

ATTACHMENT B

WISCONSIN ELECTRICAL EMPLOYEES HEALTH AND WELFARE PLAN RETIREE AND WIDOW RATES EFFECTIVE AS OF JANUARY 1, 2026

RETIREES

\$334.00	Retired, Medicare Member Single
\$486.00	Retired, Medicare Member, Children
\$842.00	Retired, Medicare Member, Non-Medicare Spouse
\$994.00	Retired, Medicare Member, Non-Medicare Spouse, Children
\$635.00	Retired, Medicare Member, Medicare Spouse
\$787.00	Retired, Medicare Member, Medicare Spouse, Children
\$937.00	Retired, Medicare Member, Medicare Spouse, Medicare Child
\$568.00	Retired, Non-Medicare Member Single
\$720.00	Retired, Non-Medicare Member, Children
\$869.00	Retired, Non-Medicare Member, Medicare Spouse
\$1021.00	Retired, Non-Medicare Member, Medicare Spouse, Children
\$1076.00	Retired, Non-Medicare Member, Non-Medicare Spouse
\$1228.00	Retired, Non-Medicare Member, Non-Medicare Spouse, Children

WIDOWS - OVER AGE 65

\$331.00	Medicare Widow, Single
\$632.00	Medicare Widow, Medicare Child(ren)
\$483.00	Medicare Widow, Non-Medicare Child(ren)

OPTIONAL DENTAL AND VISION BENEFIT ADDITIONAL PREMIUM COST

	Comprehensive Dental	Preventive Dental	Vision
Single	\$63.00	\$28.00	\$14.00
Married	\$125.00	\$57.00	\$27.00
Family	\$150.00	\$68.00	\$32.00

NOTE: Those Retirees and Widows eligible for Medicare will be moved to the UnitedHealthcare Group Retiree Advantage Plan.