

NSM Insurance

Benefit Contribution Summary - 2025

	Monthly Premium	Monthly Employer Contribution	Monthly Employee Contribution	Employee Contribution Per Pay
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Medical - PPO Plan

Single	\$752.19	\$636.27	\$115.92	\$57.96
Employee + Spouse	\$1,730.79	\$1,375.17	\$355.62	\$177.81
Employee + Child(ren)	\$1,341.16	\$1,065.59	\$275.57	\$137.79
Family	\$2,206.94	\$1,640.11	\$566.83	\$283.42

Medical - HSA Plan

Single	\$625.46	\$552.14	\$73.32	\$36.66
Employee + Spouse	\$1,439.17	\$1,277.87	\$161.30	\$80.65
Employee + Child(ren)	\$1,115.18	\$991.11	\$124.07	\$62.04
Family	\$1,835.08	\$1,609.49	\$225.59	\$112.80

NSM HSA Funding

Single	-	\$112.50	-	-
Employee + Spouse	-	\$210.00	-	-
Employee + Child(ren)	-	\$210.00	-	-
Family	-	\$310.00	-	-

United Concordia Dental

Single	\$33.16	\$24.16	\$9.00	\$4.50
Employee + Spouse	\$84.34	\$67.34	\$17.00	\$8.50
Employee + Child(ren)	\$84.34	\$65.34	\$19.00	\$9.50
Family	\$84.34	\$54.34	\$30.00	\$15.00

VSP Vision

Single	\$6.02	-	\$6.02	\$3.01
Employee + Spouse	\$10.13	-	\$10.13	\$5.07
Employee + Child(ren)	\$10.34	-	\$10.34	\$5.17
Family	\$16.67	-	\$16.67	\$8.34

Additional Benefits - No Cost to Employee

Basic Life & AD&D
Short-Term Disability
Long Term Disability

Voluntary Benefits - Employee Paid

Voluntary Life and AD&D
Accident Insurance
Critical Illness Insurance
Hospital Indemnity