

Sherman ISD

TRS Medical Rates

2022-2023 Plan Year

24 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$178.50	\$26.50
Employee & Child(ren)	\$178.50	\$190.50
Employee & Spouse	\$178.50	\$400.00
Family	\$178.50	\$513.50

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$178.50	\$32.50
Employee & Child(ren)	\$178.50	\$200.00
Employee & Spouse	\$178.50	\$415.00
Family	\$178.50	\$531.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$178.50	\$79.00
Employee & Child(ren)	\$178.50	\$236.00
Employee & Spouse	\$178.50	\$451.00
Family	\$178.50	\$613.50

SCOTT & WHITE HMO	Employer Contribution	Employee Contribution
Employee Only	\$178.50	\$93.18
Employee & Child(ren)	\$178.50	\$258.29
Employee & Spouse	\$178.50	\$503.96
Family	\$178.50	\$606.99

Active Care 2 (only if you have been previously enrolled)	Employer Contribution	Employee Contribution
Employee Only	\$178.50	\$328.00
Employee & Child(ren)	\$178.50	\$575.00
Employee & Spouse	\$178.50	\$1,022.50
Family	\$178.50	\$1,242.00