

DESOTO ISD

TRS Medical Rates

2021-2022 Plan Year

24 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$351.00	\$33.00
Employee & Child(ren)	\$351.00	\$200.00
Employee & Spouse	\$351.00	\$412.50
Family	\$351.00	\$527.00

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$351.00	\$39.00
Employee & Child(ren)	\$351.00	\$210.50
Employee & Spouse	\$351.00	\$429.00
Family	\$351.00	\$547.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$351.00	\$95.50
Employee & Child(ren)	\$351.00	\$264.00
Employee & Spouse	\$351.00	\$491.50
Family	\$351.00	\$662.00

SCOTT & WHITE HMO	Employer Contribution	Employee Contribution
Employee Only	\$351.00	\$94.74
Employee & Child(ren)	\$351.00	\$260.58
Employee & Spouse	\$351.00	\$505.85
Family	\$351.00	\$608.71