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2012 Local Low Cost Plan:

Effective January 1, 2012
Deductible HMO - Deductible Standard Plan (P04)

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	521.20	0.00	521.20	1298.80	0.00	1298.80
	ADAMS	PHYSICIANS PLUS	513.00	0.00	513.00	1278.30	0.00	1278.30
	ADAMS	SECURITY HEALTH PLAN	526.04	360.76	886.80	1311.42	901.38	2212.80
	ADAMS	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	ADAMS	STANDARD PLAN: BALANCE OF STATE	526.04	453.16	979.20	1311.42	1132.68	2444.10
	ASHLAND							
	ASHLAND	ANTHEM BLUE NORTHWEST	769.63	187.17	956.80	1920.38	467.42	2387.80
	ASHLAND	GHC OF EAU CLAIRE	769.63	125.67	895.30	1920.38	313.72	2234.10
	ASHLAND	SECURITY HEALTH PLAN	769.63	117.17	886.80	1920.38	292.42	2212.80
	ASHLAND	WEA TRUST NORTHWEST	759.40	0.00	759.40	1894.30	0.00	1894.30
	ASHLAND	STANDARD PLAN: BALANCE OF STATE	769.63	209.57	979.20	1920.38	523.72	2444.10
	BARRON							
*	BARRON	GUNDERSEN LUTHERAN HEALTH PLAN	737.20	0.00	737.20	1838.80	0.00	1838.80
	BARRON	HUMANA WESTERN	777.48	226.82	1004.30	1940.02	566.58	2506.60
	BARRON	SECURITY HEALTH PLAN	777.48	109.32	886.80	1940.02	272.78	2212.80
	BARRON	WEA TRUST NORTHWEST	759.40	0.00	759.40	1894.30	0.00	1894.30
	BARRON	STANDARD PLAN: BALANCE OF STATE	777.48	201.72	979.20	1940.02	504.08	2444.10
	BAYFIELD							
*	BAYFIELD	ANTHEM BLUE NORTHWEST	573.67	383.13	956.80	1430.88	956.92	2387.80
*	BAYFIELD	GHC OF EAU CLAIRE	573.67	321.63	895.30	1430.88	803.22	2234.10
*	BAYFIELD	HEALTHPARTNERS	573.67	234.73	808.40	1430.88	585.92	2016.80
*	BAYFIELD	SECURITY HEALTH PLAN	573.67	313.13	886.80	1430.88	781.92	2212.80
*	BAYFIELD	WEA TRUST NORTHWEST	573.67	185.73	759.40	1430.88	463.42	1894.30
	BAYFIELD	STATE MAINTENANCE PLAN (SMP)	573.67	78.23	651.90	1430.88	195.12	1626.00
	BAYFIELD	STANDARD PLAN: BALANCE OF STATE	573.67	405.53	979.20	1430.88	1013.22	2444.10
	BROWN							
	BROWN	ANTHEM BLUE NORTHEAST	677.63	152.57	830.20	1690.39	380.91	2071.30
	BROWN	ARISE HEALTH PLAN	677.63	129.57	807.20	1690.39	323.41	2013.80
	BROWN	HUMANA EASTERN	677.63	326.67	1004.30	1690.39	816.21	2506.60
	BROWN	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
	BROWN	UNITEDHEALTHCARE NE	673.00	0.00	673.00	1678.30	0.00	1678.30
	BROWN	WEA TRUST EAST	677.63	47.87	725.50	1690.39	119.21	1809.60
	BROWN	STANDARD PLAN: BALANCE OF STATE	677.63	301.57	979.20	1690.39	753.71	2444.10
	BUFFALO							
*	BUFFALO	HEALTH TRADITION HEALTH PLAN	573.67	103.33	677.00	1430.88	257.42	1688.30
*	BUFFALO	WEA TRUST NORTHWEST	573.67	185.73	759.40	1430.88	463.42	1894.30
	BUFFALO	STATE MAINTENANCE PLAN (SMP)	573.67	78.23	651.90	1430.88	195.12	1626.00
	BUFFALO	STANDARD PLAN: BALANCE OF STATE	573.67	405.53	979.20	1430.88	1013.22	2444.10
	BURNETT							
	BURNETT	ANTHEM BLUE NORTHWEST	752.38	204.42	956.80	1877.26	510.54	2387.80
	BURNETT	GHC OF EAU CLAIRE	752.38	142.92	895.30	1877.26	356.84	2234.10
	BURNETT	HEALTHPARTNERS	752.38	56.02	808.40	1877.26	139.54	2016.80
	BURNETT	WEA TRUST NORTHWEST	752.38	7.02	759.40	1877.26	17.04	1894.30
	BURNETT	STANDARD PLAN: BALANCE OF STATE	752.38	226.82	979.20	1877.26	566.84	2444.10
	CALUMET							
	CALUMET	ANTHEM BLUE NORTHEAST	611.07	219.13	830.20	1523.98	547.32	2071.30
*	CALUMET	ARISE HEALTH PLAN	611.07	196.13	807.20	1523.98	489.82	2013.80
*	CALUMET	HUMANA EASTERN	611.07	393.23	1004.30	1523.98	982.62	2506.60
	CALUMET	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
	CALUMET	UNITEDHEALTHCARE NE	611.07	61.93	673.00	1523.98	154.32	1678.30
*	CALUMET	WEA TRUST EAST	611.07	114.43	725.50	1523.98	285.62	1809.60
	CALUMET	STANDARD PLAN: BALANCE OF STATE	611.07	368.13	979.20	1523.98	920.12	2444.10
	CHIPPEWA							
	CHIPPEWA	GUNDERSEN LUTHERAN HEALTH PLAN	737.20	0.00	737.20	1838.80	0.00	1838.80
	CHIPPEWA	HUMANA WESTERN	745.29	259.01	1004.30	1859.55	647.05	2506.60
	CHIPPEWA	SECURITY HEALTH PLAN	745.29	141.51	886.80	1859.55	353.25	2212.80
	CHIPPEWA	WEA TRUST NORTHWEST	745.29	14.11	759.40	1859.55	34.75	1894.30
	CHIPPEWA	STANDARD PLAN: BALANCE OF STATE	745.29	233.91	979.20	1859.55	584.55	2444.10

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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	714.56	92.64	807.20	1782.70	231.10	2013.80
	CLARK	GUNDERSEN LUTHERAN HEALTH PLAN	714.56	22.64	737.20	1782.70	56.10	1838.80
	CLARK	SECURITY HEALTH PLAN	714.56	172.24	886.80	1782.70	430.10	2212.80
	CLARK	STANDARD PLAN: BALANCE OF STATE	714.56	264.64	979.20	1782.70	661.40	2444.10
	COLUMBIA							
	COLUMBIA	DEAN HEALTH PLAN	490.56	30.64	521.20	1222.72	76.08	1298.80
	COLUMBIA	PHYSICIANS PLUS	490.56	22.44	513.00	1222.72	55.58	1278.30
	COLUMBIA	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	COLUMBIA	WEA TRUST EAST	490.56	234.94	725.50	1222.72	586.88	1809.60
	COLUMBIA	STANDARD PLAN: BALANCE OF STATE	490.56	488.64	979.20	1222.72	1221.38	2444.10
	CRAWFORD							
	CRAWFORD	GUNDERSEN LUTHERAN HEALTH PLAN	648.74	88.46	737.20	1618.14	220.66	1838.80
*	CRAWFORD	HEALTH TRADITION HEALTH PLAN	648.74	28.26	677.00	1618.14	70.16	1688.30
*	CRAWFORD	MEDICAL ASSOCIATES HEALTH PLAN	590.00	0.00	590.00	1470.80	0.00	1470.80
*	CRAWFORD	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	CRAWFORD	STANDARD PLAN: BALANCE OF STATE	648.74	330.46	979.20	1618.14	825.96	2444.10
	DANE							
	DANE	DEAN HEALTH PLAN	448.84	72.36	521.20	1118.41	180.39	1298.80
	DANE	GHC OF SOUTH CENTRAL WISCONSIN	448.84	86.56	535.40	1118.41	215.89	1334.30
	DANE	PHYSICIANS PLUS	448.84	64.16	513.00	1118.41	159.89	1278.30
	DANE	UNITY UW HEALTH	448.84	21.76	470.60	1118.41	53.89	1172.30
	DANE	STANDARD PLAN: DANE	448.84	460.36	909.20	1118.41	1150.69	2269.10
	DODGE							
	DODGE	ANTHEM BLUE SOUTHEAST	619.53	304.77	924.30	1545.17	761.43	2306.60
*	DODGE	ARISE HEALTH PLAN	619.53	187.67	807.20	1545.17	468.63	2013.80
	DODGE	DEAN HEALTH PLAN	521.20	0.00	521.20	1298.80	0.00	1298.80
	DODGE	HUMANA EASTERN	619.53	384.77	1004.30	1545.17	961.43	2506.60
	DODGE	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
	DODGE	UNITEDHEALTHCARE SE	619.53	83.17	702.70	1545.17	207.43	1752.60
	DODGE	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	DODGE	WEA TRUST EAST	619.53	105.97	725.50	1545.17	264.43	1809.60
	DODGE	STANDARD PLAN: BALANCE OF STATE	619.53	359.67	979.20	1545.17	898.93	2444.10
	DOOR							
	DOOR	ANTHEM BLUE NORTHEAST	636.40	193.80	830.20	1587.31	483.99	2071.30
	DOOR	ARISE HEALTH PLAN	636.40	170.80	807.20	1587.31	426.49	2013.80
*	DOOR	HUMANA EASTERN	636.40	367.90	1004.30	1587.31	919.29	2506.60
	DOOR	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
	DOOR	UNITEDHEALTHCARE NE	636.40	36.60	673.00	1587.31	90.99	1678.30
	DOOR	WEA TRUST EAST	636.40	89.10	725.50	1587.31	222.29	1809.60
	DOOR	STANDARD PLAN: BALANCE OF STATE	636.40	342.80	979.20	1587.31	856.79	2444.10
	DOUGLAS							
	DOUGLAS	ANTHEM BLUE NORTHWEST	778.95	177.85	956.80	1943.69	444.11	2387.80
	DOUGLAS	GHC OF EAU CLAIRE	778.95	116.35	895.30	1943.69	290.41	2234.10
	DOUGLAS	HEALTHPARTNERS	778.95	29.45	808.40	1943.69	73.11	2016.80
	DOUGLAS	HUMANA WESTERN	778.95	225.35	1004.30	1943.69	562.91	2506.60
	DOUGLAS	SECURITY HEALTH PLAN	778.95	107.85	886.80	1943.69	269.11	2212.80
	DOUGLAS	WEA TRUST NORTHWEST	759.40	0.00	759.40	1894.30	0.00	1894.30
	DOUGLAS	STANDARD PLAN: BALANCE OF STATE	778.95	200.25	979.20	1943.69	500.41	2444.10
	DUNN							
*	DUNN	HUMANA WESTERN	668.27	336.03	1004.30	1666.98	839.62	2506.60
	DUNN	WEA TRUST NORTHWEST	668.27	91.13	759.40	1666.98	227.32	1894.30
	DUNN	STANDARD PLAN: BALANCE OF STATE	668.27	310.93	979.20	1666.98	777.12	2444.10
	EAU CLAIRE							
	EAU CLAIRE	ANTHEM BLUE NORTHWEST	764.63	192.17	956.80	1907.89	479.91	2387.80
	EAU CLAIRE	GUNDERSEN LUTHERAN HEALTH PLAN	737.20	0.00	737.20	1838.80	0.00	1838.80
	EAU CLAIRE	HUMANA WESTERN	764.63	239.67	1004.30	1907.89	598.71	2506.60
	EAU CLAIRE	SECURITY HEALTH PLAN	764.63	122.17	886.80	1907.89	304.91	2212.80
	EAU CLAIRE	WEA TRUST NORTHWEST	759.40	0.00	759.40	1894.30	0.00	1894.30
	EAU CLAIRE	STANDARD PLAN: BALANCE OF STATE	764.63	214.57	979.20	1907.89	536.21	2444.10

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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	573.67	233.53	807.20	1430.88	582.92	2013.80
*	FLORENCE	WEA TRUST EAST	573.67	151.83	725.50	1430.88	378.72	1809.60
	FLORENCE	STATE MAINTENANCE PLAN (SMP)	573.67	78.23	651.90	1430.88	195.12	1626.00
	FLORENCE	STANDARD PLAN: BALANCE OF STATE	573.67	405.53	979.20	1430.88	1013.22	2444.10
FOND DU LAC								
	FOND DU LAC	ANTHEM BLUE NORTHEAST	617.27	212.93	830.20	1539.48	531.82	2071.30
	FOND DU LAC	ARISE HEALTH PLAN	617.27	189.93	807.20	1539.48	474.32	2013.80
	FOND DU LAC	DEAN HEALTH PLAN	521.20	0.00	521.20	1298.80	0.00	1298.80
	FOND DU LAC	HUMANA EASTERN	617.27	387.03	1004.30	1539.48	967.12	2506.60
	FOND DU LAC	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
	FOND DU LAC	UNITEDHEALTHCARE NE	617.27	55.73	673.00	1539.48	138.82	1678.30
	FOND DU LAC	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	FOND DU LAC	WEA TRUST EAST	617.27	108.23	725.50	1539.48	270.12	1809.60
	FOND DU LAC	STANDARD PLAN: BALANCE OF STATE	617.27	361.93	979.20	1539.48	904.62	2444.10
FOREST								
*	FOREST	ARISE HEALTH PLAN	573.67	233.53	807.20	1430.88	582.92	2013.80
*	FOREST	SECURITY HEALTH PLAN	573.67	313.13	886.80	1430.88	781.92	2212.80
	FOREST	STATE MAINTENANCE PLAN (SMP)	573.67	78.23	651.90	1430.88	195.12	1626.00
	FOREST	STANDARD PLAN: BALANCE OF STATE	573.67	405.53	979.20	1430.88	1013.22	2444.10
GRANT								
	GRANT	DEAN HEALTH PLAN	514.58	6.62	521.20	1282.76	16.04	1298.80
	GRANT	GUNDERSEN LUTHERAN HEALTH PLAN	514.58	222.62	737.20	1282.76	556.04	1838.80
	GRANT	HEALTH TRADITION HEALTH PLAN	514.58	162.42	677.00	1282.76	405.54	1688.30
	GRANT	MEDICAL ASSOCIATES HEALTH PLAN	514.58	75.42	590.00	1282.76	188.04	1470.80
	GRANT	PHYSICIANS PLUS	513.00	0.00	513.00	1278.30	0.00	1278.30
	GRANT	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	GRANT	STANDARD PLAN: DANE	514.58	394.62	909.20	1282.76	986.34	2269.10
GREEN								
	GREEN	DEAN HEALTH PLAN	521.20	0.00	521.20	1298.80	0.00	1298.80
	GREEN	HUMANA EASTERN	585.38	418.92	1004.30	1459.77	1046.83	2506.60
*	GREEN	MERCYCARE HEALTH PLAN	502.20	0.00	502.20	1251.30	0.00	1251.30
	GREEN	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	GREEN	STANDARD PLAN: BALANCE OF STATE	585.38	393.82	979.20	1459.77	984.33	2444.10
GREEN LAKE								
	GREEN LAKE	ANTHEM BLUE NORTHEAST	671.09	159.11	830.20	1674.04	397.26	2071.30
*	GREEN LAKE	ARISE HEALTH PLAN	671.09	136.11	807.20	1674.04	339.76	2013.80
*	GREEN LAKE	DEAN HEALTH PLAN	521.20	0.00	521.20	1298.80	0.00	1298.80
	GREEN LAKE	HUMANA EASTERN	671.09	333.21	1004.30	1674.04	832.56	2506.60
	GREEN LAKE	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
*	GREEN LAKE	PHYSICIANS PLUS	513.00	0.00	513.00	1278.30	0.00	1278.30
*	GREEN LAKE	SECURITY HEALTH PLAN	671.09	215.71	886.80	1674.04	538.76	2212.80
	GREEN LAKE	UNITEDHEALTHCARE NE	671.09	1.91	673.00	1674.04	4.26	1678.30
	GREEN LAKE	WEA TRUST EAST	671.09	54.41	725.50	1674.04	135.56	1809.60
	GREEN LAKE	STANDARD PLAN: BALANCE OF STATE	671.09	308.11	979.20	1674.04	770.06	2444.10
IOWA								
	IOWA	DEAN HEALTH PLAN	460.75	60.45	521.20	1148.18	150.62	1298.80
	IOWA	MEDICAL ASSOCIATES HEALTH PLAN	460.75	129.25	590.00	1148.18	322.62	1470.80
	IOWA	PHYSICIANS PLUS	460.75	52.25	513.00	1148.18	130.12	1278.30
	IOWA	UNITY COMMUNITY	460.75	9.35	470.10	1148.18	22.92	1171.10
	IOWA	STANDARD PLAN: BALANCE OF STATE	460.75	518.45	979.20	1148.18	1295.92	2444.10
IRON								
*	IRON	SECURITY HEALTH PLAN	573.67	313.13	886.80	1430.88	781.92	2212.80
	IRON	STATE MAINTENANCE PLAN (SMP)	573.67	78.23	651.90	1430.88	195.12	1626.00
	IRON	STANDARD PLAN: BALANCE OF STATE	573.67	405.53	979.20	1430.88	1013.22	2444.10
JACKSON								
	JACKSON	GUNDERSEN LUTHERAN HEALTH PLAN	673.29	63.91	737.20	1679.52	159.28	1838.80
	JACKSON	HEALTH TRADITION HEALTH PLAN	673.29	3.71	677.00	1679.52	8.78	1688.30
	JACKSON	SECURITY HEALTH PLAN	673.29	213.51	886.80	1679.52	533.28	2212.80
	JACKSON	WEA TRUST NORTHWEST	673.29	86.11	759.40	1679.52	214.78	1894.30
	JACKSON	STANDARD PLAN: BALANCE OF STATE	673.29	305.91	979.20	1679.52	764.58	2444.10

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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	609.75	314.55	924.30	1520.72	785.88	2306.60
	JEFFERSON	DEAN HEALTH PLAN	521.20	0.00	521.20	1298.80	0.00	1298.80
	JEFFERSON	HUMANA EASTERN	609.75	394.55	1004.30	1520.72	985.88	2506.60
	JEFFERSON	MERCYCARE HEALTH PLAN	502.20	0.00	502.20	1251.30	0.00	1251.30
*	JEFFERSON	PHYSICIANS PLUS	513.00	0.00	513.00	1278.30	0.00	1278.30
	JEFFERSON	UNITEDHEALTHCARE SE	609.75	92.95	702.70	1520.72	231.88	1752.60
	JEFFERSON	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	JEFFERSON	WEA TRUST EAST	609.75	115.75	725.50	1520.72	288.88	1809.60
	JEFFERSON	STANDARD PLAN: DANE	609.75	299.45	909.20	1520.72	748.38	2269.10
	JUNEAU							
*	JUNEAU	DEAN HEALTH PLAN	521.20	0.00	521.20	1298.80	0.00	1298.80
	JUNEAU	GUNDERSEN LUTHERAN HEALTH PLAN	609.64	127.56	737.20	1520.42	318.38	1838.80
	JUNEAU	HEALTH TRADITION HEALTH PLAN	609.64	67.36	677.00	1520.42	167.88	1688.30
	JUNEAU	SECURITY HEALTH PLAN	609.64	277.16	886.80	1520.42	692.38	2212.80
	JUNEAU	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	JUNEAU	STANDARD PLAN: BALANCE OF STATE	609.64	369.56	979.20	1520.42	923.68	2444.10
	KENOSHA							
	KENOSHA	ANTHEM BLUE SOUTHEAST	738.50	185.80	924.30	1842.59	464.01	2306.60
	KENOSHA	HUMANA EASTERN	738.50	265.80	1004.30	1842.59	664.01	2506.60
	KENOSHA	UNITEDHEALTHCARE SE	702.70	0.00	702.70	1752.60	0.00	1752.60
	KENOSHA	WEA TRUST EAST	725.50	0.00	725.50	1809.60	0.00	1809.60
	KENOSHA	STANDARD PLAN: WAUKESHA	738.50	240.70	979.20	1842.59	601.51	2444.10
	KEWAUNEE							
	KEWAUNEE	ANTHEM BLUE NORTHEAST	647.44	182.76	830.20	1614.91	456.39	2071.30
	KEWAUNEE	ARISE HEALTH PLAN	647.44	159.76	807.20	1614.91	398.89	2013.80
*	KEWAUNEE	HUMANA EASTERN	647.44	356.86	1004.30	1614.91	891.69	2506.60
	KEWAUNEE	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
*	KEWAUNEE	UNITEDHEALTHCARE NE	647.44	25.56	673.00	1614.91	63.39	1678.30
	KEWAUNEE	WEA TRUST EAST	647.44	78.06	725.50	1614.91	194.69	1809.60
	KEWAUNEE	STANDARD PLAN: BALANCE OF STATE	647.44	331.76	979.20	1614.91	829.19	2444.10
	LACROSSE							
	LACROSSE	GUNDERSEN LUTHERAN HEALTH PLAN	622.25	114.95	737.20	1551.92	286.88	1838.80
	LACROSSE	HEALTH TRADITION HEALTH PLAN	622.25	54.75	677.00	1551.92	136.38	1688.30
	LACROSSE	STANDARD PLAN: DANE	622.25	286.95	909.20	1551.92	717.18	2269.10
	LAFAYETTE							
	LAFAYETTE	DEAN HEALTH PLAN	476.43	44.77	521.20	1187.38	111.42	1298.80
	LAFAYETTE	MEDICAL ASSOCIATES HEALTH PLAN	476.43	113.57	590.00	1187.38	283.42	1470.80
	LAFAYETTE	PHYSICIANS PLUS	476.43	36.57	513.00	1187.38	90.92	1278.30
	LAFAYETTE	STANDARD PLAN: BALANCE OF STATE	476.43	502.77	979.20	1187.38	1256.72	2444.10
	LANGLADE							
	LANGLADE	ARISE HEALTH PLAN	745.36	61.84	807.20	1859.70	154.10	2013.80
	LANGLADE	SECURITY HEALTH PLAN	745.36	141.44	886.80	1859.70	353.10	2212.80
	LANGLADE	STANDARD PLAN: BALANCE OF STATE	745.36	233.84	979.20	1859.70	584.40	2444.10
	LINCOLN							
*	LINCOLN	ARISE HEALTH PLAN	780.38	26.82	807.20	1947.26	66.54	2013.80
	LINCOLN	SECURITY HEALTH PLAN	780.38	106.42	886.80	1947.26	265.54	2212.80
	LINCOLN	STANDARD PLAN: BALANCE OF STATE	780.38	198.82	979.20	1947.26	496.84	2444.10
	MANITOWOC							
	MANITOWOC	ANTHEM BLUE NORTHEAST	677.63	152.57	830.20	1690.39	380.91	2071.30
	MANITOWOC	ARISE HEALTH PLAN	677.63	129.57	807.20	1690.39	323.41	2013.80
	MANITOWOC	HUMANA EASTERN	677.63	326.67	1004.30	1690.39	816.21	2506.60
	MANITOWOC	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
	MANITOWOC	UNITEDHEALTHCARE NE	673.00	0.00	673.00	1678.30	0.00	1678.30
	MANITOWOC	WEA TRUST EAST	677.63	47.87	725.50	1690.39	119.21	1809.60
	MANITOWOC	STANDARD PLAN: BALANCE OF STATE	677.63	301.57	979.20	1690.39	753.71	2444.10
	MARATHON							
	MARATHON	ARISE HEALTH PLAN	709.72	97.48	807.20	1770.62	243.18	2013.80
	MARATHON	SECURITY HEALTH PLAN	709.72	177.08	886.80	1770.62	442.18	2212.80
	MARATHON	WEA TRUST EAST	709.72	15.78	725.50	1770.62	38.98	1809.60
	MARATHON	STANDARD PLAN: BALANCE OF STATE	709.72	269.48	979.20	1770.62	673.48	2444.10

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2012 Local Low Cost Plan:

Effective January 1, 2012
Deductible HMO - Deductible Standard Plan (P04)

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
MARINETTE								
	MARINETTE	ANTHEM BLUE NORTHEAST	711.08	119.12	830.20	1774.01	297.29	2071.30
	MARINETTE	ARISE HEALTH PLAN	711.08	96.12	807.20	1774.01	239.79	2013.80
	MARINETTE	HUMANA EASTERN	711.08	293.22	1004.30	1774.01	732.59	2506.60
	MARINETTE	UNITEDHEALTHCARE NE	673.00	0.00	673.00	1678.30	0.00	1678.30
	MARINETTE	WEA TRUST EAST	711.08	14.42	725.50	1774.01	35.59	1809.60
	MARINETTE	STANDARD PLAN: BALANCE OF STATE	711.08	268.12	979.20	1774.01	670.09	2444.10
MARQUETTE								
*	MARQUETTE	NETWORK HEALTH PLAN	451.44	128.56	580.00	1124.90	320.90	1445.80
	MARQUETTE	PHYSICIANS PLUS	451.44	61.56	513.00	1124.90	153.40	1278.30
*	MARQUETTE	UNITEDHEALTHCARE NE	451.44	221.56	673.00	1124.90	553.40	1678.30
*	MARQUETTE	UNITY COMMUNITY	451.44	18.66	470.10	1124.90	46.20	1171.10
*	MARQUETTE	WEA TRUST EAST	451.44	274.06	725.50	1124.90	684.70	1809.60
	MARQUETTE	STANDARD PLAN: BALANCE OF STATE	451.44	527.76	979.20	1124.90	1319.20	2444.10
MENOMINEE								
	MENOMINEE	STATE MAINTENANCE PLAN (SMP)	573.67	78.23	651.90	1430.88	195.12	1626.00
	MENOMINEE	STANDARD PLAN: BALANCE OF STATE	573.67	405.53	979.20	1430.88	1013.22	2444.10
MILWAUKEE								
	MILWAUKEE	ANTHEM BLUE SOUTHEAST	765.25	159.05	924.30	1909.46	397.14	2306.60
	MILWAUKEE	HUMANA EASTERN	765.25	239.05	1004.30	1909.46	597.14	2506.60
	MILWAUKEE	UNITEDHEALTHCARE SE	702.70	0.00	702.70	1752.60	0.00	1752.60
	MILWAUKEE	WEA TRUST EAST	725.50	0.00	725.50	1809.60	0.00	1809.60
	MILWAUKEE	WPS METRO CHOICE	765.25	225.95	991.20	1909.46	564.34	2473.80
	MILWAUKEE	STANDARD PLAN: MILWAUKEE	765.25	293.75	1059.00	1909.46	734.04	2643.50
MONROE								
	MONROE	GUNDERSEN LUTHERAN HEALTH PLAN	622.25	114.95	737.20	1551.92	286.88	1838.80
	MONROE	HEALTH TRADITION HEALTH PLAN	622.25	54.75	677.00	1551.92	136.38	1688.30
	MONROE	STANDARD PLAN: BALANCE OF STATE	622.25	356.95	979.20	1551.92	892.18	2444.10
OCONTO								
	OCONTO	ANTHEM BLUE NORTHEAST	647.44	182.76	830.20	1614.91	456.39	2071.30
	OCONTO	ARISE HEALTH PLAN	647.44	159.76	807.20	1614.91	398.89	2013.80
*	OCONTO	HUMANA EASTERN	647.44	356.86	1004.30	1614.91	891.69	2506.60
	OCONTO	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
*	OCONTO	UNITEDHEALTHCARE NE	647.44	25.56	673.00	1614.91	63.39	1678.30
	OCONTO	WEA TRUST EAST	647.44	78.06	725.50	1614.91	194.69	1809.60
	OCONTO	STANDARD PLAN: BALANCE OF STATE	647.44	331.76	979.20	1614.91	829.19	2444.10
ONEIDA								
*	ONEIDA	ARISE HEALTH PLAN	780.38	26.82	807.20	1947.26	66.54	2013.80
	ONEIDA	SECURITY HEALTH PLAN	780.38	106.42	886.80	1947.26	265.54	2212.80
	ONEIDA	STANDARD PLAN: BALANCE OF STATE	780.38	198.82	979.20	1947.26	496.84	2444.10
OUTAGAMIE								
	OUTAGAMIE	ANTHEM BLUE NORTHEAST	677.63	152.57	830.20	1690.39	380.91	2071.30
	OUTAGAMIE	ARISE HEALTH PLAN	677.63	129.57	807.20	1690.39	323.41	2013.80
	OUTAGAMIE	HUMANA EASTERN	677.63	326.67	1004.30	1690.39	816.21	2506.60
	OUTAGAMIE	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
	OUTAGAMIE	UNITEDHEALTHCARE NE	673.00	0.00	673.00	1678.30	0.00	1678.30
	OUTAGAMIE	WEA TRUST EAST	677.63	47.87	725.50	1690.39	119.21	1809.60
	OUTAGAMIE	STANDARD PLAN: BALANCE OF STATE	677.63	301.57	979.20	1690.39	753.71	2444.10
OZAUKEE								
	OZAUKEE	ANTHEM BLUE SOUTHEAST	765.25	159.05	924.30	1909.46	397.14	2306.60
	OZAUKEE	HUMANA EASTERN	765.25	239.05	1004.30	1909.46	597.14	2506.60
	OZAUKEE	UNITEDHEALTHCARE SE	702.70	0.00	702.70	1752.60	0.00	1752.60
	OZAUKEE	WEA TRUST EAST	725.50	0.00	725.50	1809.60	0.00	1809.60
	OZAUKEE	WPS METRO CHOICE	765.25	225.95	991.20	1909.46	564.34	2473.80
	OZAUKEE	STANDARD PLAN: WAUKESHA	765.25	213.95	979.20	1909.46	534.64	2444.10
PEPIN								
*	PEPIN	HUMANA WESTERN	573.67	430.63	1004.30	1430.88	1075.72	2506.60
*	PEPIN	SECURITY HEALTH PLAN	573.67	313.13	886.80	1430.88	781.92	2212.80
*	PEPIN	WEA TRUST NORTHWEST	573.67	185.73	759.40	1430.88	463.42	1894.30
	PEPIN	STATE MAINTENANCE PLAN (SMP)	573.67	78.23	651.90	1430.88	195.12	1626.00
	PEPIN	STANDARD PLAN: BALANCE OF STATE	573.67	405.53	979.20	1430.88	1013.22	2444.10

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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	740.55	216.25	956.80	1847.68	540.12	2387.80
	PIERCE	HEALTHPARTNERS	740.55	67.85	808.40	1847.68	169.12	2016.80
*	PIERCE	HUMANA WESTERN	740.55	263.75	1004.30	1847.68	658.92	2506.60
	PIERCE	WEA TRUST NORTHWEST	740.55	18.85	759.40	1847.68	46.62	1894.30
	PIERCE	STANDARD PLAN: BALANCE OF STATE	740.55	238.65	979.20	1847.68	596.42	2444.10
POLK								
	POLK	ANTHEM BLUE NORTHWEST	740.55	216.25	956.80	1847.68	540.12	2387.80
	POLK	HEALTHPARTNERS	740.55	67.85	808.40	1847.68	169.12	2016.80
*	POLK	HUMANA WESTERN	740.55	263.75	1004.30	1847.68	658.92	2506.60
	POLK	WEA TRUST NORTHWEST	740.55	18.85	759.40	1847.68	46.62	1894.30
	POLK	STANDARD PLAN: DANE	740.55	168.65	909.20	1847.68	421.42	2269.10
PORTAGE								
*	PORTAGE	ARISE HEALTH PLAN	709.41	97.79	807.20	1769.86	243.94	2013.80
	PORTAGE	SECURITY HEALTH PLAN	709.41	177.39	886.80	1769.86	442.94	2212.80
	PORTAGE	WEA TRUST EAST	709.41	16.09	725.50	1769.86	39.74	1809.60
	PORTAGE	STANDARD PLAN: BALANCE OF STATE	709.41	269.79	979.20	1769.86	674.24	2444.10
PRICE								
	PRICE	SECURITY HEALTH PLAN	780.38	106.42	886.80	1947.26	265.54	2212.80
	PRICE	STANDARD PLAN: BALANCE OF STATE	780.38	198.82	979.20	1947.26	496.84	2444.10
RACINE								
	RACINE	ANTHEM BLUE SOUTHEAST	765.25	159.05	924.30	1909.46	397.14	2306.60
	RACINE	HUMANA EASTERN	765.25	239.05	1004.30	1909.46	597.14	2506.60
	RACINE	UNITEDHEALTHCARE SE	702.70	0.00	702.70	1752.60	0.00	1752.60
	RACINE	WEA TRUST EAST	725.50	0.00	725.50	1809.60	0.00	1809.60
	RACINE	WPS METRO CHOICE	765.25	225.95	991.20	1909.46	564.34	2473.80
	RACINE	STANDARD PLAN: WAUKESHA	765.25	213.95	979.20	1909.46	534.64	2444.10
RICHLAND								
	RICHLAND	DEAN HEALTH PLAN	513.66	7.54	521.20	1280.45	18.35	1298.80
	RICHLAND	GUNDERSEN LUTHERAN HEALTH PLAN	513.66	223.54	737.20	1280.45	558.35	1838.80
	RICHLAND	HEALTH TRADITION HEALTH PLAN	513.66	163.34	677.00	1280.45	407.85	1688.30
	RICHLAND	PHYSICIANS PLUS	513.00	0.00	513.00	1278.30	0.00	1278.30
	RICHLAND	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	RICHLAND	STANDARD PLAN: BALANCE OF STATE	513.66	465.54	979.20	1280.45	1163.65	2444.10
ROCK								
	ROCK	ANTHEM BLUE SOUTHEAST	609.75	314.55	924.30	1520.72	785.88	2306.60
	ROCK	DEAN HEALTH PLAN	521.20	0.00	521.20	1298.80	0.00	1298.80
	ROCK	HUMANA EASTERN	609.75	394.55	1004.30	1520.72	985.88	2506.60
	ROCK	MERCYCARE HEALTH PLAN	502.20	0.00	502.20	1251.30	0.00	1251.30
*	ROCK	PHYSICIANS PLUS	513.00	0.00	513.00	1278.30	0.00	1278.30
	ROCK	UNITEDHEALTHCARE SE	609.75	92.95	702.70	1520.72	231.88	1752.60
	ROCK	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	ROCK	WEA TRUST EAST	609.75	115.75	725.50	1520.72	288.88	1809.60
	ROCK	STANDARD PLAN: BALANCE OF STATE	609.75	369.45	979.20	1520.72	923.38	2444.10
RUSK								
	RUSK	SECURITY HEALTH PLAN	724.33	162.47	886.80	1807.12	405.68	2212.80
	RUSK	WEA TRUST NORTHWEST	724.33	35.07	759.40	1807.12	87.18	1894.30
	RUSK	STANDARD PLAN: BALANCE OF STATE	724.33	254.87	979.20	1807.12	636.98	2444.10
SAUK								
	SAUK	DEAN HEALTH PLAN	513.66	7.54	521.20	1280.45	18.35	1298.80
	SAUK	GUNDERSEN LUTHERAN HEALTH PLAN	513.66	223.54	737.20	1280.45	558.35	1838.80
	SAUK	HEALTH TRADITION HEALTH PLAN	513.66	163.34	677.00	1280.45	407.85	1688.30
	SAUK	PHYSICIANS PLUS	513.00	0.00	513.00	1278.30	0.00	1278.30
	SAUK	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	SAUK	STANDARD PLAN: BALANCE OF STATE	513.66	465.54	979.20	1280.45	1163.65	2444.10
SAWYER								
	SAWYER	GHC OF EAU CLAIRE	745.51	149.79	895.30	1860.09	374.01	2234.10
	SAWYER	SECURITY HEALTH PLAN	745.51	141.29	886.80	1860.09	352.71	2212.80
	SAWYER	WEA TRUST NORTHWEST	745.51	13.89	759.40	1860.09	34.21	1894.30
	SAWYER	STANDARD PLAN: BALANCE OF STATE	745.51	233.69	979.20	1860.09	584.01	2444.10

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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	711.08	119.12	830.20	1774.01	297.29	2071.30
	SHAWANO	ARISE HEALTH PLAN	711.08	96.12	807.20	1774.01	239.79	2013.80
	SHAWANO	HUMANA EASTERN	711.08	293.22	1004.30	1774.01	732.59	2506.60
	SHAWANO	UNITEDHEALTHCARE NE	673.00	0.00	673.00	1678.30	0.00	1678.30
	SHAWANO	WEA TRUST EAST	711.08	14.42	725.50	1774.01	35.59	1809.60
	SHAWANO	STANDARD PLAN: BALANCE OF STATE	711.08	268.12	979.20	1774.01	670.09	2444.10
	SHEBOYGAN							
	SHEBOYGAN	ANTHEM BLUE NORTHEAST	677.63	152.57	830.20	1690.39	380.91	2071.30
	SHEBOYGAN	ARISE HEALTH PLAN	677.63	129.57	807.20	1690.39	323.41	2013.80
	SHEBOYGAN	HUMANA EASTERN	677.63	326.67	1004.30	1690.39	816.21	2506.60
	SHEBOYGAN	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
	SHEBOYGAN	UNITEDHEALTHCARE NE	673.00	0.00	673.00	1678.30	0.00	1678.30
	SHEBOYGAN	WEA TRUST EAST	677.63	47.87	725.50	1690.39	119.21	1809.60
	SHEBOYGAN	STANDARD PLAN: BALANCE OF STATE	677.63	301.57	979.20	1690.39	753.71	2444.10
	ST. CROIX							
	ST. CROIX	ANTHEM BLUE NORTHWEST	776.36	180.44	956.80	1937.21	450.59	2387.80
	ST. CROIX	HEALTHPARTNERS	776.36	32.04	808.40	1937.21	79.59	2016.80
	ST. CROIX	HUMANA WESTERN	776.36	227.94	1004.30	1937.21	569.39	2506.60
	ST. CROIX	WEA TRUST NORTHWEST	759.40	0.00	759.40	1894.30	0.00	1894.30
	ST. CROIX	STANDARD PLAN: DANE	776.36	132.84	909.20	1937.21	331.89	2269.10
	TAYLOR							
	TAYLOR	ARISE HEALTH PLAN	745.36	61.84	807.20	1859.70	154.10	2013.80
	TAYLOR	SECURITY HEALTH PLAN	745.36	141.44	886.80	1859.70	353.10	2212.80
	TAYLOR	STANDARD PLAN: BALANCE OF STATE	745.36	233.84	979.20	1859.70	584.40	2444.10
	TREMPEALEAU							
	TREMPEALEAU	GUNDERSEN LUTHERAN HEALTH PLAN	658.50	78.70	737.20	1642.56	196.24	1838.80
*	TREMPEALEAU	HEALTH TRADITION HEALTH PLAN	658.50	18.50	677.00	1642.56	45.74	1688.30
	TREMPEALEAU	WEA TRUST NORTHWEST	658.50	100.90	759.40	1642.56	251.74	1894.30
	TREMPEALEAU	STANDARD PLAN: BALANCE OF STATE	658.50	320.70	979.20	1642.56	801.54	2444.10
	VERNON							
*	VERNON	DEAN HEALTH PLAN	521.20	0.00	521.20	1298.80	0.00	1298.80
	VERNON	GUNDERSEN LUTHERAN HEALTH PLAN	552.73	184.47	737.20	1378.14	460.66	1838.80
	VERNON	HEALTH TRADITION HEALTH PLAN	552.73	124.27	677.00	1378.14	310.16	1688.30
*	VERNON	SECURITY HEALTH PLAN	552.73	334.07	886.80	1378.14	834.66	2212.80
	VERNON	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	VERNON	STANDARD PLAN: BALANCE OF STATE	552.73	426.47	979.20	1378.14	1065.96	2444.10
	VILAS							
*	VILAS	ARISE HEALTH PLAN	780.38	26.82	807.20	1947.26	66.54	2013.80
	VILAS	SECURITY HEALTH PLAN	780.38	106.42	886.80	1947.26	265.54	2212.80
	VILAS	STANDARD PLAN: BALANCE OF STATE	780.38	198.82	979.20	1947.26	496.84	2444.10
	WALWORTH							
	WALWORTH	ANTHEM BLUE SOUTHEAST	634.93	289.37	924.30	1583.68	722.92	2306.60
*	WALWORTH	DEAN HEALTH PLAN	521.20	0.00	521.20	1298.80	0.00	1298.80
	WALWORTH	HUMANA EASTERN	634.93	369.37	1004.30	1583.68	922.92	2506.60
	WALWORTH	MERCYCARE HEALTH PLAN	502.20	0.00	502.20	1251.30	0.00	1251.30
	WALWORTH	UNITEDHEALTHCARE SE	634.93	67.77	702.70	1583.68	168.92	1752.60
	WALWORTH	UNITY COMMUNITY	470.10	0.00	470.10	1171.10	0.00	1171.10
	WALWORTH	WEA TRUST EAST	634.93	90.57	725.50	1583.68	225.92	1809.60
	WALWORTH	STANDARD PLAN: BALANCE OF STATE	634.93	344.27	979.20	1583.68	860.42	2444.10
	WASHBURN							
	WASHBURN	ANTHEM BLUE NORTHWEST	769.63	187.17	956.80	1920.38	467.42	2387.80
	WASHBURN	GHC OF EAU CLAIRE	769.63	125.67	895.30	1920.38	313.72	2234.10
*	WASHBURN	GUNDERSEN LUTHERAN HEALTH PLAN	737.20	0.00	737.20	1838.80	0.00	1838.80
	WASHBURN	SECURITY HEALTH PLAN	769.63	117.17	886.80	1920.38	292.42	2212.80
	WASHBURN	WEA TRUST NORTHWEST	759.40	0.00	759.40	1894.30	0.00	1894.30
	WASHBURN	STANDARD PLAN: BALANCE OF STATE	769.63	209.57	979.20	1920.38	523.72	2444.10

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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	765.25	159.05	924.30	1909.46	397.14	2306.60
	WASHINGTON	HUMANA EASTERN	765.25	239.05	1004.30	1909.46	597.14	2506.60
	WASHINGTON	UNITEDHEALTHCARE SE	702.70	0.00	702.70	1752.60	0.00	1752.60
	WASHINGTON	WEA TRUST EAST	725.50	0.00	725.50	1809.60	0.00	1809.60
	WASHINGTON	WPS METRO CHOICE	765.25	225.95	991.20	1909.46	564.34	2473.80
	WASHINGTON	STANDARD PLAN: WAUKESHA	765.25	213.95	979.20	1909.46	534.64	2444.10
WAUKESHA								
	WAUKESHA	ANTHEM BLUE SOUTHEAST	765.25	159.05	924.30	1909.46	397.14	2306.60
*	WAUKESHA	DEAN HEALTH PLAN	521.20	0.00	521.20	1298.80	0.00	1298.80
	WAUKESHA	HUMANA EASTERN	765.25	239.05	1004.30	1909.46	597.14	2506.60
	WAUKESHA	UNITEDHEALTHCARE SE	702.70	0.00	702.70	1752.60	0.00	1752.60
	WAUKESHA	WEA TRUST EAST	725.50	0.00	725.50	1809.60	0.00	1809.60
	WAUKESHA	WPS METRO CHOICE	765.25	225.95	991.20	1909.46	564.34	2473.80
	WAUKESHA	STANDARD PLAN: WAUKESHA	765.25	213.95	979.20	1909.46	534.64	2444.10
WAUPACA								
	WAUPACA	ANTHEM BLUE NORTHEAST	708.99	121.21	830.20	1768.79	302.51	2071.30
	WAUPACA	ARISE HEALTH PLAN	708.99	98.21	807.20	1768.79	245.01	2013.80
	WAUPACA	HUMANA EASTERN	708.99	295.31	1004.30	1768.79	737.81	2506.60
	WAUPACA	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
	WAUPACA	SECURITY HEALTH PLAN	708.99	177.81	886.80	1768.79	444.01	2212.80
*	WAUPACA	UNITEDHEALTHCARE NE	673.00	0.00	673.00	1678.30	0.00	1678.30
	WAUPACA	WEA TRUST EAST	708.99	16.51	725.50	1768.79	40.81	1809.60
	WAUPACA	STANDARD PLAN: BALANCE OF STATE	708.99	270.21	979.20	1768.79	675.31	2444.10
WAUSHARA								
	WAUSHARA	ANTHEM BLUE NORTHEAST	665.84	164.36	830.20	1660.91	410.39	2071.30
	WAUSHARA	HUMANA EASTERN	665.84	338.46	1004.30	1660.91	845.69	2506.60
	WAUSHARA	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
	WAUSHARA	PHYSICIANS PLUS	513.00	0.00	513.00	1278.30	0.00	1278.30
	WAUSHARA	SECURITY HEALTH PLAN	665.84	220.96	886.80	1660.91	551.89	2212.80
*	WAUSHARA	UNITEDHEALTHCARE NE	665.84	7.16	673.00	1660.91	17.39	1678.30
	WAUSHARA	WEA TRUST EAST	665.84	59.66	725.50	1660.91	148.69	1809.60
	WAUSHARA	STANDARD PLAN: BALANCE OF STATE	665.84	313.36	979.20	1660.91	783.19	2444.10
WINNEBAGO								
	WINNEBAGO	ANTHEM BLUE NORTHEAST	671.09	159.11	830.20	1674.04	397.26	2071.30
*	WINNEBAGO	ARISE HEALTH PLAN	671.09	136.11	807.20	1674.04	339.76	2013.80
	WINNEBAGO	HUMANA EASTERN	671.09	333.21	1004.30	1674.04	832.56	2506.60
	WINNEBAGO	NETWORK HEALTH PLAN	580.00	0.00	580.00	1445.80	0.00	1445.80
	WINNEBAGO	UNITEDHEALTHCARE NE	671.09	1.91	673.00	1674.04	4.26	1678.30
	WINNEBAGO	WEA TRUST EAST	671.09	54.41	725.50	1674.04	135.56	1809.60
	WINNEBAGO	STANDARD PLAN: BALANCE OF STATE	671.09	308.11	979.20	1674.04	770.06	2444.10
WOOD								
	WOOD	ARISE HEALTH PLAN	709.72	97.48	807.20	1770.62	243.18	2013.80
	WOOD	SECURITY HEALTH PLAN	709.72	177.08	886.80	1770.62	442.18	2212.80
	WOOD	WEA TRUST EAST	709.72	15.78	725.50	1770.62	38.98	1809.60
	WOOD	STANDARD PLAN: BALANCE OF STATE	709.72	269.48	979.20	1770.62	673.48	2444.10