

HIRSP Plans Option Table

	HIRSP 1,000	HIRSP 2,500	HIRSP 5000	HIRSP Health Savings Account
Premiums	Refer to rate table	Refer to rate table	Refer to rate table	Refer to rate table
Premium reductions available if you qualify	Yes (refer to "Reductions in shaded box below")	Yes (refer to "Reductions in shaded box below")	Yes (refer to "Reductions in shaded box below")	Yes (refer to "Reductions in shaded box below")
Medical deductible (you pay)	\$1,000 per year	\$2,500 per year	\$5,000 per year	\$3,500 per year
Medical deductible reductions available if you qualify	Yes (refer to "Reductions" in shaded box below)	Yes (refer to "Reductions" in shaded box below)	Yes (refer to "Reductions" in shaded box below)	Yes (refer to "Reductions" in shaded box below)
Medical Coinsurance (you pay)	20% of allowed amount \$1,000 per year	20% of allowed amount \$1,000 per year	20% of allowed amount \$1,000 per year	20% of allowed amount
Individual medical out-of-pocket maximum (your total expenditures for medical deductible and medical coinsurance, after which HIRSP will pay at 100%)	\$2,000 per year	\$3,500 per year	\$6,000 per year	20% of allowed amount
Family medical out-of-pocket maximum (all family members must be on the same plan)	\$4,000 per year	\$7,000 per year	\$12,000 per year	\$2,100 per year
Drug Copay (you pay)	\$10 Tier 1 / \$30 Tier 2	\$10 Tier 1 / \$30 Tier 2	\$10 Tier 1 / \$30 Tier 2	\$5,600 per year
Drug out-of-pocket maximum reductions available if you qualify	Yes (refer to "Reductions" in shaded box below)	Yes (refer to "Reductions" in shaded box below)	Yes (refer to "Reductions" in shaded box below)	\$11,200 per year
Pre-existing condition waiting period	Yes (refer to "Pre-existing" in shaded box below)	Yes (refer to "Pre-existing" in shaded box below)	Yes (refer to "Pre-existing" in shaded box below)	Yes (refer to "Reductions" in shaded box below)
Maximum lifetime benefit	\$1,000,000	\$1,000,000	\$1,000,000	Yes (refer to "Pre-existing" in shaded box below) \$1,000,000

Reductions: Available for policyholders with household incomes of less than \$25,000.

HIRSP 1,000 / HIRSP 2,500 / HIRSP 5,000 – subsidized premium, medical deductible, and drug out-of-pocket maximum
 HIRSP HSA – subsidized premium and medical/drug deductible

Pre-existing: If you are eligible for HIRSP based on your medical condition, HIRSP does not cover services or medications related to a pre-existing injury or illness during your first six months of coverage. A pre-existing injury or illness is a condition, whether physical or mental, regardless of the cause of the condition, which was diagnosed or for which medical advice, care, or, treatment was recommended or received during the six months immediately preceding the policy effective date.

HEALTH INSURANCE RISK-SHARING PLAN

Quarterly Premium Rates

Rates Effective January 1, 2008

HIRSP 1,000 -- (\$1,000 Deductible)

Age	Males		
	Zone 1	Zone 2	Zone 3
0-18	\$906	\$879	\$783
19-24	906	879	783
25-29	954	915	813
30-34	1,101	1,059	939
35-39	1,296	1,242	1,107
40-44	1,560	1,509	1,344
45-49	1,899	1,899	1,725
50-54	2,292	2,295	2,295
55-59	2,799	2,799	2,802
60 +	3,405	3,402	3,402

Age	Females		
	Zone 1	Zone 2	Zone 3
0-18	\$891	\$879	\$783
19-24	1,134	1,092	972
25-29	1,281	1,227	1,092
30-34	1,464	1,401	1,245
35-39	1,704	1,641	1,464
40-44	1,974	1,908	1,701
45-49	2,229	2,226	1,989
50-54	2,469	2,466	2,379
55-59	2,742	2,742	2,742
60 +	2,895	2,895	2,898

HIRSP 2,500 -- (\$2,500 Deductible)

Age	Males		
	Zone 1	Zone 2	Zone 3
0-18	\$519	\$495	\$477
19-24	519	495	477
25-29	537	513	495
30-34	624	597	573
35-39	720	687	657
40-44	873	834	798
45-49	1,110	1,059	1,014
50-54	1,452	1,386	1,317
55-59	1,884	1,794	1,704
60 +	2,379	2,262	2,148

Age	Females		
	Zone 1	Zone 2	Zone 3
0-18	\$504	\$489	\$477
19-24	633	612	600
25-29	699	681	663
30-34	804	780	762
35-39	921	894	876
40-44	1,068	1,038	1,014
45-49	1,236	1,194	1,167
50-54	1,434	1,386	1,347
55-59	1,641	1,581	1,539
60 +	1,881	1,806	1,758

HIRSP Health Savings Account -- (\$3,500 Deductible)

Age	Males		
	Zone 1	Zone 2	Zone 3
0-18	\$450	\$426	\$408
19-24	450	426	408
25-29	462	441	426
30-34	537	516	492
35-39	621	591	564
40-44	750	717	687
45-49	957	912	870
50-54	1,248	1,191	1,131
55-59	1,620	1,542	1,464
60 +	2,046	1,947	1,848

Age	Females		
	Zone 1	Zone 2	Zone 3
0-18	\$432	\$420	\$414
19-24	546	528	516
25-29	600	585	570
30-34	690	669	654
35-39	792	768	753
40-44	921	891	870
45-49	1,062	1,026	1,002
50-54	1,233	1,191	1,158
55-59	1,413	1,359	1,323
60 +	1,617	1,554	1,512

HIRSP 5,000 -- (\$5,000 Deductible)

Age	Males		
	Zone 1	Zone 2	Zone 3
0-18	\$381	\$360	\$348
19-24	381	360	348
25-29	393	375	363
30-34	456	435	420
35-39	525	501	480
40-44	636	606	585
45-49	813	777	738
50-54	1,059	1,011	960
55-59	1,377	1,311	1,245
60 +	1,737	1,653	1,569

Age	Females		
	Zone 1	Zone 2	Zone 3
0-18	\$366	\$357	\$351
19-24	462	447	438
25-29	513	495	486
30-34	588	570	555
35-39	672	654	639
40-44	780	756	738
45-49	900	870	852
50-54	1,047	1,011	984
55-59	1,197	1,155	1,125
60 +	1,374	1,320	1,284

HIRSP Medicare Supplement - (\$500 deductible)

Age	Males		
	Zone 1	Zone 2	Zone 3
0-18	\$351	\$318	\$282
19-24	351	318	282
25-29	462	414	369
30-34	531	477	426
35-39	627	567	501
40-44	762	687	609
45-49	906	813	723
50-54	1,104	993	882
55-59	1,323	1,191	1,062
60 +	1,587	1,428	1,269

Age	Females		
	Zone 1	Zone 2	Zone 3
0-18	\$351	\$318	\$282
19-24	486	438	390
25-29	618	555	495
30-34	675	609	540
35-39	831	747	666
40-44	945	852	756
45-49	1,089	981	873
50-54	1,230	1,107	984
55-59	1,356	1,221	1,086
60 +	1,470	1,323	1,176

Zone 1 = ZIP codes 532__

Zone 2 = ZIP codes 530__, 531__, 534__, and 537__

Zone 3 = All other ZIP codes

* Household Income as defined in Wisconsin Statute s. 71.52(5)

How to read HIRSP's Quarterly Premium Rate Tables

You should review the rate tables on the next page to determine if you would benefit from changing your HIRSP coverage.

Complete the following steps:

1. Find the table that currently applies to you. Tables are listed by plan and gender. If you do not know which plan you are enrolled in, please refer to your HIRSP identification card.
2. Find your age bracket in the table.
3. Find your zone as indicated by the ZIP code ranges as defined in the key below the tables.
4. Find the box where the age row and zone column meet. This is your current quarterly premium, excluding reductions for premium, deductible, and drug out-of-pocket maximum.
5. Find the correct rate table either above or below your current rate table. This table will show your premium if you choose to change your HIRSP plan.
6. Repeat steps 2-4 above to see what the premium would be if you choose HIRSP's other plan coverage.
7. Compare the rates and deductibles.

Example

A 42-year old Milwaukee woman in HIRSP 1,000, would make the following comparison.

She would find the table saying "HIRSP 1,000, Female," look down the "Age Bracket" column to the row identified as "40-44," and read across to "Zone 1" (ZIP codes 532__) to find a quarterly premium of \$1,974.00

She would then look at the "HIRSP 2,500, Female" table, find age bracket "40-44," and read across to the "Zone 1" column to find a premium of \$1,068.00

She would continue her comparison, same as above, of the HIRSP 5,000 and HIRSP Health Savings Account (HSA). She would have a chart that would have the following:

<u>Plan</u>	<u>Female / age 40-44 / Zone 1</u> <u>Quarterly Premium</u>
HIRSP 1,000	\$1,974.00
HIRSP 2,500	\$1,068.00
HIRSP 5,000	\$ 780.00
HIRSP HSA	\$ 921.00

Note: Applicants/Policyholders eligible for Medicare are only able to sign up for HIRSP Medicare Supplement and must be enrolled in Medicare Part A, Part B, and Part D.