

DEVINE INDEPENDENT SCHOOL DISTRICT
TRS ACTIVECARE INSURANCE PREMIUMS

2018-2019

| PLAN OPTION | TRS ACTIVECARE HD-1 | | | Monthly Increase: |
|---------------------|---------------------|------------|-----------------------------|-------------------|
| | COVERAGE | TOTAL COST | DISTRICT/STATE CONTRIBUTION | |
| EMPLOYEE ONLY | \$ 367.00 | \$ 250.00 | \$ 58.50 | \$ 16.00 |
| EMPLOYEE & SPOUSE | \$ 1,035.00 | \$ 250.00 | \$ 392.50 | \$ 44.00 |
| EMPLOYEE & CHILDREN | \$ 701.00 | \$ 250.00 | \$ 225.50 | \$ 30.00 |
| EMPLOYEE & FAMILY | \$ 1,374.00 | \$ 250.00 | \$ 562.00 | \$ 58.00 |

| PLAN OPTION | TRS ACTIVECARE SELECT | | | Monthly Increase: |
|---------------------|-----------------------|------------|-----------------------------|-------------------|
| | COVERAGE | TOTAL COST | DISTRICT/STATE CONTRIBUTION | |
| EMPLOYEE ONLY | \$ 540.00 | \$ 250.00 | \$ 145.00 | \$ 26.00 |
| EMPLOYEE & SPOUSE | \$ 1,327.00 | \$ 250.00 | \$ 538.50 | \$ 63.00 |
| EMPLOYEE & CHILDREN | \$ 876.00 | \$ 250.00 | \$ 313.00 | \$ 42.00 |
| EMPLOYEE & FAMILY | \$ 1,668.00 | \$ 250.00 | \$ 709.00 | \$ 79.00 |

| PLAN OPTION | TRS ACTIVECARE 2 | | | Monthly Increase: |
|---------------------|------------------|------------|-----------------------------|-------------------|
| | COVERAGE | TOTAL COST | DISTRICT/STATE CONTRIBUTION | |
| EMPLOYEE ONLY | \$ 782.00 | \$ 250.00 | \$ 266.00 | \$ 68.00 |
| EMPLOYEE & SPOUSE | \$ 1,855.00 | \$ 250.00 | \$ 802.50 | \$ 161.00 |
| EMPLOYEE & CHILDREN | \$ 1,163.00 | \$ 250.00 | \$ 456.50 | \$ 101.00 |
| EMPLOYEE & FAMILY | \$ 2,194.00 | \$ 250.00 | \$ 972.00 | \$ 190.00 |