

**SPLIT PREMIUMS  
( SPOUSE EMPLOYED BY ANOTHER TRS-ACTIVE CARE  
PARTICIPATING DISTRICT )**

**CYPRESS- FAIRBANKS ISD Employee Monthly Premium Rates 2019-2020**

**TRS-ACTIVECARE PLANS**

<b>MONTHLY PREMIUMS</b>	<b>TRS ActiveCare 1-HD</b>	<b>TRS ActiveCare Select</b>	<b>TRS ActiveCare 2</b>	<b>SCOTT &amp; WHITE HMO</b>
<b>EMPLOYEE CONTRIBUTION</b>	<b>FULL-TIME EMPLOYEE RATES ( MINIMUM 35 HOURS PER WEEK )</b>			
Employee & Spouse	<b>\$308.00</b>	<b>\$455.50</b>	<b>\$779.50</b>	<b>\$428.29</b>
Employee & Family	<b>\$467.50</b>	<b>\$615.50</b>	<b>\$947.50</b>	<b>\$503.64</b>
<b>EMPLOYEE CONTRIBUTION</b>	<b>PART-TIME EMPLOYEE RATES ( 15 - 34 HOURS PER WEEK )</b>			
Employee & Spouse	<b>\$308.00</b>	<b>\$458.50</b>	<b>\$785.00</b>	<b>\$428.29</b>
Employee & Family	<b>\$482.50</b>	<b>\$634.00</b>	<b>\$969.50</b>	<b>\$503.64</b>