New Braunfels Independent School District
Health Insurance Rates
2022-2023
TRANSPORTATION

Plan Name	2022-2023 Rates	District Contribution	Employee Cost	9 MONTH Employee Per pay check
ActiveCare Primary				
Employee Only	346.00	331.53	14.47	**9.65**
Employee/Spouse	976.00	331.53	644.47	**429.65**
Employee/Children	622.00	331.53	290.47	**193.65**
Employee/Family	1168.00	331.53	836.47	**557.65**
ActiveCare HD				
Employee Only	357.00	331.53	25.47	**16.98**
Employee/Spouse	1005.00	331.53	673.47	**448.98**
Employee/Children	641.00	331.53	309.47	**206.31**
Employee/Family	1202.00	331.53	870.47	**580.31**
ActiveCare Primary +				
Employee Only	434.00	331.53	102.47	**68.31**
Employee/Spouse	1062.00	331.53	730.47	**486.98**
Employee/Children	699.00	331.53	367.47	**244.98**
Employee/Family	1336.00	331.53	1004.47	**669.65**
Active Care 2 * **				
Employee Only	1013.00	331.53	681.47	**454.31**
Employee/Spouse	2402.00	331.53	2070.47	**1380.31**
Employee/Children	1507.00	331.53	1175.47	**783.65**
Employee/Family	2841.00	331.53	2509.47	**1672.98**
Optional Dental (Base Plan)				
Employee Only	19.76	0.00	19.76	**13.17**
Employee/Spouse	45.57	0.00	45.57	**30.38**
Employee/Children	50.11	0.00	50.11	**33.41**
Employee/Family	69.80	0.00	69.80	**46.53**
Optional Dental (Plus Plan)				
Employee Only	37.46	0.00	37.46	**24.97**
Employee/Spouse	70.64	0.00	70.64	**47.09**
Employee/Children	94.48	0.00	94.48	**62.99**
Employee/Family	127.66	0.00	127.66	**85.11**

*** ActiveCare 2 is not offered to new employees. The premiums shown are for current employees *only*.