

Annual Salary	NMSU %	Employee %
\$0 - \$26,249	80	20
\$26,250 - \$31,499	70	30
\$31,500+	60	40

Benefit Premiums
Effective July 1, 2009

Plan	Premiums for 12 month employees				Premiums for 9 month employees			
	Total Premium	Employee 20%	Employee 30%	Employee 40%	Total Premium	Employee 20%	Employee 30%	Employee 40%
BCBSNM PPO Employee Only	\$215.27	\$43.05	\$64.58	\$86.11	\$287.03	\$57.41	\$86.11	\$114.81
BCBSNM PPO Employee + Spouse	\$484.37	\$96.87	\$145.31	\$193.75	\$645.83	\$129.17	\$193.75	\$258.33
BCBSNM PPO Employee + Child	\$301.39	\$60.28	\$90.42	\$120.56	\$401.85	\$80.37	\$120.56	\$160.74
BCBSNM PPO Family	\$635.05	\$127.01	\$190.52	\$254.02	\$846.73	\$169.35	\$254.02	\$338.69
United PPO Employee Only	\$215.27	\$43.05	\$64.58	\$86.11	\$287.03	\$57.41	\$86.11	\$114.81
United PPO Employee + Spouse	\$484.37	\$96.87	\$145.31	\$193.75	\$645.83	\$129.17	\$193.75	\$258.33
United PPO Employee + Child	\$301.39	\$60.28	\$90.42	\$120.56	\$401.85	\$80.37	\$120.56	\$160.74
United PPO Family	\$635.05	\$127.01	\$190.52	\$254.02	\$846.73	\$169.35	\$254.02	\$338.69
Lovlace HMO Employee Only	\$185.10	\$37.02	\$55.53	\$74.04	\$246.80	\$49.36	\$74.04	\$98.72
Lovlace HMO Employee + Spouse	\$416.46	\$83.29	\$124.94	\$166.58	\$555.28	\$111.06	\$166.58	\$222.11
Lovlace HMO Employee + Child	\$259.13	\$51.83	\$77.74	\$103.65	\$345.51	\$69.10	\$103.65	\$138.20
Lovlace HMO Family	\$546.02	\$109.20	\$163.81	\$218.41	\$728.03	\$145.61	\$218.41	\$291.21
Presbyterian HMO Employee Only	\$185.10	\$37.02	\$55.53	\$74.04	\$246.80	\$49.36	\$74.04	\$98.72
Presbyterian HMO Employee + Spouse	\$416.46	\$83.29	\$124.94	\$166.58	\$555.28	\$111.06	\$166.58	\$222.11
Presbyterian HMO Employee + Child(ren)	\$259.13	\$51.83	\$77.74	\$103.65	\$345.51	\$69.10	\$103.65	\$138.20
Presbyterian HMO Family	\$546.02	\$109.20	\$163.81	\$218.41	\$728.03	\$145.61	\$218.41	\$291.21