

2010 REPRESENTED REGULAR HEALTH RATES

These rates apply to represented full-time employees covered by the retirement system that are working at least 50% time or greater. Employees in Represented Bargaining Units will continue to pay the 2009 employee contribution rate until their contracts are settled.

	Single Premiums						Family Premiums		
	Tier	Plan Suffix Code	Ded Code	Employee Pays**	UW Pays	Total	Employee Pays**	UW Pays	Total
STANDARD	3	.01	4AO	164.00	910.00	1,074.00	412.00	2,269.60	2,681.60
STANDARD--Out of State*	2	.01	4AG	69.00	1,005.00	1,074.00	173.00	2,508.60	2,681.60
STATE MAINTENANCE (SMP)	1	.05	4AR	31.00	633.60	664.60	78.00	1,579.70	1,657.70
ANTHEM BCBS NE	1	.14	4HN	31.00	584.50	615.50	78.00	1,457.00	1,535.00
ANTHEM BCBS NW	1	.13	4DE	31.00	568.70	599.70	78.00	1,417.50	1,495.50
ANTHEM BCBS SE	1	.11	4EN	31.00	693.50	724.50	78.00	1,729.50	1,807.50
ARISE HEALTH PLAN	1	.47	4BH	31.00	641.40	672.40	78.00	1,599.30	1,677.30
DEAN HEALTH	1	.15	4CP	31.00	543.70	574.70	78.00	1,355.00	1,433.00
GHC-EAU CLAIRE	1	.30	4DN	31.00	735.70	766.70	78.00	1,835.00	1,913.00
GHC-SOUTH CENTRAL WI	1	.35	4DB	31.00	538.10	569.10	78.00	1,341.00	1,419.00
GUNDERSEN LUTHERAN	1	.37	4BN	31.00	654.90	685.90	78.00	1,633.00	1,711.00
HEALTHPARTNERS	1	.85	4BS	31.00	658.00	689.00	78.00	1,640.80	1,718.80
HEALTH TRADITION	1	.55	4CW	31.00	689.10	720.10	78.00	1,718.50	1,796.50
HUMANA--EASTERN	1	.21	4EQ	31.00	696.00	727.00	78.00	1,735.80	1,813.80
HUMANA--WESTERN	1	.22	4BW	31.00	669.20	700.20	78.00	1,668.80	1,746.80
MEDICAL ASSOCIATES	1	.63	4DP	31.00	533.50	564.50	78.00	1,329.50	1,407.50
MERCYCARE HEALTH	1	.64	4GN	31.00	533.10	564.10	78.00	1,328.50	1,406.50
NETWORK HEALTH	1	.70	4GB	31.00	614.50	645.50	78.00	1,532.00	1,610.00
PHYSICIANS PLUS	1	.74	4CM	31.00	544.10	575.10	78.00	1,356.00	1,434.00
SECURITY HEALTH	1	.71	4DT	31.00	712.00	743.00	78.00	1,775.80	1,853.80
UNITED HEALTHCARE NE	1	.94	4DH	31.00	622.40	653.40	78.00	1,551.80	1,629.80
UNITED HEALTHCARE SE	1	.83	4HX	31.00	641.90	672.90	78.00	1,600.50	1,678.50
UNITY-COMMUNITY	1	.40	4CH	31.00	595.40	626.40	78.00	1,484.30	1,562.30
UNITY-UW HEALTH	1	.92	4BE	31.00	545.10	576.10	78.00	1,358.50	1,436.50
WPS METRO CHOICE	1	.84	4HG	31.00	644.10	675.10	78.00	1,606.00	1,684.00

* Standard Plan Out-of-State Rates apply only to those assigned to work out-of-state, NOT those residing out-of-state.

**Employees in Bargaining Unit 14 will continue to pay the 2008 employee contribution rate until their contract is settled.