

CYPRESS-FAIRBANKS 2023-2024 MEDICAL RATES

TRS-ACTIVECARE PLANS*					
MONTHLY PREMIUMS	Primary	HD	Primary +	ActiveCare 2**	Scott & White HMO
Employee Contribution	FULL-TIME EMPLOYEE RATES (MINIMUM 35 HOURS PER WEEK)				
Employee Only	\$207.00	\$219.00	\$276.00	\$775.00	\$328.46
Employee & Child(ren)	\$446.00	\$466.00	\$562.00	\$1,197.00	\$664.98
Employee & Spouse	\$731.00	\$763.00	\$870.00	\$1,941.00	\$954.74
Employee & Family	\$989.00	\$1,030.00	\$1,187.00	\$2,347.00	\$1,154.72
Employee Contribution	PART-TIME EMPLOYEE RATES (15-34 HOURS PER WEEK)				
Employee Only	\$207.00	\$219.00	\$276.00	\$775.00	\$328.46
Employee & Child(ren)	\$509.00	\$529.00	\$625.00	\$1,260.00	\$664.98
Employee & Spouse	\$794.00	\$826.00	\$933.00	\$2,004.00	\$1,047.74
Employee & Family	\$1,092.00	\$1,133.00	\$1,290.00	\$2,450.00	\$1,224.72
Employee Contribution	SUBSTITUTE, TEMP, PART-TIME RATES (10+ HOURS PER WEEK)				
Employee Only	\$432.00	\$444.00	\$507.00	\$1,013.00	\$553.46
Employee & Child(ren)	\$735.00	\$755.00	\$862.00	\$1,507.00	\$889.98
Employee & Spouse	\$1,167.00	\$1,199.00	\$1,319.00	\$2,402.00	\$1,390.74
Employee & Family	\$1,469.00	\$1,510.00	\$1,674.00	\$2,841.00	\$1,600.72

**For pooling and split employee rates see insurance department website*

***PLAN CLOSED. ONLY FOR CURRENT ENROLLEES.*

For more information, please refer to the TRS-ActiveCare website.

<https://www.trs.texas.gov/Pages/healthcare-trsactivecare-2023-24-plans.aspx>