United Independent School District Self Funded Health Insurance Plan

September 1, 2025 - August 31, 2026

RENEWAL BCBSTX

Renewal	Indemnity		
	Current	Renewal	Contract Total
rojected Enrollment	4,771	4,684	
ngle		3,140	
amily		1,544	
dministration Fee**	\$48.92	\$50.15	\$2,818,831
rescription Drug Rebate Credit ****	(\$102.43)	(\$116.93)	(\$6,572,402)
edical Rebate Credit	(\$2.61)	(\$2.61)	(\$146,703)
Disite Wellness Coordinator	\$2.35	\$2.42	\$136,023
Total Fee PEPM	(\$53.77)	(\$66.97)	(\$3,764,251)
	\$33.19	\$40.79	\$2,292,725
dividual Stop Loss \$525,000 Deductible	\$4,500	\$4,500	\$4,500
ggregate Stop Loss 125% Attachment Factor Total Fixed Costs PEPM	(\$20.50)	(\$26.10)	(\$1,467,026)

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