

DESOTO ISD

TRS Medical Rates

2023-2024 Plan Year

12 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$410.00	\$40.00
Employee & Child(ren)	\$410.00	\$355.00
Employee & Spouse	\$410.00	\$805.00
Family	\$410.00	\$1,120.00

ACTIVECARE HD	Employer Contribution	Employee Contribution
Employee Only	\$410.00	\$52.00
Employee & Child(ren)	\$410.00	\$376.00
Employee & Spouse	\$410.00	\$838.00
Family	\$410.00	\$1,161.00

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$410.00	\$119.00
Employee & Child(ren)	\$410.00	\$490.00
Employee & Spouse	\$410.00	\$966.00
Family	\$410.00	\$1,336.00

SCOTT & WHITE HMO	Employer Contribution	Employee Contribution
Employee Only	\$410.00	\$159.76
Employee & Child(ren)	\$410.00	\$506.49
Employee & Spouse	\$410.00	\$1,022.42
Family	\$410.00	\$1,238.78