

New Mexico Highlands University
Bi-Weekly Contribution Schedule - Rates Effective 7/1/12 – 6/30/13

EMPLOYEE ONLY

		Salary 0-14,999		Salary 15,000-19,999		Salary 20,000-24,999		Salary 25,000 & Up	
		Employee 25%	NMHU 75%	Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross/Blue Shield	198.71	49.68	149.03	59.61	139.10	69.55	129.16	79.48	119.23
Presbyterian HMO OR Lovelace	170.86	42.72	128.15	51.26	119.60	59.80	111.06	68.34	102.52
Presbyterian / High Deductible Health Plan	136.69	34.17	102.52	41.01	95.68	47.84	88.85	54.68	82.01
Delta Dental	13.39	3.35	10.04	4.02	9.37	4.69	8.70	5.36	8.03

EMPLOYEE + SPOUSE

		Salary 0-14,999		Salary 15,000-19,999		Salary 20,000-24,999		Salary 25,000 & Up	
		Employee 25%	NMHU 75%	Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross/Blue Shield	447.11	111.78	335.33	134.13	312.98	156.49	290.62	178.84	268.27
Presbyterian HMO OR Lovelace	384.42	96.11	288.32	115.33	269.09	134.55	249.87	153.76	230.66
Presbyterian / High Deductible Health Plan	307.54	76.88	230.66	92.26	215.28	107.64	199.90	123.02	184.52
Delta Dental	26.77	6.69	20.08	8.03	18.74	9.37	17.40	10.71	16.06

EMPLOYEE + CHILD

		Salary 0-14,999		Salary 15,000-19,999		Salary 20,000-24,999		Salary 25,000 & Up	
		Employee 25%	NMHU 75%	Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross/Blue Shield	278.20	69.55	208.65	83.46	194.74	97.37	180.83	111.28	166.92
Presbyterian HMO OR Lovelace	239.20	59.80	179.40	71.76	167.44	83.72	155.48	95.68	143.52
Presbyterian / High Deductible Health Plan	191.36	47.84	143.52	57.41	133.95	66.98	124.38	76.54	114.82
Delta Dental	26.77	6.69	20.08	8.03	18.74	9.37	17.40	10.71	16.06

FAMILY

		Salary 0-14,999		Salary 15,000-19,999		Salary 20,000-24,999		Salary 25,000 & Up	
		Employee 25%	NMHU 75%	Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross/Blue Shield	586.20	146.55	439.65	175.86	410.34	205.17	381.03	234.48	351.72
Presbyterian HMO OR Lovelace	504.02	126.01	378.02	151.21	352.81	176.41	327.61	201.61	302.41
Presbyterian / High Deductible Health Plan	403.22	100.80	302.42	120.97	282.25	141.13	262.09	161.29	241.93
Delta Dental	40.16	10.04	30.12	12.05	28.11	14.06	26.10	16.06	24.10

DOMESTIC PARTNER ADULT ONLY

		Salary 0-14,999		Salary 15,000-19,999		Salary 20,000-24,999		Salary 25,000 & Up	
		Employee 25%	NMHU 75%	Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross/Blue Shield	248.40	62.10	186.30	74.52	173.88	86.94	161.46	99.36	149.04
Presbyterian HMO OR Lovelace	213.56	53.39	160.17	64.07	149.49	74.75	138.81	85.43	128.13
Presbyterian / High Deductible Health Plan	170.85	42.71	128.14	51.25	119.60	59.80	111.05	68.34	102.51
Delta Dental	13.38	3.34	10.04	4.01	9.37	4.68	8.70	5.35	8.03

DOMESTIC CHILD ONLY

		Salary 0-14,999		Salary 15,000-19,999		Salary 20,000-24,999		Salary 25,000 & Up	
		Employee 25%	NMHU 75%	Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross/Blue Shield	79.49	19.87	59.62	23.85	55.64	27.82	51.67	31.80	47.69
Presbyterian HMO OR Lovelace	68.34	17.08	51.26	20.50	47.84	23.92	44.42	27.34	41.00
Presbyterian / High Deductible Health Plan	54.67	13.67	41.00	16.40	38.27	19.13	35.54	21.87	32.80
Delta Dental	13.38	3.11	9.33	4.01	9.37	4.68	8.70	5.35	8.03

PARTNER w/EMPLOYEE + CHILD

	TOTAL COST	Salary 0-14,999		Salary 15,000-19,999		Salary 20,000-24,999		Salary 25,000 & Up	
		Employee 25%	NMHU 75%	Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross/Blue Shield	308.00	77.00	231.00	92.40	215.60	107.80	200.20	123.20	184.80
Presbyterian HMO OR Lovelace	264.82	66.20	198.62	79.45	185.37	92.69	172.13	105.93	158.89
Presbyterian / High Deductible Health Plan	211.86	52.96	158.90	63.56	148.30	74.15	137.71	84.74	127.12
Delta Dental	13.39	3.35	10.04	4.02	9.37	4.69	8.70	5.36	8.03

PARTNER + MULTIPLE DEPENDENTS

	TOTAL COST	Salary 0-14,999		Salary 15,000-19,999		Salary 20,000-24,999		Salary 25,000 & Up	
		Employee 25%	NMHU 75%	Employee 30%	NMHU 70%	Employee 35%	NMHU 65%	Employee 40%	NMHU 60%
Blue Cross/Blue Shield	387.49	96.87	290.62	116.25	271.24	135.62	251.87	155.00	232.49
Presbyterian HMO OR Lovelace	333.16	83.29	249.87	99.95	233.21	116.61	216.55	133.26	199.90
Presbyterian / High Deductible Health Plan	266.53	66.63	199.90	79.96	186.57	93.29	173.24	106.61	159.92
Delta Dental	26.77	6.69	20.08	8.03	18.74	9.37	17.40	10.71	16.06

VISON SERVICE PLAN

		Regular Vision			
100% Employee Paid		Employee Only	Employee + Spouse	Employee + Child	Family
		2.48	4.68	4.68	6.90

		Domestic Vision			
100% Employee Paid		Domestic Partner Adult Only	Domestic Child Only	Domestic w/Employee + Child	Domestic + Multiple Dependents
		2.20	2.20	2.22	4.42

ARAG LEGAL

		Regular Legal			
100% Employee Paid		Employee Only	Employee + Spouse	Employee + Child	Family
		7.90	10.06	10.06	10.35

		Legal + Senior Advocate			
100% Employee Paid		Employee Only	Employee + Spouse	Employee + Child	Family
		11.82	13.98	13.98	14.28

BASIC LIFE

Paid by NMHU	NMHU provides \$50,000 of Basic Term Life 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	GLOBE LIFE (WHOLE LIFE INSURANCE)				
	Paid up to age 65 (issue age 0-55) Guaranteed issue \$75,000; Cash value				
	Paid up to age 100 (issue age 0-80) Guaranteed issue \$30,000; Cash value				

STANDARD LIFE (TERM LIFE)

100% Employee Paid	Employees are allowed to pick up to 3 times their annual salary or \$150,000, the lesser of the two amounts.				
	Rates are based on age and salary.				
	Dependent life is available for your spouse (\$10,000) and dependent child(ren) (\$5,000)				

FLEX SPENDING ACCOUNTS (Medical & Dependent Care)

100% Employee Paid	Risk Management allows for up to \$5,000 per calendar year to be set aside for out-of-pocket medical expenses and dependent care.				
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