

2020-2021 TRS ACTIVECARE HEALTH INSURANCE RATES

TRS ActiveCare HD	Empl Only	Empl & Sps	Empl & Chld	Empl & Fam
Plan Rate	397.00	1,120.00	715.00	1,338.00
District Contribution	225.00	225.00	225.00	225.00
Employee Cost	172.00	895.00	490.00	1,113.00

TRS ActiveCare Primary	Empl Only	Empl & Sps	Empl & Chld	Empl & Fam
Plan Rate	386.00	1,089.00	695.00	1,301.00
District Contribution	225.00	225.00	225.00	225.00
Employee Cost	161.00	864.00	470.00	1,076.00

TRS ActiveCare Primary +	Empl Only	Empl & Sps	Empl & Chld	Empl & Fam
Plan Rate	514.00	1,264.00	834.00	1,588.00
District Contribution	225.00	225.00	225.00	225.00
Employee Cost	289.00	1,039.00	609.00	1,363.00

Blue Essentials HMO	Empl Only	Empl & Sps	Empl & Chld	Empl & Fam
Plan Rate	534.42	1,287.58	835.68	1,370.12
District Contribution	225.00	225.00	225.00	225.00
Employee Cost	309.42	1,062.58	610.68	1,145.12

2020-2021 TSHBP HEALTH INSURANCE RATES

High Deductible Plan (HDHP)	Empl Only	Empl & Sps	Empl & Chld	Empl & Fam
Plan Rate	346.00	980.00	659.00	1,274.00
District Contribution	225.00	225.00	225.00	225.00
Employee Cost	121.00	755.00	434.00	1,049.00

Copay Plan (CPP)	Empl Only	Empl & Sps	Empl & Chld	Empl & Fam
Plan Rate	389.00	1,098.00	750.00	1,447.00
District Contribution	225.00	225.00	225.00	225.00
Employee Cost	164.00	873.00	525.00	1,222.00