## GARLAND ISD – TRS ACTIVECARE PREMIUMS 2017-2018

TRS ACTIVECARE 1HD	TOTAL MONTHLY COST*	GISD CONTRIBUTION	EMPLOYEE'S MONTHLY PREMIUM	SPLIT/POOLED (Per employee)
Employee Only	\$351.00	\$325.00	\$26.00	
Employee + Spouse	\$991.00	\$325.00	\$666.00	\$170.50
Employee + Children	\$671.00	\$325.00	\$346.00	
Employee + Family	\$1,316.00	\$325.00	\$991.00	\$333.00
TRS ACTIVECARE SELECT	TOTAL MONTHLY COST*	GISD CONTRIBUTION	EMPLOYEE'S MONTHLY PREMIUM	SPLIT/POOLED (PER EMPLOYEE)
Employee Only	\$514.00	\$325.00	\$189.00	
Employee + Spouse	\$1,264.00	\$325.00	\$939.00	\$307.00
Employee + Children	\$834.00	\$325.00	\$509.00	
Employee + Family	\$1,589.00	\$325.00	\$1,264.00	\$469.50
TRS ACTIVECARE 2	TOTAL MONTHLY COST*	GISD CONTRIBUTION	EMPLOYEE'S MONTHLY PREMIUM	SPLIT/POOLED (PER EMPLOYEE)
Employee Only	\$714.00	\$325.00	\$389.00	
Employee + Spouse	\$1,694.00	\$325.00	\$1,369.00	\$522.00
Employee + Children	\$1,062.00	\$325.00	\$737.00	
Employee + Family	\$2,004.00	\$325.00	\$1,679.00	\$677.00
SCOTT AND WHITE HMO	TOTAL MONTHLY COST*	GISD CONTRIBUTION	EMPLOYEE'S MONTHLY PREMIUM	SPLIT/POOLED (PER EMPLOYEE)
Employee Only	\$561.04	\$325.00	\$236.04	
Employee + Spouse	\$1,263.08	\$325.00	\$938.08	\$306.54
Employee + Children	\$888.42	\$325.00	\$563.42	
Employee + Family	\$1,400.98	\$325.00	\$1,075.98	\$375.49

\*Substitutes and Part-time Non-TRS eligible employees will pay full monthly cost. They are not eligible for the district contribution because they do not contribute to TRS.