

ROCKWALL ISD

TRS Medical Rates

2023-2024 Plan Year

12 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$361.00	\$89.00
Employee & Child(ren)	\$361.00	\$404.00
Employee & Spouse	\$361.00	\$854.00
Family	\$361.00	\$1,169.00

ACTIVECARE HD	Employer Contribution	Employee Contribution
Employee Only	\$361.00	\$101.00
Employee & Child(ren)	\$361.00	\$425.00
Employee & Spouse	\$361.00	\$887.00
Family	\$361.00	\$1,210.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$361.00	\$168.00
Employee & Child(ren)	\$361.00	\$539.00
Employee & Spouse	\$361.00	\$1,015.00
Family	\$361.00	\$1,385.00

SCOTT & WHITE HMO	Employer Contribution	Employee Contribution
Employee Only	\$361.00	\$208.76
Employee & Child(ren)	\$361.00	\$555.49
Employee & Spouse	\$361.00	\$1,071.42
Family	\$361.00	\$1,287.78