

# NORTHWEST ISD

## TRS Medical Rates

2026-2027 Plan Year

24 Pay

<b>ACTIVECARE PRIMARY</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$172.50	\$133.50
Employee & Spouse	\$172.50	\$654.00
Employee & Child(ren)	\$172.50	\$348.00
Family	\$172.50	\$868.00

<b>ACTIVECARE PRIMARY PLUS</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$172.50	\$187.50
Employee & Spouse	\$172.50	\$763.50
Employee & Child(ren)	\$172.50	\$439.50
Family	\$172.50	\$1,015.50

<b>ACTIVECARE HD</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$172.50	\$142.50
Employee & Spouse	\$172.50	\$678.00
Employee & Child(ren)	\$172.50	\$363.00
Family	\$172.50	\$898.50

<b>ACTIVE CARE 2</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$172.50	\$334.00
Employee & Spouse	\$172.50	\$1,028.50
Employee & Child(ren)	\$172.50	\$581.00
Family	\$172.50	\$1,248.00

Employer Paid Premium: 172.50

Pay Mode: 24

ACTIVECARE PRIMARY	Monthly Premium	Annual Premium
	\$ 612.00	7344.00
	\$ 1,653.00	19836.00
	\$ 1,041.00	12492.00
	\$ 2,081.00	24972.00

  

ACTIVECARE PRIMARY PLUS	Monthly Premium	Annual Premium
	\$ 720.00	8640.00
	\$ 1,872.00	22464.00
	\$ 1,224.00	14688.00
	\$ 2,376.00	28512.00

  

ACTIVECARE 1HD	Monthly Premium	Annual Premium
	\$ 630.00	7560.00
	\$ 1,701.00	20412.00
	\$ 1,071.00	12852.00
	\$ 2,142.00	25704.00

  

ACTIVE CARE 2	Monthly Premium	Annual Premium
	\$ 1,013.00	12156.00
	\$ 2,402.00	28824.00
	\$ 1,507.00	18084.00
	\$ 2,841.00	34092.00

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_