

Carroll ISD

TRS Medical Rates

2024-2025 Plan Year

12 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$300.00	\$205.00
Employee & Child(ren)	\$300.00	\$559.00
Employee & Spouse	\$300.00	\$1,064.00
Family	\$300.00	\$1,417.00

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$300.00	\$219.00
Employee & Child(ren)	\$300.00	\$583.00
Employee & Spouse	\$300.00	\$1,102.00
Family	\$300.00	\$1,465.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$300.00	\$292.00
Employee & Child(ren)	\$300.00	\$707.00
Employee & Spouse	\$300.00	\$1,240.00
Family	\$300.00	\$1,654.00

ACTIVECARE 2 (ONLY IF PREVIOUSLY ENROLLED)	Employer Contribution	Employee Contribution
Employee Only	\$300.00	\$713.00
Employee & Child(ren)	\$300.00	\$1,207.00
Employee & Spouse	\$300.00	\$2,102.00
Family	\$300.00	\$2,541.00