

State of Wisconsin Employees Group Health Insurance Program  
2016 Plan Year **GRADUATE ASSISTANTS**  
Imputed Income Calculation (Fair Market Value)  
IYC Health Plan & IYC Access Health Plan  
**With Uniform Dental Benefits**

Plan	2016 Monthly Premium Rates		2 Category Estimated Imputed Income*	
	Single	Family	1 Non-Tax Dependent	2 or more Non-Tax Dep.
Anthem Blue Preferred Northeast	\$ 503.70	\$ 1,250.30	\$ 433.60	\$ 746.60
Anthem Blue Preferred Southeast	\$ 516.60	\$ 1,282.50	\$ 444.90	\$ 765.90
Arise Health Plan	\$ 542.60	\$ 1,347.50	\$ 467.50	\$ 804.90
Arise Health Plan - Aspirus Arise	\$ 528.80	\$ 1,313.00	\$ 455.50	\$ 784.20
Dean Health Insurance	\$ 410.60	\$ 1,017.50	\$ 352.50	\$ 606.90
Dean Health Insurance-Prevea360	\$ 472.40	\$ 1,172.00	\$ 406.30	\$ 699.60
GHC of Eau Claire	\$ 567.10	\$ 1,408.80	\$ 488.90	\$ 841.70
GHC of South Central Wisconsin	\$ 443.00	\$ 1,098.50	\$ 380.70	\$ 655.50
Gundersen Health Plan	\$ 547.60	\$ 1,360.00	\$ 471.90	\$ 812.40
Health Tradition Health Plan	\$ 504.40	\$ 1,252.00	\$ 434.20	\$ 747.60
HealthPartners Health Plan	\$ 501.20	\$ 1,244.00	\$ 431.40	\$ 742.80
Humana-Eastern	\$ 521.50	\$ 1,294.80	\$ 449.20	\$ 773.30
Humana-Western	\$ 580.20	\$ 1,441.50	\$ 500.30	\$ 861.30
IYC Access Plan	\$ 1,008.90	\$ 2,516.50	\$ 875.70	\$ 1,507.60
Medical Associates Health Plans	\$ 443.20	\$ 1,099.00	\$ 380.90	\$ 655.80
MercyCare Health Plans	\$ 393.60	\$ 975.00	\$ 337.70	\$ 581.40
Network Health - Northeast	\$ 544.20	\$ 1,351.50	\$ 468.90	\$ 807.30
Network Health - Southeast	\$ 571.40	\$ 1,419.50	\$ 492.60	\$ 848.10
Physicians Plus	\$ 459.40	\$ 1,139.50	\$ 395.00	\$ 680.10
Security Health Plan	\$ 589.50	\$ 1,464.80	\$ 508.40	\$ 875.30
State Maintenance Plan (SMP)	\$ 636.90	\$ 1,586.90	\$ 551.80	\$ 950.00
UnitedHealthcare of Wisconsin	\$ 544.50	\$ 1,352.30	\$ 469.20	\$ 807.80
Unity Health Insurance-Community	\$ 539.40	\$ 1,339.50	\$ 464.70	\$ 800.10
Unity Health Insurance-UW Health	\$ 473.70	\$ 1,175.30	\$ 407.50	\$ 701.60
WEA Trust-East	\$ 486.60	\$ 1,207.50	\$ 418.70	\$ 720.90
WEA Trust- Northwest Chippewa Valley	\$ 512.10	\$ 1,271.30	\$ 441.00	\$ 759.20
WEA Trust- Northwest Mayo Clinic Hlth Sys	\$ 512.10	\$ 1,271.30	\$ 441.00	\$ 759.20
WEA Trust-South Central	\$ 368.90	\$ 913.30	\$ 316.20	\$ 544.40

Sept. 25, 2015

\* 2 Category Estimated Imputed Income assumes, for 2 or more non-tax dependents, that approximately 75% have 2 and 25% have 3 or more dependents.