Sherman ISD

TRS Medical Rates

2024-2025 Plan Year 24 Pay

ACTIVECARE PRIMARY	Employer Contribution	Employee Contribution
Employee Only	\$200.00	\$50.50
Employee & Child(ren)	\$200.00	\$226.00
Employee & Spouse	\$200.00	\$476.50
Family	\$200.00	\$652.00

ACTIVECARE HD	Employer Contribution	Employee Contribution
Employee Only	\$200.00	\$56.50
Employee & Child(ren)	\$200.00	\$236.50
Employee & Spouse	\$200.00	\$493.00
Family	\$200.00	\$672.50

ACTIVECARE PRIMARY PLUS	Employer Contribution	Employee Contribution
Employee Only	\$200.00	\$94.00
Employee & Child(ren)	\$200.00	\$300.00
Employee & Spouse	\$200.00	\$564.50
Family	\$200.00	\$770.50

ACTIVE CARE 2	Employer Contribution	Employee Contribution
Employee Only	\$200.00	\$306.50
Employee & Child(ren)	\$200.00	\$553.50
Employee & Spouse	\$200.00	\$1,001.00
Family	\$200.00	\$1,220.50