

SHERMAN ISD

TRS Medical Rates

2026-2027 Plan Year

12 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$400.00	\$214.00
Employee & Spouse	\$400.00	\$1,258.00
Employee & Child(ren)	\$400.00	\$644.00
Family	\$400.00	\$1,688.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$400.00	\$322.00
Employee & Spouse	\$400.00	\$1,478.00
Employee & Child(ren)	\$400.00	\$828.00
Family	\$400.00	\$1,983.00

ACTIVECARE HD	Employer Contribution	Employee Contribution
Employee Only	\$400.00	\$228.00
Employee & Spouse	\$400.00	\$1,296.00
Employee & Child(ren)	\$400.00	\$668.00
Family	\$400.00	\$1,736.00

ACTIVE CARE 2	Employer Contribution	Employee Contribution
Employee Only	\$400.00	\$613.00
Employee & Spouse	\$400.00	\$2,002.00
Employee & Child(ren)	\$400.00	\$1,107.00
Family	\$400.00	\$2,441.00