

2026 Health Insurance Contribution Rates <i>Full Time - Non Represented Employees</i>	82%	Average Qualified Tier 1 Plan	LOW DEDUCTIBLE PLAN
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Family Plan

	Dean Health Plan by Medica	GHC of Eau Claire Greater Wisconsin	GHC of SCW Dane Choice**	Medical Associates	Quartz Central	Quartz UW**	Access Plan - by Dean	State Maintenance Plan by Dean
2026 Local Deductible Plan Total Monthly Premium	3,129.62	3,777.78	2,314.18	2,489.08	3,545.28	2,401.88	3,578.10	2,856.32
City Monthly Contribution towards lowest qualified plan	2,342.18	2,342.18	2,342.18	2,342.18	2,342.18	2,342.18	2,342.18	2,342.18
Employee Monthly Contribution per Month	\$ 787.44	\$ 1,435.60	\$ (28.00)	\$ 146.90	\$ 1,203.10	\$ 59.70	\$ 1,235.92	\$ 514.14
Half per paycheck	\$ 393.72	\$ 717.80	\$ (14.00)	\$ 73.45	\$ 601.55	\$ 29.85	\$ 617.96	\$ 257.07

Single Plan

	Dean Health Plan by Medica	GHC of Eau Claire Greater Wisconsin	GHC of SCW Dane Choice**	Medical Associates	Quartz Central	Quartz UW**	Access Plan - by Dean	State Maintenance Plan by Dean
2026 Local Deductible Plan Total Monthly Premium	1,269.20	1,528.46	943.02	1,012.98	1,435.46	978.10	1,448.58	1,159.86
City Monthly Contribution towards lowest qualified plan	951.09	951.09	951.09	951.09	951.09	951.09	951.09	951.09
Employee Monthly Contribution per Month	\$ 318.11	\$ 577.37	\$ (8.07)	\$ 61.89	\$ 484.37	\$ 27.01	\$ 497.49	\$ 208.77
Half per paycheck	\$ 159.06	\$ 288.69	\$ (4.03)	\$ 30.95	\$ 242.19	\$ 13.51	\$ 248.75	\$ 104.39

Please Note:

Contribution rates above are monthly. Half of the monthly contribution is deducted per paycheck.

(In months with 3 paychecks, only 2 deductions are made).

** In-plan providers are located in Dane County only.

Annual Cost to City of a Single Plan:	\$ 11,413.02	\$ 1,148.13	\$ 10,264.89	2025
Annual Cost to City of a Family Plan:	\$28,106.19	\$2,859.51	\$25,246.68	2025