

STATE OF NEW HAMPSHIRE
 PART TIME DENTAL UNREPRESENTED (ALL), SEA, TEAMSTERS LOCAL 633, AND NEPBA EMPLOYEES
 STATE & EMPLOYEE CONTRIBUTION CHART
 EFFECTIVE 01/01/2015

12/19/2014 4:42 PM

30 HOURS TO 31.5 HOURS

	DENTAL EE CONTRIBUTION		DENTAL ER CONTRBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
DN-1	\$4.40	\$114.40	\$13.62	\$354.12	\$468.52
DN-2	\$8.49	\$220.74	\$25.98	\$675.48	\$896.22
DN-3	\$14.47	\$376.22	\$45.90	\$1,193.40	\$1,569.62

32 HOURS TO 34.5 HOURS

	DENTAL EE CONTRIBUTION		DENTAL ER CONTRBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
DN-1	\$3.55	\$92.30	\$14.47	\$376.22	\$468.52
DN-2	\$6.87	\$178.62	\$27.60	\$717.60	\$896.22
DN-3	\$11.61	\$301.86	\$48.76	\$1,267.76	\$1,569.62

35 HOURS TO 37 HOURS

	DENTAL EE CONTRIBUTION		DENTAL ER CONTRBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
DN-1	\$2.19	\$56.94	\$15.83	\$411.58	\$468.52
DN-2	\$4.27	\$111.02	\$30.20	\$785.20	\$896.22
DN-3	\$7.02	\$182.52	\$53.35	\$1,387.10	\$1,569.62

	MONTHLY WORKING RATES	ANNUAL
DN-1: 1 PERSON	\$39.04	\$468.48
DN-2: 2 PERSON	\$74.69	\$896.28
DN-3: FAMILY	\$130.80	\$1,569.60

DENTAL 26 PP				
18.02	20%	3.40	1.00	4.40
34.47	20%	6.49	2.00	8.49
60.37	20%	11.47	3.00	14.47

DELTA DENTAL

WEEKLY HRS RANGE	COMPANY - STATE SHARE (3023)				EMPLOYEE SHARE (3021/3022)			
	%	TYPE	PLAN	AMT PER 26	%	TYPE	PLAN	AMT PER
				PP				26 PP
30.0 (30 to 31.5)	80%	DN	1	13.62	20%	DN	1	\$4.40
		DN	2	25.98		DN	2	\$8.49
		DN	3	45.90		DN	3	\$14.47
32.0 (32 to 34.5)	85%	DN	1	14.47	15%	DN	1	\$3.55
		DN	2	27.60		DN	2	\$6.87
		DN	3	48.76		DN	3	\$11.61
35.0 (35 to 37)	93%	DN	1	\$15.83	7%	DN	1	\$2.19
		DN	2	\$30.20		DN	2	\$4.27
		DN	3	\$53.35		DN	3	\$7.02
FULL TIME (37.5 to >)	100%	DN	1	\$18.02	0%	DN	1	\$1.00
		DN	2	\$34.47		DN	2	\$2.00
		DN	3	\$60.37		DN	3	\$3.00