

## MEDICAL/PRESCRIPTION DRUG & DENTAL BENEFITS

Medical (including prescription drug) and dental coverage on the 1<sup>st</sup> day of the month following completion of one full month of full-time regular employment. *Employees selecting either the HMO or POS plans will be required to contribute a set amount per pay period depending on the plan selected.*

**Health Maintenance Organization (HMO):** Managed care plan that requires members to coordinate their health plan through a Primary Care Physician (PCP) and access services from In-Network New England Providers. Members can receive either 1) \$450 per calendar year toward a participating health club membership or 2) up to \$200 reimbursement per calendar year for approved home exercise equipment. Members are also eligible for biennial credit of \$100 per family member for eyeglasses or contact lenses.

**Point of Service (POS):** Allows members to coordinate their care and access services from both In-Network New England Providers and with Out-of-Network Providers. Care sought with Out-of-Network Providers is subject to applicable deductible and co-insurance amounts and amounts exceeding the allowable benefit. <https://www.anthem.com/>

### **\*Prescription Services**

Prescriptions for maintenance or long-term medications are available through Express Scripts.

<https://www.express-scripts.com/>

### **\*Dental**

Dental insurance is available through Delta Dental on the 1<sup>st</sup> day of the month following the completion of one full month of full time regular employment. *Employees selecting Delta Dental will be required to contribute a set amount per pay period depending on the plan selected.*

<https://www.nedelta.com/Home>

## OTHER BENEFITS OFFERED

### **\*NH Retirement System (NHRS)**

Mandatory contribution for full-time employees.  
7% per pay period.

<https://www.nhrs.org/>

### **\*Life Insurance (VOYA)**

\$50,000 group term life insurance coverage at no cost for full-time employees. Additional plans are available for full-time employees through voluntary election.

### **\*Flexible Spending Plan**

Pre-tax plan available for medical, dental and childcare expenses through ASIFlex for full-time employees through voluntary election.

<http://www.asiflex.com/>

### **\*Deferred Compensation Plan**

457 (b) Public Employees Deferred Compensation Plan is a pre-tax savings plan available through Empower Retirement to full-time employees through voluntary election.

[www.NHDCP.com](http://www.NHDCP.com)

### **\*Employee Assistance Program (EAP)**

Confidential and voluntary program that provides assistance to employees and their family members.

### **\*Mobile Health App**

The Mobile Health app can support your health with personalized tips and resources. Download at the App Store, Google Play or

[Home | Mobile Health  
\(mobilehealthconsumer.com\)](http://www.mobilehealthconsumer.com)

**\*On-line account access available with registration**

## HOURS AND PAY POLICIES

### **Standard Work Week**

Permanent full-time employees work a basic week of 37.5 or 40 hours, depending upon job assignment. Overtime may be required for certain positions.

### **Wage Increases**

Employee performance is evaluated annually. A full-time employee who receives a satisfactory evaluation will receive a salary increment on their anniversary date if the pay range allows.

### **Holidays**

Ten paid holidays and three paid floating holidays per calendar year for full-time employees. Floating holidays are accrued on July 1<sup>st</sup>, October 1<sup>st</sup> and January 1<sup>st</sup>. *All Floating Holidays must be used within the Fiscal Year in which they accrued.*

### **Longevity**

Upon completion of 10 years of continuous full-time service, an employee receives a \$350 annual bonus, plus \$350 for each 5-year period thereafter.

## ADDITIONAL INFORMATION

### **NH Employee Portal**

<https://apps.das.nh.gov/EmployeePortal/>

### **State Employees' Association**

<https://www.seiu1984.org/>

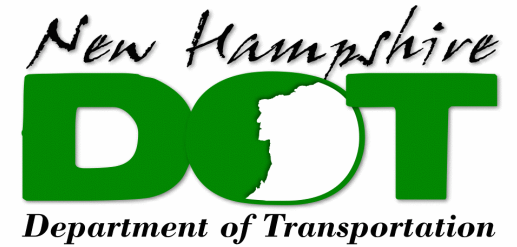
**LEAVE ACCRUAL POLICY**

**\*ANNUAL LEAVE**

CONTINUOUS SERVICE	MONTHLY ACCRUAL	DAYS/ YEAR	MAX DAYS
00-01 yr	1.00 day	12	12
02-08 yrs	1.25 days	15	32
09-15 yrs	1.50 days	18	38
16-20 yrs	1.75 days	21	44
21+ yrs	2.00 days	24	50

**\*SICK LEAVE**

CONTINUOUS SERVICE	MONTHLY ACCRUAL	DAYS/ YEAR	MAX DAYS
01-08 yrs	1.25 days	15	90
09-15 yrs	1.25 days	15	105
16+ yrs	1.25 days	15	120



**Summarized Benefit and  
Employment Information  
for Full-Time Employees**

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(EOE)

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Provided courtesy of the Bureau of Human Resources