

NMSU Benefit Premiums

Effective January 1, 2024

Premium Contributions for Medical, Group Life, and Long-Term Disability are shared between NMSU and the employees based on the following salary schedule:

Annual Salary	NMSU %	Employee %
\$0 - \$35,999	80	20
\$36,000 - \$44,000	70	30
\$44,001+	60	40

9-month premiums are calculated by taking the 12-month premium, multiplying by 24 pays and dividing by 18 paychecks.
 9-month premiums are collected over the 9-month academic year (August-May) for the fiscal year coverage (July 1-June 30).
 See ARP 8.21 through 8.27 for information about coverage after termination of employment.

Medical Premiums Per Paycheck

Plan	Premiums for 12-month employees				Premiums for 9-month employees			
	Total Per Pay Period	Employee 20%	Employee 30%	Employee 40%	Total Per Pay Period	Employee 20%	Employee 30%	Employee 40%
Presbyterian HMO Employee Only	\$295.51	\$59.10	\$88.65	\$118.20	\$394.01	\$78.80	\$118.20	\$157.61
Presbyterian HMO Employee + Spouse	\$664.90	\$132.98	\$199.47	\$265.96	\$886.53	\$177.31	\$265.96	\$354.61
Presbyterian HMO Employee + Child	\$531.93	\$106.39	\$159.58	\$212.77	\$709.24	\$141.85	\$212.77	\$283.70
Presbyterian HMO Family	\$871.75	\$174.35	\$261.53	\$348.70	\$1,162.33	\$232.47	\$348.70	\$464.93
BCBSNM HMO Employee Only	\$295.51	\$59.10	\$88.65	\$118.20	\$394.01	\$78.80	\$118.20	\$157.61
BCBSNM HMO Employee + Spouse	\$664.90	\$132.98	\$199.47	\$265.96	\$886.53	\$177.31	\$265.96	\$354.61
BCBSNM HMO Employee + Child	\$531.93	\$106.39	\$159.58	\$212.77	\$709.24	\$141.85	\$212.77	\$283.70
BCBSNM HMO Family	\$871.75	\$174.35	\$261.53	\$348.70	\$1,162.33	\$232.47	\$348.70	\$464.93
Cigna HMO(OAPIN) Employee Only	\$292.56	\$58.51	\$87.77	\$117.02	\$390.07	\$78.01	\$117.02	\$156.03
Cigna HMO(OAPIN) Employee + Spouse	\$658.25	\$131.65	\$197.48	\$263.30	\$877.67	\$175.53	\$263.30	\$351.07
Cigna HMO(OAPIN) Employee + Child	\$526.61	\$105.32	\$157.98	\$210.64	\$702.15	\$140.43	\$210.64	\$280.86
Cigna HMO(OAPIN) Family	\$863.03	\$172.61	\$258.91	\$345.21	\$1,150.70	\$230.14	\$345.21	\$460.28

BCBSNM PPO Employee Only	\$343.67	\$68.73	\$103.10	\$137.47
BCBSNM PPO Employee + Spouse	\$773.31	\$154.66	\$231.99	\$309.32
BCBSNM PPO Employee + Child	\$618.63	\$123.73	\$185.59	\$247.45
BCBSNM PPO Family	\$1,013.91	\$202.78	\$304.17	\$405.56
Cigna PPO (OAP) Employee Only	\$340.23	\$68.05	\$102.07	\$136.09
Cigna PPO (OAP) Employee + Spouse	\$765.58	\$153.12	\$229.67	\$306.23
Cigna PPO (OAP) Employee + Child	\$612.44	\$122.49	\$183.73	\$244.98
Cigna PPO (OAP) Family	\$1,003.77	\$200.75	\$301.13	\$401.51

\$458.23	\$91.65	\$137.47	\$183.29
\$1,031.08	\$206.22	\$309.32	\$412.43
\$824.84	\$164.97	\$247.45	\$329.94
\$1,351.88	\$270.38	\$405.56	\$540.75
\$453.64	\$90.73	\$136.09	\$181.46
\$1,020.77	\$204.15	\$306.23	\$408.31
\$816.59	\$163.32	\$244.98	\$326.63
\$1,338.36	\$267.67	\$401.51	\$535.34

Dental Premiums Per Paycheck

	Premiums for 12-month employees	
	Total Per Pay Period Contribution	Employee Pay Period Contribution
Employee Only	\$17.78	\$7.11
Employee + Spouse	\$35.54	\$14.21
Employee + Child	\$40.89	\$16.35
Family	\$53.31	\$21.32

Premiums for 9-month employees	
Total Per Pay Period Contribution	Employee Pay Period Contribution
\$23.71	\$9.48
\$47.38	\$18.95
\$54.51	\$21.81
\$71.08	\$28.43

Vision Premiums Per Paycheck

	Premiums for 12-month employees
Employee Only	\$2.50
Employee + Spouse	\$5.26
Employee + Child	\$5.63
Family	\$8.99

Premiums for 9-month employees
\$3.33
\$7.01
\$7.51
\$11.99