

2019-2020 Monthly Medical Plan Premiums

Updated June 25, 2019

Plan	Total Premium	District Contribution	Employee Rate	Change from 2018-2019
ActiveCare 1-HD				
Employee Only	\$378.00	\$300.00	\$78.00	-\$14.00
Employee & Spouse	\$1,066.00	\$300.00	\$766.00	\$6.00
Employee & Children	\$722.00	\$300.00	\$422.00	-\$4.00
Employee & Family	\$1,415.00	\$300.00	\$1,115.00	\$16.00
ActiveCare Select EPO				
Employee Only	\$556.00	\$300.00	\$256.00	-\$9.00
Employee & Spouse	\$1,367.00	\$300.00	\$1,067.00	\$15.00
Employee & Children	\$902.00	\$300.00	\$602.00	\$1.00
Employee & Family	\$1,718.00	\$300.00	\$1,418.00	\$25.00
ActiveCare 2				
Employee Only	\$852.00	\$300.00	\$552.00	\$45.00
Employee & Spouse	\$2,020.00	\$300.00	\$1,720.00	\$140.00
Employee & Children	\$1,267.00	\$300.00	\$967.00	\$79.00
Employee & Family	\$2,389.00	\$300.00	\$2,089.00	\$170.00
Scott & White HMO				
Employee Only	\$558.54	\$300.00	\$258.54	-\$44.82
Employee & Spouse	\$1,306.58	\$300.00	\$1,006.58	-\$71.82
Employee & Children	\$876.76	\$300.00	\$576.76	-\$56.30
Employee & Family	\$1,457.28	\$300.00	\$1,157.28	-\$77.28