

Alamo Heights ISD Medical Rates

Effective 9/1/2022– 8/31/2023



The rates below are not inclusive of your district's medical contribution. Please visit your benefit website for more information regarding your district's medical contribution amounts.

TSHBP HIGH DEDUCTIBLE PLAN (HD)

EMPLOYEE ONLY - \$371.00
EMPLOYEE + CHILDREN - \$694.00
EMPLOYEE + SPOUSE - \$1,015.00
EMPLOYEE + FAMILY - \$1,330.00

AETNA HIGH DEDUCTIBLE PLAN (HD)

EMPLOYEE ONLY - \$411.00
EMPLOYEE + CHILDREN - \$739.00
EMPLOYEE + SPOUSE - \$1,158.00
EMPLOYEE + FAMILY - \$1,384.00

TSHBP COPAY PLAN

EMPLOYEE ONLY - \$413.00
EMPLOYEE + CHILDREN - \$785.00
EMPLOYEE + SPOUSE - \$1,155.00
EMPLOYEE + FAMILY - \$1,525.00

AETNA SIGNATURE PLAN

EMPLOYEE ONLY - \$457.00
EMPLOYEE + CHILDREN - \$776.00
EMPLOYEE + SPOUSE - \$1,196.00
EMPLOYEE + FAMILY - \$1,468.00

Individual Deductible & Maximum Out of Pocket for 2022 - 2023

In-Network Services

Cost for Individual Deductible

Cost for Individual Max OOP

