

TRS-ActiveCare Blue Cross Blue Shield Plan Year (October 2009 - August 2010)

These rates apply to employees paid year-round

Employees choosing to enroll in ActiveCare 1, 2, or 3 will receive a one-time \$500 District contribution into a Flexible Spending Account. A \$3,000 District contribution will be made to a Health Savings Account for those employees enrolling in ActiveCare 1HD. See your Summary of Benefits booklet (distributed in early September) for details.

Blue Cross Blue Shield Member Services: 1-866-355-5999 (8 am - 8 pm)

Informed Healthline-24/7 nurse line 1-800-581-0368

TRS-ActiveCare 09-10 YR

Comparable 08-09 Aetna Plan & Rates

Plan	PER PAYCHECK (24 CHKS)	District Flex/HSA Contribution	PER PAYCHECK (24 CHKS)	PER PAYCHECK (24 CHKS)
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Active Care 1

Employee Only	1.00	500.00
Employee/Spouse	90.00	500.00
Employee/Children	46.50	500.00
Employee/Family	173.50	500.00
Employee/Family(both SBISD)	2.00	1000.00

ActiveCare 1 and 1HD are plans with high deductibles. Both plans are unlike other plans the District has offered in the past. Employees participating in either of these plans should be aware of the deductibles and prepared to be more actively involved in their healthcare costs.

Active Care 1 HD

Employee Only	67.50	3000.00
Employee/Spouse	250.00	3000.00
Employee/Children	125.00	3000.00
Employee/Family	287.50	3000.00
Employee/Family(both SBISD)	135.00	6000.00

ActiveCare 1 and 1HD are plans with high deductibles. Both plans are unlike other plans the District has offered in the past. Employees participating in either of these plans should be aware of the deductibles and prepared to be more actively involved in their healthcare costs.

Active Care 2

Employee Only	2.50	500.00
Employee/Spouse	167.50	500.00
Employee/Children	97.50	500.00
Employee/Family	262.50	500.00
Employee/Family(both SBISD)	113.00	1000.00

HMO Low

PPO Low

16.76	1.00
200.16	91.41
217.76	106.35
417.96	282.24
213.91	38.92

Active Care 3

Employee Only	74.00	500.00
Employee/Spouse	392.00	500.00
Employee/Children	222.00	500.00
Employee/Family	448.50	500.00
Employee/Family(both SBISD)	273.50	1000.00

HMO High

PPO High

143.64	169.54
505.61	519.71
541.60	553.01
928.59	929.59
688.18	707.19

* These are Spring Branch ISD employee rates.

Rates located on the Blue Cross Blue Shield and TRS websites include both the employee and District contribution.

TRS-ActiveCare Blue Cross Blue Shield Plan Year (October 2009 - August 2010)

These rates apply to employees paid over 9 months (bus drivers, cns campus staff, & crossing guards)

Employees choosing to enroll in ActiveCare 1, 2, or 3 will receive a one-time \$500 District contribution into a Flexible Spending Account. A \$3,000 District contribution will be made to a Health Savings Account for those employees enrolling in ActiveCare 1HD. See your Summary of Benefits booklet (distributed in early September) for details.

Blue Cross Blue Shield Member Services: 1-866-355-5999 (8 am - 8 pm)

Informed Healthline-24/7 nurse line 1-800-581-0368

TRS-ActiveCare 09-10 YR

Comparable 08-09 Aetna Plan & Rates

Plan	PER PAYCHECK (18 CHKS)	District Flex/HSA Contribution	PER PAYCHECK (18 CHKS)	PER PAYCHECK (18 CHKS)
<u>Active Care 1</u>				
Employee Only	1.22	500.00	<i>ActiveCare 1 and 1HD are plans with high deductibles. Both plans are unlike other plans the District has offered in the past. Employees participating in either of these plans should be aware of the deductibles and prepared to be more actively involved in their healthcare costs.</i>	
Employee/Spouse	110.00	500.00		
Employee/Children	56.83	500.00		
Employee/Family	212.06	500.00		
Employee/Family(both SBISD)	2.44	1000.00		
<u>Active Care 1 HD</u>				
Employee Only	82.50	3000.00	<i>ActiveCare 1 and 1HD are plans with high deductibles. Both plans are unlike other plans the District has offered in the past. Employees participating in either of these plans should be aware of the deductibles and prepared to be more actively involved in their healthcare costs.</i>	
Employee/Spouse	305.56	3000.00		
Employee/Children	152.78	3000.00		
Employee/Family	351.39	3000.00		
Employee/Family(both SBISD)	165.00	6000.00		
<u>Active Care 2</u>				
			<u>HMO Low</u>	<u>PPO Low</u>
Employee Only	3.06	500.00	22.35	1.33
Employee/Spouse	204.72	500.00	266.88	121.88
Employee/Children	119.17	500.00	290.35	141.80
Employee/Family	320.83	500.00	557.28	376.32
Employee/Family(both SBISD)	138.11	1000.00	285.21	51.89
<u>Active Care 3</u>				
			<u>HMO High</u>	<u>PPO High</u>
Employee Only	90.44	500.00	191.52	226.05
Employee/Spouse	479.11	500.00	674.15	692.95
Employee/Children	271.33	500.00	722.13	737.35
Employee/Family	548.17	500.00	1238.12	1239.45
Employee/Family(both SBISD)	334.28	1000.00	917.57	942.92

* These are Spring Branch ISD employee rates.

Rates located on the BCBS and TRS websites include both the employee and District contribution.