

BOWIE ISD

TRS Medical Rates

2023-2024 Plan Year

12 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$300.00	\$162.00
Employee & Child(ren)	\$300.00	\$486.00
Employee & Spouse	\$300.00	\$948.00
Family	\$300.00	\$1,271.00

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$300.00	\$165.00
Employee & Child(ren)	\$300.00	\$491.00
Employee & Spouse	\$300.00	\$956.00
Family	\$300.00	\$1,281.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$300.00	\$242.00
Employee & Child(ren)	\$300.00	\$622.00
Employee & Spouse	\$300.00	\$1,110.00
Family	\$300.00	\$1,489.00

WEST TEXAS HMO	Employer Contribution	Employee Contribution
Employee Only	\$300.00	\$565.00
Employee & Child(ren)	\$300.00	\$1,061.42
Employee & Spouse	\$300.00	\$1,803.16
Family	\$300.00	\$1,933.34