STATE OF NEW HAMPSHIRE
FULL TIME ACTIVE EMPLOYEE DENTAL SAME GENDER SPOUSE
STATE AND IMPUTTED WAGE CHART
EFFECTIVE 01/01/2012

1/23/2012 2:09 PM

MONTHLY WORKING RATE	
1 PERSON	$ 37.96
2 PERSON	$ 72.64
FAMILY	$ 127.18

	STATE SHARE									EMPLOYEE CONTRIBUTIONS			
	STATE SHARE FRINGE TYPE				IMPUTED WAGES FRINGE TYPE					PRE AND AFTER TAX			
TIERS	TYPE		PLAN	AMT PER 24 PP	TYPE		PLAN	AMT PER 24 PP		TYPE		PLAN	AMT PER 26 PP
ONE	DENTS		ONE	$ 18.98	DENTW		ONE	$ -		DNTLP		ONE	$ -
ONE>TWO	DENTS		TWO	$ 18.98	DENTW		TWO	$ 17.34		DNTLX		TWO	$ -
ONE>FAM	DENTS		FAM	$ 18.98	DENTW		FAM	$ 44.61		DNTLX		FAM	$ -
TWO	DENTS		TWO	$ 36.32	DENTW		TWO	$ -		DNTLP		TWO	$ -
TWO>FAM	DENTS		FAM	$ 36.32	DENTW		FAM	$ 27.27		DNTLX		FAM	$ -
FAM	DENTS		FAM	$ 63.59	DENTW		FAM	$ -		DNTLP		TWO	$ -
FAM>FAM	DENTS		FAM	$ 46.25	DENTW		FAM	$ 17.34		DNTLX		FAM	$ -
				PROOF									
ONE	DENTS		ONE	455.52	455.52		$ -						
ONE>TWO	DENTS		TWO	871.68	871.68		$ -						
ONE.3	DENTS		FAM	1,526.16	1,526.16		$ -						
TWO	DENTS		TWO	871.68	871.68		$ -						
TWO>FAM	DENTS		FAM	1,526.16	1,526.16		$ -						
FAM	DENTS		FAM	1,526.16	1,526.16		$ -						
FAM>FAM	DENTS		FAM	1,526.16	1,526.16		$ -						