

2021 STATE OF WISCONSIN GROUP HEALTH INSURANCE MONTHLY PREMIUM RATES:

WISCONSIN PUBLIC EMPLOYERS (LOCAL) PROGRAM OPTION 14: DEDUCTIBLE PLAN WITHOUT DENTAL

	Single	Family	All CG's except: CG11, 12, 13, 14, 41 & 42	
	616.88	1,509.65		
88% of Average	Employee Single	Employee Family	Employer Single	Employer Family
DEAN	\$114.34	\$281.41	\$616.88	\$1,509.65
GHC	\$88.80	\$217.57	\$616.88	\$1,509.65
QUARTZ - COMMUNITY	\$261.12	\$648.37	\$616.88	\$1,509.65
QUARTZ - UW HEALTH	\$49.22	\$118.61	\$616.88	\$1,509.65
MERCYCARE	\$87.78	\$215.01	\$616.88	\$1,509.65

WPE (Local) Deductible without Dental PO14		
Plan Name	Single	Family
DEAN HEALTH INSURANCE	731.22	1,791.06
DEAN HEALTH INSURANCE PREVEA360	734.50	1,799.26
GHC OF EAU CLAIRE	795.78	1,952.46
GHC OF SOUTH CENTRAL WISCONSIN	705.68	1,727.22
HEALTHPARTNERS HEALTH PLAN	923.08	2,270.72
MEDICAL ASSOCIATES HEALTH PLAN	675.06	1,650.66
MERCYCARE HEALTH PLAN	704.66	1,724.66
NETWORK HEALTH	836.96	2,055.42
QUARTZ - COMMUNITY	878.00	2,158.02
QUARTZ - UW HEALTH	666.10	1,628.26
ROBIN WITH HEALTHPARTNERS	960.62	2,364.56
WEA TRUST - EAST	861.60	2,117.02
WEA TRUST WEST - CHIPPEWA VALLEY	1,019.88	2,512.72
WEA TRUST WEST - MAYO CLINIC HLTH SYS	990.26	2,438.66
Local IYC Access Plan	1,104.90	2,725.26

*Employee & Employer Contributions for AMFS, AMPS, IAFF 311, MPPOA, and Teamsters: (Only Compensation Groups 11, 12, 13, 14, 41 & 42)				
	Single	Family	Includes only: CG11, 12, 13, 14, 41 & 42	
	666.10	1,628.26		
100% of Low	Employee Single	Employee Family	Employer Single	Employer Family
DEAN	\$65.12	\$162.80	\$666.10	\$1,628.26
GHC	\$39.58	\$98.96	\$666.10	\$1,628.26
QUARTZ - COMMUNITY	\$211.90	\$529.76	\$666.10	\$1,628.26
QUARTZ - UW HEALTH	\$0.00	\$0.00	\$666.10	\$1,628.26
MERCYCARE	\$38.56	\$96.40	\$666.10	\$1,628.26

*These rates are for employees certified at 100% for benefits. Expanded rate sheets for those certified at less than 100% may be found on the City Human Resources Benefits Website.

NOTES ON THE ABOVE INFORMATION

- 1) Compensation Groups 11 & 12 are commissioned Police employees (MPPOA & AMPS)
- 2) Compensation Groups 13 & 14 are commissioned Fire employees (IAFF 311 & AMFS)
- 3) Compensation Groups 41 & 42 are Teamsters-represented employees.
- 4) Employees may choose from any of the health plans listed under Employee Trust Funds Program Option 14. The required contribution amounts are provided for the most commonly selected plans.
- 5) To determine the employee contribution to monthly premium for any of the other available plans, subtract the maximum Employer contribution amount for your compensation group for the selected coverage level from the total premium for the selected plan.
- 6) Dean Health Insurance, GHC of South Central Wisconsin, and Quartz-UW Health are the qualified Tier 1 plans in the Dane County Service Area that factor into the maximum Employer contribution under the 88% of Average calculation.