

# NMSU Benefit Premiums

## Effective July 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	\$325.06	\$65.01	\$97.52	\$130.02	\$433.41	\$86.68	\$130.02	\$173.37
Presbyterian HMO Employee + Spouse	\$731.39	\$146.28	\$219.42	\$292.56	\$975.19	\$195.04	\$292.56	\$390.07
Presbyterian HMO Employee + Child	\$585.13	\$117.03	\$175.54	\$234.05	\$780.17	\$156.03	\$234.05	\$312.07
Presbyterian HMO Family	\$958.93	\$191.79	\$287.68	\$383.57	\$1,278.57	\$255.71	\$383.57	\$511.43
BCBSNM HMO Employee Only	\$325.06	\$65.01	\$97.52	\$130.02	\$433.41	\$86.68	\$130.02	\$173.37
BCBSNM HMO Employee + Spouse	\$731.39	\$146.28	\$219.42	\$292.56	\$975.19	\$195.04	\$292.56	\$390.07
BCBSNM HMO Employee + Child	\$585.13	\$117.03	\$175.54	\$234.05	\$780.17	\$156.03	\$234.05	\$312.07
BCBSNM HMO Family	\$958.93	\$191.79	\$287.68	\$383.57	\$1,278.57	\$255.71	\$383.57	\$511.43
Cigna HMO(OAPIN) Employee Only	\$321.81	\$64.36	\$96.54	\$128.72	\$429.08	\$85.82	\$128.72	\$171.63
Cigna HMO(OAPIN) Employee + Spouse	\$724.08	\$144.82	\$217.22	\$289.63	\$965.43	\$193.09	\$289.63	\$386.17
Cigna HMO(OAPIN) Employee + Child	\$579.27	\$115.85	\$173.78	\$231.71	\$772.36	\$154.47	\$231.71	\$308.94
Cigna HMO(OAPIN) Family	\$949.33	\$189.87	\$284.80	\$379.73	\$1,265.77	\$253.15	\$379.73	\$506.31

BCBSNM PPO Employee Only	\$378.04	\$75.61	\$113.41	\$151.21
BCBSNM PPO Employee + Spouse	\$850.64	\$170.13	\$255.19	\$340.26
BCBSNM PPO Employee + Child	\$680.50	\$136.10	\$204.15	\$272.20
BCBSNM PPO Family	\$1,115.30	\$223.06	\$334.59	\$446.12
Cigna PPO (OAP) Employee Only	\$374.26	\$74.85	\$112.28	\$149.70
Cigna PPO (OAP) Employee + Spouse	\$842.14	\$168.43	\$252.64	\$336.86
Cigna PPO (OAP) Employee + Child	\$673.69	\$134.74	\$202.11	\$269.47
Cigna PPO (OAP) Family	\$1,104.15	\$220.83	\$331.24	\$441.66

\$504.05	\$100.81	\$151.21	\$201.62
\$1,134.19	\$226.84	\$340.26	\$453.67
\$907.33	\$181.47	\$272.20	\$362.93
\$1,487.07	\$297.41	\$446.12	\$594.83
\$499.01	\$99.80	\$149.70	\$199.60
\$1,122.85	\$224.57	\$336.86	\$449.14
\$898.25	\$179.65	\$269.47	\$359.30
\$1,472.19	\$294.44	\$441.66	\$588.88

### Dental Premiums Per Paycheck

	Premiums for 12-month employees	
	Total Per Pay Period Contribution	Employee Pay Period Contribution
Employee Only	\$19.56	\$7.82
Employee + Spouse	\$39.09	\$15.64
Employee + Child	\$44.98	\$17.99
Family	\$58.64	\$23.46

Premiums for 9-month employees	
Total Per Pay Period Contribution	Employee Pay Period Contribution
\$26.08	\$10.43
\$52.12	\$20.85
\$59.97	\$23.99
\$78.19	\$31.27

### 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