

Desoto ISD

TRS Medical Rates

2023-2024 Plan Year

24 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$205.00	\$20.00
Employee & Child(ren)	\$205.00	\$177.50
Employee & Spouse	\$205.00	\$402.50
Family	\$205.00	\$560.00

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$205.00	\$26.00
Employee & Child(ren)	\$205.00	\$188.00
Employee & Spouse	\$205.00	\$419.00
Family	\$205.00	\$580.50

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$205.00	\$59.50
Employee & Child(ren)	\$205.00	\$245.00
Employee & Spouse	\$205.00	\$483.00
Family	\$205.00	\$668.00

SCOTT & WHITE HMO	Employer Contribution	Employee Contribution
Employee Only	\$205.00	\$79.88
Employee & Child(ren)	\$205.00	\$253.25
Employee & Spouse	\$205.00	\$511.21
Family	\$205.00	\$619.39