2024 Health Insurance Contribution Rates - 93% of Least Costly Plan POLICE UNION

Family Plan														
	D)ean	GHC of SCW Neighbors	GHC of SCW Dane Choice**	Med Assoc.	Quartz Central	Quartz UW**							
2024 Local Deductible Plan Total Monthly Premium		2,321.22	2,101.22	1,904.02	1,859.86	3,037.72	2,070.06							
City Monthly Contribution (93% of lowest qual. plan)		1,729.67	1,729.67	1,729.67	1,729.67	1,729.67	1,729.67							
Employee Monthly Contribution per Month	\$	591.55	\$ 371.55	\$ 174.35	\$ 130.19	\$ 1,308.05	\$ 340.39							
Half per paycheck	\$	295.78	\$ 185.78	\$ 87.18	\$ 65.10	\$ 654.03	\$ 170.20							

Single Plan													
			GHC of SCW	GHC of SCW		Quartz							
	I	Dean	Neighbors	Dane Choice**	Med Assoc.	Central	Quartz UW**						
2024 Local Deductible Plan Total Monthly Premium		943.40	855.40	776.52	758.86	1,230.00	842.94						
City Monthly Contribution (93% of lowest qual. plan)		705.74	705.74	705.74	705.74	705.74	705.74						
Employee Monthly Contribution per Month	\$	237.66	\$ 149.66	\$ 70.78	\$ 53.12	\$ 524.26	\$ 137.20						
Half per paycheck	\$	118.83	\$ 74.83	\$ 35.39	\$ 26.56	\$ 262.13	\$ 68.60						

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).

^{*}Lowest Qualified Plan Premium

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

Difference in Employee Cost of Plans from 2023 to 2024 for Police Union											
Premium	Per Month Premium Pemium Plan 2022 2023 2024			ium 2024	Per Month Incr./Decr.		No. on Plan		Annual Difference		
Dean	single	125.07	136.44	237.69	101	1.25	0		0.00		
	family	311.96	339.79	591.55	253	1.76	3		9063.36		
GHC of SC WI	single	13.39	27.66	149.39	123	1.73	0		0.00		
Neighbors*	family	32.76	67.83	371.55	303	3.72	1		3644.64		
			•								
GHC of SCW	single		0.00	70.81	70	0.81	0				
Dane Choice*	family		0.00	174.35	174	1.35	0				
					(0.00					
Med Ass.	single	72.69	70.42	53.12	-17	7.30	1		-207.60		
	family	181.02	174.73	130.19	-44	1.54	1		-534.48		
Quartz-Central	single	342.35	484.76	524.29	39	9.53	0		0.00		
	family	855.16	1210.59	1308.05	97	7.46	0		0.00		
					1						
Quartz UW	single	53.71	104.42	137.23	32	2.81	0		0.00		
	family	133.56	259.73	340.39	80	0.66	0		0.00		
						E	Employee Incr.	\$	11,965.92		

Per month premium						per month			Annual
Premium	Plan	2022	2023	2024		Incr./Decr.	No. on Plan	D	ifference
Dean	single	655.97	663.84	705.74		41.90	0	\$	-
	family	1605.32	1627.97	1729.67		101.70	3	\$	3,661.20
GHC of SC WI	single	655.97	663.84	705.74		41.90	0	\$	-
Neighbors*	family	1605.32	1627.97	1729.67		101.70	1	\$	1,220.40
	•		•					,	
GHC of SCW	single		0.00	705.74		705.74	0		
Dane Choice*	family		0.00	1729.67		1729.67	0		
Med Ass.	Isingle	655.97	663.84	705.74		41.90	1	Ċ	
IVIEU ASS.	single						_	\$	502.80
	family	1605.32	1627.97	1729.67		101.70	1	\$	1,220.40
Quartz-Central	single	655.97	663.84	705.74		41.90	0	\$	
	family	1605.32	1627.97	1729.67		101.70	0	\$	-
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Quartz UW	single	655.97	663.84	705.74		41.90	0	\$	-
	family	1605.32	1627.97	1729.67		101.70	0	\$	-
							Employer Incr.	\$	6,604.80

2024 Health Insurance Contribution Rates at 93% for Police Union

93% of Gross Premium of the Least Costly Qualified Plan within Service Area

	2023 Single	2024 Single		% of	2023 Family	2024 Family			
	Plan Monthly	Plan Monthly	Amount of	Increase/	Plan Monthly	Plan Monthly	Amount of	% of Increase/	
Plan	Premium	Premium	Increase	Decrease	Premium	Premium	Increase	Decrease	
Dean Health	800.28	943.40	143.12	17.9%	1,917.28	2,321.22	403.94	21.1%	
GHC of SCW Neighbors*	691.50	855.40	163.90	23.7%	1,638.08	2,101.22	463.14	28.3%	
GHC of SCW Dane Choice*	-	776.52	776.52			1,904.02			
Medical Associates	734.26	758.86	24.60	3.4%	1,786.34	1,859.86	73.52	4.1%	
Quartz Community	1,148.60	1,230.00	81.40	7.1%	2,460.48	3,037.72	577.24	23.5%	
Quartz UW Health	768.26	842.94	74.68	9.7%	1,738.88	2,070.06	331.18	19.0%	
Least costly qualified plan									
within the service area	\$ 691.50	\$ 758.86	\$ 67.36	9.7%	\$ 1,638.08	\$ 1,859.86	221.78	13.5%	
93% based on least costly									
premiums of the qualified						,			
plans for 2024	\$ 663.84	\$ 705.74	\$ 41.90	6.3%	\$ 1,572.56	\$ 1,729.67	\$ 157.11	10.0%	
Current Employee Count		On Single Plan	1			On Family Plan	5		
Projected Increase/Decrease									
City Cost per Month			\$ 41.90				\$ 785.55		

Projected Increase -					
City Cost - Annually Single	\$ 502.80	Family	\$ 9,4	26.60	\$ 9,929.40

TOTAL

<u>Notes</u>

^{*}GHC of SCW split into Neighbors and Dane Choice