

# HOWE ISD

## TRS Medical Rates

*2026-2027 Plan Year*

12 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$450.00	\$164.00
Employee & Spouse	\$450.00	\$1,208.00
Employee & Child(ren)	\$450.00	\$594.00
Family	\$450.00	\$1,638.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$450.00	\$272.00
Employee & Spouse	\$450.00	\$1,428.00
Employee & Child(ren)	\$450.00	\$778.00
Family	\$450.00	\$1,933.00

ACTIVECARE HD	Employer Contribution	Employee Contribution
Employee Only	\$450.00	\$178.00
Employee & Spouse	\$450.00	\$1,246.00
Employee & Child(ren)	\$450.00	\$618.00
Family	\$450.00	\$1,686.00

ACTIVE CARE 2	Employer Contribution	Employee Contribution
Employee Only	\$450.00	\$563.00
Employee & Spouse	\$450.00	\$1,952.00
Employee & Child(ren)	\$450.00	\$1,057.00
Family	\$450.00	\$2,391.00