

2015 Monthly Local Rates: HDHP HMO—Standard PPO

Plan Name	Tier	Non-Medicare rates*		Medicare Rates		
		Single	Family	Single	Medicare 1 Eligible**	Medicare 2 Eligible***
Anthem Blue Preferred Northeast	1	605.80	1,507.00	530.80	1,131.60	1,056.60
Anthem Blue Preferred Southeast	1	649.20	1,615.50	557.00	1,201.20	1,109.00
Arise Health Plan Northern	1	854.00	2,127.50	680.50	1,529.50	1,356.00
Arise Health Plan Southeast	1	881.10	2,195.25	696.80	1,572.90	1,388.60
Dean Health Insurance	1	581.80	1,447.00	509.40	1,086.20	1,013.80
Dean Health Insurance - Prevea360	1	705.80	1,757.00	582.20	1,283.00	1,159.40
GHC of Eau Claire	3	947.40	2,361.00	610.70	1,553.10	1,216.40
GHC of South Central Wisconsin	1	514.40	1,278.50	476.20	985.60	947.40
Gundersen Health Plan	1	661.10	1,645.25	420.70	1,076.80	836.40
HealthPartners	1	742.10	1,847.75	591.90	1,329.00	1,178.80
Health Tradition Health Plan	1	576.00	1,432.50	513.20	1,084.20	1,021.40
Humana Eastern	3	1,018.30	2,538.25	458.10	1,471.40	911.20
Humana Western	3	1,018.30	2,538.25	458.10	1,471.40	911.20
Medical Associates Health Plans	1	544.50	1,353.75	438.40	977.90	871.80
Medicare Plus****	N/A****	N/A****	N/A****	414.30	N/A****	824.30
MercyCare Health Plans	1	534.40	1,328.50	446.80	976.20	888.60
Network Health	1	662.60	1,649.00	565.40	1,223.00	1,125.80
Physicians Plus	1	603.70	1,501.75	497.50	1,096.20	990.00
Security Health Plan	3	900.10	2,242.75	571.30	1,466.40	1,137.60
Standard Plan - Balance of State-PPO ¹ & ****	3	1,156.50	2,885.00	N/A****	1,570.80	N/A****
Standard Plan - Dane - PPO ² & ****	3	1,073.10	2,676.50	N/A****	1,487.40	N/A****
Standard Plan - Milwaukee - PPO ³ & ****	3	1,250.20	3,119.30	N/A****	1,664.50	N/A****
Standard Plan - Waukesha - PPO ⁴ & ****	3	1,156.50	2,885.00	N/A****	1,570.80	N/A****
State Maintenance Plan (SMP)****	1	769.60	1,917.90	N/A****	1,183.90	N/A****
UnitedHealthCare of Wisconsin	1	753.80	1,877.00	620.20	1,369.00	1,235.40
Unity Health Insurance - Community	1	553.00	1,375.00	470.70	1,018.70	936.40
Unity Health Insurance - UW Health	1	475.60	1,181.50	428.80	899.40	852.60
WEA Trust - East	1	688.60	1,714.00	581.00	1,264.60	1,157.00
WEA Trust - Northwest Chippewa Valley	1	805.30	2,005.75	651.10	1,451.40	1,297.20
WEA Trust - Northwest Mayo Clinic Hlth. Sys.	1	805.30	2,005.75	651.10	1,451.40	1,297.20
WEA Trust - South Central	1	654.20	1,628.00	560.30	1,209.50	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.