

Attention All Coldspring-Oakhurst CISD Employees---

2022-2023 TRS ACTIVECARE HEALTH PLANS

To learn about each health care coverage plan, go to the TRS website.

www.trs.state.tx.us

BlueCross/BlueShield

Monthly Premium Cost
2022-2023 Plan Year
Effective 09/01/22-08/31/23

Cover Category	<u>Active Care HD</u> (Compare to 1-HD)		<u>ActiveCare 2</u> Not Available for New Enrollment		<u>ActiveCare Primary+</u> (Compare to Select)		<u>ActiveCare Primary</u> New Plan	
	Total Cost	Net Cost*	Total Cost	Net Cost*	Total Cost	Net Cost*	Total Cost	Net Cost*
Employee Only	\$415	\$56	\$1013	\$654	\$505	\$146	\$402	\$43
Employee and Spouse	\$1166	\$807	\$2402	\$2043	\$1234	\$875	\$1133	\$774
Employee and Child(ren)	\$744	\$385	\$1507	\$1148	\$812	\$453	\$723	\$364
Employee and Family	\$1394	\$1035 (338.00) Split Prem	\$2841	\$2482 (1061.50) Split Prem	\$1552	\$1193 (417.00) Split Prem	\$1356	\$997 (319.00) Spit Prem

*The district plus state contributes \$359.00 per employee for 2022-2023 Health Insurance.