

State of Wisconsin, Wisconsin Public Employers Group Health Insurance Program
 2011 Plan Year **LOCAL Active Employees & Employer Paid Annuitants**
 Imputed Income Calculation (Fair Market Value)
Deductible HMO & Deductible Standard PPP **Program Option 5**

Plan	Monthly Premium Rates		2 Category Estimated Monthly Imputed Income*	
	Single	Family	1 non-tax Dependent	2 or more non-tax Dependents
Anthem Blue Northeast	\$ 828.90	\$ 2,068.40	\$ 566.00	\$ 1,158.90
Anthem Blue Northwest	\$ 844.90	\$ 2,108.40	\$ 577.00	\$ 1,181.30
Anthem Blue Southeast	\$ 978.90	\$ 2,443.40	\$ 668.70	\$ 1,369.30
Arise	\$ 700.20	\$ 1,746.70	\$ 477.90	\$ 978.40
Dean Health Plan	\$ 488.40	\$ 1,217.20	\$ 332.80	\$ 681.40
GHC - Eau Claire	\$ 772.70	\$ 1,927.90	\$ 527.50	\$ 1,080.10
GHC - South Central	\$ 513.40	\$ 1,279.70	\$ 349.90	\$ 716.40
Gundersen/Lutheran	\$ 759.20	\$ 1,894.20	\$ 518.30	\$ 1,061.20
HealthPartners	\$ 810.10	\$ 2,021.40	\$ 553.10	\$ 1,132.50
Health Tradition	\$ 678.70	\$ 1,692.90	\$ 463.10	\$ 948.20
Humana - Eastern	\$ 1,029.50	\$ 2,569.90	\$ 703.40	\$ 1,440.20
Humana -Western	\$ 1,029.50	\$ 2,569.90	\$ 703.40	\$ 1,440.20
Medical Associates HMO	\$ 536.00	\$ 1,336.20	\$ 365.40	\$ 748.20
MercyCare	\$ 469.10	\$ 1,168.90	\$ 319.60	\$ 654.30
Network	\$ 581.70	\$ 1,450.40	\$ 396.70	\$ 812.20
Physicians Plus	\$ 484.50	\$ 1,207.40	\$ 330.10	\$ 675.90
Security Health Plan	\$ 888.50	\$ 2,217.40	\$ 606.80	\$ 1,242.40
Standard - Dane	\$ 839.40	\$ 2,094.50	\$ 573.10	\$ 1,173.40
Standard - Milwaukee	\$ 973.30	\$ 2,429.40	\$ 664.90	\$ 1,361.40
Standard - Waukesha	\$ 902.80	\$ 2,253.00	\$ 616.50	\$ 1,262.40
Standard - Balance of State	\$ 902.80	\$ 2,253.00	\$ 616.50	\$ 1,262.40
State Maintenance Plan (SMP)	\$ 651.90	\$ 1,626.00	\$ 444.80	\$ 910.70
UnitedHealthcare-Northeast	\$ 660.20	\$ 1,646.70	\$ 450.50	\$ 922.30
UnitedHealthcare-Southeast	\$ 689.20	\$ 1,719.20	\$ 470.30	\$ 963.00
Unity - Community	\$ 483.80	\$ 1,205.70	\$ 329.60	\$ 675.00
Unity - UW	\$ 484.30	\$ 1,206.90	\$ 330.00	\$ 675.60
WEA Trust	\$ 714.50	\$ 1,782.40	\$ 487.60	\$ 998.50
WPS MetroChoice	\$ 947.10	\$ 2,363.90	\$ 647.00	\$ 1,324.60

* 2 Category Estimated Imputed Income assumes 2 or more non-tax Deps category is comprised of approximately 75% 2 Dep and 25% 3 Dep +

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.