

TRS/Aetna Split Premiums

Effective September 1, 2016 thru August 31, 2017

TRS-ActiveCare Plan				Split Premium		District Contribution per month	District Cost per Check
	Code	Total TRS Cost	TRS Half Premium	EE Cost per month	Cost per Check		
ActiveCare -1 HD							
Employee and Spouse	01AE/AF	\$914.00	\$457.00	\$146.00	\$73.00	\$311.00	\$155.50
Employee and Family	01AG/AH	\$1,231.00	\$615.50	\$304.50	\$152.25	\$311.00	\$155.50
TRS ActiveCare Select							
Employee and Spouse	01BE/BF	\$1,147.00	\$573.50	\$232.50	\$116.25	\$341.00	\$170.50
Employee and Family	01BG/BH	\$1,361.00	\$680.50	\$339.50	\$169.75	\$341.00	\$170.50
ActiveCare -2							
Employee and Spouse	01CE/CF	\$1,552.00	\$776.00	\$408.00	\$204.00	\$368.00	\$184.00
Employee and Family	01CG/CH	\$1,597.00	\$798.50	\$430.50	\$215.25	\$368.00	\$184.00
Scott and White - HMO							
Employee and Spouse	01EE/EF	\$1,192.82	\$596.41	\$223.41	\$111.71	\$373.00	\$186.50
Employee and Family	01EG/EH	\$1,322.98	\$661.49	\$288.49	\$144.25	\$373.00	\$186.50