

DESOTO ISD

TRS Medical Rates

2022-2023 Plan Year

24 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$410.00	\$0.00
Employee & Child(ren)	\$410.00	\$164.00
Employee & Spouse	\$410.00	\$373.50
Family	\$410.00	\$487.00

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$410.00	\$6.00
Employee & Child(ren)	\$410.00	\$173.50
Employee & Spouse	\$410.00	\$388.50
Family	\$410.00	\$504.50

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$410.00	\$52.50
Employee & Child(ren)	\$410.00	\$209.50
Employee & Spouse	\$410.00	\$424.50
Family	\$410.00	\$587.00

SCOTT & WHITE HMO	Employer Contribution	Employee Contribution
Employee Only	\$410.00	\$66.67
Employee & Child(ren)	\$410.00	\$231.78
Employee & Spouse	\$410.00	\$477.46
Family	\$410.00	\$580.49