

POOLING RATES
(BOTH SPOUSES ARE CFISD EMPLOYEES)

CYPRESS- FAIRBANKS ISD Employee Monthly Premium Rates 2026-2027

TRS-ACTIVECARE PLANS

MONTHLY PREMIUMS	TRS ActiveCare Primary	TRS ActiveCare HD	TRS ActiveCare Primary+	TRS ActiveCare 2
EMPLOYEE CONTRIBUTION	FULL-TIME EMPLOYEE RATES (MINIMUM 35 HOURS PER WEEK)			
Employee & Spouse	\$1,087.00	\$1,125.00	\$1,284.00	\$1,941.00
Employee & Family	\$1,455.00	\$1,503.00	\$1,721.00	\$2,347.00
EMPLOYEE CONTRIBUTION	PART-TIME EMPLOYEE RATES (15 - 34 HOURS PER WEEK)			
Employee & Spouse	\$1,087.00	\$1,125.00	\$1,284.00	\$1,941.00
Employee & Family	\$1,455.00	\$1,503.00	\$1,721.00	\$2,347.00