

REGION 11

TRS Medical Rates

2022-2023 Plan Year

12 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$250.00	\$167.00
Employee & Child(ren)	\$250.00	\$501.00
Employee & Spouse	\$250.00	\$926.00
Family	\$250.00	\$1,155.00

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$250.00	\$179.00
Employee & Child(ren)	\$250.00	\$522.00
Employee & Spouse	\$250.00	\$959.00
Family	\$250.00	\$1,195.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$250.00	\$275.00
Employee & Child(ren)	\$250.00	\$595.00
Employee & Spouse	\$250.00	\$1,034.00
Family	\$250.00	\$1,364.00

ACTIVECARE 2 (ONLY IF PREVIOUSLY ENROLLED)	Employer Contribution	Employee Contribution
Employee Only	\$250.00	\$763.00
Employee & Child(ren)	\$250.00	\$2,152.00
Employee & Spouse	\$250.00	\$1,257.00
Family	\$250.00	\$2,591.00

SCOTT & WHITE HMO	Employer Contribution	Employee Contribution
Employee Only	\$250.00	\$319.24
Employee & Child(ren)	\$250.00	\$665.65
Employee & Spouse	\$250.00	\$1,181.08
Family	\$250.00	\$1,397.24