GRAPE CREEK ISD rg 15

TRS Medical Rates 2023-2024 Plan Year

	Employer	
ACTIVECARE HD	Contribution	Employee Contribution
Employee Only	\$417.00	\$17.00
Employee & Spouse	\$417.00	\$755.00
Employee & Child(ren)	\$417.00	\$321.00
Family	\$400.00	\$1059.00

ACTIVECARE Primary	Employer Contribution	Employee Contribution
Employee Only	\$417.00	\$3.00
Employee & Spouse	\$417.00	\$717.00
Employee & Child(ren)	\$417.00	\$297.00
Family	\$417.00	\$1,011.00

	Employer	
ACTIVECARE Primary Plus	Contribution	Employee Contribution
Employee Only	\$417.00	\$76.00
Employee & Spouse	\$417.00	\$865.00
Employee & Child(ren)	\$417.00	\$422.00
Family	\$417.00	\$1,210.00

	Employer	
ACTIVECARE 2	Contribution	Employee Contribution
Employee Only	\$417.00	\$596.00
Employee & Spouse	\$417.00	\$1,985.00
Employee & Child(ren)	\$417.00	\$1,090.00
Family	\$417.00	\$2,424.00

	Employer	
West Texas HMO (West TX)	Contribution	Employee Contribution
Employee Only	\$417.00	\$488.00
Employee & Spouse	\$417.00	\$1,686.16
Employee & Child(ren)	\$417.00	\$944.42
Family	\$417.00	\$1,816.34