

State of Wisconsin Employees Group Health Insurance Program
 2013 Plan Year **LOCAL Active Employees & Employer Paid Annuitants**
 Imputed Income Calculation (Fair Market Value)
 Coinsurance HMO & Standard PPO Plan **Program Option 6**

Plan	2013 Monthly Premium Rates		2 Category Estimated Imputed Income*	
	Single	Family	1 non-tax Dependent	2 or more non-tax Dependents
Anthem Blue - Northeast	\$ 926.40	\$ 2,311.20	\$ 603.70	\$ 1,251.70
Anthem Blue - Northwest	\$ 1,072.30	\$ 2,676.00	\$ 699.10	\$ 1,449.60
Anthem Blue - Southeast	\$ 1,022.90	\$ 2,552.50	\$ 666.80	\$ 1,382.60
Arise Health Plan	\$ 860.30	\$ 2,146.00	\$ 560.50	\$ 1,162.10
Dean Health Plan	\$ 589.90	\$ 1,470.00	\$ 383.70	\$ 795.50
GHC of Eau Claire	\$ 1,002.20	\$ 2,500.70	\$ 653.20	\$ 1,354.50
GHC of South Central WI	\$ 549.30	\$ 1,368.50	\$ 357.10	\$ 740.50
Gundersen Lutheran Health Plan	\$ 726.00	\$ 1,810.20	\$ 472.60	\$ 980.00
Health Tradition Health Plan	\$ 700.00	\$ 1,745.20	\$ 455.60	\$ 944.80
HealthPartners	\$ 800.80	\$ 1,997.20	\$ 521.50	\$ 1,081.40
Humana - Eastern	\$ 1,046.10	\$ 2,610.50	\$ 682.00	\$ 1,414.00
Humana - Western	\$ 1,046.10	\$ 2,610.50	\$ 682.00	\$ 1,414.00
Medical Associates Health Plan	\$ 709.00	\$ 1,767.70	\$ 461.50	\$ 956.90
MercyCare Health Plans	\$ 530.90	\$ 1,322.50	\$ 345.10	\$ 715.60
Network Health Plan	\$ 708.60	\$ 1,766.70	\$ 461.30	\$ 956.40
Physicians Plus	\$ 578.10	\$ 1,440.50	\$ 375.90	\$ 779.50
Security Health Plan	\$ 1,063.50	\$ 2,654.00	\$ 693.30	\$ 1,437.70
Standard Plan DANE (LOCAL)	\$ 935.20	\$ 2,333.20	\$ 609.40	\$ 1,263.70
Standard Plan MILWAUKEE (LOCAL)	\$ 1,088.20	\$ 2,715.50	\$ 709.40	\$ 1,470.90
Standard Plan WAUKESHA (LOCAL)	\$ 1,006.90	\$ 2,512.30	\$ 656.20	\$ 1,360.70
Standard Plan WISCONSIN (LOCAL)	\$ 1,006.90	\$ 2,512.30	\$ 656.20	\$ 1,360.70
State Maintenance Plan	\$ 710.70	\$ 1,772.40	\$ 462.80	\$ 959.60
Unitedhealthcare of WI NE	\$ 761.90	\$ 1,900.00	\$ 496.10	\$ 1,028.80
Unitedhealthcare of WI SE	\$ 800.30	\$ 1,996.00	\$ 521.20	\$ 1,080.80
Unity - Community	\$ 506.50	\$ 1,261.50	\$ 329.10	\$ 682.40
Unity - UW Health	\$ 483.10	\$ 1,203.00	\$ 313.80	\$ 650.70
WEA Trust PPO - East	\$ 765.70	\$ 1,909.50	\$ 498.60	\$ 1,033.90
WEA Trust PPO - Northwest	\$ 802.40	\$ 2,001.20	\$ 522.60	\$ 1,083.60
WPS Metro Choice Southeast	\$ 1,129.70	\$ 2,819.50	\$ 736.60	\$ 1,527.40
WPS Metro Choice Northwest	\$ 970.20	\$ 2,420.70	\$ 632.30	\$ 1,311.10

10/09/2012

* 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.

Note:

These amounts include both employee and employer share of the premium. Please consult your tax advisor as to the treatment of employee contributions made toward coverage for the employee and dependents in cases where the employee pays a share of premium as defined in Section 152.