

Healthcare Plan Rate Sheet

Employees scheduled to work at least 10 but less than 20 hours per week

September 1, 2020 to August 31, 2021

	Total	EPISD Contribution	Prorated Monthly Rate	Semi-Monthly Sept 15-June 15
EPISD CDHP				
Employee Only	\$305.00	\$265.00	\$50.53	\$25.26
Employee & Spouse	\$859.00	\$265.00	\$750.32	\$375.16
Employee & Child(ren)	\$582.00	\$265.00	\$400.42	\$200.21
Employee & Family	\$1,140.00	\$265.00	\$1,105.26	\$552.63
*TRS ActiveCare Primary				
Employee Only	\$386.00	\$265.00	\$150.84	\$76.42
Employee & Spouse	\$1,089.00	\$265.00	\$1,040.84	\$520.42
Employee & Child(ren)	\$695.00	\$265.00	\$543.16	\$271.58
Employee & Family	\$1,301.00	\$265.00	\$1,308.63	\$654.32
TRS ActiveCare HD				
Employee Only	\$397.00	\$265.00	\$166.74	\$83.37
Employee & Spouse	\$1,120.00	\$265.00	\$1,080.00	\$540.00
Employee & Child(ren)	\$715.00	\$265.00	\$568.42	\$284.21
Employee & Family	\$1,338.00	\$265.00	\$1,355.37	\$677.68
EPISD Traditional PPO				
Employee Only	\$486.00	\$265.00	\$279.16	\$139.58
Employee & Spouse	\$1,194.00	\$265.00	\$1,173.47	\$586.74
Employee & Child(ren)	\$788.00	\$265.00	\$660.63	\$330.32
Employee & Family	\$1,501.00	\$265.00	\$1,561.26	\$780.63
*TRS ActiveCare Primary+				
Employee Only	\$514.00	\$265.00	\$314.53	\$157.26
Employee & Spouse	\$1,264.00	\$265.00	\$1,261.89	\$630.95
Employee & Child(ren)	\$834.00	\$265.00	\$715.74	\$359.37
Employee & Family	\$1,588.00	\$265.00	\$1,671.16	\$835.58
TRS ActiveCare 2				
Employee Only	\$937.00	\$265.00	\$848.84	\$424.42
Employee & Spouse	\$2,222.00	\$265.00	\$2,472.00	\$1,236.00
Employee & Child(ren)	\$1,393.00	\$265.00	\$1,424.84	\$712.42
Employee & Family	\$2,627.00	\$265.00	\$2,983.58	\$1,491.79

***If you enroll for the EPISD CDHP Plan and Select an HSA EPISD will contribute up to \$500 to your HSA: \$250 on September 15th and then \$250.00 on March 15th.**

*Statewide Network only and Primary Care Provider Required