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= Low Cost Qualified Plan

2012 Local Low Cost Plan:

Effective January 1, 2012
Traditional HMO - Standard PPP (P03)

Provides employer share amount that is 88% of the average premium cost of the qualified Tier 1 health plans within the county.

			Single Coverage			Family Coverage		
			Maximum Employer Share	Minimum Employee Share	Total Single Premium	Maximum Employer Share	Minimum Employee Share	Total Family Premium
	ADAMS							
	ADAMS	DEAN HEALTH PLAN	574.64	0.66	575.30	1432.93	1.17	1434.10
	ADAMS	PHYSICIANS PLUS	560.90	0.00	560.90	1398.10	0.00	1398.10
	ADAMS	SECURITY HEALTH PLAN	574.64	401.76	976.40	1432.93	1003.87	2436.80
	ADAMS	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	ADAMS	STANDARD PLAN: BALANCE OF STATE-PPP	574.64	384.86	959.50	1432.93	961.97	2394.90
	ASHLAND							
	ASHLAND	ANTHEM BLUE NORTHWEST	846.34	229.96	1076.30	2112.18	574.42	2686.60
	ASHLAND	GHC OF EAU CLAIRE	846.34	129.56	975.90	2112.18	323.42	2435.60
	ASHLAND	SECURITY HEALTH PLAN	846.34	130.06	976.40	2112.18	324.62	2436.80
	ASHLAND	WEA TRUST NORTHWEST	818.40	0.00	818.40	2041.80	0.00	2041.80
	ASHLAND	STANDARD PLAN: BALANCE OF STATE-PPP	846.34	113.16	959.50	2112.18	282.72	2394.90
	BARRON							
*	BARRON	GUNDERSEN LUTHERAN HEALTH PLAN	786.70	0.00	786.70	1962.60	0.00	1962.60
	BARRON	HUMANA WESTERN	846.74	245.06	1091.80	2113.14	612.16	2725.30
	BARRON	SECURITY HEALTH PLAN	846.74	129.66	976.40	2113.14	323.66	2436.80
	BARRON	WEA TRUST NORTHWEST	818.40	0.00	818.40	2041.80	0.00	2041.80
	BARRON	STANDARD PLAN: BALANCE OF STATE-PPP	846.74	112.76	959.50	2113.14	281.76	2394.90
	BAYFIELD							
*	BAYFIELD	ANTHEM BLUE NORTHWEST	627.35	448.95	1076.30	1565.17	1121.43	2686.60
*	BAYFIELD	GHC OF EAU CLAIRE	627.35	348.55	975.90	1565.17	870.43	2435.60
*	BAYFIELD	HEALTHPARTNERS	627.35	235.85	863.20	1565.17	588.63	2153.80
*	BAYFIELD	SECURITY HEALTH PLAN	627.35	349.05	976.40	1565.17	871.63	2436.80
*	BAYFIELD	WEA TRUST NORTHWEST	627.35	191.05	818.40	1565.17	476.63	2041.80
	BAYFIELD	STATE MAINTENANCE PLAN (SMP)	627.35	85.55	712.90	1565.17	213.43	1778.60
	BAYFIELD	STANDARD PLAN: BALANCE OF STATE-PPP	627.35	332.15	959.50	1565.17	829.73	2394.90
	BROWN							
	BROWN	ANTHEM BLUE NORTHEAST	741.44	190.96	932.40	1849.92	476.88	2326.80
	BROWN	ARISE HEALTH PLAN	741.44	120.46	861.90	1849.92	300.68	2150.60
	BROWN	HUMANA EASTERN	741.44	350.36	1091.80	1849.92	875.38	2725.30
	BROWN	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
	BROWN	UNITEDHEALTHCARE NE	739.40	0.00	739.40	1844.30	0.00	1844.30
	BROWN	WEA TRUST EAST	741.44	40.16	781.60	1849.92	99.88	1949.80
	BROWN	STANDARD PLAN: BALANCE OF STATE-PPP	741.44	218.06	959.50	1849.92	544.98	2394.90
	BUFFALO							
*	BUFFALO	HEALTH TRADITION HEALTH PLAN	627.35	94.45	721.80	1565.17	235.13	1800.30
*	BUFFALO	WEA TRUST NORTHWEST	627.35	191.05	818.40	1565.17	476.63	2041.80
	BUFFALO	STATE MAINTENANCE PLAN (SMP)	627.35	85.55	712.90	1565.17	213.43	1778.60
	BUFFALO	STANDARD PLAN: BALANCE OF STATE-PPP	627.35	332.15	959.50	1565.17	829.73	2394.90
	BURNETT							
	BURNETT	ANTHEM BLUE NORTHWEST	821.44	254.86	1076.30	2049.92	636.68	2686.60
	BURNETT	GHC OF EAU CLAIRE	821.44	154.46	975.90	2049.92	385.68	2435.60
	BURNETT	HEALTHPARTNERS	821.44	41.76	863.20	2049.92	103.88	2153.80
	BURNETT	WEA TRUST NORTHWEST	818.40	0.00	818.40	2041.80	0.00	2041.80
	BURNETT	STANDARD PLAN: BALANCE OF STATE-PPP	821.44	138.06	959.50	2049.92	344.98	2394.90
	CALUMET							
	CALUMET	ANTHEM BLUE NORTHEAST	680.53	251.87	932.40	1697.64	629.16	2326.80
*	CALUMET	ARISE HEALTH PLAN	680.53	181.37	861.90	1697.64	452.96	2150.60
*	CALUMET	HUMANA EASTERN	680.53	411.27	1091.80	1697.64	1027.66	2725.30
	CALUMET	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
	CALUMET	UNITEDHEALTHCARE NE	680.53	58.87	739.40	1697.64	146.66	1844.30
*	CALUMET	WEA TRUST EAST	680.53	101.07	781.60	1697.64	252.16	1949.80
	CALUMET	STANDARD PLAN: BALANCE OF STATE-PPP	680.53	278.97	959.50	1697.64	697.26	2394.90
	CHIPPEWA							
	CHIPPEWA	GUNDERSEN LUTHERAN HEALTH PLAN	786.70	0.00	786.70	1962.60	0.00	1962.60
	CHIPPEWA	HUMANA WESTERN	808.13	283.67	1091.80	2016.63	708.67	2725.30
	CHIPPEWA	SECURITY HEALTH PLAN	808.13	168.27	976.40	2016.63	420.17	2436.80
	CHIPPEWA	WEA TRUST NORTHWEST	808.13	10.27	818.40	2016.63	25.17	2041.80
	CHIPPEWA	STANDARD PLAN: BALANCE OF STATE-PPP	808.13	151.37	959.50	2016.63	378.27	2394.90

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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
CLARK								
*	CLARK	ARISE HEALTH PLAN	775.76	86.14	861.90	1935.74	214.86	2150.60
	CLARK	GUNDERSEN LUTHERAN HEALTH PLAN	775.76	10.94	786.70	1935.74	26.86	1962.60
	CLARK	SECURITY HEALTH PLAN	775.76	200.64	976.40	1935.74	501.06	2436.80
	CLARK	STANDARD PLAN: BALANCE OF STATE-PPP	775.76	183.74	959.50	1935.74	459.16	2394.90
COLUMBIA								
	COLUMBIA	DEAN HEALTH PLAN	531.78	43.52	575.30	1325.79	108.31	1434.10
	COLUMBIA	PHYSICIANS PLUS	531.78	29.12	560.90	1325.79	72.31	1398.10
	COLUMBIA	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	COLUMBIA	WEA TRUST EAST	531.78	249.82	781.60	1325.79	624.01	1949.80
	COLUMBIA	STANDARD PLAN: BALANCE OF STATE-PPP	531.78	427.72	959.50	1325.79	1069.11	2394.90
CRAWFORD								
	CRAWFORD	GUNDERSEN LUTHERAN HEALTH PLAN	692.30	94.40	786.70	1727.09	235.51	1962.60
*	CRAWFORD	HEALTH TRADITION HEALTH PLAN	692.30	29.50	721.80	1727.09	73.21	1800.30
*	CRAWFORD	MEDICAL ASSOCIATES HEALTH PLAN	658.40	0.00	658.40	1641.80	0.00	1641.80
*	CRAWFORD	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	CRAWFORD	STANDARD PLAN: BALANCE OF STATE-PPP	692.30	267.20	959.50	1727.09	667.81	2394.90
DANE								
	DANE	DEAN HEALTH PLAN	485.25	90.05	575.30	1209.47	224.63	1434.10
	DANE	GHC OF SOUTH CENTRAL WISCONSIN	485.25	84.35	569.60	1209.47	210.33	1419.80
	DANE	PHYSICIANS PLUS	485.25	75.65	560.90	1209.47	188.63	1398.10
	DANE	UNITY UW HEALTH	485.25	14.65	499.90	1209.47	36.13	1245.60
	DANE	STANDARD PLAN: DANE-PPP	485.25	405.95	891.20	1209.47	1014.73	2224.20
DODGE								
	DODGE	ANTHEM BLUE SOUTHEAST	680.27	359.03	1039.30	1696.98	897.12	2594.10
*	DODGE	ARISE HEALTH PLAN	680.27	181.63	861.90	1696.98	453.62	2150.60
	DODGE	DEAN HEALTH PLAN	575.30	0.00	575.30	1434.10	0.00	1434.10
	DODGE	HUMANA EASTERN	680.27	411.53	1091.80	1696.98	1028.32	2725.30
	DODGE	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
	DODGE	UNITEDHEALTHCARE SE	680.27	95.33	775.60	1696.98	237.82	1934.80
	DODGE	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	DODGE	WEA TRUST EAST	680.27	101.33	781.60	1696.98	252.82	1949.80
	DODGE	STANDARD PLAN: BALANCE OF STATE-PPP	680.27	279.23	959.50	1696.98	697.92	2394.90
DOOR								
	DOOR	ANTHEM BLUE NORTHEAST	697.58	234.82	932.40	1740.25	586.55	2326.80
	DOOR	ARISE HEALTH PLAN	697.58	164.32	861.90	1740.25	410.35	2150.60
*	DOOR	HUMANA EASTERN	697.58	394.22	1091.80	1740.25	985.05	2725.30
	DOOR	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
	DOOR	UNITEDHEALTHCARE NE	697.58	41.82	739.40	1740.25	104.05	1844.30
	DOOR	WEA TRUST EAST	697.58	84.02	781.60	1740.25	209.55	1949.80
	DOOR	STANDARD PLAN: BALANCE OF STATE-PPP	697.58	261.92	959.50	1740.25	654.65	2394.90
DOUGLAS								
	DOUGLAS	ANTHEM BLUE NORTHWEST	850.96	225.34	1076.30	2123.72	562.88	2686.60
	DOUGLAS	GHC OF EAU CLAIRE	850.96	124.94	975.90	2123.72	311.88	2435.60
	DOUGLAS	HEALTHPARTNERS	850.96	12.24	863.20	2123.72	30.08	2153.80
	DOUGLAS	HUMANA WESTERN	850.96	240.84	1091.80	2123.72	601.58	2725.30
	DOUGLAS	SECURITY HEALTH PLAN	850.96	125.44	976.40	2123.72	313.08	2436.80
	DOUGLAS	WEA TRUST NORTHWEST	818.40	0.00	818.40	2041.80	0.00	2041.80
	DOUGLAS	STANDARD PLAN: BALANCE OF STATE-PPP	850.96	108.54	959.50	2123.72	271.18	2394.90
DUNN								
*	DUNN	HUMANA WESTERN	720.19	371.61	1091.80	1796.78	928.52	2725.30
	DUNN	WEA TRUST NORTHWEST	720.19	98.21	818.40	1796.78	245.02	2041.80
	DUNN	STANDARD PLAN: BALANCE OF STATE-PPP	720.19	239.31	959.50	1796.78	598.12	2394.90
EAU CLAIRE								
	EAU CLAIRE	ANTHEM BLUE NORTHWEST	835.93	240.37	1076.30	2086.15	600.45	2686.60
	EAU CLAIRE	GUNDERSEN LUTHERAN HEALTH PLAN	786.70	0.00	786.70	1962.60	0.00	1962.60
	EAU CLAIRE	HUMANA WESTERN	835.93	255.87	1091.80	2086.15	639.15	2725.30
	EAU CLAIRE	SECURITY HEALTH PLAN	835.93	140.47	976.40	2086.15	350.65	2436.80
	EAU CLAIRE	WEA TRUST NORTHWEST	818.40	0.00	818.40	2041.80	0.00	2041.80
	EAU CLAIRE	STANDARD PLAN: BALANCE OF STATE-PPP	835.93	123.57	959.50	2086.15	308.75	2394.90

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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
	FLORENCE							
*	FLORENCE	ARISE HEALTH PLAN	627.35	234.55	861.90	1565.17	585.43	2150.60
*	FLORENCE	WEA TRUST EAST	627.35	154.25	781.60	1565.17	384.63	1949.80
	FLORENCE	STATE MAINTENANCE PLAN (SMP)	627.35	85.55	712.90	1565.17	213.43	1778.60
	FLORENCE	STANDARD PLAN: BALANCE OF STATE-PPP	627.35	332.15	959.50	1565.17	829.73	2394.90
	FOND DU LAC							
	FOND DU LAC	ANTHEM BLUE NORTHEAST	674.30	258.10	932.40	1682.07	644.73	2326.80
	FOND DU LAC	ARISE HEALTH PLAN	674.30	187.60	861.90	1682.07	468.53	2150.60
	FOND DU LAC	DEAN HEALTH PLAN	575.30	0.00	575.30	1434.10	0.00	1434.10
	FOND DU LAC	HUMANA EASTERN	674.30	417.50	1091.80	1682.07	1043.23	2725.30
	FOND DU LAC	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
	FOND DU LAC	UNITEDHEALTHCARE NE	674.30	65.10	739.40	1682.07	162.23	1844.30
	FOND DU LAC	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	FOND DU LAC	WEA TRUST EAST	674.30	107.30	781.60	1682.07	267.73	1949.80
	FOND DU LAC	STANDARD PLAN: BALANCE OF STATE-PPP	674.30	285.20	959.50	1682.07	712.83	2394.90
	FOREST							
*	FOREST	ARISE HEALTH PLAN	627.35	234.55	861.90	1565.17	585.43	2150.60
*	FOREST	SECURITY HEALTH PLAN	627.35	349.05	976.40	1565.17	871.63	2436.80
	FOREST	STATE MAINTENANCE PLAN (SMP)	627.35	85.55	712.90	1565.17	213.43	1778.60
	FOREST	STANDARD PLAN: BALANCE OF STATE-PPP	627.35	332.15	959.50	1565.17	829.73	2394.90
	GRANT							
	GRANT	DEAN HEALTH PLAN	557.70	17.60	575.30	1390.58	43.52	1434.10
	GRANT	GUNDERSEN LUTHERAN HEALTH PLAN	557.70	229.00	786.70	1390.58	572.02	1962.60
	GRANT	HEALTH TRADITION HEALTH PLAN	557.70	164.10	721.80	1390.58	409.72	1800.30
	GRANT	MEDICAL ASSOCIATES HEALTH PLAN	557.70	100.70	658.40	1390.58	251.22	1641.80
	GRANT	PHYSICIANS PLUS	557.70	3.20	560.90	1390.58	7.52	1398.10
	GRANT	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	GRANT	STANDARD PLAN: DANE-PPP	557.70	333.50	891.20	1390.58	833.62	2224.20
	GREEN							
	GREEN	DEAN HEALTH PLAN	575.30	0.00	575.30	1434.10	0.00	1434.10
	GREEN	HUMANA EASTERN	635.51	456.29	1091.80	1585.09	1140.21	2725.30
*	GREEN	MERCYCARE HEALTH PLAN	543.90	0.00	543.90	1355.60	0.00	1355.60
	GREEN	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	GREEN	STANDARD PLAN: BALANCE OF STATE-PPP	635.51	323.99	959.50	1585.09	809.81	2394.90
	GREEN LAKE							
	GREEN LAKE	ANTHEM BLUE NORTHEAST	738.04	194.36	932.40	1841.40	485.40	2326.80
*	GREEN LAKE	ARISE HEALTH PLAN	738.04	123.86	861.90	1841.40	309.20	2150.60
*	GREEN LAKE	DEAN HEALTH PLAN	575.30	0.00	575.30	1434.10	0.00	1434.10
	GREEN LAKE	HUMANA EASTERN	738.04	353.76	1091.80	1841.40	883.90	2725.30
	GREEN LAKE	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
*	GREEN LAKE	PHYSICIANS PLUS	560.90	0.00	560.90	1398.10	0.00	1398.10
*	GREEN LAKE	SECURITY HEALTH PLAN	738.04	238.36	976.40	1841.40	595.40	2436.80
	GREEN LAKE	UNITEDHEALTHCARE NE	738.04	1.36	739.40	1841.40	2.90	1844.30
	GREEN LAKE	WEA TRUST EAST	738.04	43.56	781.60	1841.40	108.40	1949.80
	GREEN LAKE	STANDARD PLAN: BALANCE OF STATE-PPP	738.04	221.46	959.50	1841.40	553.50	2394.90
	IOWA							
	IOWA	DEAN HEALTH PLAN	504.68	70.62	575.30	1258.03	176.07	1434.10
	IOWA	MEDICAL ASSOCIATES HEALTH PLAN	504.68	153.72	658.40	1258.03	383.77	1641.80
	IOWA	PHYSICIANS PLUS	504.68	56.22	560.90	1258.03	140.07	1398.10
	IOWA	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	IOWA	STANDARD PLAN: BALANCE OF STATE-PPP	504.68	454.82	959.50	1258.03	1136.87	2394.90
	IRON							
*	IRON	SECURITY HEALTH PLAN	627.35	349.05	976.40	1565.17	871.63	2436.80
	IRON	STATE MAINTENANCE PLAN (SMP)	627.35	85.55	712.90	1565.17	213.43	1778.60
	IRON	STANDARD PLAN: BALANCE OF STATE-PPP	627.35	332.15	959.50	1565.17	829.73	2394.90
	JACKSON							
	JACKSON	GUNDERSEN LUTHERAN HEALTH PLAN	726.73	59.97	786.70	1813.13	149.47	1962.60
	JACKSON	HEALTH TRADITION HEALTH PLAN	721.80	0.00	721.80	1800.30	0.00	1800.30
	JACKSON	SECURITY HEALTH PLAN	726.73	249.67	976.40	1813.13	623.67	2436.80
	JACKSON	WEA TRUST NORTHWEST	726.73	91.67	818.40	1813.13	228.67	2041.80
	JACKSON	STANDARD PLAN: BALANCE OF STATE-PPP	726.73	232.77	959.50	1813.13	581.77	2394.90

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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
	JEFFERSON							
	JEFFERSON	ANTHEM BLUE SOUTHEAST	667.15	372.15	1039.30	1664.21	929.89	2594.10
	JEFFERSON	DEAN HEALTH PLAN	575.30	0.00	575.30	1434.10	0.00	1434.10
	JEFFERSON	HUMANA EASTERN	667.15	424.65	1091.80	1664.21	1061.09	2725.30
	JEFFERSON	MERCYCARE HEALTH PLAN	543.90	0.00	543.90	1355.60	0.00	1355.60
*	JEFFERSON	PHYSICIANS PLUS	560.90	0.00	560.90	1398.10	0.00	1398.10
	JEFFERSON	UNITEDHEALTHCARE SE	667.15	108.45	775.60	1664.21	270.59	1934.80
	JEFFERSON	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	JEFFERSON	WEA TRUST EAST	667.15	114.45	781.60	1664.21	285.59	1949.80
	JEFFERSON	STANDARD PLAN: DANE-PPP	667.15	224.05	891.20	1664.21	559.99	2224.20
	JUNEAU							
*	JUNEAU	DEAN HEALTH PLAN	575.30	0.00	575.30	1434.10	0.00	1434.10
	JUNEAU	GUNDERSEN LUTHERAN HEALTH PLAN	656.55	130.15	786.70	1637.68	324.92	1962.60
	JUNEAU	HEALTH TRADITION HEALTH PLAN	656.55	65.25	721.80	1637.68	162.62	1800.30
	JUNEAU	SECURITY HEALTH PLAN	656.55	319.85	976.40	1637.68	799.12	2436.80
	JUNEAU	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	JUNEAU	STANDARD PLAN: BALANCE OF STATE-PPP	656.55	302.95	959.50	1637.68	757.22	2394.90
	KENOSHA							
	KENOSHA	ANTHEM BLUE SOUTHEAST	811.43	227.87	1039.30	2024.88	569.22	2594.10
	KENOSHA	HUMANA EASTERN	811.43	280.37	1091.80	2024.88	700.42	2725.30
	KENOSHA	UNITEDHEALTHCARE SE	775.60	0.00	775.60	1934.80	0.00	1934.80
	KENOSHA	WEA TRUST EAST	781.60	0.00	781.60	1949.80	0.00	1949.80
	KENOSHA	STANDARD PLAN: WAUKESHA-PPP	811.43	148.07	959.50	2024.88	370.02	2394.90
	KEWAUNEE							
	KEWAUNEE	ANTHEM BLUE NORTHEAST	709.30	223.10	932.40	1769.57	557.23	2326.80
	KEWAUNEE	ARISE HEALTH PLAN	709.30	152.60	861.90	1769.57	381.03	2150.60
*	KEWAUNEE	HUMANA EASTERN	709.30	382.50	1091.80	1769.57	955.73	2725.30
	KEWAUNEE	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
*	KEWAUNEE	UNITEDHEALTHCARE NE	709.30	30.10	739.40	1769.57	74.73	1844.30
	KEWAUNEE	WEA TRUST EAST	709.30	72.30	781.60	1769.57	180.23	1949.80
	KEWAUNEE	STANDARD PLAN: BALANCE OF STATE-PPP	709.30	250.20	959.50	1769.57	625.33	2394.90
	LACROSSE							
	LACROSSE	GUNDERSEN LUTHERAN HEALTH PLAN	663.74	122.96	786.70	1655.68	306.92	1962.60
	LACROSSE	HEALTH TRADITION HEALTH PLAN	663.74	58.06	721.80	1655.68	144.62	1800.30
	LACROSSE	STANDARD PLAN: DANE-PPP	663.74	227.46	891.20	1655.68	568.52	2224.20
	LAFAYETTE							
	LAFAYETTE	DEAN HEALTH PLAN	526.42	48.88	575.30	1312.37	121.73	1434.10
	LAFAYETTE	MEDICAL ASSOCIATES HEALTH PLAN	526.42	131.98	658.40	1312.37	329.43	1641.80
	LAFAYETTE	PHYSICIANS PLUS	526.42	34.48	560.90	1312.37	85.73	1398.10
	LAFAYETTE	STANDARD PLAN: BALANCE OF STATE-PPP	526.42	433.08	959.50	1312.37	1082.53	2394.90
	LANGLADE							
	LANGLADE	ARISE HEALTH PLAN	808.85	53.05	861.90	2018.46	132.14	2150.60
	LANGLADE	SECURITY HEALTH PLAN	808.85	167.55	976.40	2018.46	418.34	2436.80
	LANGLADE	STANDARD PLAN: BALANCE OF STATE-PPP	808.85	150.65	959.50	2018.46	376.44	2394.90
	LINCOLN							
*	LINCOLN	ARISE HEALTH PLAN	859.23	2.67	861.90	2144.38	6.22	2150.60
	LINCOLN	SECURITY HEALTH PLAN	859.23	117.17	976.40	2144.38	292.42	2436.80
	LINCOLN	STANDARD PLAN: BALANCE OF STATE-PPP	859.23	100.27	959.50	2144.38	250.52	2394.90
	MANITOWOC							
	MANITOWOC	ANTHEM BLUE NORTHEAST	741.44	190.96	932.40	1849.92	476.88	2326.80
	MANITOWOC	ARISE HEALTH PLAN	741.44	120.46	861.90	1849.92	300.68	2150.60
	MANITOWOC	HUMANA EASTERN	741.44	350.36	1091.80	1849.92	875.38	2725.30
	MANITOWOC	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
	MANITOWOC	UNITEDHEALTHCARE NE	739.40	0.00	739.40	1844.30	0.00	1844.30
	MANITOWOC	WEA TRUST EAST	741.44	40.16	781.60	1849.92	99.88	1949.80
	MANITOWOC	STANDARD PLAN: BALANCE OF STATE-PPP	741.44	218.06	959.50	1849.92	544.98	2394.90
	MARATHON							
	MARATHON	ARISE HEALTH PLAN	768.50	93.40	861.90	1917.58	233.02	2150.60
	MARATHON	SECURITY HEALTH PLAN	768.50	207.90	976.40	1917.58	519.22	2436.80
	MARATHON	WEA TRUST EAST	768.50	13.10	781.60	1917.58	32.22	1949.80
	MARATHON	STANDARD PLAN: BALANCE OF STATE-PPP	768.50	191.00	959.50	1917.58	477.32	2394.90

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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
MARINETTE								
	MARINETTE	ANTHEM BLUE NORTHEAST	775.65	156.75	932.40	1935.44	391.36	2326.80
	MARINETTE	ARISE HEALTH PLAN	775.65	86.25	861.90	1935.44	215.16	2150.60
	MARINETTE	HUMANA EASTERN	775.65	316.15	1091.80	1935.44	789.86	2725.30
	MARINETTE	UNITEDHEALTHCARE NE	739.40	0.00	739.40	1844.30	0.00	1844.30
	MARINETTE	WEA TRUST EAST	775.65	5.95	781.60	1935.44	14.36	1949.80
	MARINETTE	STANDARD PLAN: BALANCE OF STATE-PPP	775.65	183.85	959.50	1935.44	459.46	2394.90
MARQUETTE								
*	MARQUETTE	NETWORK HEALTH PLAN	493.59	154.61	648.20	1230.33	385.97	1616.30
	MARQUETTE	PHYSICIANS PLUS	493.59	67.31	560.90	1230.33	167.77	1398.10
*	MARQUETTE	UNITEDHEALTHCARE NE	493.59	245.81	739.40	1230.33	613.97	1844.30
*	MARQUETTE	UNITY COMMUNITY	493.59	5.81	499.40	1230.33	13.97	1244.30
*	MARQUETTE	WEA TRUST EAST	493.59	288.01	781.60	1230.33	719.47	1949.80
	MARQUETTE	STANDARD PLAN: BALANCE OF STATE-PPP	493.59	465.91	959.50	1230.33	1164.57	2394.90
MENOMINEE								
	MENOMINEE	STATE MAINTENANCE PLAN (SMP)	627.35	85.55	712.90	1565.17	213.43	1778.60
	MENOMINEE	STANDARD PLAN: BALANCE OF STATE-PPP	627.35	332.15	959.50	1565.17	829.73	2394.90
MILWAUKEE								
	MILWAUKEE	ANTHEM BLUE SOUTHEAST	835.65	203.65	1039.30	2085.44	508.66	2594.10
	MILWAUKEE	HUMANA EASTERN	835.65	256.15	1091.80	2085.44	639.86	2725.30
	MILWAUKEE	UNITEDHEALTHCARE SE	775.60	0.00	775.60	1934.80	0.00	1934.80
	MILWAUKEE	WEA TRUST EAST	781.60	0.00	781.60	1949.80	0.00	1949.80
	MILWAUKEE	WPS METRO CHOICE	835.65	224.05	1059.70	2085.44	559.66	2645.10
	MILWAUKEE	STANDARD PLAN: MILWAUKEE-PPP	835.65	201.35	1037.00	2085.44	503.26	2588.70
MONROE								
	MONROE	GUNDERSEN LUTHERAN HEALTH PLAN	663.74	122.96	786.70	1655.68	306.92	1962.60
	MONROE	HEALTH TRADITION HEALTH PLAN	663.74	58.06	721.80	1655.68	144.62	1800.30
	MONROE	STANDARD PLAN: BALANCE OF STATE-PPP	663.74	295.76	959.50	1655.68	739.22	2394.90
OCONTO								
	OCONTO	ANTHEM BLUE NORTHEAST	709.30	223.10	932.40	1769.57	557.23	2326.80
	OCONTO	ARISE HEALTH PLAN	709.30	152.60	861.90	1769.57	381.03	2150.60
*	OCONTO	HUMANA EASTERN	709.30	382.50	1091.80	1769.57	955.73	2725.30
	OCONTO	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
*	OCONTO	UNITEDHEALTHCARE NE	709.30	30.10	739.40	1769.57	74.73	1844.30
	OCONTO	WEA TRUST EAST	709.30	72.30	781.60	1769.57	180.23	1949.80
	OCONTO	STANDARD PLAN: BALANCE OF STATE-PPP	709.30	250.20	959.50	1769.57	625.33	2394.90
ONEIDA								
*	ONEIDA	ARISE HEALTH PLAN	859.23	2.67	861.90	2144.38	6.22	2150.60
	ONEIDA	SECURITY HEALTH PLAN	859.23	117.17	976.40	2144.38	292.42	2436.80
	ONEIDA	STANDARD PLAN: BALANCE OF STATE-PPP	859.23	100.27	959.50	2144.38	250.52	2394.90
OUTAGAMIE								
	OUTAGAMIE	ANTHEM BLUE NORTHEAST	741.44	190.96	932.40	1849.92	476.88	2326.80
	OUTAGAMIE	ARISE HEALTH PLAN	741.44	120.46	861.90	1849.92	300.68	2150.60
	OUTAGAMIE	HUMANA EASTERN	741.44	350.36	1091.80	1849.92	875.38	2725.30
	OUTAGAMIE	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
	OUTAGAMIE	UNITEDHEALTHCARE NE	739.40	0.00	739.40	1844.30	0.00	1844.30
	OUTAGAMIE	WEA TRUST EAST	741.44	40.16	781.60	1849.92	99.88	1949.80
	OUTAGAMIE	STANDARD PLAN: BALANCE OF STATE-PPP	741.44	218.06	959.50	1849.92	544.98	2394.90
OZAUKEE								
	OZAUKEE	ANTHEM BLUE SOUTHEAST	835.65	203.65	1039.30	2085.44	508.66	2594.10
	OZAUKEE	HUMANA EASTERN	835.65	256.15	1091.80	2085.44	639.86	2725.30
	OZAUKEE	UNITEDHEALTHCARE SE	775.60	0.00	775.60	1934.80	0.00	1934.80
	OZAUKEE	WEA TRUST EAST	781.60	0.00	781.60	1949.80	0.00	1949.80
	OZAUKEE	WPS METRO CHOICE	835.65	224.05	1059.70	2085.44	559.66	2645.10
	OZAUKEE	STANDARD PLAN: WAUKESHA-PPP	835.65	123.85	959.50	2085.44	309.46	2394.90
PEPIN								
*	PEPIN	HUMANA WESTERN	627.35	464.45	1091.80	1565.17	1160.13	2725.30
*	PEPIN	SECURITY HEALTH PLAN	627.35	349.05	976.40	1565.17	871.63	2436.80
*	PEPIN	WEA TRUST NORTHWEST	627.35	191.05	818.40	1565.17	476.63	2041.80
	PEPIN	STATE MAINTENANCE PLAN (SMP)	627.35	85.55	712.90	1565.17	213.43	1778.60
	PEPIN	STANDARD PLAN: BALANCE OF STATE-PPP	627.35	332.15	959.50	1565.17	829.73	2394.90

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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
	PIERCE							
	PIERCE	ANTHEM BLUE NORTHWEST	808.98	267.32	1076.30	2018.78	667.82	2686.60
	PIERCE	HEALTHPARTNERS	808.98	54.22	863.20	2018.78	135.02	2153.80
*	PIERCE	HUMANA WESTERN	808.98	282.82	1091.80	2018.78	706.52	2725.30
	PIERCE	WEA TRUST NORTHWEST	808.98	9.42	818.40	2018.78	23.02	2041.80
	PIERCE	STANDARD PLAN: BALANCE OF STATE-PPP	808.98	150.52	959.50	2018.78	376.12	2394.90
	POLK							
	POLK	ANTHEM BLUE NORTHWEST	808.98	267.32	1076.30	2018.78	667.82	2686.60
	POLK	HEALTHPARTNERS	808.98	54.22	863.20	2018.78	135.02	2153.80
*	POLK	HUMANA WESTERN	808.98	282.82	1091.80	2018.78	706.52	2725.30
	POLK	WEA TRUST NORTHWEST	808.98	9.42	818.40	2018.78	23.02	2041.80
	POLK	STANDARD PLAN: DANE-PPP	808.98	82.22	891.20	2018.78	205.42	2224.20
	PORTAGE							
*	PORTAGE	ARISE HEALTH PLAN	773.52	88.38	861.90	1930.10	220.50	2150.60
	PORTAGE	SECURITY HEALTH PLAN	773.52	202.88	976.40	1930.10	506.70	2436.80
	PORTAGE	WEA TRUST EAST	773.52	8.08	781.60	1930.10	19.70	1949.80
	PORTAGE	STANDARD PLAN: BALANCE OF STATE-PPP	773.52	185.98	959.50	1930.10	464.80	2394.90
	PRICE							
	PRICE	SECURITY HEALTH PLAN	859.23	117.17	976.40	2144.38	292.42	2436.80
	PRICE	STANDARD PLAN: BALANCE OF STATE-PPP	859.23	100.27	959.50	2144.38	250.52	2394.90
	RACINE							
	RACINE	ANTHEM BLUE SOUTHEAST	835.65	203.65	1039.30	2085.44	508.66	2594.10
	RACINE	HUMANA EASTERN	835.65	256.15	1091.80	2085.44	639.86	2725.30
	RACINE	UNITEDHEALTHCARE SE	775.60	0.00	775.60	1934.80	0.00	1934.80
	RACINE	WEA TRUST EAST	781.60	0.00	781.60	1949.80	0.00	1949.80
	RACINE	WPS METRO CHOICE	835.65	224.05	1059.70	2085.44	559.66	2645.10
	RACINE	STANDARD PLAN: WAUKESHA-PPP	835.65	123.85	959.50	2085.44	309.46	2394.90
	RICHLAND							
	RICHLAND	DEAN HEALTH PLAN	553.36	21.94	575.30	1379.73	54.37	1434.10
	RICHLAND	GUNDERSEN LUTHERAN HEALTH PLAN	553.36	233.34	786.70	1379.73	582.87	1962.60
	RICHLAND	HEALTH TRADITION HEALTH PLAN	553.36	168.44	721.80	1379.73	420.57	1800.30
	RICHLAND	PHYSICIANS PLUS	553.36	7.54	560.90	1379.73	18.37	1398.10
	RICHLAND	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	RICHLAND	STANDARD PLAN: BALANCE OF STATE-PPP	553.36	406.14	959.50	1379.73	1015.17	2394.90
	ROCK							
	ROCK	ANTHEM BLUE SOUTHEAST	667.15	372.15	1039.30	1664.21	929.89	2594.10
	ROCK	DEAN HEALTH PLAN	575.30	0.00	575.30	1434.10	0.00	1434.10
	ROCK	HUMANA EASTERN	667.15	424.65	1091.80	1664.21	1061.09	2725.30
	ROCK	MERCYCARE HEALTH PLAN	543.90	0.00	543.90	1355.60	0.00	1355.60
*	ROCK	PHYSICIANS PLUS	560.90	0.00	560.90	1398.10	0.00	1398.10
	ROCK	UNITEDHEALTHCARE SE	667.15	108.45	775.60	1664.21	270.59	1934.80
	ROCK	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	ROCK	WEA TRUST EAST	667.15	114.45	781.60	1664.21	285.59	1949.80
	ROCK	STANDARD PLAN: BALANCE OF STATE-PPP	667.15	292.35	959.50	1664.21	730.69	2394.90
	RUSK							
	RUSK	SECURITY HEALTH PLAN	789.71	186.69	976.40	1970.58	466.22	2436.80
	RUSK	WEA TRUST NORTHWEST	789.71	28.69	818.40	1970.58	71.22	2041.80
	RUSK	STANDARD PLAN: BALANCE OF STATE-PPP	789.71	169.79	959.50	1970.58	424.32	2394.90
	SAUK							
	SAUK	DEAN HEALTH PLAN	553.36	21.94	575.30	1379.73	54.37	1434.10
	SAUK	GUNDERSEN LUTHERAN HEALTH PLAN	553.36	233.34	786.70	1379.73	582.87	1962.60
	SAUK	HEALTH TRADITION HEALTH PLAN	553.36	168.44	721.80	1379.73	420.57	1800.30
	SAUK	PHYSICIANS PLUS	553.36	7.54	560.90	1379.73	18.37	1398.10
	SAUK	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	SAUK	STANDARD PLAN: BALANCE OF STATE-PPP	553.36	406.14	959.50	1379.73	1015.17	2394.90
	SAWYER							
	SAWYER	GHC OF EAU CLAIRE	812.74	163.16	975.90	2028.17	407.43	2435.60
	SAWYER	SECURITY HEALTH PLAN	812.74	163.66	976.40	2028.17	408.63	2436.80
	SAWYER	WEA TRUST NORTHWEST	812.74	5.66	818.40	2028.17	13.63	2041.80
	SAWYER	STANDARD PLAN: BALANCE OF STATE-PPP	812.74	146.76	959.50	2028.17	366.73	2394.90

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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
SHAWANO								
	SHAWANO	ANTHEM BLUE NORTHEAST	775.65	156.75	932.40	1935.44	391.36	2326.80
	SHAWANO	ARISE HEALTH PLAN	775.65	86.25	861.90	1935.44	215.16	2150.60
	SHAWANO	HUMANA EASTERN	775.65	316.15	1091.80	1935.44	789.86	2725.30
	SHAWANO	UNITEDHEALTHCARE NE	739.40	0.00	739.40	1844.30	0.00	1844.30
	SHAWANO	WEA TRUST EAST	775.65	5.95	781.60	1935.44	14.36	1949.80
	SHAWANO	STANDARD PLAN: BALANCE OF STATE-PPP	775.65	183.85	959.50	1935.44	459.46	2394.90
SHEBOYGAN								
	SHEBOYGAN	ANTHEM BLUE NORTHEAST	741.44	190.96	932.40	1849.92	476.88	2326.80
	SHEBOYGAN	ARISE HEALTH PLAN	741.44	120.46	861.90	1849.92	300.68	2150.60
	SHEBOYGAN	HUMANA EASTERN	741.44	350.36	1091.80	1849.92	875.38	2725.30
	SHEBOYGAN	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
	SHEBOYGAN	UNITEDHEALTHCARE NE	739.40	0.00	739.40	1844.30	0.00	1844.30
	SHEBOYGAN	WEA TRUST EAST	741.44	40.16	781.60	1849.92	99.88	1949.80
	SHEBOYGAN	STANDARD PLAN: BALANCE OF STATE-PPP	741.44	218.06	959.50	1849.92	544.98	2394.90
ST. CROIX								
	ST. CROIX	ANTHEM BLUE NORTHWEST	846.93	229.37	1076.30	2113.65	572.95	2686.60
	ST. CROIX	HEALTHPARTNERS	846.93	16.27	863.20	2113.65	40.15	2153.80
	ST. CROIX	HUMANA WESTERN	846.93	244.87	1091.80	2113.65	611.65	2725.30
	ST. CROIX	WEA TRUST NORTHWEST	818.40	0.00	818.40	2041.80	0.00	2041.80
	ST. CROIX	STANDARD PLAN: DANE-PPP	846.93	44.27	891.20	2113.65	110.55	2224.20
TAYLOR								
	TAYLOR	ARISE HEALTH PLAN	808.85	53.05	861.90	2018.46	132.14	2150.60
	TAYLOR	SECURITY HEALTH PLAN	808.85	167.55	976.40	2018.46	418.34	2436.80
	TAYLOR	STANDARD PLAN: BALANCE OF STATE-PPP	808.85	150.65	959.50	2018.46	376.44	2394.90
TREMPEALEAU								
	TREMPEALEAU	GUNDERSEN LUTHERAN HEALTH PLAN	706.24	80.46	786.70	1761.94	200.66	1962.60
*	TREMPEALEAU	HEALTH TRADITION HEALTH PLAN	706.24	15.56	721.80	1761.94	38.36	1800.30
	TREMPEALEAU	WEA TRUST NORTHWEST	706.24	112.16	818.40	1761.94	279.86	2041.80
	TREMPEALEAU	STANDARD PLAN: BALANCE OF STATE-PPP	706.24	253.26	959.50	1761.94	632.96	2394.90
VERNON								
*	VERNON	DEAN HEALTH PLAN	575.30	0.00	575.30	1434.10	0.00	1434.10
	VERNON	GUNDERSEN LUTHERAN HEALTH PLAN	588.98	197.72	786.70	1468.78	493.82	1962.60
	VERNON	HEALTH TRADITION HEALTH PLAN	588.98	132.82	721.80	1468.78	331.52	1800.30
*	VERNON	SECURITY HEALTH PLAN	588.98	387.42	976.40	1468.78	968.02	2436.80
	VERNON	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	VERNON	STANDARD PLAN: BALANCE OF STATE-PPP	588.98	370.52	959.50	1468.78	926.12	2394.90
VILAS								
*	VILAS	ARISE HEALTH PLAN	859.23	2.67	861.90	2144.38	6.22	2150.60
	VILAS	SECURITY HEALTH PLAN	859.23	117.17	976.40	2144.38	292.42	2436.80
	VILAS	STANDARD PLAN: BALANCE OF STATE-PPP	859.23	100.27	959.50	2144.38	250.52	2394.90
WALWORTH								
	WALWORTH	ANTHEM BLUE SOUTHEAST	693.97	345.33	1039.30	1731.24	862.86	2594.10
*	WALWORTH	DEAN HEALTH PLAN	575.30	0.00	575.30	1434.10	0.00	1434.10
	WALWORTH	HUMANA EASTERN	693.97	397.83	1091.80	1731.24	994.06	2725.30
	WALWORTH	MERCYCARE HEALTH PLAN	543.90	0.00	543.90	1355.60	0.00	1355.60
	WALWORTH	UNITEDHEALTHCARE SE	693.97	81.63	775.60	1731.24	203.56	1934.80
	WALWORTH	UNITY COMMUNITY	499.40	0.00	499.40	1244.30	0.00	1244.30
	WALWORTH	WEA TRUST EAST	693.97	87.63	781.60	1731.24	218.56	1949.80
	WALWORTH	STANDARD PLAN: BALANCE OF STATE-PPP	693.97	265.53	959.50	1731.24	663.66	2394.90
WASHBURN								
	WASHBURN	ANTHEM BLUE NORTHWEST	846.34	229.96	1076.30	2112.18	574.42	2686.60
	WASHBURN	GHC OF EAU CLAIRE	846.34	129.56	975.90	2112.18	323.42	2435.60
*	WASHBURN	GUNDERSEN LUTHERAN HEALTH PLAN	786.70	0.00	786.70	1962.60	0.00	1962.60
	WASHBURN	SECURITY HEALTH PLAN	846.34	130.06	976.40	2112.18	324.62	2436.80
	WASHBURN	WEA TRUST NORTHWEST	818.40	0.00	818.40	2041.80	0.00	2041.80
	WASHBURN	STANDARD PLAN: BALANCE OF STATE-PPP	846.34	113.16	959.50	2112.18	282.72	2394.90

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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
WASHINGTON								
	WASHINGTON	ANTHEM BLUE SOUTHEAST	835.65	203.65	1039.30	2085.44	508.66	2594.10
	WASHINGTON	HUMANA EASTERN	835.65	256.15	1091.80	2085.44	639.86	2725.30
	WASHINGTON	UNITEDHEALTHCARE SE	775.60	0.00	775.60	1934.80	0.00	1934.80
	WASHINGTON	WEA TRUST EAST	781.60	0.00	781.60	1949.80	0.00	1949.80
	WASHINGTON	WPS METRO CHOICE	835.65	224.05	1059.70	2085.44	559.66	2645.10
	WASHINGTON	STANDARD PLAN: WAUKESHA-PPP	835.65	123.85	959.50	2085.44	309.46	2394.90
WAUKESHA								
	WAUKESHA	ANTHEM BLUE SOUTHEAST	835.65	203.65	1039.30	2085.44	508.66	2594.10
*	WAUKESHA	DEAN HEALTH PLAN	575.30	0.00	575.30	1434.10	0.00	1434.10
	WAUKESHA	HUMANA EASTERN	835.65	256.15	1091.80	2085.44	639.86	2725.30
	WAUKESHA	UNITEDHEALTHCARE SE	775.60	0.00	775.60	1934.80	0.00	1934.80
	WAUKESHA	WEA TRUST EAST	781.60	0.00	781.60	1949.80	0.00	1949.80
	WAUKESHA	WPS METRO CHOICE	835.65	224.05	1059.70	2085.44	559.66	2645.10
	WAUKESHA	STANDARD PLAN: WAUKESHA-PPP	835.65	123.85	959.50	2085.44	309.46	2394.90
WAUPACA								
	WAUPACA	ANTHEM BLUE NORTHEAST	776.20	156.20	932.40	1936.82	389.98	2326.80
	WAUPACA	ARISE HEALTH PLAN	776.20	85.70	861.90	1936.82	213.78	2150.60
	WAUPACA	HUMANA EASTERN	776.20	315.60	1091.80	1936.82	788.48	2725.30
	WAUPACA	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
	WAUPACA	SECURITY HEALTH PLAN	776.20	200.20	976.40	1936.82	499.98	2436.80
*	WAUPACA	UNITEDHEALTHCARE NE	739.40	0.00	739.40	1844.30	0.00	1844.30
	WAUPACA	WEA TRUST EAST	776.20	5.40	781.60	1936.82	12.98	1949.80
	WAUPACA	STANDARD PLAN: BALANCE OF STATE-PPP	776.20	183.30	959.50	1936.82	458.08	2394.90
WAUSHARA								
	WAUSHARA	ANTHEM BLUE NORTHEAST	732.06	200.34	932.40	1826.45	500.35	2326.80
	WAUSHARA	HUMANA EASTERN	732.06	359.74	1091.80	1826.45	898.85	2725.30
	WAUSHARA	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
	WAUSHARA	PHYSICIANS PLUS	560.90	0.00	560.90	1398.10	0.00	1398.10
	WAUSHARA	SECURITY HEALTH PLAN	732.06	244.34	976.40	1826.45	610.35	2436.80
*	WAUSHARA	UNITEDHEALTHCARE NE	732.06	7.34	739.40	1826.45	17.85	1844.30
	WAUSHARA	WEA TRUST EAST	732.06	49.54	781.60	1826.45	123.35	1949.80
	WAUSHARA	STANDARD PLAN: BALANCE OF STATE-PPP	732.06	227.44	959.50	1826.45	568.45	2394.90
WINNEBAGO								
	WINNEBAGO	ANTHEM BLUE NORTHEAST	738.04	194.36	932.40	1841.40	485.40	2326.80
*	WINNEBAGO	ARISE HEALTH PLAN	738.04	123.86	861.90	1841.40	309.20	2150.60
	WINNEBAGO	HUMANA EASTERN	738.04	353.76	1091.80	1841.40	883.90	2725.30
	WINNEBAGO	NETWORK HEALTH PLAN	648.20	0.00	648.20	1616.30	0.00	1616.30
	WINNEBAGO	UNITEDHEALTHCARE NE	738.04	1.36	739.40	1841.40	2.90	1844.30
	WINNEBAGO	WEA TRUST EAST	738.04	43.56	781.60	1841.40	108.40	1949.80
	WINNEBAGO	STANDARD PLAN: BALANCE OF STATE-PPP	738.04	221.46	959.50	1841.40	553.50	2394.90
WOOD								
	WOOD	ARISE HEALTH PLAN	768.50	93.40	861.90	1917.58	233.02	2150.60
	WOOD	SECURITY HEALTH PLAN	768.50	207.90	976.40	1917.58	519.22	2436.80
	WOOD	WEA TRUST EAST	768.50	13.10	781.60	1917.58	32.22	1949.80
	WOOD	STANDARD PLAN: BALANCE OF STATE-PPP	768.50	191.00	959.50	1917.58	477.32	2394.90