

Self-Insured Plan Changes

Rate Changes:

- 3.0% increase for TRS-ActiveCare 1-HD & TRS-ActiveCare Select
- 8.9% increase for TRS-ActiveCare 2

	FY 2020 Premium	Increase from 2019	Participant Premium*
TRS-ActiveCare-1HD			
Employee Only	\$378	\$11	\$153
Employee & Spouse	\$1,066	\$31	\$841
Employee & Children	\$722	\$21	\$497
Employee & Family	\$1,415	\$41	\$1,190
TRS-ActiveCare Select			
Employee Only	\$556	\$16	\$331
Employee & Spouse	\$1,367	\$40	\$1,142
Employee & Children	\$902	\$26	\$677
Employee & Family	\$1,718	\$50	\$1,493
TRS-ActiveCare-2			
Employee Only	\$852	\$70	\$627
Employee & Spouse	\$2,020	\$165	\$1,795
Employee & Children	\$1,267	\$104	\$1,042
Employee & Family	\$2,389	\$195	\$2,164

*Member premium after minimum state/district contributions. For school districts that contribute more than minimum, participant premiums will be lower.

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Benefit Changes:

- No increase to the deductibles
- Increase in maximum out-of-pocket (MOOP)
- Increase in member cost sharing for name brand drugs and out-of-network inpatient hospital charges
- Tobacco use information collection

	Individual	Family
TRS-ActiveCare-1HD		
In-Network MOOP	\$6,750 (↑\$100)	\$13,500 (↑\$200)
Out-of-Network MOOP	\$20,250 (↑\$6,950)	\$40,500 (↑\$13,900)
Preferred Brand Drugs	25% after Deductible (↑5%)	
Out-of-Network Inpatient Hospital	Member pays the balance of covered charges above \$500 per diem (↑ from 40% coinsurance)	
TRS-ActiveCare Select		
In-Network MOOP	\$7,900 (↑\$550)	\$15,800 (↑\$1,100)
Generic Drugs	↓\$5	
Preferred Brand Drugs	↑ in coinsurance capped at 2 times the current copay	
TRS-ActiveCare-2		
In-Network MOOP	\$7,900 (↑\$550)	\$15,800 (↑\$1,100)
Out-of-Network MOOP	\$23,700 (↑\$9,000)	\$47,400 (↑\$18,000)
Preferred Brand Drugs	↑ coinsurance, capped at twice the current copay	
Non-Preferred Brand Drugs	↑ in coinsurance, up to \$130 per fill	
Out-of-Network Inpatient Hospital	Member pays the balance of covered charges above \$500 per diem (↑ from \$150 copay per day + 40% coinsurance)	

MOOP = Out-of-Pocket Maximum