

City of Nashua Benefits

NASHUA ASSOCIATION OF SCHOOL ADMINISTRATORS AND SUPERVISORS

2022-23 Plan Year



The effective date for medical, dental and vision insurance depends on the date of hire (or as defined in CBA):

- If hired on or before the 15th of the month, coverage is effective on the 1st of the next month;
- If after the 15th of the month, coverage is effective the 1st of the month following a full month of employment.

Please refer to respective plan documents for the effective date on all other benefits.

The rates listed within this document are based on full-time status. Please request prorated rates if you work part-time.

Title I teachers may purchase health insurance at group rates at own expense.

Type of Benefit	Benefits Detail	Benefit Cost	Per Pay:	22	26	
Health Insurance	Anthem HMO 1500/3000 Access Blue New England (PCP Required)	Single:		\$ 94.09	\$ 79.61	
		2 Person:		\$ 189.54	\$ 160.38	
		Family:		\$ 253.43	\$ 214.44	
	Anthem POS Blue Choice New England (PCP Required)	Single:		\$ 196.71	\$ 166.45	
		2 Person:		\$ 395.99	\$ 335.07	
		Family:		\$ 530.28	\$ 448.70	
	Anthem HDHP w/ HSA* Blue Choice New England (PCP required)	Single:		\$ 98.27	\$ 83.15	
		2Person:		\$ 197.53	\$ 167.14	
		Family:		\$ 254.83	\$ 215.63	
	Anthem HDHP w/no HSA	Single:		\$ 84.39	\$ 71.41	
	Blue Choice New England (PCP Required)	2 Person:		\$ 170.01	\$ 143.85	
		Family:		\$ 227.31	\$ 192.34	
Dental Insurance	NE Delta Dental Plans options are based on Employee Groups and Collective Bargaining Agreements (\$2000/ high option includes orthodontic benefit)	\$1,500 Plan				
		Single:		\$ 0.00	\$ 0.00	
		2 Person:		\$ 0.00	\$ 0.00	
		Family:		\$ 0.00	\$ 0.00	
		\$2,000 Plan				
		Single:		\$ 2.80	\$ 2.37	
		2 Person:		\$ 5.68	\$ 4.81	
		Family:		\$ 11.77	\$ 9.96	
Vision Insurance	Vision Service Plan (VSP) (no ID cards issued, access benefit with providers using your name, DOB, SSN)	Single:		\$ 0.00	\$ 0.00	
		2 Person:		\$ 0.00	\$ 0.00	
		Family:		\$ 0.00	\$ 0.00	
Term Life Insurance	The Hartford Basic Life: 100% Employer Paid, 1.5 x Annual Base w/\$200k Cap Optional Life*: 100% Employee paid / cost varies according to age. *maximum of \$250,000, combined maximum of \$300,000 for basic and optional coverage					
Disability Plan	UNUM 60% earnings, max benefit of \$6,000 month, 180 day elimination period. Employer Paid, minimum 20 hrs/wk. *Review your CBA or Employee Group Rules and Regulations for eligibility requirements					
Flex Spending Account	Benefit Strategies 1. <u>Dependent Care</u> (DCA) (November Open Enrollment) 2. <u>Health Care</u> (FSA)* *Employees are not eligible for FSA while contributing to a HSA Account (with HDHP)	Plan Max: \$5,000 (Jan 1 – Dec 31)				
		Plan Max: \$2,850 (Jul 1 – Jun 30)				
Other Insurances	Colonial Life 1. Medical Bridge 2. Accident Insurance	Contact Colonial Life 800-350-8167 Payroll deductions start after being notified by Colonial with the enrollments and changes				
Retirement Plans	Mandatory enrollment based on position/job classification and full-time status Employees contribute the following: Group I: 7% of wages					

403(b) & 457(b) plans 2022 contribution limits: \$20,500 (+ \$6,500 for 50+ years of age)

Contact NSD Human Resources

Please see your CBA or Employee Group Rules and Regulations for more information (i.e., tuition reimbursement and leave plans).