



Employer *Bulletin*

Employer Communication Center (608) 264-7900 Toll free: 1-888-681-3952 <http://etf.wi.gov>

Wisconsin Public Employers Group Health Insurance Program to be Available to Governmental Employers Not Participating in the Wisconsin Retirement System

Local governmental employers that do not participate in the Wisconsin Retirement System (WRS) and are separate Social Security entities may elect to enroll in the Wisconsin Public Employers (WPE) Group Health Insurance Program offered by the Wisconsin Group Insurance Board beginning in 2013.

The WPE program, which has been available under Wis. Stat. s. 40.51 (7) since 1987 for WRS participating employers, has expanded eligibility under 2011 Wisconsin Act 133 to include governmental employers who are not in the WRS but who meet the definition of employer under Wis. Stat. s. 40.02 (28). You are receiving this bulletin because you are on the Department of Employee Trust Funds' (ETF) list of employers who meet this criterion.

The program is based on coverage provided primarily through limited network health maintenance organization (HMO) type plans throughout the state. Some preferred provider organizations (PPO) type plans are also available.

Governmental employers may enroll in the WPE Group Health Insurance Program on a quarterly basis. Submitting your application materials four months before the start of a calendar quarter will ensure your coverage takes effect on January 1, April 1, July 1, or October 1.

The attached premium rates table and map shows the local base premiums and locations for all of the participating health plans. Although employees may elect any health plan, benefits will usually be limited by the provider network contracted by the health plan in these counties.

Contact Information

For more information on the WPE Group Health Insurance Program, contact ETF's Employer Communication Center toll free at (888) 681-3952, option 1 or locally at (608) 264-7900, option 1, or online at <http://www.etf.wi.gov/contact.htm>.

More information regarding the WPE Group Health Insurance Program, such as ETF's booklet, *How to Join the Wisconsin Public Employers' Group Health Insurance Program for Non-WRS Employers* (ET-1156), can be found on ETF's Internet site at <http://etf.wi.gov>.

2013 STATE OF WISCONSIN GROUP HEALTH INSURANCE MONTHLY PREMIUM RATES: WISCONSIN PUBLIC EMPLOYERS (LOCAL)

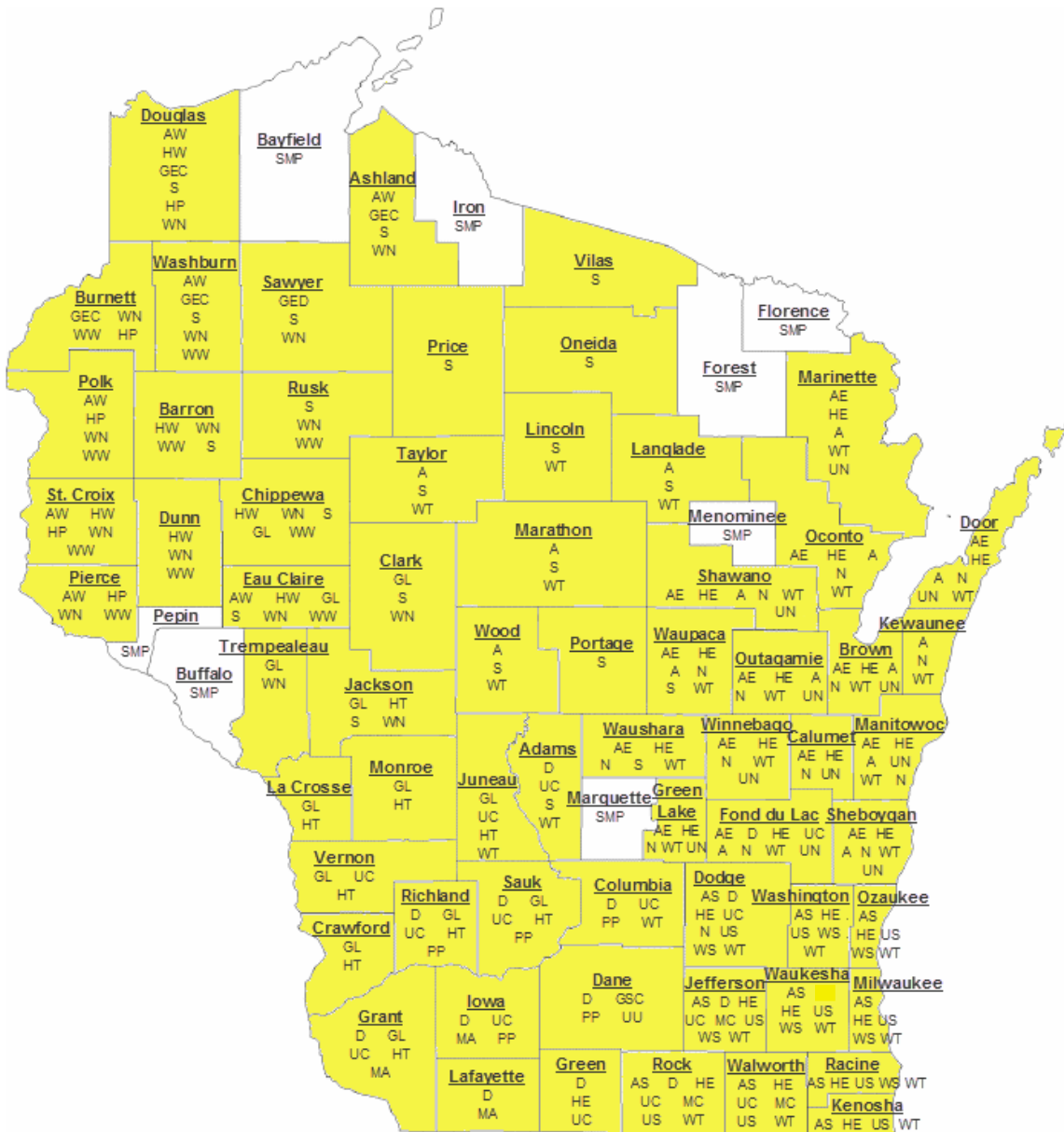
Plan Name	Tier	Full-Pay (P02)			Medicare			Co-Insurance (P06)			Deductible (P04)			Medicare		
		Regular Single	Regular Family	Medicare Single	Medicare 2-Eligible	Medicare 1-Eligible	Regular Single	Regular Family	Medicare Single	Medicare 2-Eligible	Medicare 1-Eligible	Regular Single	Regular Family	Medicare Single	Medicare 2-Eligible	Medicare 1-Eligible
ANTHEM BLUE NORTHEAST	3	970.70	2,422.00	622.80	1,242.40	1,590.30	926.40	2,311.20	600.70	1,198.20	1,523.90	864.40	2,156.20	569.70	1,136.20	1,430.90
ANTHEM BLUE NORTHWEST	3	1,124.30	2,806.00	699.70	1,396.20	1,820.80	1,072.30	2,676.00	673.70	1,344.20	1,742.80	999.60	2,494.20	637.30	1,271.40	1,633.70
ANTHEM BLUE SOUTHEAST	3	1,072.30	2,676.00	673.60	1,344.00	1,742.70	1,022.90	2,552.50	648.90	1,294.60	1,668.60	953.80	2,379.70	613.90	1,224.60	1,564.50
ARISE HEALTH PLAN	1	944.20	2,355.70	609.50	1,215.80	1,550.50	860.30	2,146.00	567.60	1,132.00	1,424.70	884.00	2,205.20	579.50	1,155.80	1,460.30
DEAN HEALTH PLAN	1	644.10	1,605.50	452.80	902.40	1,093.70	589.90	1,470.00	426.40	849.60	1,013.10	583.10	1,453.00	423.10	843.00	1,003.00
GHC OF EAU CLAIRE	1	1,050.50	2,621.50	546.90	1,090.60	1,594.20	1,002.20	2,500.70	528.50	1,053.80	1,527.50	963.50	2,404.00	513.80	1,024.40	1,474.10
GHC OF SOUTH CENTRAL WISCONSIN	1	573.80	1,429.70	424.40	845.60	995.00	549.30	1,368.50	412.20	821.20	958.30	539.60	1,344.20	407.30	811.40	943.70
GUNDERSEN LUTHERAN HEALTH PLAN	1	759.80	1,894.70	451.30	899.40	1,207.90	726.00	1,810.20	432.30	861.40	1,155.10	712.60	1,776.70	432.30	861.40	1,141.70
HEALTH TRADITION HEALTH PLAN	1	732.40	1,826.20	503.60	1,004.00	1,232.80	700.00	1,745.20	479.10	955.00	1,175.90	687.10	1,713.00	479.10	955.00	1,163.00
HEALTHPARTNERS	1	838.50	2,091.50	536.80	1,070.40	1,372.10	800.80	1,997.20	511.80	1,020.40	1,309.40	785.70	1,959.50	511.80	1,020.40	1,294.30
HUMANA EASTERN	3	1,148.20	2,865.70	392.80	782.40	1,537.80	1,046.70	2,612.00	338.80	674.40	1,382.30	1,052.50	2,626.50	338.80	674.40	1,388.10
HUMANA WESTERN	1	1,148.20	2,865.70	392.80	782.40	1,537.80	1,046.70	2,612.00	338.80	674.40	1,382.30	1,052.50	2,626.50	338.80	674.40	1,388.10
MEDICAL ASSOCIATES HEALTH PLAN	1	741.90	1,850.00	420.40	837.60	1,159.10	709.00	1,767.70	385.60	768.00	1,091.40	663.90	1,655.00	385.60	768.00	1,046.30
MERCY CARE HEALTH PLAN	1	554.40	1,381.20	379.50	755.80	930.70	530.90	1,322.50	376.50	749.80	904.20	512.10	1,275.50	376.50	749.80	885.40
NETWORK HEALTH PLAN	1	741.50	1,849.00	508.30	1,013.40	1,246.60	708.60	1,766.70	491.80	980.40	1,197.20	662.70	1,652.00	468.90	934.60	1,128.40
PHYSICIANS PLUS	1	604.10	1,505.50	404.60	806.00	1,005.50	578.10	1,440.50	401.60	800.00	976.50	552.20	1,375.70	389.90	776.60	938.90
SECURITY HEALTH PLAN	3	1,115.10	2,783.00	523.30	1,043.40	1,635.20	1,063.50	2,654.00	506.10	1,009.00	1,566.40	1,012.10	2,525.50	506.10	1,009.00	1,515.00
UNITEDHEALTHCARE NORTHEAST	1	797.60	1,989.20	536.30	1,069.40	1,330.70	761.90	1,900.00	518.50	1,033.80	1,277.20	725.80	1,809.70	500.40	997.60	1,223.00
UNITEDHEALTHCARE SOUTHEAST	1	838.00	2,090.20	556.50	1,109.80	1,391.30	800.30	1,996.00	537.70	1,072.20	1,334.80	759.00	1,892.70	517.00	1,030.80	1,272.80
UNITY COMMUNITY	1	528.70	1,317.00	370.80	738.40	896.30	506.50	1,261.50	361.20	719.20	864.50	497.70	1,239.50	357.40	711.60	851.90
UNITY UW HEALTH	1	504.10	1,255.50	360.20	717.20	861.10	483.10	1,203.00	351.20	699.20	831.10	474.80	1,182.20	347.60	692.00	819.20
WEA TRUST PPP EAST	1	801.60	1,999.20	538.30	1,073.40	1,336.70	765.70	1,909.50	520.40	1,037.60	1,282.90	744.30	1,856.00	509.70	1,016.20	1,250.80
WEA TRUST PPP NORTHWEST	1	840.20	2,095.70	557.60	1,112.00	1,394.60	802.40	2,001.20	538.70	1,074.20	1,337.90	779.80	1,944.70	527.40	1,051.60	1,304.00
WPS METRO CHOICE SOUTHEAST	3	1,241.70	3,099.50	758.40	1,513.60	1,996.90	1,129.70	2,819.50	702.40	1,401.60	1,828.90	1,160.70	2,897.00	717.90	1,432.60	1,875.40
WPS METRO CHOICE NORTHWEST	1	1,064.90	2,657.50	670.00	1,336.80	1,731.70	970.20	2,420.70	622.60	1,242.00	1,589.60	996.30	2,486.00	635.70	1,268.20	1,628.80
STATE MAINTENANCE PLAN (SMP)	1	748.10	1,865.80	NA	NA	NA	710.70	1,772.40	NA	NA	NA	684.10	1,705.70	NA	NA	NA
STANDARD PLAN - DANE	3	1,042.40	2,600.90	361.80	720.60	1,404.20	935.20	2,333.20	361.80	720.60	1,404.20	880.90	2,197.10	361.80	720.60	1,404.20
STANDARD PLAN - MILWAUKEE	3	1,216.60	3,036.20	361.80	720.60	1,578.40	1,088.20	2,715.50	361.80	720.60	1,578.40	1,021.40	2,548.40	361.80	720.60	1,578.40
STANDARD PLAN - WAUKESHA	3	1,124.90	2,806.90	361.80	720.60	1,486.60	1,006.90	2,512.30	361.80	720.60	1,486.60	947.40	2,363.40	361.80	720.60	1,486.60
STANDARD PLAN - BALANCE OF STATE	3	1,124.90	2,806.90	361.80	720.60	1,486.60	1,006.90	2,512.30	361.80	720.60	1,486.60	947.40	2,363.40	361.80	720.60	1,486.60

2013 State Qualified Health Plans By County

Health Plans	Plan Abbrev.	Tier
Anthem Blue Northeast	AE	1
Anthem Blue Northwest	AW	3
Anthem Blue Southeast	AS	1
Arise Health Plan	A	1
Dean Health Plan	D	1
GHC of Eau Claire	GEC	1
GHC of South Central Wisconsin	GSC	1
Gundersen Lutheran Health Plan	GL	1
HealthPartners	HP	1
Health Tradition Health Plan	HT	1
Humana Eastern	HE	1
Humana Western	HW	1
Medical Associates Health Plan	MA	1
MercyCare Health Plan	MC	1
Network Health Plan	N	1
Physicians Plus – Meriter & UW Health	PP	1
Security Health Plan	S	1
State Maintenance Plan	SMP	1
UnitedHealthcare NE	UN	1
UnitedHealthcare SE	US	1
Unity Community	UC	1
Unity UW Health	UU	1
WEA Trust PPP East	WT	1
WEA Trust PPP Northwest	WN	1
WPS Metro Choice Southeast	WS	3
WPS Metro Choice Northwest	WW	1

ATTACHMENT B

2013 Qualified Health Plans By County



- SMP Only
- Tier 1 County