REGION 9

TRS Medical Rates

2023-2024 Plan Year 12 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$225.00	\$237.00
Employee & Child(ren)	\$225.00	\$561.00
Employee & Spouse	\$225.00	\$1,023.00
Family	\$225.00	\$1,346.00

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$225.00	\$240.00
Employee & Child(ren)	\$225.00	\$566.00
Employee & Spouse	\$225.00	\$1,031.00
Family	\$225.00	\$1,356.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$225.00	\$317.00
Employee & Child(ren)	\$225.00	\$697.00
Employee & Spouse	\$225.00	\$1,185.00
Family	\$225.00	\$1,564.00

BCBSTX WEST TEXAS HMO	Employer Contribution	Employee Contribution
Employee Only	\$225.00	\$640.00
Employee & Child(ren)	\$225.00	\$1,136.42
Employee & Spouse	\$225.00	\$1,878.16
Family	\$225.00	\$2,008.34