

**Wisconsin Public Employees
 Non-Medicare benefits
 Options Effective January 1, 2005 or later**

NON-MEDICARE BENEFITS		Traditional HMO – Classic Standard Plan	Traditional HMO – Standard PPP	Deductible HMO – Deductible Standard Plan	Deductible HMO – Deductible Standard PPP
Standard Plan Option Benefit	Deductible (Unless otherwise noted, it is an overall deductible)	\$250 Individual / \$500 Family (Major Medical*)	<i>In-Network:</i> \$250 Individual / \$500 Family <i>Out-of-Network:</i> \$500 Individual / \$1000 Family	\$500 Individual / \$1000 Family	<i>In-Network:</i> \$500 Individual / \$1000 Family <i>Out-of-Network:</i> \$1000 Individual / \$2000 Family
	Coinsurance	80% / 20% (Major Medical*)	<i>In-Network:</i> 90% / 10% <i>Out-of-Network:</i> 70% / 30%	100%/0% <u>80%/20%</u>	<i>In-Network:</i> 90%/10% <u>80%/20%</u> <i>Out-of-Network:</i> 70% / 30%
	Annual out-of-pocket maximum (Includes deductible & coinsurance)	\$1250 Individual / \$2500 Family (Major Medical*)	<i>In-Network:</i> \$1000 Individual / \$2000 Family <i>Out-of-Network:</i> \$2000 Individual / \$4000 Family	\$500-2000 Individual / \$1000-4000 Family	<i>In-Network:</i> \$1000-2000 Individual / \$2000-4000 Family <i>Out-of-Network:</i> \$2000-4000 Individual / \$4000-8000 Family
	HMO-type benefit	Uniform Benefits	Uniform Benefits	\$500 Individual / \$1000 Family After deductible is met, Uniform Benefits apply	\$500 Individual / \$1000 Family After deductible is met, Uniform Benefits apply