

PERRIN-WHITT CISD

TRS Medical Rates

2026-2027 Plan Year

12 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$250.00	\$318.00
Employee & Spouse	\$250.00	\$1,284.00
Employee & Child(ren)	\$250.00	\$716.00
Family	\$250.00	\$1,682.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$250.00	\$418.00
Employee & Spouse	\$250.00	\$1,487.00
Employee & Child(ren)	\$250.00	\$886.00
Family	\$250.00	\$1,955.00

ACTIVECARE HD	Employer Contribution	Employee Contribution
Employee Only	\$250.00	\$320.00
Employee & Spouse	\$250.00	\$1,289.00
Employee & Child(ren)	\$250.00	\$719.00
Family	\$250.00	\$1,688.00

ACTIVE CARE 2	Employer Contribution	Employee Contribution
Employee Only	\$250.00	\$763.00
Employee & Spouse	\$250.00	\$2,152.00
Employee & Child(ren)	\$250.00	\$1,257.00
Family	\$250.00	\$2,591.00