

City of Nashua Benefits

NSD FOOD SERVICE WORKERS / COOKS & ASSISTANTS

2026-27 Plan Year



The effective date 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 health rates listed within this document are based on 35 hours/wk. Please request prorated rates if you work part-time.

Type of Benefit	Benefit Detail	Benefit Cost Per Pay: 37	
Health Insurance	Anthem HMO 1500/3000	Single:	\$ 87.64
	Access Blue New England (PCP Required)	2 Person:	\$ 176.55
		Family:	\$ 230.06
	Anthem POS	Single:	\$ 183.23
	Blue Choice New England (PCP Required)	2 Person:	\$ 368.85
		Family:	\$ 493.93
	Anthem HDHP w/ HSA*	Single:	\$ 86.86
	Blue Choice New England (PCP Required)	2 Person:	\$ 174.72
		Family:	\$ 228.09
*Employees must have an HSA account with Anthem WealthCare prior to the City's contribution to be deposited in July. Health Savings Account (HSA): tax-deferred account for use with covering your deductible when enrolled in the High Deductible Health Plan (HDHP) HSA City Contributions: \$1,500 for one person or \$3,000 for two person or family (see your CBA for distribution schedule) HSA Employee Contributions: up to \$2,900/tax year one person, up to \$5,750/tax year for two person or family Annual Combined Contribution Max = \$4,400/one person and \$8,750/2P or family (+ \$1,000 for 55+ years of age)			
Dental Insurance	Anthem HDHP w/no HSA	Single:	\$ 78.61
	Blue Choice New England (PCP Required)	2 Person:	\$ 158.36
		Family:	\$ 211.73
	NE Delta Dental 1500 Plan		
	Plan options are based on Employee Groups and Collective Bargaining Agreements	Single:	\$ 0.00
		2 Person:	\$ 16.77
		Family:	\$ 40.52
Vision Insurance	Vision Service Plan (VSP) (no ID cards issued, access benefit with providers using your name, DOB, SSN)	Single:	\$ 2.39
		2 Person:	\$ 4.79
		Family:	\$ 7.70
Term Life Insurance	The Hartford Basic Life: 100% Employer Paid, Tier I- 1 x Annual Base Tier 2 and 3- \$7,500 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	Met Life Offered by Union at Employee's sole expense. *Review your CBA or Employee Group Rules and Regulations for eligibility requirements		
Flex Spending Account	Voya 1. <u>Dependent Care</u> (DCA) 2. <u>Health Care</u> (FSA)* *Employees are not eligible for FSA while contributing to a HSA Account (with HDHP)	Plan Max: \$7,500 (Jul 1 – Jun 30)	
		Plan Max: \$3,400 (Jul 1 – Jun 30)	
Other Insurances	Colonial Life Medical Bridge Critical Illness Accident Insurance Life Insurance Payroll deductions start after being notified by Colonial.	Contact Colonial Life	
		www.coloniallife.com	
Pension Plan	Mandatory enrollment based on position/job classification and full-time status (35+ hrs.) Employees contribute the following: Group I: 7% of wage		
Retirement Plans	403(b) Plan - Contact NSD Human Resources		
	457(b) Plan - Empower Customer Service 855-756-4738		
	2026 annual contribution limit: \$24,500 (+ \$8,000 for 50+ years of age) (+\$11,500 catch-up Age 60-63)		

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