

2022-23 TRS Rate Sheet for FT Employees

TRS MEDICAL INSURANCE - BCBS					
12 Pay Rates (per pay period) – Professional & Paraprofessional					
Tier	ActiveCare Primary	ActiveCare HD	ActiveCare Primary+	ActiveCare 2 (closed)	Scott & White HMO
Employee Only	\$0	\$12	\$105	\$603	\$133.35
Employee + Spouse	\$747	\$777	\$849	\$1,992	\$954.92
Employee + Children	\$328	\$347	\$419	\$1,097	\$463.57
Employee + Family	\$974	\$1,009	\$1,174	\$2,431	\$1,160.98
24 Pay Rates (per pay period) – Facilities Services & Operations					
Employee Only	\$0	\$6	\$52.50	\$301.5	\$66.68
Employee + Spouse	\$373.5	\$388.50	\$424.50	\$996	\$477.46
Employee + Children	\$164	\$173.50	\$209.50	\$548.50	\$231.79
Employee + Family	\$487	\$504.50	\$587	\$1,215.50	\$580.49
19 Pay Rates (per pay period) – Food Services					
Employee Only	\$0	\$7.58	\$66.32	\$380.84	\$84.22
Employee + Spouse	\$471.79	\$490.74	\$536.21	\$1,258.11	\$603.11
Employee + Children	\$207.16	\$219.16	\$264.63	\$692.84	\$292.78
Employee + Family	\$615.16	\$637.26	\$741.47	\$1,535.37	\$733.25

FSA Maximum Contribution – FFGA		HSA Maximum Contribution – UMB Bank	
Healthcare 2023	\$2,840.00	Individual 2023	\$3,850
Dependent Care 2023	\$5,000.00	Family 2023	\$7,750

VSP Vision – New Provider			
<p>\$175 frame allowance and \$175 contact lens allowance. Exams/Frames/Lenses/Contacts: \$10 copay each. Frequency: once every 12 months. (Based on date of service). Standard progressive lenses are covered in full, after materials copay.</p>			
Tier	12 Pay	24 Pay	19 Pay
Employee Only	\$10.24	\$5.12	\$6.47
Employee + Spouse	\$18.75	\$9.38	\$11.84
Employee + Children	\$19.74	\$9.87	\$12.47
Employee + Family	\$28.61	\$14.31	\$18.07
Ameritas Dental PPO – New Provider			
Tier	12 Pay	24 Pay	19 Pay
Employee Only – employer sponsored dental	\$0	\$0	\$0
Employee + 1	\$41.48	\$20.74	\$26.20
Employee + Family	\$89.17	\$44.59	\$56.32