

TRS-ACTIVE CARE/FULL TIME

2020-2021

TOTAL MONTHLY COST BASED ON MISD/STATE CONTRIBUTION OF \$75

\$386 increase of \$8 per month per employee

ACTIVECARE-PRIMARY* NEW

	Maximum	increase
Total	Employee	over 19-20
Cost	Cost***	
\$386	\$0	*new
\$1,089	\$703	*new
\$695	\$309	*new
\$1,301	\$915	*new

*State Contribution \$75
*MISD Contribution \$311

Employee Only
Employee and Spouse
Employee and Child(ren)
Employee and Family

ACTIVECARE-HD

	Maximum	increase
Total	Employee	over 19-20
Cost	Cost***	
\$397	\$11	\$11
\$1,120	\$734	\$46
\$715	\$329	(\$15)
\$1,338	\$952	(\$85)

*State Contribution \$75
*MISD Contribution \$311

Employee Only
Employee and Spouse
Employee and Child(ren)
Employee and Family

ACTIVECARE PRIMARY+ (Select)

Total	Maximum	increase
Cost	Employee	over 19-20
Cost	Cost***	
\$514	\$128	(\$50)
\$1,264	\$878	(\$111)
\$834	\$448	(\$76)
\$1,588	\$1,202	(\$138)

*State Contribution \$75
*MISD Contribution \$311

Employee Only
Employee and Spouse
Employee and Child(ren)
Employee and Family

ACTIVECARE 2 (closed to new enrollees)

Total	Maximum	increase
Cost	Employee	over 19-20
Cost	Cost***	
\$937	\$551	\$77
\$2,222	\$1,836	\$194
\$1,393	\$1,007	\$118
\$2,627	\$2,241	\$230

*State Contribution \$75
*MISD Contribution \$311

Employee Only
Employee and Spouse
Employee and Child(ren)
Employee and Family

2020-21 TRS-ActiveCare Plan Highlights Sept. 1, 2020 – Aug. 31, 2021



What's New

- Primary plan with a **lower premium and copays**
- Primary+ (formerly Select) **decreased premiums by up to 8%**
- **Broader networks** of health care providers
- **Lower premiums** for families with children

Leverage Your \$0 Preventive Care*

- Annual routine physicals (ages 12+)
- Annual mammogram (ages 40+)
- Annual OBGYN exam & pap smear (ages 18+)
- Annual prostate cancer screening (ages 45+)
- Well-child care (unlimited up to age 12)
- Healthy diet/obesity counseling (unlimited to age 22; ages 22+ get twenty-six visits per year)
- Smoking cessation counseling (8 visits per year)
- Breastfeeding support (six per year)
- Colonoscopy (ages 50+ once every ten years)

*Available for all plans. See benefits guides for more details.

Did You Know

- Our provider search tool will be available in June.
- Choosing a PCP helps you meet your health goals faster.
- Generic medications save money! Ask your provider if your medicine has a generic.

All TRS-ActiveCare participants have **three plan options**. Each is designed with the unique needs of our members in mind.

	NEW: TRS-ActiveCare Primary	TRS-ActiveCare HD	TRS-ActiveCare Primary+
Plan summary	<ul style="list-style-type: none"> • Lower premium • Copays for doctor visits before you meet deductible • Statewide network • PCP referrals required to see specialists • Not compatible with health savings account (HSA) • No out-of-network coverage 	<ul style="list-style-type: none"> • Similar to current 1-HD • Lower premium • Compatible with health savings account (HSA) • Nationwide network with out-of-network coverage • No requirement for PCPs or referrals • Must meet deductible before plan pays for non-preventive care 	<ul style="list-style-type: none"> • Simpler version of the current Select plan • Lower deductible than HD and primary plans • Copays for many services and drugs • Higher premium • Statewide network • PCP referrals required to see specialists • Not compatible with a health savings account (HSA) • No out-of-network coverage
If you make no changes during Annual Enrollment, you'll have the following plan...	Only employees that choose this new plan during Annual Enrollment will be enrolled in it.	If you're currently in TRS-ActiveCare 1-HD and you make no change during Annual Enrollment, this will be your plan next year.	If you're currently in TRS-ActiveCare Select and you make no changes during Annual Enrollment, this will be your plan next year.

Total Monthly Premiums			
Employee Only	\$386	\$397	\$514
Employee and Spouse	\$1,089	\$1,120	\$1,264
Employee and Children	\$695	\$715	\$834
Employee and Family	\$1,301	\$1,338	\$1,588

Plan Features	In-Network Coverage Only		In-Network		Out-of-Network		In-Network Coverage Only	
	Individual/Family Deductible	\$2,500/\$5,000	\$2,800/\$5,600	\$5,500/\$11,000	\$1,200/\$3,600			
Coinsurance	You pay 30% after deductible	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible				
Individual/Family Maximum Out-of-Pocket	\$8,150/\$16,300	\$6,900/\$13,800	\$20,250/\$40,500	\$6,900/\$13,800				
Network	Statewide Network	Nationwide Network		Statewide Network				
Primary Care Provider (PCP) Required	Yes	No		Yes				

Doctor Visits				
Primary Care	\$30 copay	You pay 20% after deductible	You pay 40% after deductible	\$30 copay
Specialist	\$70 copay	You pay 20% after deductible	You pay 40% after deductible	\$70 copay
TRS Virtual Health	\$0 per consultation	\$30 per consultation		\$0 per consultation

Immediate Care				
Urgent Care	\$50 copay	You pay 20% after deductible	You pay 40% after deductible	\$50 copay
Emergency Care	You pay 30% after deductible	You pay 20% after deductible		You pay 20% after deductible
TRS Virtual Health	\$0 per consultation	\$30 per consultation		\$0 per consultation

Prescription Drugs				
Drug Deductible	Integrated with medical	Integrated with medical	\$200 brand deductible	\$200 brand deductible
Generics (30-Day Supply / 90-Day Supply)	\$15/\$45 copay	You pay 20% after deductible	\$15/\$45 copay	\$20/\$45 copay
Preferred Brand	You pay 30% after deductible	You pay 25% after deductible	You pay 25% after deductible	You pay 25% after deductible
Non-preferred Brand	You pay 50% after deductible	You pay 50% after deductible	You pay 50% after deductible	You pay 50% after deductible
Specialty	You pay 30% after deductible	You pay 20% after deductible	You pay 20% after deductible	You pay 20% after deductible

This plan is closed and not accepting new enrollees. If you're currently enrolled in TRS-ActiveCare 2, you can remain in this plan.

TRS-ActiveCare 2	
<ul style="list-style-type: none"> • Closed to new enrollees • Current enrollees can choose to stay in plan • Lower deductible • Copays for many drugs and services • Nationwide network with out-of-network coverage • No requirement for PCPs or referrals 	
If you're currently in TRS-ActiveCare 2, and you make no changes during Annual Enrollment, you will remain in TRS-ActiveCare 2 next year.	

\$937
\$2,222
\$1,393
\$2,627

In-Network	Out-of-Network
\$1,000/\$3,000	\$2,000/\$6,000
You pay 20% after deductible	You pay 40% after deductible
\$7,900/\$15,800	\$23,700/\$47,400
Nationwide Network	
No	

\$30 copay	You pay 40% after deductible
\$70 copay	You pay 40% after deductible
\$0 per consultation	

\$50 copay	You pay 40% after deductible
You pay a \$250 copay plus 20% after deductible	
\$0 per consultation	

\$200 brand deductible
\$20/\$45 copay
You pay 25% after deductible (\$40 min/\$80 max) You pay 25% after deductible (\$105 min/\$210 max)
You pay 50% after deductible (\$100 min/\$200 max) You pay 50% after deductible (\$215 min/\$430 max)
You pay 20% after deductible (\$200 min/\$300 max) No 90-Day Supply of Specialty Medications