

# PARADISE ISD

## TRS Medical Rates

2026-2027 Plan Year

12 Pay

<b>ACTIVECARE PRIMARY</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$350.00	\$262.00
Employee & Spouse	\$350.00	\$1,303.00
Employee & Child(ren)	\$350.00	\$691.00
Family	\$350.00	\$1,731.00

<b>ACTIVECARE PRIMARY PLUS</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$350.00	\$370.00
Employee & Spouse	\$350.00	\$1,522.00
Employee & Child(ren)	\$350.00	\$874.00
Family	\$350.00	\$2,026.00

<b>ACTIVECARE HD</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$350.00	\$280.00
Employee & Spouse	\$350.00	\$1,351.00
Employee & Child(ren)	\$350.00	\$721.00
Family	\$350.00	\$1,792.00

<b>ACTIVE CARE 2</b>	<b>Employer Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$350.00	\$663.00
Employee & Spouse	\$350.00	\$2,052.00
Employee & Child(ren)	\$350.00	\$1,157.00
Family	\$350.00	\$2,491.00

Employer Paid Premium: 350.00

Pay Mode: 12

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

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