

**STATE OF NEW HAMPSHIRE
PART TIME HMO AND POS MEDICAL
PART TIME ACTIVE UNREPRESENTED (CLASSIFIED, UNCLASSIFIED, NON-CLASSIFIED AND HR CONFIDENTIAL) EMPLOYEES CONTRIBUTION CHART
WITH \$20/\$40/\$60 EE CONTRIBUTIONS
EFFECTIVE 03/21/2014**

The employee's share of Point of Service and HMO plans are the 26 PP respective working rate, less the employee share from the CBA (\$20/\$40/\$60), times the % of participation, then the employee share from the CBA (\$20/\$40/\$60) added back.

HMO Group: 30 to 31.5 Hours

	HMO EE CONTRIBUTION		HMO ER CONTRIBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$72.96	\$1,896.96	\$211.82	\$5,507.32	\$7,404.28
HL-2	\$145.91	\$3,793.66	\$423.62	\$11,014.12	\$14,807.78
HL-3	\$230.25	\$5,986.50	\$681.00	\$17,706.00	\$23,692.50

POS

	POS EE CONTRIBUTION		POS ER CONTRIBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$84.05	\$2,185.30	\$256.20	\$6,661.20	\$8,846.50
HL-2	\$168.10	\$4,370.60	\$512.40	\$13,322.40	\$17,693.00
HL-3	\$265.76	\$6,909.76	\$823.05	\$21,399.30	\$28,309.06

HMO Group: 32 to 34.5 Hours

	HMO EE CONTRIBUTION		HMO ER CONTRIBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$59.72	\$1,552.72	\$225.06	\$5,851.56	\$7,404.28
HL-2	\$119.43	\$3,105.18	\$450.10	\$11,702.60	\$14,807.78
HL-3	\$187.69	\$4,879.94	\$723.56	\$18,812.56	\$23,692.50

POS

	POS EE CONTRIBUTION		POS ER CONTRIBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$68.04	\$1,769.04	\$272.21	\$7,077.46	\$8,846.50
HL-2	\$136.08	\$3,538.08	\$544.42	\$14,154.92	\$17,693.00
HL-3	\$214.32	\$5,572.32	\$874.49	\$22,736.74	\$28,309.06

HMO Group: 35.0 to 37.0 Hours

	HMO EE CONTRIBUTION		HMO ER CONTRIBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$38.53	\$1,001.78	\$246.25	\$6,402.50	\$7,404.28
HL-2	\$77.07	\$2,003.82	\$492.46	\$12,803.96	\$14,807.78
HL-3	\$119.59	\$3,109.34	\$791.66	\$20,583.16	\$23,692.50

POS

	POS EE CONTRIBUTION		POS ER CONTRIBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$42.42	\$1,102.92	\$297.83	\$7,743.58	\$8,846.50
HL-2	\$84.84	\$2,205.84	\$595.66	\$15,487.16	\$17,693.00
HL-3	\$132.02	\$3,432.52	\$956.79	\$24,876.54	\$28,309.06

MONTHLY WORKING RATES

	POS	HMO
HL-1: 1 PERSON	\$ 737.21	\$ 617.02
HL-2: 2 PERSON	\$ 1,474.41	\$ 1,233.98
HL-3: FAMILY	\$ 2,359.08	\$ 1,974.37

POS 26 PP %

		%		
1 PERSON	340.25	20%	64.05	20.00
2 PERSON	680.50	20%	128.10	40.00
FAMILY	1,088.81	20%	205.76	60.00

HMO 26 PP %

		%		
1 PERSON	284.78	20%	52.96	20.00
2 PERSON	569.53	20%	105.91	40.00
FAMILY	911.25	20%	170.25	60.00

POINT OF SERVICE (POS)

WEEKLY HRS RANGE	COMPANY-STATE SHARE (3006)								EMPLOYEE SHARE (3004)							
	%	TYPE	PLAN	AMT PER 26				%	TYPE	PLAN	AMT PER 26					
				PP							26 PP					
30.0 (30 to 31.5)	80%	HL	1				256.20	20%	HL	1				84.05		
		HL	2				512.40		HL	2				168.10		
		HL	3				823.05		HL	3				265.76		
32.0 (32 to 34.5)	85%	HL	1				272.21	15%	HL	1				68.04		
		HL	2				544.42		HL	2				136.08		
		HL	3				874.49		HL	3				214.32		
35.0 (35 to 37)	93%	HL	1				297.83	7%	HL	1				42.42		
		HL	2				595.66		HL	2				84.84		
		HL	3				956.79		HL	3				132.02		
FULL TIME (37.5 to >)	100%	HL	1				320.25	0%	HL	1				20.00		
		HL	2				640.50		HL	2				40.00		
		HL	3				1028.81		HL	3				60.00		

HEALTH MAINTENANCE ORGANIZATION (HMO)

WEEKLY HRS RANGE	COMPANY-STATE SHARE (3003)								EMPLOYEE SHARE (3001)							
	%	TYPE	PLAN	AMT PER 26				%	TYPE	PLAN	AMT PER 26					
				PP							26 PP					
30.0 (30 to 31.5)	80%	HL	1				211.82	20%	HL	1				72.96		
		HL	2				423.62		HL	2				145.91		
		HL	3				681.00		HL	3				230.25		
32.0 (32 to 34.5)	85%	HL	1				225.06	15%	HL	1				59.72		
		HL	2				450.10		HL	2				119.43		
		HL	3				723.56		HL	3				187.69		
35.0 (35 to 37)	93%	HL	1				246.25	7%	HL	1				38.53		
		HL	2				492.46		HL	2				77.07		
		HL	3				791.66		HL	3				119.59		
FULL TIME (37.5 to >)	100%	HL	1				264.78	0%	HL	1				20.00		
		HL	2				529.53		HL	2				40.00		
		HL	3				851.25		HL	3				60.00		