.53
Delta Dental	27.04	8.11	18.93	9.46	17.58	10.82	16.22
Vision Service Plan	4.73						

EMPLOYEE + CHILD(REN)

	Total BW Cost	Salary 15,000-19,999		Salary 20,000 - 24,999		Salary 25,000 & Up	
		Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross Blue Shield (PPO)	470.69	141.21	329.48	164.74	305.95	188.28	282.41
(HMO) Presbyterian & Blue Cross Blue Shield	404.70	121.41	283.29	141.64	263.06	161.88	242.82
Delta Dental	31.11	9.33	21.78	10.89	20.22	12.44	18.66
Vision Service Plan	5.51						

FAMILY

	Total BW Cost	Salary 15,000-19,999		Salary 20,000 - 24,999		Salary 25,000 & Up	
		Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross Blue Shield (PPO)	771.43	231.43	540.00	270.00	501.43	308.57	462.86
(HMO) Presbyterian & Blue Cross Blue Shield	663.28	198.98	464.30	232.15	431.13	265.31	397.97
Delta Dental	40.56	12.17	28.39	14.20	26.36	16.22	24.34
Vision Service Plan	6.96						

DOMESTIC PARTNER ADULT

	Total BW Cost	Salary 15,000-19,999		Salary 20,000 - 24,999		Salary 25,000 & Up	
		Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross Blue Shield (PPO)	326.88	98.06	228.82	114.41	212.47	130.75	196.13
(HMO) Presbyterian & Blue Cross Blue Shield	281.05	84.31	196.74	98.37	182.68	112.42	168.63
Delta Dental	13.52	4.06	9.46	4.73	8.79	5.41	8.11
Vision Service Plan	2.22						

DOMESTIC CHILD

	Total BW Cost	Salary 15,000-19,999		Salary 20,000 - 24,999		Salary 25,000 & Up	
		Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross Blue Shield (PPO)	209.19	62.76	146.43	73.22	135.97	83.68	125.51
(HMO) Presbyterian & Blue Cross Blue Shield	179.87	53.96	125.91	62.95	116.92	71.95	107.92
Delta Dental	17.59	5.28	12.31	6.16	11.43	7.04	10.55
Vision Service Plan	3.00						

EMPLOYEE + CHILD(REN) W/DOMESTIC PARTNER

	Total BW Cost	Salary 15,000-19,999		Salary 20,000 - 24,999		Salary 25,000 & Up	
		Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross Blue Shield (PPO)	300.53	90.16	210.37	105.19	195.34	120.21	180.32
(HMO) Presbyterian & Blue Cross Blue Shield	258.58	77.57	181.01	90.50	168.08	103.43	155.15
Delta Dental	9.45	2.83	6.62	3.31	6.14	3.78	5.67
Vision Service Plan	1.46						

EMPLOYEE + DOMESTIC PARTNER & CHILD(REN)

	Total BW Cost	Salary 15,000-19,999		Salary 20,000 - 24,999		Salary 25,000 & Up	
		Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross Blue Shield (PPO)	509.94	152.98	356.96	178.48	331.46	203.97	305.96
(HMO) Presbyterian & Blue Cross Blue Shield	438.45	131.53	306.92	153.46	284.99	175.38	263.07
Delta Dental	27.04	8.11	18.93	9.46	17.58	10.82	16.22
Vision Service Plan	4.46						

DISABILITY

100% Employee Paid	\$4.70	Work related injuries or illnesses are not covered under this plan
		To be eligible to file a claim (must be filed within 90 days form first day out of work) the employee must have paid premiums for at least 12 consecutive months.
		28 day elimination period (length of time between when an employee is unable to work due to a disability before qualifying for short term disability (max of 24 weeks based on proper medical documentation)
		Long Term Disability - (maximum of 2 years) Begins after Short Term Disability has ended as long as the employee still meets all eligibility requirements

BASIC LIFE INSURANCE

PAID BY NMHU	NMHU provides \$50,000 of Basic Term Life insurance to each of their Regular or Interim employees who work at least 20 hours or more per week
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SUPPLEMENTAL LIFE INSURANCE (OPTIONAL)

100% Employee Paid		MINNESOTA LIFE (TERM LIFE)
		Employees are allowed to pick up to \$150,000 without providing proof of good health (evidence of insurability). With match AD&D (accidental death & dismemberment) benefit
		Spouse - Newly eligible spouses/domestic partners can elect coverage up to \$30,000 without providing proof of good health (evidence of insurability). With a matching AD&D (accidental death & dismemberment) benefit
		Children - are eligible from live birth to age 26 to a maximum of \$15,000 with a matching AD&D benefit
		RATES - Are based on age and salary

UNUM PROVIDENT (TERM LIFE)

Employees have a guaranteed issued amount of 5x their salary or \$100,000, the lesser of the two amounts that may be picked up in increments of \$10,000
picked up in increments of \$5,000. Child(ren) - have a guaranteed issued amount of \$10,000 that may be picked up in increments of \$2,000.
RATES - Are determined by age

FLEX SPENDING ACCOUNTS

100% Employee Paid	This program allows employees to set aside a specific dollar amount per calendar year for out-of pocket medical expenses and dependent care
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SUPPLEMENTAL RETIREMENT

100% Employee Paid	The University offers a 403(b) and a 457(b). This program allows employees to set aside additional dollars as a supplement to your main retirement.
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