CHAPEL HILL ISD

TRS Medical Rates

2022-2023 Plan Year

24 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$137.50	\$71.00
Employee & Child(ren)	\$137.50	\$238.00
Employee & Spouse	\$137.50	\$450.50
Family	\$137.50	\$565.00

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$137.50	\$77.00
Employee & Child(ren)	\$137.50	\$248.50
Employee & Spouse	\$137.50	\$467.00
Family	\$137.50	\$585.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$137.50	\$125.00
Employee & Child(ren)	\$137.50	\$285.00
Employee & Spouse	\$137.50	\$504.50
Family	\$137.50	\$669.50

SCOTT & WHITE HMO	Employer Contribution	Employee Contribution
Employee Only	\$137.50	\$147.12
Employee & Child(ren)	\$137.50	\$320.33
Employee & Spouse	\$137.50	\$578.04
Family	\$137.50	\$686.12

Active Care 2 (only if you have		
been previously enrolled)	Employer Contribution	Employee Contribution
Employee Only	\$137.50	\$369.00
Employee & Child(ren)	\$137.50	\$616.00
Employee & Spouse	\$137.50	\$1,063.50
Family	\$137.50	\$1,283.00