

# 2020 - Monthly Health & Dental Premiums by Employment Allocation

## Marathon County Health Plan

### Aspirus Narrow Network

Single					Employee + 1					Family							
2020 Total Premium			With 5% Wellness Incentive		2020 Total Premium			With 5% Wellness Incentive		2020 Total Premium			With 5% Wellness Incentive				
\$	709.40	Employer	Employee	Employer	Employee	\$	1,702.54	Employer	Employee	Employer	Employee	\$	2,000.57	Employer	Employee	Employer	Employee
100 % FTE	\$603.00	\$106.40	\$638.46	\$70.94	100 % FTE	\$1,447.16	\$255.38	\$1,532.30	\$170.24	100 % FTE	\$1,700.49	\$300.08	\$1,800.51	\$200.06			
95 % FTE	\$572.85	\$136.55	\$608.31	\$101.09	95 % FTE	\$1,374.80	\$327.74	\$1,459.94	\$242.60	95 % FTE	\$1,615.47	\$385.10	\$1,715.49	\$285.08			
90 % FTE	\$542.70	\$166.70	\$578.16	\$131.24	90 % FTE	\$1,302.44	\$400.10	\$1,387.58	\$314.96	90 % FTE	\$1,530.44	\$470.13	\$1,630.46	\$370.11			
85 % FTE	\$512.55	\$196.85	\$548.01	\$161.39	85 % FTE	\$1,230.09	\$472.45	\$1,315.23	\$387.31	85 % FTE	\$1,445.42	\$555.15	\$1,545.44	\$455.13			
80 % FTE	\$482.40	\$227.00	\$517.86	\$191.54	80 % FTE	\$1,157.73	\$544.81	\$1,242.87	\$459.67	80 % FTE	\$1,360.39	\$640.18	\$1,460.41	\$540.16			
75 % FTE	\$452.25	\$257.15	\$487.71	\$221.69	75 % FTE	\$1,085.37	\$617.17	\$1,170.51	\$532.03	75 % FTE	\$1,275.37	\$725.20	\$1,375.39	\$625.18			

\*Employee contribution is 15% of the total premium. The contribution for employees who qualify for the Wellness Incentive is 10% of the total premium

### NEHA Broad Network

Single					Employee + 1					Family							
2020 Total Premium			With 5% Wellness Incentive		2020 Total Premium			With 5% Wellness Incentive		2020 Total Premium			With 5% Wellness Incentive				
\$	769.90	Employer	Employee	Employer	Employee	\$	1,849.40	Employer	Employee	Employer	Employee	\$	2,173.37	Employer	Employee	Employer	Employee
100 % FTE	\$603.00	\$166.90	\$638.46	\$131.44	100 % FTE	\$1,447.16	\$402.24	\$1,532.30	\$317.10	100 % FTE	\$1,700.49	\$472.88	\$1,800.51	\$372.86			
95 % FTE	\$572.85	\$197.05	\$608.31	\$161.59	95 % FTE	\$1,374.80	\$474.60	\$1,459.94	\$389.46	95 % FTE	\$1,615.47	\$557.90	\$1,715.49	\$457.88			
90 % FTE	\$542.70	\$227.20	\$578.16	\$191.74	90 % FTE	\$1,302.44	\$546.96	\$1,387.58	\$461.82	90 % FTE	\$1,530.44	\$642.93	\$1,630.46	\$542.91			
85 % FTE	\$512.55	\$257.35	\$548.01	\$221.89	85 % FTE	\$1,230.09	\$619.31	\$1,315.23	\$534.17	85 % FTE	\$1,445.42	\$727.95	\$1,545.44	\$627.93			
80 % FTE	\$482.40	\$287.50	\$517.86	\$252.04	80 % FTE	\$1,157.73	\$691.67	\$1,242.87	\$606.53	80 % FTE	\$1,360.39	\$812.98	\$1,460.41	\$712.96			
75 % FTE	\$452.25	\$317.65	\$487.71	\$282.19	75 % FTE	\$1,085.37	\$764.03	\$1,170.51	\$678.89	75 % FTE	\$1,275.37	\$898.00	\$1,375.39	\$797.98			

## Marathon County Dental Plan

Single			Employee + 1			Family					
2020 Total Premium			2020 Total Premium			2020 Total Premium					
\$	32.20	Employer	Employee	\$	64.51	Employer	Employee	\$	120.64	Employer	Employee
100 % FTE	\$16.10	\$16.10	100 % FTE	\$32.25	\$32.26	100 % FTE	\$60.32	\$60.32			
95 % FTE	\$15.29	\$16.91	95 % FTE	\$30.64	\$33.87	95 % FTE	\$57.30	\$63.34			
90 % FTE	\$14.49	\$17.71	90 % FTE	\$29.02	\$35.49	90 % FTE	\$54.29	\$66.35			
85 % FTE	\$13.68	\$18.52	85 % FTE	\$27.41	\$37.10	85 % FTE	\$51.27	\$69.37			
80 % FTE	\$12.88	\$19.32	80 % FTE	\$25.80	\$38.71	80 % FTE	\$48.26	\$72.38			
75 % FTE	\$12.07	\$20.13	75 % FTE	\$24.19	\$40.32	75 % FTE	\$45.24	\$75.40			

\*Employee contribution is 50% of the total premium