STATE OF NEW HAMPSHIRE
PART TIME HMO MEDICAL ACTIVE EMPLOYEE SAME GENDER SPOUSE
STATE, IMPUTED AND EMPLOYEE CONTRIBUTION CHART
BI-WEEKLY RATES WITH $20, $40, $60 EE FEE

EFFECTIVE 01/01/2013

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 26 PP				
1 PERSON	$ 296.75	20%	$ 55.35	$ 20.00	$ 75.35
2 PERSON	$ 593.46	20%	$ 110.69	$ 40.00	$ 150.69
FAMILY	$ 949.54	20%	$ 177.91	$ 60.00	$ 237.91
1 PERSON	$ 296.75	15%	$ 41.51	$ 20.00	$ 61.51
2 PERSON	$ 593.46	15%	$ 83.02	$ 40.00	$ 123.02
FAMILY	$ 949.54	15%	$ 133.43	$ 60.00	$ 193.43
1 PERSON	$ 296.75	7%	$ 19.37	$ 20.00	$ 39.37
2 PERSON	$ 593.46	7%	$ 38.74	$ 40.00	$ 78.74
FAMILY	$ 949.54	7%	$ 62.27	$ 60.00	$ 122.27

MONTHLY WORKING RATES	
	HMO
1 PERSON	$ 642.95
2 PERSON	$ 1,285.83
FAMILY	$ 2,057.33

		HEALTH MAINTENANCE ORGANIZATION										EMPLOYEE CONTRIBUTIONS					
		STATE SHARE FRINGE TYPE					IMPUTED WAGES FRINGE TYPE					PRE TAX			AFTER TAX		
WEEKLY HRS RANGE	TIERS	%	TYPE	PLAN	AMT PER 26 PP		TYPE	PLAN	AMT PER 26 PP	%		TYPE	PLAN	AMT PER 26 PP	TYPE	PLAN	AMT PER 26 PP
30.0	ONE	80%	HLTHS	HMO1	$ 221.40		HLTHW	HMO1	$ -	20%		HLTHP	HMO1	$ 75.35	HLTHX	HMO1	$ -
	ONE>TWO		HLTHS	HMO2	$ 221.40		HLTHW	HMO2	$ 221.37			HLTHP	HMO2	$ 95.35	HLTHX	HMO2	$ 55.34
	ONE>FAM		HLTHS	HMOF	$ 221.40		HLTHW	HMOF	$ 490.23			HLTHP	HMOF	$ 115.35	HLTHX	HMOF	$ 122.56
30.0	TWO		HLTHS	HMO2	$ 442.77		HLTHW	HMO2	$ -			HLTHP	HMO2	$ 150.69	HLTHX	HMO2	$ -
	TWO>FAM		HLTHS	HMOF	$ 442.77		HLTHW	HMOF	$ 268.86			HLTHP	HMOF	$ 170.69	HLTHX	HMOF	$ 67.22
30.0	FAM		HLTHS	HMOF	$ 711.63		HLTHW	HMOF	$ -			HLTHP	HMOF	$ 237.91	HLTHX	HMOF	$ -
	FAM>FAM		HLTHS	HMOF	$ 490.26		HLTHW	HMOF	$ 221.37			HLTHP	HMOF	$ 237.91	HLTHX	HMOF	$ -
(30 to 31.5)																	
32.0	ONE	85%	HLTHS	HMO1	$ 235.24		HLTHW	HMO1	$ -	15%		HLTHP	HMO1	$ 61.51	HLTHX	HMO1	$ -
	ONE>TWO		HLTHS	HMO2	$ 235.24		HLTHW	HMO2	$ 235.20			HLTHP	HMO2	$ 81.51	HLTHX	HMO2	$ 41.51
	ONE>FAM		HLTHS	HMOF	$ 235.24		HLTHW	HMOF	$ 520.87			HLTHP	HMOF	$ 101.51	HLTHX	HMOF	$ 91.92
32.0	TWO		HLTHS	HMO2	$ 470.44		HLTHW	HMO2	$ -			HLTHP	HMO2	$ 123.02	HLTHX	HMO2	$ -
	TWO>FAM		HLTHS	HMOF	$ 470.44		HLTHW	HMOF	$ 285.67			HLTHP	HMOF	$ 143.02	HLTHX	HMOF	$ 50.41
32.0	FAM		HLTHS	HMOF	$ 756.11		HLTHW	HMOF	$ -			HLTHP	HMOF	$ 193.43	HLTHX	HMOF	$ -
	FAM>FAM		HLTHS	HMOF	$ 520.91		HLTHW	HMOF	$ 235.20			HLTHP	HMOF	$ 193.43	HLTHX	HMOF	$ -
(32 to 34.5)																	
35.0	ONE	93%	HLTHS	HMO1	$ 257.38		HLTHW	HMO1	$ -	7%		HLTHP	HMO1	$ 39.37	HLTHX	HMO1	$ -
	ONE>TWO		HLTHS	HMO2	$ 257.38		HLTHW	HMO2	$ 257.34			HLTHP	HMO2	$ 59.37	HLTHX	HMO2	$ 19.37
	ONE>FAM		HLTHS	HMOF	$ 257.38		HLTHW	HMOF	$ 569.89			HLTHP	HMOF	$ 79.37	HLTHX	HMOF	$ 42.90
35.0	TWO		HLTHS	HMO2	$ 514.72		HLTHW	HMO2	$ -			HLTHP	HMO2	$ 78.74	HLTHX	HMO2	$ -
	TWO>FAM		HLTHS	HMOF	$ 514.72		HLTHW	HMOF	$ 312.55			HLTHP	HMOF	$ 98.74	HLTHX	HMOF	$ 23.53
35.0	FAM		HLTHS	HMOF	$ 827.27		HLTHW	HMOF	$ -			HLTHP	HMOF	$ 122.27	HLTHX	HMOF	$ -
	FAM>FAM		HLTHS	HMOF	$ 569.93		HLTHW	HMOF	$ 257.34			HLTHP	HMOF	$ 122.27	HLTHX	HMOF	$ -
(35 to 37)																	
FULL TIME	ONE	100%	HLTHS	HMO1	$ 276.75		HLTHW	HMO1	$ -	0%		HLTHP	HMO1	$ 20.00			
	TWO		HLTHS	HMO2	$ 276.75		HLTHW	HMO2	$ 276.71			HLTHP	HMO2	$ 40.00			
(37.5 to >)	FAM		HLTHS	HMOF	$ 276.75		HLTHW	HMOF	$ 612.79			HLTHP	HMOF	$ 60.00			