

HEALTH INSURANCE PREMIUMS

2021-2022

	TOTAL MONTHLY PREMIUM	MONTHLY SPEARMAN ISD CONTRIBUTION	MONTHLY STATE CONTRIBUTION	MONTHLY EMPLOYEE CONTRIBUTION	PREMIUM INCREASE/DECREASE 2021-2022
ActiveCare Primary					
Employee Only	\$ 417.00	\$ 310.00	\$ 75.00	\$ 32.00	\$ (10.00)
Employee & Spouse	\$1,176.00	\$ 310.00	\$ 75.00	\$ 791.00	\$ 46.00
Employee & Child(ren)	\$ 751.00	\$ 310.00	\$ 75.00	\$ 366.00	\$ 15.00
Employee & Family	\$1,405.00	\$ 310.00	\$ 75.00	\$ 1,020.00	\$ 63.00
ActiveCare HD					
Employee Only	\$ 429.00	\$ 310.00	\$ 75.00	\$ 44.00	\$ (9.00)
Employee & Spouse	\$1,209.00	\$ 310.00	\$ 75.00	\$ 824.00	\$ 48.00
Employee & Child(ren)	\$ 772.00	\$ 310.00	\$ 75.00	\$ 387.00	\$ 16.00
Employee & Family	\$1,445.00	\$ 310.00	\$ 75.00	\$ 1,060.00	\$ 66.00
ActiveCare Primary +					
Employee Only	\$ 542.00	\$ 310.00	\$ 75.00	\$ 157.00	\$ (13.00)
Employee & Spouse	\$1,334.00	\$ 310.00	\$ 75.00	\$ 949.00	\$ 29.00
Employee & Child(ren)	\$ 879.00	\$ 310.00	\$ 75.00	\$ 494.00	\$ 4.00
Employee & Family	\$1,675.00	\$ 310.00	\$ 75.00	\$ 1,290.00	\$ 46.00
ActiveCare 2					
Closed to new enrollees					
Employee Only	\$1,013.00	\$ 310.00	\$ 75.00	\$ 628.00	\$ 35.00
Employee & Spouse	\$2,402.00	\$ 310.00	\$ 75.00	\$ 2,017.00	\$ 139.00
Employee & Child(ren)	\$1,507.00	\$ 310.00	\$ 75.00	\$ 1,122.00	\$ 73.00
Employee & Family	\$2,841.00	\$ 310.00	\$ 75.00	\$ 2,456.00	\$ 173.00
West Texas Blue Essentials					
HMO Rates					
Employee Only	\$ 596.54	\$ 310.00	\$ 75.00	\$ 211.54	\$ 21.12
Employee & Spouse	\$1,443.66	\$ 310.00	\$ 75.00	\$ 1,058.66	\$ 115.08
Employee & Child(ren)	\$ 936.18	\$ 310.00	\$ 75.00	\$ 551.18	\$ 59.50
Employee & Family	\$1,532.74	\$ 310.00	\$ 75.00	\$ 1,147.74	\$ 121.62