Public Safety 2018 Rates and Enrollment

89.50%	SINGLE MONTHLY CONTRIBUTION			FAMILY MONTHLY CONTRIBUTION		
DODGE COUNTY QUALIFIED PLANS ARE SHADED ORANGE.	**TOTAL**	**EMPLOYER**	**EMPLOYEE**	**TOTAL**	**EMPLOYER**	**EMPLOYEE**
DEAN HEALTH PLAN	723.70	593.65	130.05	1783.52	1461.11	322.41
Dean Health Insurance-Prevea360	727.10	593.65	133.45	1792.02	1461.11	330.91
GHC OF EAU CLAIRE	911.00	593.65	317.35	2251.72	1461.11	790.61
GHC OF SOUTH CENTRAL WISCONSIN	646.60	593.65	52.95	1590.72	1461.11	129.61
HEALTHPARTNERS Health Plan	854.40	593.65	260.75	2110.22	1461.11	649.11
MEDICAL ASSOCIATES HEALTH PLAN	584.40	593.65	0.00	1435.22	1461.11	0.00
MERCYCARE HEALTH PLAN	694.00	593.65	100.35	1709.22	1461.11	248.11
NETWORK HEALTH	738.30	593.65	144.65	1820.02	1461.11	358.91
Quartz -Community	663.30	593.65	69.65	1632.52	1461.11	171.41
Quartz-UW Health	593.70	593.65	0.00	1458.52	1461.11	0.00
Security Health Plan-Central	1026.00	593.65	432.35	2539.22	1461.11	1078.11
Security Health Plan-Valley	1022.50	593.65	428.85	2530.52	1461.11	1069.41
State Maintenance Plan (SMP)-WPE	880.58	593.65	286.93	2175.66	1461.11	714.55
WEA Trust-East	847.30	593.65	253.65	2092.52	1461.11	631.41
Wea Trust-Northwest Chippewa Valley	1062.60	593.65	468.95	2630.72	1461.11	1169.61
WEA Trust-Northwest Mayo Clinic	1062.60	593.65	468.95	2630.72	1461.11	1169.61
IYC Access Plan (+IYC Medicare Plus)	1311.82	593.65	718.17	3253.80	1461.11	1792.69

2018 Dental Benefit	**Total**	**Employer Paid (FT)**	**Employee Paid (FT)**	**COBRA**
Single	$29.37	$26.70	$2.67	$29.96
Family	$94.17	$85.62	$8.55	$96.05