## **Health Plan Contributions**

Members in the Teachers' Retirement Insurance Program (TRIP) are responsible for a monthly contribution for Medicare Advantage coverage that includes prescription drug benefits. If your school district currently pays your TRIP insurance premium, it may continue to pay the premium on your behalf after you enroll in TRAIL. If you wish to verify the premium payment arrangements for your TRAIL MAPD coverage, you should contact your school district.

2023 TRAIL MAPD Health Plan Monthly Contributions Effective January 1, 2023			
Aetna MAPD PPO Plan			
Member Rate	\$2.06		
Dependent Rate	\$6.18		

## **Plan Administrators**

Plan	Administrators' Name and Address	Customer Service Phone Numbers	Websites
Aetna MAPD PPO Plan	Aetna MAPD PPO Plan PO Box 981106 El Paso, TX 79998-1106	855-223-4807 TTY users, call 711	stateofillinois.aetnamedicare.com
Medicare COB Unit	CMS Group Insurance 801 South 7th Street PO Box 19208 Springfield, IL 62794-9208	217-782-7007 800-442-1300 800-526-0844 (TDD/TTY)	CMS.BEN.MedicareCOB@illinois.gov
Retirement System	Teachers' Retirement System 2815 W. Washington St PO Box 19253 Springfield, IL 62794-9253	877-927-5877 TTY users, call 711	trsil.org