

ECTOR COUNTY ISD
Medical Contribution Rate Sheet
Effective January 1, 2025

Option I

	<u>Employee Pays</u>	<u>District Pays</u>	<u>Total Rate Paid</u>
Employee Only:	150.00	380.00	530.00
Employee & Spouse:	705.00	380.00	1085.00
Employee & Child:	453.00	380.00	833.00
Employee & Children:	526.00	380.00	906.00
Employee, Spouse & Child(ren):	942.00	380.00	1322.00

Option II

	<u>Employee Pays</u>	<u>District Pays</u>	<u>Total Rate Paid</u>
Employee Only:	60.00	380.00	440.00
Employee & Spouse:	540.00	380.00	920.00
Employee & Child:	333.00	380.00	713.00
Employee & Children:	385.00	380.00	765.00
Employee, Spouse & Child(ren):	738.00	380.00	1118.00

Option III HSA*

	<u>Employee Pays</u>	<u>District Pays</u>	<u>Total Rate Paid</u>
Employee Only:	0.00	380.00	380.00
Employee & Spouse:	495.00	380.00	875.00
Employee & Child:	300.00	380.00	680.00
Employee & Children:	345.00	380.00	720.00
Employee, Spouse & Child(ren)	700.00	380.00	1080.00

In-Hospital Indemnity

	<u>Employee Pays</u>	<u>District Pays</u>	<u>Total Rate Paid</u>
Employee Only	0.00	380.00	380.00

*Staff contribution only