

TRS-ActiveCare 2018-19 what's new & what's changing

TRS-ActiveCare Premium Changes

New 2018–19 Premiums

TRS-ActiveCare Monthly Premium	TRS-ActiveCare 1-HD		TRS-ActiveCare Select/ ActiveCare Select Whole Health		TRS-ActiveCare 2	
	Full monthly Premium*	Cost after state/district contribution**	Full monthly Premium*	Cost after state/district contribution**	Full monthly Premium*	Cost after state/district contribution**
Individual	\$367	\$142	\$540	\$315	\$782	\$557
+Spouse	\$1,035	\$810	\$1,327	\$1,102	\$1,855	\$1,630
+Children	\$701	\$476	\$876	\$651	\$1,163	\$938
+Family	\$1,374	\$1,149	\$1,668	\$1,443	\$2,194	\$1,969

Current 2017–18 Premiums

TRS-ActiveCare Monthly Premium	TRS-ActiveCare 1-HD		TRS-ActiveCare Select/ ActiveCare Select Whole Health		TRS-ActiveCare 2	
	Full monthly Premium*	Cost after state/district contribution**	Full monthly Premium*	Cost after state/district contribution**	Full monthly Premium*	Cost after state/district contribution**
Individual	\$351	\$126	\$514	\$289	\$714	\$489
+Spouse	\$991	\$766	\$1,264	\$1,039	\$1,694	\$1,469
+Children	\$671	\$446	\$834	\$609	\$1,062	\$837
+Family	\$1,316	\$1,091	\$1,589	\$1,364	\$2,004	\$1,779

HMO Premium Changes

New 2018–19 Premiums

TRS-ActiveCare Monthly Premium	BCBSTX		FirstCare		Scott and White	
	Full monthly Premium*	Cost after state/district contribution**	Full monthly Premium*	Cost after state/district contribution**	Full monthly Premium*	Cost after state/district contribution**
Individual	\$474.02	\$249.02	\$534.04	\$309.04	\$578.36	\$353.36
+Spouse	\$1,146.83	\$921.83	\$1,348.92	\$1,123.92	\$1,353.40	\$1,128.40
+Children	\$742.19	\$517.19	\$849.76	\$624.76	\$908.06	\$683.06
+Family	\$1,216.42	\$991.42	\$1,385.36	\$1,160.36	\$1,509.56	\$1,284.56

Current 2017–18 Premiums

TRS-ActiveCare Monthly Premium	BCBSTX		FirstCare		Scott and White	
	Full monthly Premium*	Cost after state/district contribution**	Full monthly Premium*	Cost after state/district contribution**	Full monthly Premium*	Cost after state/district contribution**
Individual	\$460.50	\$235.50	\$514.82	\$289.82	\$561.04	\$336.04
+Spouse	\$1,113.72	\$888.72	\$1,287.60	\$1,062.60	\$1,263.08	\$1,038.08
+Children	\$720.86	\$495.86	\$816.07	\$591.07	\$888.42	\$663.42
+Family	\$1,181.28	\$956.28	\$1,298.52	\$1,073.52	\$1,400.98	\$1,175.98

*If you are not eligible for the state/district subsidy, you will pay the full monthly premium. Contact your Benefits Administrator for your monthly premium.

**The cost after state, \$75 and district, \$150 contribution is the maximum you may pay per month. Ask your Benefits Administrator for your monthly cost. (This is the amount you will owe each month after all available subsidies are applied to your premium.)