## **Pilot Point ISD**

## **TRS Medical Rates**

2023-2024 Plan Year

12 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$310.00	\$151.00
Employee & Child(ren)	\$310.00	\$474.00
Employee & Spouse	\$310.00	\$935.00
Family	\$310.00	\$1,258.00

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$310.00	\$165.00
Employee & Child(ren)	\$310.00	\$498.00
Employee & Spouse	\$310.00	\$973.00
Family	\$310.00	\$1,305.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$310.00	\$231.00
Employee & Child(ren)	\$310.00	\$610.00
Employee & Spouse	\$310.00	\$1,097.00
Family	\$310.00	\$1,476.00

ACTIVECARE 2 (ONLY IF PREVIOUSLY ENROLLED)	Employer Contribution	Employee Contribution
Employee Only	\$310.00	\$703.00
Employee & Child(ren)	\$310.00	\$1,197.00
Employee & Spouse	\$310.00	\$2,092.00
Family	\$310.00	\$2,531.00

SCOTT & WHITE HMO	Employer Contribution	Employee Contribution
Employee Only	\$310.00	\$286.96
Employee & Child(ren)	\$310.00	\$650.68
Employee & Spouse	\$310.00	\$1,191.90
Family	\$310.00	\$1,418.86