

### 2015 Health Insurance Premiums for Craftworkers High Deductible Health Plans

Rates also apply to Craftworker Supervisors, Shop Supervisors, Crafts Operation Manager (UW-Milwaukee), and employees in project positions allocated to a crafts classification. Employees, including craftworker LTEs, are required to pay the entire monthly health insurance premium.

	Tier	Plan Suffix Code	Single Premiums			Family Premiums		
			Employee Share	UW Share	Total	Employee Share	UW Share	Total
Anthem Blue Preferred Northeast (HDANNE)	1	HB	641.10	0.00	641.10	1,595.30	0.00	1,595.30
Anthem Blue Preferred Southeast (HDANSE)	1	HA	713.30	0.00	713.30	1,775.80	0.00	1,775.80
Arise Health Plan Northern (HDARIS)	1	HK	678.00	0.00	678.00	1,687.50	0.00	1,687.50
Arise Health Plan Southeast (HDARSE)	1	HL	699.20	0.00	699.20	1,740.50	0.00	1,740.50
Dean Health Insurance (HDDEAN)	1	HC	592.10	0.00	592.10	1,472.80	0.00	1,472.80
Dean Health Insurance - Prevea360 (HDDNPR)	1	HD	709.70	0.00	709.70	1,766.80	0.00	1,766.80
GHC of Eau Claire (HDGHEC)	1	HG	746.00	0.00	746.00	1,857.50	0.00	1,857.50
GHC of South Central Wisconsin (HDGHSC)	1	HH	568.20	0.00	568.20	1,413.00	0.00	1,413.00
Gundersen Health Plan (HDGUNL)	1	HI	694.90	0.00	694.90	1,729.80	0.00	1,729.80
Health Tradition Health Plan (HDHLTR)	1	HM	712.70	0.00	712.70	1,774.30	0.00	1,774.30
HealthPartners Health Plan (HDHLPA)	1	HS	635.20	0.00	635.20	1,580.50	0.00	1,580.50
Humana - Eastern (HDHUME)	1	HE	730.70	0.00	730.70	1,819.30	0.00	1,819.30
Humana - Western (HDHUMW)	1	HF	730.70	0.00	730.70	1,819.30	0.00	1,819.30
Medical Associates Health Plans (HDMDAS)	1	HN	591.40	0.00	591.40	1,471.00	0.00	1,471.00
MercyCare Health Plans (HDMERC)	1	HO	527.50	0.00	527.50	1,311.30	0.00	1,311.30
Network Health (HDNTWK)	1	HP	700.00	0.00	700.00	1,742.50	0.00	1,742.50
Physicians Plus (HDPPLS)	1	HR	598.30	0.00	598.30	1,488.30	0.00	1,488.30
Security Health Plan (HDSECR)	1	HQ	713.30	0.00	713.30	1,775.80	0.00	1,775.80
Standard Plan (HDSTIN)	3	H6	1,222.40	0.00	1,222.40	3,049.70	0.00	3,049.70
Standard Plan - Out of State* (HDSTOU)	2	H6	1,222.40	0.00	1,222.40	3,049.70	0.00	3,049.70
State Maintenance Plan (HDSMP)	1	H7	757.40	0.00	757.40	1,887.30	0.00	1,887.30
UnitedHealthcare of Wisconsin (HDUNHC)	1	HY	696.30	0.00	696.30	1,733.30	0.00	1,733.30
Unity Health Insurance - Community (HDUNCO)	1	HJ	678.60	0.00	678.60	1,689.00	0.00	1,689.00
Unity Health Insurance - UW Health (HDUNUW)	1	HX	608.10	0.00	608.10	1,512.80	0.00	1,512.80
WEA Trust - East (HDWEE)	1	HT	696.20	0.00	696.20	1,733.00	0.00	1,733.00
WEA Trust - Northwest Chippewa Valley (HDWENW)	1	HU	727.90	0.00	727.90	1,812.30	0.00	1,812.30
WEA Trust - Northwest Mayo Clinic Hlth Sys (HDWNWM)	1	HW	727.90	0.00	727.90	1,812.30	0.00	1,812.30
WEA Trust - South Central (HDWESC)	1	HV	583.00	0.00	583.00	1,450.00	0.00	1,450.00

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