

DESOTO ISD

TRS Medical Rates

2021-2022 Plan Year

18 Pay

ACTIVECARE PRIMARY	Employer Contribution Monthly	Employee Contribution
Employee Only	\$351.00	\$44.00
Employee & Child(ren)	\$351.00	\$266.67
Employee & Spouse	\$351.00	\$550.00
Family	\$351.00	\$702.67

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$351.00	\$52.00
Employee & Child(ren)	\$351.00	\$280.67
Employee & Spouse	\$351.00	\$572.00
Family	\$351.00	\$729.33

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$351.00	\$127.33
Employee & Child(ren)	\$351.00	\$352.00
Employee & Spouse	\$351.00	\$655.33
Family	\$351.00	\$882.67

SCOTT & WHITE HMO	Employer Contribution	Employee Contribution
Employee Only	\$351.00	\$127.65
Employee & Child(ren)	\$351.00	\$347.44
Employee & Spouse	\$351.00	\$674.47
Family	\$351.00	\$811.61