

2015 Monthly Local Rates: Coinsurance HMO Option—Standard PPO

Plan Name	Tier	Non-Medicare rates*		Medicare Rates		
		Single	Family	Single	Medicare 1 Eligible**	Medicare 2 Eligible***
Anthem Blue Preferred Northeast	1	691.70	1,721.80	530.80	1,217.50	1,056.60
Anthem Blue Preferred Southeast	1	741.20	1,845.50	557.00	1,293.20	1,109.00
Arise Health Plan Northern	1	975.30	2,430.80	680.50	1,650.80	1,356.00
Arise Health Plan Southeast	1	1,006.30	2,508.30	696.80	1,698.10	1,388.60
Dean Health Insurance	1	664.20	1,653.00	509.40	1,168.60	1,013.80
Dean Health Insurance - Prevea360	1	805.90	2,007.30	582.20	1,383.10	1,159.40
GHC of Eau Claire	3	1,082.00	2,697.50	610.70	1,687.70	1,216.40
GHC of South Central Wisconsin	1	587.20	1,460.50	476.20	1,058.40	947.40
Gundersen Health Plan	1	754.90	1,879.80	420.70	1,170.60	836.40
HealthPartners Health Plan	1	847.40	2,111.00	591.90	1,434.30	1,178.80
Health Tradition Health Plan	1	657.60	1,636.50	513.20	1,165.80	1,021.40
Humana - Eastern	3	1,163.10	2,900.30	458.10	1,616.20	911.20
Humana - Western	3	1,163.10	2,900.30	458.10	1,616.20	911.20
Medical Associates Health Plans	1	621.60	1,546.50	438.40	1,055.00	871.80
Medicare Plus****	N/A****	N/A****	N/A****	414.30	N/A****	824.30
MercyCare Health Plans	1	610.10	1,517.80	446.80	1,051.90	888.60
Network Health	1	756.60	1,884.00	565.40	1,317.00	1,125.80
Physicians Plus	1	689.20	1,715.50	497.50	1,181.70	990.00
Security Health Plan	3	1,028.00	2,562.50	571.30	1,594.30	1,137.60
Standard Plan - Balance of State-PPO ¹ & ****	3	1,164.80	2,904.40	N/A****	1,579.10	N/A****
Standard Plan - Dane - PPO ² & ****	3	1,081.20	2,697.40	N/A****	1,495.50	N/A****
Standard Plan - Milwaukee - PPO ³ & ****	3	1,259.50	3,142.50	N/A****	1,673.80	N/A****
Standard Plan - Waukesha - PPO ⁴ & ****	3	1,164.80	2,904.40	N/A****	1,579.10	N/A****
State Maintenance Plan (SMP)****	1	821.90	2,049.10	N/A****	1,236.20	N/A****
UnitedHealthCare of Wisconsin	1	860.80	2,144.50	620.20	1,476.00	1,235.40
Unity Health Insurance - Community	1	631.30	1,570.80	470.70	1,097.00	936.40
Unity Health Insurance - UW Health	1	542.90	1,349.80	428.80	966.70	852.60
WEA Trust - East	1	786.30	1,958.30	581.00	1,362.30	1,157.00
WEA Trust - Northwest Chippewa Valley	1	919.60	2,291.50	651.10	1,565.70	1,297.20
WEA Trust - Northwest Mayo Clinic Hlth. Sys.	1	919.60	2,291.50	651.10	1,565.70	1,297.20
WEA Trust - South Central	1	747.00	1,860.00	560.30	1,302.30	1,115.60

Standard Plan Area Includes The Following:

- ¹ BALANCE OF STATE: All other Wisconsin counties (code A4)
- ² DANE: Dane, Grant, Jefferson, LaCrosse, Polk, St. Croix (code A1)
- ³ MILWAUKEE: Milwaukee County, also applies to retirees and continuants living out of state (code A2)
- ⁴ WAUKESHA: Kenosha, Ozaukee, Racine, Washington, Waukesha (code A3)

N/A= "not applicable."

Medicare premium rates apply only to subscribers who have terminated employment.

*Members of new participating employers may have a surcharge added to their rates. Your employer will inform you. Contact your payroll office with questions.

**Medicare 1 Eligible= Family coverage with at least one insured family member enrolled in Medicare Parts A, B & D.

***Medicare 2 Eligible= Family coverage with all insured members enrolled in Medicare Parts A, B & D.

****Members with Standard Plan or SMP coverage who become enrolled in Medicare Parts A and B will automatically be moved to the Medicare Plus plan. All other non-Medicare family members will remain covered under the Standard Plan or SMP.