

ROYSE CITY

TRS Medical Rates

2023-2024 Plan Year

24 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$127.00	\$98.00
Employee & Child(ren)	\$127.00	\$255.50
Employee & Spouse	\$127.00	\$480.50
Family	\$127.00	\$638.00

ACTIVECARE 1HD	Employer Contribution	Employee Contribution
Employee Only	\$127.00	\$104.00
Employee & Child(ren)	\$127.00	\$266.00
Employee & Spouse	\$127.00	\$497.00
Family	\$127.00	\$658.50

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$127.00	\$137.50
Employee & Child(ren)	\$127.00	\$323.00
Employee & Spouse	\$127.00	\$561.00
Family	\$127.00	\$746.00

SCOTT & WHITE HMO	Employer Contribution	Employee Contribution
Employee Only	\$127.00	\$157.88
Employee & Child(ren)	\$127.00	\$331.25
Employee & Spouse	\$127.00	\$598.21
Family	\$127.00	\$697.39