2017 Premiums - Wisconsin Public Employers Group Health Insurance Program

3 = Tier 3 Plan * = Not In Calculation - Plan Not Qualified in County

IYC Local HDHP; No Dental - P17

88% of the Tier 1 Qualified Plans' Average Premium

		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
ADAMS							
	DEAN HEALTH INSURANCE	546.28	79.94	626.22	1,344.38	196.92	1,541.30
	PHYSICIANS PLUS	546.28	57.04	603.32	1,344.38	139.72	1,484.10
3	SECURITY HEALTH PLAN - CENTRAL	546.28	349.14	895.42	1,344.38	869.92	2,214.30
	UNITY HEALTH INSURANCE - COMMUNITY	546.28	7.14	553.42	1,344.38	14.92	1,359.30
	WEA TRUST - EAST	546.28	153.84	700.12	1,344.38	381.72	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	546.28	499.30	1,045.58	1,344.38	1,263.54	2,607.92
ASHLAND							
	GHC OF EAU CLAIRE	649.63	114.69	764.32	1,602.79	283.81	1,886.60
	HEALTHPARTNERS HEALTH PLAN	649.63	62.49	712.12	1,602.79	153.31	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	649.63	245.79	895.42	1,602.79	611.51	2,214.30
3	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	649.63	241.79	891.42	1,602.79	601.51	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	649.63	395.95	1,045.58	1,602.79	1,005.13	2,607.92
BARRON							
	HEALTHPARTNERS HEALTH PLAN	626.67	85.45	712.12	1,545.37	210.73	1,756.10
3	HUMANA - WESTERN	626.67	422.65	1,049.32	1,545.37	1,053.73	2,599.10
3	SECURITY HEALTH PLAN - CENTRAL	626.67	268.75	895.42	1,545.37	668.93	2,214.30
3	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	626.67	264.75	891.42	1,545.37	658.93	2,204.30
3	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	626.67	264.75	891.42	1,545.37	658.93	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	626.67	418.91	1,045.58	1,545.37	1,062.55	2,607.92
BAYFIELD							
*	GHC OF EAU CLAIRE	622.74	141.58	764.32	1,549.63	336.97	1,886.60
*	HEALTHPARTNERS HEALTH PLAN	622.74	89.38	712.12	1,549.63	206.47	1,756.10
3 *	SECURITY HEALTH PLAN - CENTRAL	622.74	272.68	895.42	1,549.63	664.67	2,214.30
3 *	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	622.74	268.68	891.42	1,549.63	654.67	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	622.74	422.84	1,045.58	1,549.63	1,058.29	2,607.92
	STATE MAINTENANCE PLAN (SMP) WPE	622.74	84.92	707.66	1,549.63	211.31	1,760.94
BROWN							
	ANTHEM BLUE PREFERRED NORTHEAST	579.29	18.83	598.12	1,426.90	44.20	1,471.10
3	ARISE HEALTH PLAN	579.29	314.73	894.02	1,426.90	783.90	2,210.80
	DEAN HEALTH INSURANCE - PREVEA360	579.29	26.53	605.82	1,426.90	63.40	1,490.30
3	HUMANA - EASTERN	579.29	330.63	909.92	1,426.90	823.70	2,250.60
	NETWORK HEALTH - NORTHEAST	579.29	45.13	624.42	1,426.90	109.90	1,536.80
3	SECURITY HEALTH PLAN - VALLEY	579.29	316.13	895.42	1,426.90	787.40	2,214.30
	UNITEDHEALTHCARE OF WISCONSIN	579.29	183.63	762.92	1,426.90	456.20	1,883.10
	WEA TRUST - EAST	579.29	120.83	700.12	1,426.90	299.20	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	579.29	466.29	1,045.58	1,426.90	1,181.02	2,607.92
BUFFALO							
*	HEALTH TRADITION HEALTH PLAN	560.12	-	560.12	1,376.10	-	1,376.10
3 *	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	622.74	268.68	891.42	1,549.63	654.67	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	622.74	422.84	1,045.58	1,549.63	1,058.29	2,607.92
	STATE MAINTENANCE PLAN (SMP) WPE	622.74	84.92	707.66	1,549.63	211.31	1,760.94

Revised (9/7/2016)

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88% of the Tier 1 Qualified Plans' Average Premium

		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
BURNETT							
	GHC OF EAU CLAIRE	649.63	114.69	764.32	1,602.79	283.81	1,886.60
	HEALTHPARTNERS HEALTH PLAN	649.63	62.49	712.12	1,602.79	153.31	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	649.63	245.79	895.42	1,602.79	611.51	2,214.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	649.63	395.95	1,045.58	1,602.79	1,005.13	2,607.92
CALUMET							
	ANTHEM BLUE PREFERRED NORTHEAST	582.40	15.72	598.12	1,434.69	36.41	1,471.10
3 *	ARISE HEALTH PLAN	582.40	311.62	894.02	1,434.69	776.11	2,210.80
3	HUMANA - EASTERN	582.40	327.52	909.92	1,434.69	815.91	2,250.60
	NETWORK HEALTH - NORTHEAST	582.40	42.02	624.42	1,434.69	102.11	1,536.80
	UNITEDHEALTHCARE OF WISCONSIN	582.40	180.52	762.92	1,434.69	448.41	1,883.10
*	WEA TRUST - EAST	582.40	117.72	700.12	1,434.69	291.41	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	582.40	463.18	1,045.58	1,434.69	1,173.23	2,607.92
CHIPPEWA							
	GUNDERSEN HEALTH PLAN	551.12	-	551.12	1,353.60	-	1,353.60
	HEALTHPARTNERS HEALTH PLAN	555.83	156.29	712.12	1,368.27	387.83	1,756.10
3	HUMANA - WESTERN	555.83	493.49	1,049.32	1,368.27	1,230.83	2,599.10
3	SECURITY HEALTH PLAN - CENTRAL	555.83	339.59	895.42	1,368.27	846.03	2,214.30
3	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	555.83	335.59	891.42	1,368.27	836.03	2,204.30
3	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	555.83	335.59	891.42	1,368.27	836.03	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	555.83	489.75	1,045.58	1,368.27	1,239.65	2,607.92
CLARK							
3 *	ARISE HEALTH PLAN	649.63	244.39	894.02	1,602.79	608.01	2,210.80
	GHC OF EAU CLAIRE	649.63	114.69	764.32	1,602.79	283.81	1,886.60
*	GUNDERSEN HEALTH PLAN	551.12	-	551.12	1,353.60	-	1,353.60
	HEALTHPARTNERS HEALTH PLAN	649.63	62.49	712.12	1,602.79	153.31	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	649.63	245.79	895.42	1,602.79	611.51	2,214.30
3	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	649.63	241.79	891.42	1,602.79	601.51	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	649.63	395.95	1,045.58	1,602.79	1,005.13	2,607.92
COLUMBIA							
3	ARISE HEALTH PLAN	534.04	359.98	894.02	1,313.77	897.03	2,210.80
	DEAN HEALTH INSURANCE	534.04	92.18	626.22	1,313.77	227.53	1,541.30
	GHC OF SOUTH CENTRAL WISCONSIN	534.04	17.18	551.22	1,313.77	40.03	1,353.80
	PHYSICIANS PLUS	534.04	69.28	603.32	1,313.77	170.33	1,484.10
	UNITY HEALTH INSURANCE - COMMUNITY	534.04	19.38	553.42	1,313.77	45.53	1,359.30
	WEA TRUST - EAST	534.04	166.08	700.12	1,313.77	412.33	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	534.04	511.54	1,045.58	1,313.77	1,294.15	2,607.92

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88% of the Tier 1 Qualified Plans' Average Premium

		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
CRAWFORD							
3 *	ARISE HEALTH PLAN	513.94	380.08	894.02	1,263.55	947.25	2,210.80
	GUNDERSEN HEALTH PLAN	513.94	37.18	551.12	1,263.55	90.05	1,353.60
	HEALTH TRADITION HEALTH PLAN	513.94	46.18	560.12	1,263.55	112.55	1,376.10
	HEALTHPARTNERS HEALTH PLAN	513.94	198.18	712.12	1,263.55	492.55	1,756.10
	MEDICAL ASSOCIATES HEALTH PLANS	512.72	-	512.72	1,257.60	-	1,257.60
*	UNITY HEALTH INSURANCE - COMMUNITY	513.94	39.48	553.42	1,263.55	95.75	1,359.30
3 *	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	513.94	377.48	891.42	1,263.55	940.75	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	513.94	531.64	1,045.58	1,263.55	1,344.37	2,607.92
DANE							
	DEAN HEALTH INSURANCE	500.78	125.44	626.22	1,230.64	310.66	1,541.30
	GHC OF SOUTH CENTRAL WISCONSIN	500.78	50.44	551.22	1,230.64	123.16	1,353.80
	PHYSICIANS PLUS	500.78	102.54	603.32	1,230.64	253.46	1,484.10
	UNITY HEALTH INSURANCE - UW HEALTH	495.52	-	495.52	1,214.60	-	1,214.60
3	IYC ACCESS HEALTH PLAN - DANE	500.78	466.16	966.94	1,230.64	1,180.70	2,411.34
DODGE							
3	ARISE HEALTH PLAN	567.66	326.36	894.02	1,397.84	812.96	2,210.80
	DEAN HEALTH INSURANCE	567.66	58.56	626.22	1,397.84	143.46	1,541.30
3	HUMANA - EASTERN	567.66	342.26	909.92	1,397.84	852.76	2,250.60
	NETWORK HEALTH - NORTHEAST	567.66	56.76	624.42	1,397.84	138.96	1,536.80
	PHYSICIANS PLUS	567.66	35.66	603.32	1,397.84	86.26	1,484.10
	UNITEDHEALTHCARE OF WISCONSIN	567.66	195.26	762.92	1,397.84	485.26	1,883.10
	UNITY HEALTH INSURANCE - COMMUNITY	553.42	-	553.42	1,359.30	-	1,359.30
	WEA TRUST - EAST	567.66	132.46	700.12	1,397.84	328.26	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	567.66	477.92	1,045.58	1,397.84	1,210.08	2,607.92
DOOR							
	ANTHEM BLUE PREFERRED NORTHEAST	590.83	7.29	598.12	1,455.76	15.34	1,471.10
3	ARISE HEALTH PLAN	590.83	303.19	894.02	1,455.76	755.04	2,210.80
*	DEAN HEALTH INSURANCE - PREVEA360	590.83	14.99	605.82	1,455.76	34.54	1,490.30
3	HUMANA - EASTERN	590.83	319.09	909.92	1,455.76	794.84	2,250.60
	NETWORK HEALTH - NORTHEAST	590.83	33.59	624.42	1,455.76	81.04	1,536.80
	UNITEDHEALTHCARE OF WISCONSIN	590.83	172.09	762.92	1,455.76	427.34	1,883.10
	WEA TRUST - EAST	590.83	109.29	700.12	1,455.76	270.34	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	590.83	454.75	1,045.58	1,455.76	1,152.16	2,607.92
DOUGLAS							
	GHC OF EAU CLAIRE	649.63	114.69	764.32	1,602.79	283.81	1,886.60
	HEALTHPARTNERS HEALTH PLAN	649.63	62.49	712.12	1,602.79	153.31	1,756.10
3	HUMANA - WESTERN	649.63	399.69	1,049.32	1,602.79	996.31	2,599.10
3	SECURITY HEALTH PLAN - CENTRAL	649.63	245.79	895.42	1,602.79	611.51	2,214.30
3 *	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	649.63	241.79	891.42	1,602.79	601.51	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	649.63	395.95	1,045.58	1,602.79	1,005.13	2,607.92

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88% of the Tier 1 Qualified Plans' Average Premium

		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
DUNN							
	HEALTHPARTNERS HEALTH PLAN	626.67	85.45	712.12	1,545.37	210.73	1,756.10
3	HUMANA - WESTERN	626.67	422.65	1,049.32	1,545.37	1,053.73	2,599.10
3 *	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	626.67	264.75	891.42	1,545.37	658.93	2,204.30
3	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	626.67	264.75	891.42	1,545.37	658.93	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	626.67	418.91	1,045.58	1,545.37	1,062.55	2,607.92
EAU CLAIRE							
3 *	ARISE HEALTH PLAN	555.83	338.19	894.02	1,368.27	842.53	2,210.80
	GUNDERSEN HEALTH PLAN	551.12	-	551.12	1,353.60	-	1,353.60
	HEALTHPARTNERS HEALTH PLAN	555.83	156.29	712.12	1,368.27	387.83	1,756.10
3	HUMANA - WESTERN	555.83	493.49	1,049.32	1,368.27	1,230.83	2,599.10
3	SECURITY HEALTH PLAN - CENTRAL	555.83	339.59	895.42	1,368.27	846.03	2,214.30
3	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	555.83	335.59	891.42	1,368.27	836.03	2,204.30
3	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	555.83	335.59	891.42	1,368.27	836.03	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	555.83	489.75	1,045.58	1,368.27	1,239.65	2,607.92
FLORENCE							
3 *	ARISE HEALTH PLAN	622.74	271.28	894.02	1,549.63	661.17	2,210.80
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	622.74	422.84	1,045.58	1,549.63	1,058.29	2,607.92
	STATE MAINTENANCE PLAN (SMP) WPE	622.74	84.92	707.66	1,549.63	211.31	1,760.94
FOND DU LAC							
	ANTHEM BLUE PREFERRED NORTHEAST	566.90	31.22	598.12	1,395.93	75.17	1,471.10
3	ARISE HEALTH PLAN	566.90	327.12	894.02	1,395.93	814.87	2,210.80
	DEAN HEALTH INSURANCE	566.90	59.32	626.22	1,395.93	145.37	1,541.30
3	HUMANA - EASTERN	566.90	343.02	909.92	1,395.93	854.67	2,250.60
	NETWORK HEALTH - NORTHEAST	566.90	57.52	624.42	1,395.93	140.87	1,536.80
	UNITEDHEALTHCARE OF WISCONSIN	566.90	196.02	762.92	1,395.93	487.17	1,883.10
	UNITY HEALTH INSURANCE - COMMUNITY	553.42	-	553.42	1,359.30	-	1,359.30
	WEA TRUST - EAST	566.90	133.22	700.12	1,395.93	330.17	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	566.90	478.68	1,045.58	1,395.93	1,211.99	2,607.92
FOREST							
3 *	ARISE HEALTH PLAN	622.74	271.28	894.02	1,549.63	661.17	2,210.80
3 *	SECURITY HEALTH PLAN - CENTRAL	622.74	272.68	895.42	1,549.63	664.67	2,214.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	622.74	422.84	1,045.58	1,549.63	1,058.29	2,607.92
	STATE MAINTENANCE PLAN (SMP) WPE	622.74	84.92	707.66	1,549.63	211.31	1,760.94
GRANT							
3 *	ARISE HEALTH PLAN	499.68	394.34	894.02	1,227.89	982.91	2,210.80
	DEAN HEALTH INSURANCE	499.68	126.54	626.22	1,227.89	313.41	1,541.30
	GUNDERSEN HEALTH PLAN	499.68	51.44	551.12	1,227.89	125.71	1,353.60
	HEALTH TRADITION HEALTH PLAN	499.68	60.44	560.12	1,227.89	148.21	1,376.10
	MEDICAL ASSOCIATES HEALTH PLANS	499.68	13.04	512.72	1,227.89	29.71	1,257.60
	PHYSICIANS PLUS	499.68	103.64	603.32	1,227.89	256.21	1,484.10
	UNITY HEALTH INSURANCE - COMMUNITY	499.68	53.74	553.42	1,227.89	131.41	1,359.30
3	IYC ACCESS HEALTH PLAN - DANE	499.68	467.26	966.94	1,227.89	1,183.45	2,411.34

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		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
GREEN							
	DEAN HEALTH INSURANCE	523.00	103.22	626.22	1,286.18	255.12	1,541.30
3	HUMANA - EASTERN	523.00	386.92	909.92	1,286.18	964.42	2,250.60
*	MERCYCARE HEALTH PLANS	523.00	59.42	582.42	1,286.18	145.62	1,431.80
	PHYSICIANS PLUS	523.00	80.32	603.32	1,286.18	197.92	1,484.10
	UNITY HEALTH INSURANCE - COMMUNITY	523.00	30.42	553.42	1,286.18	73.12	1,359.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	523.00	522.58	1,045.58	1,286.18	1,321.74	2,607.92
GREEN LAKE							
	ANTHEM BLUE PREFERRED NORTHEAST	598.12	-	598.12	1,471.10	-	1,471.10
3	ARISE HEALTH PLAN	604.61	289.41	894.02	1,490.22	720.58	2,210.80
*	DEAN HEALTH INSURANCE	604.61	21.61	626.22	1,490.22	51.08	1,541.30
3	HUMANA - EASTERN	604.61	305.31	909.92	1,490.22	760.38	2,250.60
*	NETWORK HEALTH - NORTHEAST	604.61	19.81	624.42	1,490.22	46.58	1,536.80
*	PHYSICIANS PLUS	603.32	-	603.32	1,484.10	-	1,484.10
3	SECURITY HEALTH PLAN - VALLEY	604.61	290.81	895.42	1,490.22	724.08	2,214.30
	UNITEDHEALTHCARE OF WISCONSIN	604.61	158.31	762.92	1,490.22	392.88	1,883.10
	WEA TRUST - EAST	604.61	95.51	700.12	1,490.22	235.88	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	604.61	440.97	1,045.58	1,490.22	1,117.70	2,607.92
IOWA							
	DEAN HEALTH INSURANCE	505.05	121.17	626.22	1,241.31	299.99	1,541.30
	MEDICAL ASSOCIATES HEALTH PLANS	505.05	7.67	512.72	1,241.31	16.29	1,257.60
	PHYSICIANS PLUS	505.05	98.27	603.32	1,241.31	242.79	1,484.10
	UNITY HEALTH INSURANCE - COMMUNITY	505.05	48.37	553.42	1,241.31	117.99	1,359.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	505.05	540.53	1,045.58	1,241.31	1,366.61	2,607.92
IRON							
*	GHC OF EAU CLAIRE	622.74	141.58	764.32	1,549.63	336.97	1,886.60
3 *	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	622.74	268.68	891.42	1,549.63	654.67	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	622.74	422.84	1,045.58	1,549.63	1,058.29	2,607.92
	STATE MAINTENANCE PLAN (SMP) WPE	622.74	84.92	707.66	1,549.63	211.31	1,760.94
JACKSON							
	GUNDERSEN HEALTH PLAN	534.85	16.27	551.12	1,315.83	37.77	1,353.60
	HEALTH TRADITION HEALTH PLAN	534.85	25.27	560.12	1,315.83	60.27	1,376.10
	HEALTHPARTNERS HEALTH PLAN	534.85	177.27	712.12	1,315.83	440.27	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	534.85	360.57	895.42	1,315.83	898.47	2,214.30
3	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	534.85	356.57	891.42	1,315.83	888.47	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	534.85	510.73	1,045.58	1,315.83	1,292.09	2,607.92

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2017 Premiums - Wisconsin Public Employers Group Health Insurance Program

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IYC Local HDHP; No Dental - P17

88% of the Tier 1 Qualified Plans' Average Premium

		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
JEFFERSON							
3 *	ARISE HEALTH PLAN	561.50	332.52	894.02	1,382.44	828.36	2,210.80
	DEAN HEALTH INSURANCE	561.50	64.72	626.22	1,382.44	158.86	1,541.30
3	HUMANA - EASTERN	561.50	348.42	909.92	1,382.44	868.16	2,250.60
	MERCYCARE HEALTH PLANS	561.50	20.92	582.42	1,382.44	49.36	1,431.80
	PHYSICIANS PLUS	561.50	41.82	603.32	1,382.44	101.66	1,484.10
	UNITEDHEALTHCARE OF WISCONSIN	561.50	201.42	762.92	1,382.44	500.66	1,883.10
	UNITY HEALTH INSURANCE - COMMUNITY	553.42	-	553.42	1,359.30	-	1,359.30
	WEA TRUST - EAST	561.50	138.62	700.12	1,382.44	343.66	1,726.10
3	IYC ACCESS HEALTH PLAN - DANE	561.50	405.44	966.94	1,382.44	1,028.90	2,411.34
JUNEAU							
3 *	ARISE HEALTH PLAN	522.39	371.63	894.02	1,284.66	926.14	2,210.80
*	DEAN HEALTH INSURANCE	522.39	103.83	626.22	1,284.66	256.64	1,541.30
	GUNDERSEN HEALTH PLAN	522.39	28.73	551.12	1,284.66	68.94	1,353.60
	HEALTH TRADITION HEALTH PLAN	522.39	37.73	560.12	1,284.66	91.44	1,376.10
	PHYSICIANS PLUS	522.39	80.93	603.32	1,284.66	199.44	1,484.10
3	SECURITY HEALTH PLAN - CENTRAL	522.39	373.03	895.42	1,284.66	929.64	2,214.30
	UNITY HEALTH INSURANCE - COMMUNITY	522.39	31.03	553.42	1,284.66	74.64	1,359.30
	WEA TRUST - EAST	522.39	177.73	700.12	1,284.66	441.44	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	522.39	523.19	1,045.58	1,284.66	1,323.26	2,607.92
KENOSHA							
3	ARISE HEALTH PLAN	671.37	222.65	894.02	1,657.13	553.67	2,210.80
3	HUMANA - EASTERN	671.37	238.55	909.92	1,657.13	593.47	2,250.60
	UNITEDHEALTHCARE OF WISCONSIN	671.37	91.55	762.92	1,657.13	225.97	1,883.10
3	IYC ACCESS HEALTH PLAN - WAUKESHA	671.37	374.21	1,045.58	1,657.13	950.79	2,607.92
KEWAUNEE							
	ANTHEM BLUE PREFERRED NORTHEAST	598.12	-	598.12	1,471.10	-	1,471.10
3	ARISE HEALTH PLAN	604.61	289.41	894.02	1,490.22	720.58	2,210.80
*	DEAN HEALTH INSURANCE - PREVEA360	604.61	1.21	605.82	1,490.22	0.08	1,490.30
3 *	HUMANA - EASTERN	604.61	305.31	909.92	1,490.22	760.38	2,250.60
*	NETWORK HEALTH - NORTHEAST	604.61	19.81	624.42	1,490.22	46.58	1,536.80
3 *	SECURITY HEALTH PLAN - VALLEY	604.61	290.81	895.42	1,490.22	724.08	2,214.30
	UNITEDHEALTHCARE OF WISCONSIN	604.61	158.31	762.92	1,490.22	392.88	1,883.10
	WEA TRUST - EAST	604.61	95.51	700.12	1,490.22	235.88	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	604.61	440.97	1,045.58	1,490.22	1,117.70	2,607.92
LACROSSE							
3 *	ARISE HEALTH PLAN	534.85	359.17	894.02	1,315.83	894.97	2,210.80
	GUNDERSEN HEALTH PLAN	534.85	16.27	551.12	1,315.83	37.77	1,353.60
	HEALTH TRADITION HEALTH PLAN	534.85	25.27	560.12	1,315.83	60.27	1,376.10
	HEALTHPARTNERS HEALTH PLAN	534.85	177.27	712.12	1,315.83	440.27	1,756.10
3	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	534.85	356.57	891.42	1,315.83	888.47	2,204.30
3	IYC ACCESS HEALTH PLAN - DANE	534.85	432.09	966.94	1,315.83	1,095.51	2,411.34

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88% of the Tier 1 Qualified Plans' Average Premium

		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
LAFAYETTE							
*	DEAN HEALTH INSURANCE	491.06	135.16	626.22	1,206.35	334.95	1,541.30
	MEDICAL ASSOCIATES HEALTH PLANS	491.06	21.66	512.72	1,206.35	51.25	1,257.60
	PHYSICIANS PLUS	491.06	112.26	603.32	1,206.35	277.75	1,484.10
*	UNITY HEALTH INSURANCE - COMMUNITY	491.06	62.36	553.42	1,206.35	152.95	1,359.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	491.06	554.52	1,045.58	1,206.35	1,401.57	2,607.92
LANGLADE							
3	ARISE HEALTH PLAN	672.60	221.42	894.02	1,660.21	550.59	2,210.80
	GHC OF EAU CLAIRE	672.60	91.72	764.32	1,660.21	226.39	1,886.60
*	HEALTHPARTNERS HEALTH PLAN	672.60	39.52	712.12	1,660.21	95.89	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	672.60	222.82	895.42	1,660.21	554.09	2,214.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	672.60	372.98	1,045.58	1,660.21	947.71	2,607.92
LINCOLN							
3 *	ARISE HEALTH PLAN	649.63	244.39	894.02	1,602.79	608.01	2,210.80
	GHC OF EAU CLAIRE	649.63	114.69	764.32	1,602.79	283.81	1,886.60
	HEALTHPARTNERS HEALTH PLAN	649.63	62.49	712.12	1,602.79	153.31	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	649.63	245.79	895.42	1,602.79	611.51	2,214.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	649.63	395.95	1,045.58	1,602.79	1,005.13	2,607.92
MANITOWOC							
	ANTHEM BLUE PREFERRED NORTHEAST	579.29	18.83	598.12	1,426.90	44.20	1,471.10
3	ARISE HEALTH PLAN	579.29	314.73	894.02	1,426.90	783.90	2,210.80
	DEAN HEALTH INSURANCE - PREVEA360	579.29	26.53	605.82	1,426.90	63.40	1,490.30
3	HUMANA - EASTERN	579.29	330.63	909.92	1,426.90	823.70	2,250.60
	NETWORK HEALTH - NORTHEAST	579.29	45.13	624.42	1,426.90	109.90	1,536.80
	UNITEDHEALTHCARE OF WISCONSIN	579.29	183.63	762.92	1,426.90	456.20	1,883.10
	WEA TRUST - EAST	579.29	120.83	700.12	1,426.90	299.20	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	579.29	466.29	1,045.58	1,426.90	1,181.02	2,607.92
MARATHON							
3	ARISE HEALTH PLAN	638.46	255.56	894.02	1,574.85	635.95	2,210.80
	GHC OF EAU CLAIRE	638.46	125.86	764.32	1,574.85	311.75	1,886.60
	HEALTHPARTNERS HEALTH PLAN	638.46	73.66	712.12	1,574.85	181.25	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	638.46	256.96	895.42	1,574.85	639.45	2,214.30
	WEA TRUST - EAST	638.46	61.66	700.12	1,574.85	151.25	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	638.46	407.12	1,045.58	1,574.85	1,033.07	2,607.92
MARINETTE							
	ANTHEM BLUE PREFERRED NORTHEAST	598.12	-	598.12	1,471.10	-	1,471.10
3	ARISE HEALTH PLAN	598.86	295.16	894.02	1,475.85	734.95	2,210.80
*	DEAN HEALTH INSURANCE - PREVEA360	598.86	6.96	605.82	1,475.85	14.45	1,490.30
3	HUMANA - EASTERN	598.86	311.06	909.92	1,475.85	774.75	2,250.60
*	NETWORK HEALTH - NORTHEAST	598.86	25.56	624.42	1,475.85	60.95	1,536.80
	UNITEDHEALTHCARE OF WISCONSIN	598.86	164.06	762.92	1,475.85	407.25	1,883.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	598.86	446.72	1,045.58	1,475.85	1,132.07	2,607.92

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		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
MARQUETTE							
3 *	ARISE HEALTH PLAN	573.51	320.51	894.02	1,412.49	798.31	2,210.80
*	DEAN HEALTH INSURANCE	573.51	52.71	626.22	1,412.49	128.81	1,541.30
	PHYSICIANS PLUS	573.51	29.81	603.32	1,412.49	71.61	1,484.10
3 *	SECURITY HEALTH PLAN - VALLEY	573.51	321.91	895.42	1,412.49	801.81	2,214.30
*	UNITEDHEALTHCARE OF WISCONSIN	573.51	189.41	762.92	1,412.49	470.61	1,883.10
*	UNITY HEALTH INSURANCE - COMMUNITY	553.42	-	553.42	1,359.30	-	1,359.30
	WEA TRUST - EAST	573.51	126.61	700.12	1,412.49	313.61	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	573.51	472.07	1,045.58	1,412.49	1,195.43	2,607.92
MENOMINEE							
3 *	ARISE HEALTH PLAN	622.74	271.28	894.02	1,549.63	661.17	2,210.80
*	WEA TRUST - EAST	622.74	77.38	700.12	1,549.63	176.47	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	622.74	422.84	1,045.58	1,549.63	1,058.29	2,607.92
	STATE MAINTENANCE PLAN (SMP) WPE	622.74	84.92	707.66	1,549.63	211.31	1,760.94
MILWAUKEE							
3	ARISE HEALTH PLAN	615.14	278.88	894.02	1,516.53	694.27	2,210.80
3	HUMANA - EASTERN	615.14	294.78	909.92	1,516.53	734.07	2,250.60
	NETWORK HEALTH - SOUTHEAST	615.14	18.88	634.02	1,516.53	44.27	1,560.80
	UNITEDHEALTHCARE OF WISCONSIN	615.14	147.78	762.92	1,516.53	366.57	1,883.10
	WEA TRUST - EAST	615.14	84.98	700.12	1,516.53	209.57	1,726.10
3	IYC ACCESS HEALTH PLAN - MILWAUKEE	615.14	518.74	1,133.88	1,516.53	1,312.09	2,828.62
MONROE							
3 *	ARISE HEALTH PLAN	534.85	359.17	894.02	1,315.83	894.97	2,210.80
	GUNDERSEN HEALTH PLAN	534.85	16.27	551.12	1,315.83	37.77	1,353.60
	HEALTH TRADITION HEALTH PLAN	534.85	25.27	560.12	1,315.83	60.27	1,376.10
	HEALTHPARTNERS HEALTH PLAN	534.85	177.27	712.12	1,315.83	440.27	1,756.10
3	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	534.85	356.57	891.42	1,315.83	888.47	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	534.85	510.73	1,045.58	1,315.83	1,292.09	2,607.92
OCONTO							
	ANTHEM BLUE PREFERRED NORTHEAST	556.27	41.85	598.12	1,369.35	101.75	1,471.10
3	ARISE HEALTH PLAN	556.27	337.75	894.02	1,369.35	841.45	2,210.80
	DEAN HEALTH INSURANCE - PREVEA360	556.27	49.55	605.82	1,369.35	120.95	1,490.30
3	HUMANA - EASTERN	556.27	353.65	909.92	1,369.35	881.25	2,250.60
	NETWORK HEALTH - NORTHEAST	556.27	68.15	624.42	1,369.35	167.45	1,536.80
3	SECURITY HEALTH PLAN - VALLEY	556.27	339.15	895.42	1,369.35	844.95	2,214.30
*	UNITEDHEALTHCARE OF WISCONSIN	556.27	206.65	762.92	1,369.35	513.75	1,883.10
	WEA TRUST - EAST	556.27	143.85	700.12	1,369.35	356.75	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	556.27	489.31	1,045.58	1,369.35	1,238.57	2,607.92
ONEIDA							
3 *	ARISE HEALTH PLAN	649.63	244.39	894.02	1,602.79	608.01	2,210.80
	GHC OF EAU CLAIRE	649.63	114.69	764.32	1,602.79	283.81	1,886.60
	HEALTHPARTNERS HEALTH PLAN	649.63	62.49	712.12	1,602.79	153.31	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	649.63	245.79	895.42	1,602.79	611.51	2,214.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	649.63	395.95	1,045.58	1,602.79	1,005.13	2,607.92

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		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
OUTAGAMIE							
	ANTHEM BLUE PREFERRED NORTHEAST	590.83	7.29	598.12	1,455.76	15.34	1,471.10
3	ARISE HEALTH PLAN	590.83	303.19	894.02	1,455.76	755.04	2,210.80
*	DEAN HEALTH INSURANCE - PREVEA360	590.83	14.99	605.82	1,455.76	34.54	1,490.30
3	HUMANA - EASTERN	590.83	319.09	909.92	1,455.76	794.84	2,250.60
	NETWORK HEALTH - NORTHEAST	590.83	33.59	624.42	1,455.76	81.04	1,536.80
3	SECURITY HEALTH PLAN - VALLEY	590.83	304.59	895.42	1,455.76	758.54	2,214.30
	UNITEDHEALTHCARE OF WISCONSIN	590.83	172.09	762.92	1,455.76	427.34	1,883.10
	WEA TRUST - EAST	590.83	109.29	700.12	1,455.76	270.34	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	590.83	454.75	1,045.58	1,455.76	1,152.16	2,607.92
OZAUKEE							
3	ARISE HEALTH PLAN	615.14	278.88	894.02	1,516.53	694.27	2,210.80
3	HUMANA - EASTERN	615.14	294.78	909.92	1,516.53	734.07	2,250.60
	NETWORK HEALTH - SOUTHEAST	615.14	18.88	634.02	1,516.53	44.27	1,560.80
	UNITEDHEALTHCARE OF WISCONSIN	615.14	147.78	762.92	1,516.53	366.57	1,883.10
	WEA TRUST - EAST	615.14	84.98	700.12	1,516.53	209.57	1,726.10
3	IYC ACCESS HEALTH PLAN - WAUKESHA	615.14	430.44	1,045.58	1,516.53	1,091.39	2,607.92
PEPIN							
*	HEALTH TRADITION HEALTH PLAN	560.12	-	560.12	1,376.10	-	1,376.10
*	HEALTHPARTNERS HEALTH PLAN	622.74	89.38	712.12	1,549.63	206.47	1,756.10
3 *	HUMANA - WESTERN	622.74	426.58	1,049.32	1,549.63	1,049.47	2,599.10
3 *	SECURITY HEALTH PLAN - CENTRAL	622.74	272.68	895.42	1,549.63	664.67	2,214.30
3 *	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	622.74	268.68	891.42	1,549.63	654.67	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	622.74	422.84	1,045.58	1,549.63	1,058.29	2,607.92
	STATE MAINTENANCE PLAN (SMP) WPE	622.74	84.92	707.66	1,549.63	211.31	1,760.94
PIERCE							
	HEALTHPARTNERS HEALTH PLAN	626.67	85.45	712.12	1,545.37	210.73	1,756.10
3 *	HUMANA - WESTERN	626.67	422.65	1,049.32	1,545.37	1,053.73	2,599.10
3	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	626.67	264.75	891.42	1,545.37	658.93	2,204.30
3 *	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	626.67	264.75	891.42	1,545.37	658.93	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	626.67	418.91	1,045.58	1,545.37	1,062.55	2,607.92
POLK							
	HEALTHPARTNERS HEALTH PLAN	626.67	85.45	712.12	1,545.37	210.73	1,756.10
3	HUMANA - WESTERN	626.67	422.65	1,049.32	1,545.37	1,053.73	2,599.10
3	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	626.67	264.75	891.42	1,545.37	658.93	2,204.30
3	IYC ACCESS HEALTH PLAN - DANE	626.67	340.27	966.94	1,545.37	865.97	2,411.34
PORTAGE							
3 *	ARISE HEALTH PLAN	621.39	272.63	894.02	1,532.17	678.63	2,210.80
	HEALTHPARTNERS HEALTH PLAN	621.39	90.73	712.12	1,532.17	223.93	1,756.10
*	NETWORK HEALTH - NORTHEAST	621.39	3.03	624.42	1,532.17	4.63	1,536.80
3	SECURITY HEALTH PLAN - CENTRAL	621.39	274.03	895.42	1,532.17	682.13	2,214.30
	WEA TRUST - EAST	621.39	78.73	700.12	1,532.17	193.93	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	621.39	424.19	1,045.58	1,532.17	1,075.75	2,607.92

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		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
PRICE							
3 *	ARISE HEALTH PLAN	672.60	221.42	894.02	1,660.21	550.59	2,210.80
	GHC OF EAU CLAIRE	672.60	91.72	764.32	1,660.21	226.39	1,886.60
*	HEALTHPARTNERS HEALTH PLAN	672.60	39.52	712.12	1,660.21	95.89	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	672.60	222.82	895.42	1,660.21	554.09	2,214.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	672.60	372.98	1,045.58	1,660.21	947.71	2,607.92
RACINE							
3 *	ARISE HEALTH PLAN	614.65	279.37	894.02	1,515.32	695.48	2,210.80
3	HUMANA - EASTERN	614.65	295.27	909.92	1,515.32	735.28	2,250.60
	NETWORK HEALTH - SOUTHEAST	614.65	19.37	634.02	1,515.32	45.48	1,560.80
	UNITEDHEALTHCARE OF WISCONSIN	614.65	148.27	762.92	1,515.32	367.78	1,883.10
3	IYC ACCESS HEALTH PLAN - WAUKESHA	614.65	430.93	1,045.58	1,515.32	1,092.60	2,607.92
RICHLAND							
	DEAN HEALTH INSURANCE	509.38	116.84	626.22	1,252.13	289.17	1,541.30
	GUNDERSEN HEALTH PLAN	509.38	41.74	551.12	1,252.13	101.47	1,353.60
	HEALTH TRADITION HEALTH PLAN	509.38	50.74	560.12	1,252.13	123.97	1,376.10
	PHYSICIANS PLUS	509.38	93.94	603.32	1,252.13	231.97	1,484.10
	UNITY HEALTH INSURANCE - COMMUNITY	509.38	44.04	553.42	1,252.13	107.17	1,359.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	509.38	536.20	1,045.58	1,252.13	1,355.79	2,607.92
ROCK							
	DEAN HEALTH INSURANCE	567.62	58.60	626.22	1,397.72	143.58	1,541.30
3	HUMANA - EASTERN	567.62	342.30	909.92	1,397.72	852.88	2,250.60
	MERCYCARE HEALTH PLANS	567.62	14.80	582.42	1,397.72	34.08	1,431.80
*	PHYSICIANS PLUS	567.62	35.70	603.32	1,397.72	86.38	1,484.10
	UNITEDHEALTHCARE OF WISCONSIN	567.62	195.30	762.92	1,397.72	485.38	1,883.10
	UNITY HEALTH INSURANCE - COMMUNITY	553.42	-	553.42	1,359.30	-	1,359.30
	WEA TRUST - EAST	567.62	132.50	700.12	1,397.72	328.38	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	567.62	477.96	1,045.58	1,397.72	1,210.20	2,607.92
RUSK							
*	HEALTHPARTNERS HEALTH PLAN	622.74	89.38	712.12	1,549.63	206.47	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	622.74	272.68	895.42	1,549.63	664.67	2,214.30
3	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	622.74	268.68	891.42	1,549.63	654.67	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	622.74	422.84	1,045.58	1,549.63	1,058.29	2,607.92
	STATE MAINTENANCE PLAN (SMP) WPE	622.74	84.92	707.66	1,549.63	211.31	1,760.94
SAUK							
	DEAN HEALTH INSURANCE	505.33	120.89	626.22	1,242.00	299.30	1,541.30
	GHC OF SOUTH CENTRAL WISCONSIN	505.33	45.89	551.22	1,242.00	111.80	1,353.80
	GUNDERSEN HEALTH PLAN	505.33	45.79	551.12	1,242.00	111.60	1,353.60
	HEALTH TRADITION HEALTH PLAN	505.33	54.79	560.12	1,242.00	134.10	1,376.10
	PHYSICIANS PLUS	505.33	97.99	603.32	1,242.00	242.10	1,484.10
	UNITY HEALTH INSURANCE - COMMUNITY	505.33	48.09	553.42	1,242.00	117.30	1,359.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	505.33	540.25	1,045.58	1,242.00	1,365.92	2,607.92

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3 = Tier 3 Plan * = Not In Calculation - Plan Not Qualified in County

IYC Local HDHP; No Dental - P17

88% of the Tier 1 Qualified Plans' Average Premium

			Single Coverage			Family Coverage		
			Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
SAWYER								
		GHC OF EAU CLAIRE	649.63	114.69	764.32	1,602.79	283.81	1,886.60
		HEALTHPARTNERS HEALTH PLAN	649.63	62.49	712.12	1,602.79	153.31	1,756.10
	3	SECURITY HEALTH PLAN - CENTRAL	649.63	245.79	895.42	1,602.79	611.51	2,214.30
	3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	649.63	395.95	1,045.58	1,602.79	1,005.13	2,607.92
SHAWANO								
		ANTHEM BLUE PREFERRED NORTHEAST	598.12	-	598.12	1,471.10	-	1,471.10
	3	ARISE HEALTH PLAN	604.61	289.41	894.02	1,490.22	720.58	2,210.80
	3	HUMANA - EASTERN	604.61	305.31	909.92	1,490.22	760.38	2,250.60
	*	NETWORK HEALTH - NORTHEAST	604.61	19.81	624.42	1,490.22	46.58	1,536.80
	3 *	SECURITY HEALTH PLAN - CENTRAL	604.61	290.81	895.42	1,490.22	724.08	2,214.30
	3	SECURITY HEALTH PLAN - VALLEY	604.61	290.81	895.42	1,490.22	724.08	2,214.30
		UNITEDHEALTHCARE OF WISCONSIN	604.61	158.31	762.92	1,490.22	392.88	1,883.10
		WEA TRUST - EAST	604.61	95.51	700.12	1,490.22	235.88	1,726.10
	3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	604.61	440.97	1,045.58	1,490.22	1,117.70	2,607.92
SHEBOYGAN								
		ANTHEM BLUE PREFERRED NORTHEAST	579.29	18.83	598.12	1,426.90	44.20	1,471.10
	3	ARISE HEALTH PLAN	579.29	314.73	894.02	1,426.90	783.90	2,210.80
		DEAN HEALTH INSURANCE - PREVEA360	579.29	26.53	605.82	1,426.90	63.40	1,490.30
	3	HUMANA - EASTERN	579.29	330.63	909.92	1,426.90	823.70	2,250.60
		NETWORK HEALTH - NORTHEAST	579.29	45.13	624.42	1,426.90	109.90	1,536.80
		UNITEDHEALTHCARE OF WISCONSIN	579.29	183.63	762.92	1,426.90	456.20	1,883.10
		WEA TRUST - EAST	579.29	120.83	700.12	1,426.90	299.20	1,726.10
	3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	579.29	466.29	1,045.58	1,426.90	1,181.02	2,607.92
ST. CROIX								
		HEALTHPARTNERS HEALTH PLAN	626.67	85.45	712.12	1,545.37	210.73	1,756.10
	3	HUMANA - WESTERN	626.67	422.65	1,049.32	1,545.37	1,053.73	2,599.10
	3	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	626.67	264.75	891.42	1,545.37	658.93	2,204.30
	3 *	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	626.67	264.75	891.42	1,545.37	658.93	2,204.30
	3	IYC ACCESS HEALTH PLAN - DANE	626.67	340.27	966.94	1,545.37	865.97	2,411.34
TAYLOR								
	3	ARISE HEALTH PLAN	672.60	221.42	894.02	1,660.21	550.59	2,210.80
		GHC OF EAU CLAIRE	672.60	91.72	764.32	1,660.21	226.39	1,886.60
	*	HEALTHPARTNERS HEALTH PLAN	672.60	39.52	712.12	1,660.21	95.89	1,756.10
	3	SECURITY HEALTH PLAN - CENTRAL	672.60	222.82	895.42	1,660.21	554.09	2,214.30
	3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	672.60	372.98	1,045.58	1,660.21	947.71	2,607.92
TREMPEALEAU								
	3	ARISE HEALTH PLAN	488.95	405.07	894.02	1,201.07	1,009.73	2,210.80
		GUNDERSEN HEALTH PLAN	488.95	62.17	551.12	1,201.07	152.53	1,353.60
		HEALTH TRADITION HEALTH PLAN	488.95	71.17	560.12	1,201.07	175.03	1,376.10
	*	HEALTHPARTNERS HEALTH PLAN	488.95	223.17	712.12	1,201.07	555.03	1,756.10
	3 *	SECURITY HEALTH PLAN - CENTRAL	488.95	406.47	895.42	1,201.07	1,013.23	2,214.30
	3 *	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	488.95	402.47	891.42	1,201.07	1,003.23	2,204.30
	3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	488.95	556.63	1,045.58	1,201.07	1,406.85	2,607.92

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IYC Local HDHP; No Dental - P17

88% of the Tier 1 Qualified Plans' Average Premium

		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
VERNON							
3 *	ARISE HEALTH PLAN	488.30	405.72	894.02	1,199.44	1,011.36	2,210.80
*	DEAN HEALTH INSURANCE	488.30	137.92	626.22	1,199.44	341.86	1,541.30
	GUNDERSEN HEALTH PLAN	488.30	62.82	551.12	1,199.44	154.16	1,353.60
	HEALTH TRADITION HEALTH PLAN	488.30	71.82	560.12	1,199.44	176.66	1,376.10
*	PHYSICIANS PLUS	488.30	115.02	603.32	1,199.44	284.66	1,484.10
	UNITY HEALTH INSURANCE - COMMUNITY	488.30	65.12	553.42	1,199.44	159.86	1,359.30
3	WEA TRUST - NORTHWEST MAYO CLINIC HEALTH SYSTEM	488.30	403.12	891.42	1,199.44	1,004.86	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	488.30	557.28	1,045.58	1,199.44	1,408.48	2,607.92
VILAS							
3 *	ARISE HEALTH PLAN	622.74	271.28	894.02	1,549.63	661.17	2,210.80
*	GHC OF EAU CLAIRE	622.74	141.58	764.32	1,549.63	336.97	1,886.60
*	HEALTHPARTNERS HEALTH PLAN	622.74	89.38	712.12	1,549.63	206.47	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	622.74	272.68	895.42	1,549.63	664.67	2,214.30
3 *	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	622.74	422.84	1,045.58	1,549.63	1,058.29	2,607.92
	STATE MAINTENANCE PLAN (SMP) WPE	622.74	84.92	707.66	1,549.63	211.31	1,760.94
WALWORTH							
3	ARISE HEALTH PLAN	571.75	322.27	894.02	1,408.07	802.73	2,210.80
*	DEAN HEALTH INSURANCE	571.75	54.47	626.22	1,408.07	133.23	1,541.30
3	HUMANA - EASTERN	571.75	338.17	909.92	1,408.07	842.53	2,250.60
	MERCYCARE HEALTH PLANS	571.75	10.67	582.42	1,408.07	23.73	1,431.80
*	PHYSICIANS PLUS	571.75	31.57	603.32	1,408.07	76.03	1,484.10
	UNITEDHEALTHCARE OF WISCONSIN	571.75	191.17	762.92	1,408.07	475.03	1,883.10
	UNITY HEALTH INSURANCE - COMMUNITY	553.42	-	553.42	1,359.30	-	1,359.30
	WEA TRUST - EAST	571.75	128.37	700.12	1,408.07	318.03	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	571.75	473.83	1,045.58	1,408.07	1,199.85	2,607.92
WASHBURN							
	GHC OF EAU CLAIRE	649.63	114.69	764.32	1,602.79	283.81	1,886.60
	HEALTHPARTNERS HEALTH PLAN	649.63	62.49	712.12	1,602.79	153.31	1,756.10
3	SECURITY HEALTH PLAN - CENTRAL	649.63	245.79	895.42	1,602.79	611.51	2,214.30
3	WEA TRUST - NORTHWEST CHIPPEWA VALLEY	649.63	241.79	891.42	1,602.79	601.51	2,204.30
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	649.63	395.95	1,045.58	1,602.79	1,005.13	2,607.92
WASHINGTON							
3	ARISE HEALTH PLAN	615.14	278.88	894.02	1,516.53	694.27	2,210.80
3	HUMANA - EASTERN	615.14	294.78	909.92	1,516.53	734.07	2,250.60
	NETWORK HEALTH - SOUTHEAST	615.14	18.88	634.02	1,516.53	44.27	1,560.80
	UNITEDHEALTHCARE OF WISCONSIN	615.14	147.78	762.92	1,516.53	366.57	1,883.10
	WEA TRUST - EAST	615.14	84.98	700.12	1,516.53	209.57	1,726.10
3	IYC ACCESS HEALTH PLAN - WAUKESHA	615.14	430.44	1,045.58	1,516.53	1,091.39	2,607.92

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		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
WAUKESHA							
3	ARISE HEALTH PLAN	576.70	317.32	894.02	1,420.43	790.37	2,210.80
	DEAN HEALTH INSURANCE	576.70	49.52	626.22	1,420.43	120.87	1,541.30
3	HUMANA - EASTERN	576.70	333.22	909.92	1,420.43	830.17	2,250.60
	NETWORK HEALTH - SOUTHEAST	576.70	57.32	634.02	1,420.43	140.37	1,560.80
*	PHYSICIANS PLUS	576.70	26.62	603.32	1,420.43	63.67	1,484.10
	UNITEDHEALTHCARE OF WISCONSIN	576.70	186.22	762.92	1,420.43	462.67	1,883.10
	UNITY HEALTH INSURANCE - COMMUNITY	553.42	-	553.42	1,359.30	-	1,359.30
	WEA TRUST - EAST	576.70	123.42	700.12	1,420.43	305.67	1,726.10
3	IYC ACCESS HEALTH PLAN - WAUKESHA	576.70	468.88	1,045.58	1,420.43	1,187.49	2,607.92
WAUPACA							
	ANTHEM BLUE PREFERRED NORTHEAST	598.12	-	598.12	1,471.10	-	1,471.10
3	ARISE HEALTH PLAN	604.61	289.41	894.02	1,490.22	720.58	2,210.80
3	HUMANA - EASTERN	604.61	305.31	909.92	1,490.22	760.38	2,250.60
*	NETWORK HEALTH - NORTHEAST	604.61	19.81	624.42	1,490.22	46.58	1,536.80
3 *	SECURITY HEALTH PLAN - CENTRAL	604.61	290.81	895.42	1,490.22	724.08	2,214.30
3	SECURITY HEALTH PLAN - VALLEY	604.61	290.81	895.42	1,490.22	724.08	2,214.30
	UNITEDHEALTHCARE OF WISCONSIN	604.61	158.31	762.92	1,490.22	392.88	1,883.10
	WEA TRUST - EAST	604.61	95.51	700.12	1,490.22	235.88	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	604.61	440.97	1,045.58	1,490.22	1,117.70	2,607.92
WAUSHARA							
	ANTHEM BLUE PREFERRED NORTHEAST	586.19	11.93	598.12	1,444.17	26.93	1,471.10
3	ARISE HEALTH PLAN	586.19	307.83	894.02	1,444.17	766.63	2,210.80
3	HUMANA - EASTERN	586.19	323.73	909.92	1,444.17	806.43	2,250.60
*	NETWORK HEALTH - NORTHEAST	586.19	38.23	624.42	1,444.17	92.63	1,536.80
	PHYSICIANS PLUS	586.19	17.13	603.32	1,444.17	39.93	1,484.10
3	SECURITY HEALTH PLAN - VALLEY	586.19	309.23	895.42	1,444.17	770.13	2,214.30
	UNITEDHEALTHCARE OF WISCONSIN	586.19	176.73	762.92	1,444.17	438.93	1,883.10
	WEA TRUST - EAST	586.19	113.93	700.12	1,444.17	281.93	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	586.19	459.39	1,045.58	1,444.17	1,163.75	2,607.92
WINNEBAGO							
	ANTHEM BLUE PREFERRED NORTHEAST	590.83	7.29	598.12	1,455.76	15.34	1,471.10
3	ARISE HEALTH PLAN	590.83	303.19	894.02	1,455.76	755.04	2,210.80
3	HUMANA - EASTERN	590.83	319.09	909.92	1,455.76	794.84	2,250.60
	NETWORK HEALTH - NORTHEAST	590.83	33.59	624.42	1,455.76	81.04	1,536.80
3 *	SECURITY HEALTH PLAN - VALLEY	590.83	304.59	895.42	1,455.76	758.54	2,214.30
	UNITEDHEALTHCARE OF WISCONSIN	590.83	172.09	762.92	1,455.76	427.34	1,883.10
	WEA TRUST - EAST	590.83	109.29	700.12	1,455.76	270.34	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	590.83	454.75	1,045.58	1,455.76	1,152.16	2,607.92

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		Single Coverage			Family Coverage		
		Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
WOOD							
3	ARISE HEALTH PLAN	616.11	277.91	894.02	1,518.97	691.83	2,210.80
*	HEALTHPARTNERS HEALTH PLAN	616.11	96.01	712.12	1,518.97	237.13	1,756.10
*	PHYSICIANS PLUS	603.32	-	603.32	1,484.10	-	1,484.10
3	SECURITY HEALTH PLAN - CENTRAL	616.11	279.31	895.42	1,518.97	695.33	2,214.30
*	UNITY HEALTH INSURANCE - COMMUNITY	553.42	-	553.42	1,359.30	-	1,359.30
	WEA TRUST - EAST	616.11	84.01	700.12	1,518.97	207.13	1,726.10
3	IYC ACCESS HEALTH PLAN - BALANCE OF STATE	616.11	429.47	1,045.58	1,518.97	1,088.95	2,607.92

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