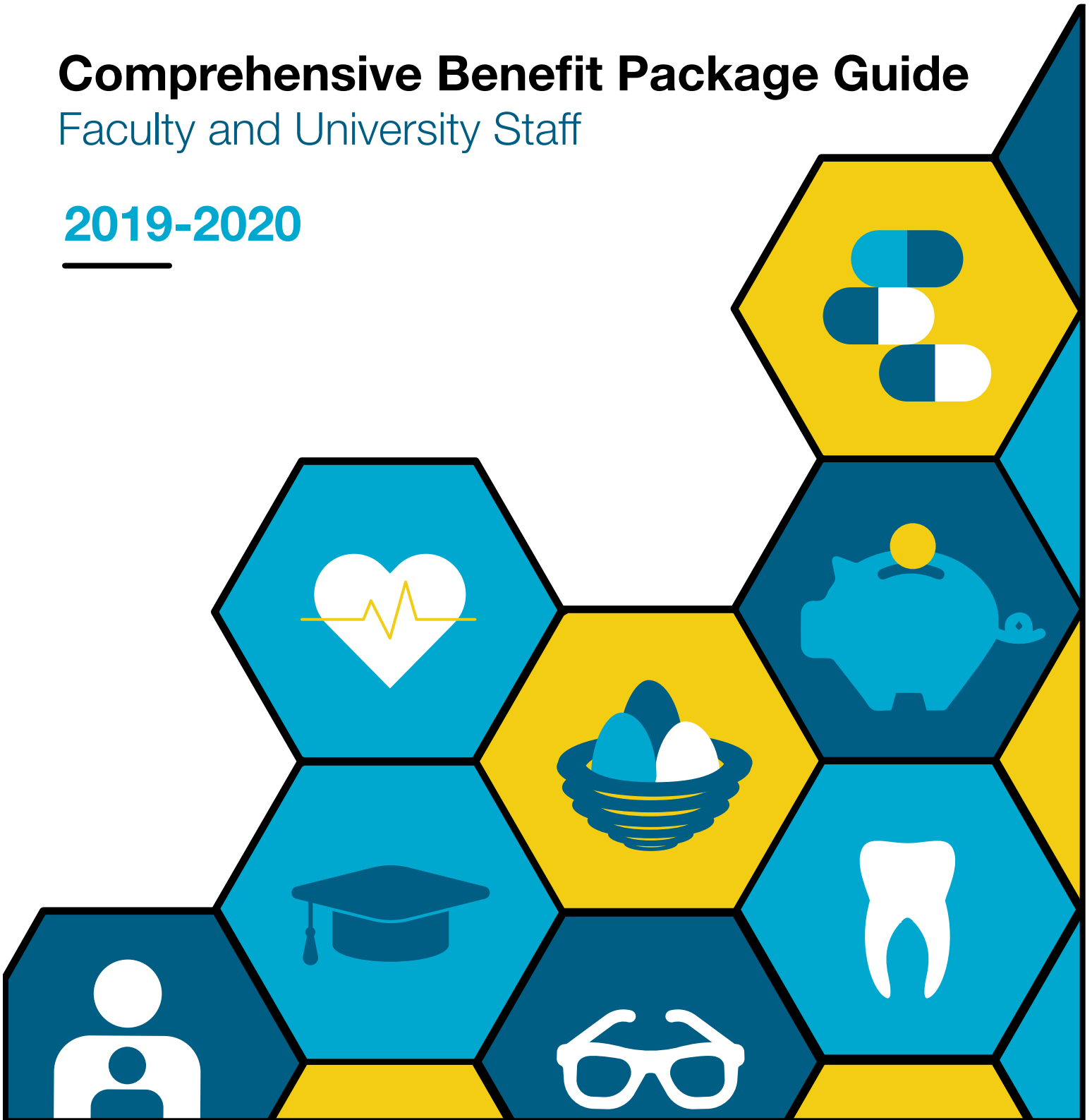




Comprehensive Benefit Package Guide

Faculty and University Staff

2019-2020



University of Colorado

Boulder | Colorado Springs | Denver | Anschutz Medical Campus

EMPLOYEE SERVICES



Faculty and University Staff Employee Guide: Comprehensive Benefit Package

Employee Services 303-860-4200, option 3

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A Comprehensive Benefit Package

Welcome to the University of Colorado! CU's four campuses succeed in transforming Colorado's communities and the nation through the efforts of an amazingly diverse workforce. Every Faculty and University Staff member is key to fulfilling the university's [mission](#) to be one of the greatest university systems in the world; an engine of leading-edge teaching, discovery and inclusivity.

Employee Services strives to make CU's workforce stronger, healthier and more secure. That's why we offer a comprehensive benefits package to support your health, wellness and retirement goals. This benefit package is an important part of your [total compensation](#). It provides choice and value to meet the needs of CU's diverse workforce. With that choice comes a lot of information that may feel overwhelming. So we have tools and information to help you make the best choices for you and your family.

This booklet offers a comprehensive overview of your health, wellness and retirement benefits options, eligibility and enrollment. There are many useful links to tools and resources that will help you dig deeper as you choose your benefits and use them.

Your main source of information is the [Employee Services Benefits](#) website. The information in this booklet is housed there, in addition to all you will need to use your valuable benefits. If you need additional help or guidance, you can speak to a benefits professional by calling 303-860-4200, option 3 during regular business hours, or send an email to benefits@cu.edu.

General Eligibility Rules

Employee eligibility: As a Faculty or University Staff employee, the university will review your job classification and appointment to determine your eligibility. Typically, you must be in a regular, benefits eligible position (or a combination of positions) of 50% or greater appointment to be eligible for employee benefits.

Dependent eligibility: As an eligible employee, you can add the following dependents to your plans:

- Spouse, Common-Law Spouse, Civil Union Partner, Domestic Partner*
- Dependent children up to age 27
- Qualifying disabled children over age 27

Once enrolled, you must provide [dependent eligibility verification](#). Documentation must be received by Employee Services by your enrollment deadline (31 days from your hire date). Dependents only need to be verified once; verification will carry over year-to-year.

Dual coverage: When two members of a household are employed with the university and/or university affiliates, you and your dependents cannot be covered as both an employee and a dependent for any CU medical, dental or vision plan. Dual coverage is allowed for life insurance. A member may be insured as both a member and a dependent up to a maximum combined life insurance and dependent's life insurance benefit of \$1,000,000. A child may be insured by more than one member.

***Imputed income:** The IRS uses the term [imputed income](#) to describe the value of any benefit or service that is considered income when calculating your federal taxes. Know your taxation. Some benefits and some dependent groups may be subject to taxation.

Enrollment

Plan year: The benefit plan year runs from July 1 through June 30. As a new hire or newly eligible employee, your elections will run from your effective date until June 30.

Open Enrollment: Open Enrollment occurs in the spring of each year for an effective date of July 1.

Effective date: Your official hire date determines when your coverage will begin. You can find your official hire date on your university welcome letter. If your hire date is the first of the month, your coverage will begin immediately, otherwise it will be the first of the following month.

For example:

If your hire date is May 1, your benefits will be effective May 1.

If your hire date is May 2 (or later), your benefits will be effective June 1.

You will [enroll](#) in your benefits in the secure environment of your employee portal, [my.cu.edu](#).

Deadlines and defaults: You have 31 days from your official hire date to enroll or waive coverage. If you fail to enroll or waive your coverage within the deadline, you will be enrolled automatically in the following default plans:

Plans	Coverage	Cost
Medical: CU Health Plan – High Deductible	employee only	\$0/month
Dental: CU Health Plan – Essential Dental	employee only	\$0/month

Once you submit your elections, or you are defaulted, your elections will remain for the plan year. You may not make any changes to your elections until next Open Enrollment, unless you experience a [qualifying life change](#).

Payroll deductions: Insurance premiums are deducted from the same month that they occur.

For example: The deductions from your paycheck in July covers your July premiums.

As a new hire, your first deduction depends on the time of month you enroll. Enrollments received after the 20th of the month may not be reflected in that month's paycheck, resulting in a double deduction the following month.

Resources

- [Employee Services Benefits Website](#)
- [Qualifying Life Change](#)
- [How to Enroll](#)
- [Benefits Eligibility Matrix](#)
- [Dependent Eligibility Verification](#)
- [Imputed Income](#)



CU Medical Plans

CU is dedicated to providing quality, affordable healthcare to its employees and their dependents. CU contributes 80-100% to employee monthly premiums. As a University employee, you have access to quality, personalized medical care with CU's four medical plans. This section provides an overview of the most common considerations for choosing a plan and highlights the medical plan options for you and your dependents.

All four CU Medical plans have built in plan features:

- Yearly, no-cost preventative care for each plan participant and access to [CU wellness programs](#)
- No-cost Flu shot clinics and Biometric Screenings on each campus
- Emergency / Urgent Care worldwide
- Affordable prescription drug prices

A blue graphic with a white box containing a list of wellness programs. To the left of the box is a red heart icon with a white ECG line. The text "WELLNESS PROGRAMS" is written in white above the heart icon.

- Gym Discounts
- Weight Loss Programs
- Nutritional and Meal Planning Apps
- Colorado Move Program
- Breathe with Quitline
-[and more](#)

Anthem Blue Cross Blue Shield

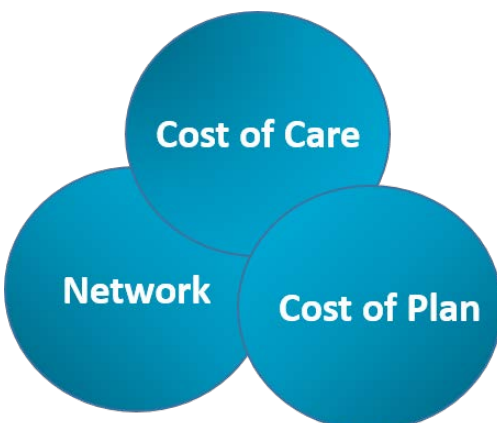
Plan Number: 195610
First Impressions: 1-855-646-4752
Member Services: 1-800-735-6072
[Anthem CU Microsite](#)

Kaiser Permanente

Plan Number: 31582
Phone Contact: 1-877-883-6698
[Kaiser CU Microsite](#)

Choosing a Medical Plan

When choosing a medical plan, these are three common considerations:



Network: The plan network determines where you will go to access care when you need it. You will want to understand the differences between the four plan networks before making your decision.

Cost of care: When you need care, what will it cost? How much will it cost to use the plan?

Cost of plan: How much does it cost to have the plan? CU covers a large portion of your monthly premiums, however, you will also contribute the plan's cost. Understanding the [plan rates](#) will help you determine the cost of having the plan.



Option 1: CU Health Plan – Exclusive

Network: Under this Anthem-administered plan, you will choose any primary care physician within one single statewide network, giving you access to a great number of doctors and specialists within three hospital systems across the Front Range: Poudre Valley, Anschutz Medical Campus, and Memorial Hospital System. As a member, your physician will manage your health care; referrals are required for most specialists. There is no out-of-network coverage, except for urgent and/or all emergency care. [Find a doctor.](#)

Cost to Use the Plan:

CU Health Plan Exclusive (HMO) – Anthem Plan	
Preventative care	No-cost preventative care Preventative Care Guidelines
Deductible (per plan year)	\$250 per individual (Each member must meet their \$250) \$750 family maximum (3+ members)
Out-of-pocket limit (per plan year)	\$7,900 individual; \$15,800 family
Office visit	Primary care physician - \$30 per visit Specialist - \$40 per visit Urgent care - \$30 per visit Office visit copays do not apply toward the deductible.
Emergency care	\$250 copay (waived if admitted)
Prescription drugs	Tier 1 \$15 Tier 2 \$35 Tier 3 \$50 Tier 4 \$75
Mail order RX 90-day supply	Must be used for maintenance and specialty medications. Plan will allow three fills at retail pharmacy. After three fills, mail order or UCHealth Retail must be used. Cost savings: 90-day supply for the price of a 60-day supply.
Out-of-state dependent children -	If you have dependent children living out-of-state and covered by the Exclusive plan, you may enroll them in CU Health Plan Exclusive Guest Membership
Eye exam	Exclusive covers a routine eye exam with a \$20 copay in-network along with discounts for hardware and other services.
Plan documents	CU Health Plan Exclusive – Plan Summary CU Health Plan Exclusive - Full Plan Booklet

Cost to Have the Plan:

Exclusive	Total Rate	CU Cost	Your Monthly Cost
Employee Only	\$611.00	\$560.50	\$50.50
Employee + Spouse	\$1,235.50	\$1,051.00	\$184.50
Employee + Child(ren)	\$1,119.50	\$1,005.00	\$114.50
Family	\$1,751.00	\$1,511.50	\$239.50

[Rate Sheet](#)



Option 2: CU Health Plan – Extended

Network: Under this Anthem administered plan, you will have access to Anthem’s nationwide network of physicians and facilities. A primary care physician is not required, and members can refer themselves to doctors of their choice within Anthem’s network, including specialists. There is no out-of-network coverage except for urgent and/or all emergency care. [Find a doctor.](#)

Cost to Use the Plan:

CU Health Plan Extended (PPO) – Anthem Plan	
Preventative care	No-cost preventative care Preventative Care Guidelines
Deductible (per plan year)	\$750 per individual (each member must meet their \$750) \$1,500 family max (2+ members) 10% coinsurance after deductible is met
Out-of-pocket limit (per plan year)	\$7,900 individual; \$15,800 family
Office visit	Primary care physician - \$40 per visit Specialist - \$50 per visit Urgent care - \$40 per visit Office visit copays do not apply toward the deductible.
Emergency care	\$250 copay (waived if admitted)
Prescription drug	Tier 1 \$15 Tier 2 \$35 Tier 3 \$50 Tier 4 \$75
Mail order RX 90-day supply	Not required. Available at cost savings: 90-day supply for the price of a 60-day supply.
Plan documents	CU Health Plan Extended Plan Summary CU Health Plan Extended Plan Booklet

Cost to Have the Plan:

Extended	Total Rate	CU Cost	Your Monthly Cost
Employee Only	\$633.50	\$560.50	\$73.00
Employee + Spouse	\$1,276.00	\$1,051.00	\$225.00
Employee + Child(ren)	\$1,150.00	\$1,005.00	\$145.00
Family	\$1,806.00	\$1,511.50	\$294.50

[Rate Sheet](#)



Option 3: CU Health Plan – High Deductible/HSA Compatible default plan

Network: CU Health Plan – High Deductible/HSA Compatible offers the widest access to care with Anthem’s nationwide network of providers and facilities as well as out-of-network coverage for covered services. You will pay more if you use out-of-network care. There are no copays on this plan. Once you satisfy the deductible, you’ll be responsible for paying the coinsurance until you reach your out-of-pocket maximum. Once this amount is reached, all covered services and prescriptions will be covered at 100%. A primary care physician is not required, and members can refer themselves to doctors of their choice including specialists. [Find a doctor](#).

Cost to Use the Plan:

CU Health Plan High Deductible/HSA Compatible (PPO) – Anthem Plan		
	In-Network Providers	Out-of-Network Providers
Preventative Care	No cost preventative care Preventative Care Guidelines	35% coinsurance after deductible
Deductible (per plan year)	\$1,500 Single Coverage \$3,000 Family Coverage (2+members) Any member may contribute to overall deductible.	\$3,000 Single Coverage \$6,000 Family Coverage (2+ members) Any member may contribute to overall deductible.
Out-of-pocket maximum (per plan year)	\$3,000 Single Coverage \$6,000 Family Coverage (2+ members)	\$6,000 Single Coverage \$12,000 Family Coverage (2+ members)
Preventative care visit	\$0 coinsurance and no deductible	
Office visit	15% coinsurance after deductible	35% coinsurance after deductible
Emergency care	15% coinsurance after deductible	35% coinsurance after deductible
Prescription drug	20% coinsurance after deductible	20% coinsurance after deductible
Mail order Rx UCHealth	Available for 90-day supply maintenance medications (not required)	N/A
Plan documents	CU Health Plan High Deductible – Plan Summary CU Health Plan High Deductible – Plan Booklet	

Cost to Have the Plan:

High Deductible	Total Rate	CU Cost	Your Monthly Cost
Employee Only	\$560.50	\$560.50	\$0
Employee + Spouse	\$1,066.00	\$1,051.00	\$15.00
Employee + Child(ren)	\$1,019.00	\$1,005.00	\$14.00
Family	\$1,530.50	\$1,511.50	\$19.00

[Rate Sheet](#)



Option 4: CU Health Plan – Kaiser

Network: Under this Kaiser-administered plan, you can choose any primary care physician within one statewide network. You will use a primary care physician to direct your care. In most cases, referrals are required. However, you may self-refer to certain specialists. In place of a deductible, members will be responsible for low copays for medical visits, diagnostic testing and hospital/facilities services. Out-of-network care is not covered except for emergency and/or urgent care. [Find a Doctor.](#)

Cost to Use the Plan:

CU Health Plan Kaiser (EPO) – Kaiser Plan	
Plan type	EPO - Kaiser
Preventive care	No-cost preventative care Preventative Care Guidelines
Deductible (per plan year)	No Deductible
Out-of-pocket limit (per plan year)	\$7,900 individual; \$15,800 family
Office visit	Primary care physician - \$30 per visit Specialist - \$40 per visit Urgent Care - \$30 per visit
Emergency care	\$250 copay (waived if admitted)
Prescription Drug	Generic \$15 Preferred Brand \$35 Specialty 20% coinsurance up to \$75 per prescription
Mail Order RX 90-day Supply	Cost savings: 90-Day Supply for the price of a 60-day supply.
Out-of-state dependents	Limited Coverage available. See Plan Document.
Eye Exam	Kaiser covers routine eye exams (eye refractions provided by Kaiser network optometrists (\$30 copay) or ophthalmologist (\$40 copay) to determine the need for vision correction and to provide a prescription for eyeglasses or contact lenses are covered.
Plan Documents	CU Health Plan Kaiser – Plan Summary CU Health Plan Kaiser – Plan Document

Cost to Have the Plan:

Kaiser	Total Rate	CU Cost	Your Monthly Cost
Employee Only	\$669.50	\$560.50	\$109.00
Employee + Spouse	\$1,347.50	\$1,051.00	\$296.50
Employee + Child(ren)	\$1,193.50	\$1,005.00	\$188.50
Family	\$1,890.00	\$1,511.50	\$378.50

[Rate Sheet](#)



CU Dental Plans

CU's two Delta Dental plans offer extensive coverage with no-cost preventative care, affordable deductibles and coinsurance payments to keep you and your family smiling bright. Regardless of which plan you choose, you will have the following no-cost preventative care:

- Four yearly cleanings (regular and/or periodontal)
- Two yearly oral exams/x-rays
- Two fluoride treatments (age 17 and under)
- Delta Dental's [Right Start For Kids](#) (children age 0-12) covers children's basic services 100%. Not subject to deductible or coinsurance. Maximum and frequency limitations apply.

Delta Dental

1-800-610-0201

[Delta CU Microsite](#)



Option 1: CU Health Plan – Essential Dental (default plan)

This Delta Dental plan grants access to providers only within the Delta nationwide Preferred Provider Option (PPO) network. You are required to use a Delta PPO provider or there is no coverage. Once you meet the \$25 per-person plan deductible, you'll be responsible for a percentage of your covered care costs, known as coinsurance. This plan offers additional orthodontic coverage for children, age 19 and under.

CU Health Plan Essential – Delta Dental	
Plan type	PPO Provider Network
Plan-year benefit	\$2,000 per person
Deductible (children under 13 excluded)	\$25 per person
Preventative & diagnostic services	0% coinsurance & no deductible
Basic services	30% coinsurance payment
Major services	50% coinsurance payment
Orthodontics (for children under age 19)	50% coinsurance payment \$2000 Lifetime Limit
Orthodontics for adults (19 and older)	Not covered
Plan Documents	CU Health Plan Essential - Plan Summary CU Health Plan Essential - Plan Booklet

Essential	Total Rate	CU Cost	Your Monthly Cost
Employee Only	\$29.00	\$29.00	\$0
Employee + Spouse	\$58.00	\$41.50	\$16.50
Employee + Child(ren)	\$62.50	\$41.00	\$21.50
Family	\$91.00	\$42.50	\$48.50

[Rate Sheet](#)



Option 2: CU Health Plan – Choice Dental

Under this Delta Dental plan, you may see any dentist in or out of Delta’s network. However, your out-of-pocket costs are lower when you use a dentist on Delta’s Preferred Provider Option (PPO) list. Once you meet the deductible, you will be responsible for a percentage of your covered costs, known as coinsurance. This plan offers additional orthodontic coverage for all plan participants.

CU Health Plan Choice – Delta Dental			
Plan type – three provider networks to choose	PPO Provider Network	Premier Provider Network**	Non-Participating (Balance Billing may apply)
Plan year benefit	\$2,500	\$2,500	\$2,500
Deductible (children under 13 excluded)	\$25 per person	\$75 per person	\$75 per person
Preventative & diagnostic services	0% coinsurance no deductible	0% coinsurance no deductible	0% coinsurance no deductible
Basic services	20-25% coinsurance	40-50% coinsurance	40-50% coinsurance
Major services	25% coinsurance	60% coinsurance	60% coinsurance
Orthodontics	40% coinsurance after deductible	60% coinsurance after deductible	60% coinsurance after deductible
Plan documents	CU Health Plan Choice – Plan Summary CU Health Plan Choice – Plan Booklet		

Essential	Total Rate	CU Cost	Your Monthly Cost
Employee Only	\$52.00	\$35.00	\$17.00
Employee + Spouse	\$104.00	\$52.50	\$51.50
Employee + Child(ren)	\$112.50	\$52.00	\$60.50
Family	\$164.00	\$58.00	\$106.00

[Rate Sheet](#)



CU Vision Plan – Blue View Vision

The optional Anthem Blue View Vision Plan covers annual eye exams, with a \$20 copay, as well as \$155 toward the yearly purchase of frames or contact lenses, for each participant. Lenses have low copays. Your choice of providers is extensive. In-network providers across the U.S. include retail locations such as LensCrafters, Pearle Vision and Target Optical. You may also use out-of-network providers but will pay more.

Plan Documents:

[CU Health Plan – Blue View Vision Coverage Summary](#)

[CU Health Plan – Blue View Vision Plan Booklet](#)

Anthem Blue View Vision

Plan Number: 0QCD-0716

Member Services: 1-866-723-0515

[Anthem CU Microsite](#)

Vision	Total Rate	CU Cost	Your Monthly Cost
Employee Only	\$6.18	\$0	\$6.18
Employee + Spouse	\$10.80	\$0	\$10.80
Employee + Child(ren)	\$11.72	\$0	\$11.72
Family	\$17.90	\$0	\$17.90

[Rate Sheet](#)



Flexible Spending Accounts (FSA)

The Flexible Spending Accounts (FSA) allow you to set aside pretax money for certain qualifying expenses. These accounts are regulated by the IRS who determines contribution limits, qualifying expenses and has designated them as “use or lose it.” The money you set aside in the account is meant to be spent and claimed by the established deadlines, or you will lose the money. CU has two FSA accounts. The Health Care FSA (HCFSA) allows you to set aside funds to spend on health care expenses. The Dependent Care FSA (DCFSA) allows you to set aside money for child care or day care expenses for eligible dependents. CU’s FSA accounts are administered through [ASIFlex](#). If you want to participate

in an FSA, you must make an election as a new hire, at each Open Enrollment or if you experience certain [Qualifying Life Changes](#).

The FSA Fact Sheets contain all the necessary information to enroll in and use your FSAs:

[Health Care FSA Fact Sheet \(HCFSA\)](#)

[Dependent Care FSA Fact Sheet \(DCFSA\)](#)

[Flexible Benefits Plan](#)

ASIFlex

Flexible Spending Account

Plan Number: 16

1-800-659-3035

www.asiflex.com

Health Savings Account (HSA)

The Health Savings Account (HSA) is an account that must be paired with the CU Health Plan – High Deductible medical plan and can be used for qualified health care expenses now or in the future. The HSA is a savings account that you own. You will keep and manage this account even if you leave the university, change health plans or retire. CU’s HSA is administered by [Optum Bank](#).

There is a triple tax benefit with the HSA. Contributions are pretax, any growth is tax-free and when used on qualifying health care expenses, it is also tax free. As long as you are enrolled in the CU Health Plan – High Deductible medical plan, you can enroll in, increase or decrease your HSA contributions at any time.

The HSA Fact Sheet contains all the necessary information to enroll in and use your HSA.

[Health Savings Account Fact Sheet](#)

[Flexible Benefits Plan](#)

Optum Bank

Health Savings Account

Plan Number: HB5195

1-844-326-7967

www.optumbank.com

Premium Only Plan

The Premium-Only Plan (POP), a part of the IRS Code Section 125, allows you to elect to pay your medical, dental and vision insurance premiums before or after taxes are deducted.

If you choose the before-tax option, your premiums will be deducted from your pay before taxes are calculated, reducing your taxable income, saving you money by withholding fewer dollars for federal, state and Social Security taxes. If you choose the after-tax option, your premiums will be deducted after your pay has been taxed.

- You will be given the opportunity to make your election as you enroll in your CU Health plans in your employee portal.
- If you do not make an election, your premiums will be deducted after tax.
- Once you make this election, your enrollment will continue for the plan year. A new election can be made only during Open Enrollment.
- If you have dependents enrolled in university benefits who do not qualify as federal tax dependents for health coverage purpose, their premiums are not eligible for the POP, and you may incur [imputed income](#).
- If you are paying into the PERA retirement plan, and you are within 3-5 years of retirement, keep in mind that your PERA defined benefit pension plan is calculated by your age, years of service and highest average salary. Anytime you make a before-tax deduction from your pay, you are lowering your taxable income, which will lower your highest average salary.

Employee Services does not provide tax advice to employees. Please contact your personal tax advisor, the IRS, SSA, State of Colorado or local government directly for professional tax advice.



CU life insurance policies can provide financial protection for your loved ones in the event of your death, and can be important to their future security. The university provides, at no cost to you, a generous Basic Term Life insurance policy of \$57,000.

If you determine that you would like to have additional coverage, the university also offers the ability to purchase two other policies for you and your dependents: Optional Term Life and Voluntary Accidental Death & Dismemberment plans.

[Rate Sheet](#)

Overview	Basic Term Life (w/ AD&D benefit)	Optional Term Life (w/ AD&D benefit)	Voluntary AD&D
Who pays the premium?	CU	Employee	Employee
Enrollment	Automatic	Optional	Optional
Employee Policy Maximum	\$57,000	\$1 million (increments of \$1,000)	\$250,000 (increments of \$10,000)
Spouse or Partner Policy Maximum	N/A	\$500,000 (increments of \$1,000)	\$250,000 (increments of \$10,000)
Child Policy Maximum	N/A	\$5,000 or \$10,000 (flat amounts)	\$5,000 (flat amount)

Basic Life Insurance with Accidental Death & Dismemberment (AD&D) benefit

Who's covered: Employee

Who pays the premium?: CU

Enrollment: Automatic

Effective: On benefits effective date

The Standard Insurance Company

1-800-628-8600

www.standard.com

[Life Insurance Certificate](#)

What the plan covers: In the event of employee's death under the terms of the group policy, the benefit is paid to the beneficiary in the amount of \$57,000. If the death is ruled an accident under the terms of the group policy, the AD&D provision pays an additional \$57,000. In the case of a loss other than death, such as the loss of a hand, sight, speech, hearing or other loss, the amount payable is a percentage of the AD&D Insurance benefit and is determined according to the terms of the group policy table ([Life Insurance Certificate, page 5](#)).

Beneficiaries: Employees must name their beneficiaries during their new benefit enrollment in the [employee portal](#). A beneficiary is a person(s) or organization named to receive the benefit in the event of the employee's death. The employee can change their beneficiaries anytime in the [employee portal](#).

Optional Life Insurance with additional AD&D

Who's covered: You, spouse/partner or child
Who pays the premium?: Employee
Enrollment: Optional – apply anytime
Effective: The first of the month following the date of approval

The Standard Insurance Company
 1-800-628-8600
www.standard.com
[Life Insurance Certificate](#)

What the plan covers: In the event of employee's death under the terms of the group policy, the benefit is paid to the beneficiary in the amount of the policy. If the death is ruled an accident under the terms of the group policy, the AD&D provision pays an additional benefit in the same amount of the policy. In the case of a loss other than death, such as the loss of a hand, sight, speech, hearing or other loss, the amount payable is a percentage of the AD&D Insurance benefit and is determined according to the terms of the group policy table ([Life Insurance Certificate, page 5](#)).

Beneficiaries: Employee must name their beneficiaries upon approval of their policy by The Standard Insurance Company. A beneficiary is a person(s) or organization named to receive the benefit in the event of the employee's death. The employee can change their beneficiaries anytime in the [employee portal](#). For spouse/partner and/or child's policy, the employee is the beneficiary.

New Hire/New Eligible Enrollment in Optional Life Insurance: New hire/newly eligible employees are eligible to purchase Optional Life insurance up to the Guarantee Issue amount (approved amount without submitting a medical history statement).

New Hire/New Eligible Guarantee Issue	
Employee policy	<p>Guarantee Issue (no medical history required): The employee can enroll up to three times his/her annual salary in increments of \$1,000, not to exceed the policy limit of \$1 million dollars.</p> <p>For additional amount beyond the Guarantee Issue, the employee will need approval by the Standard Insurance Company. To apply, the employee must submit a Medical History to The Standard Insurance Company as evidence of insurability.</p> <p>Beneficiary: Employee names beneficiary</p>
Spouse/partner policy	<p>Guarantee Issue (no medical history required): The employee can enroll a spouse or partner up to \$50,000 in increments of \$1,000, without a medical history statement. The total policy amount cannot exceed the employee's Optional Life amount, or the policy limit of \$500,000.</p> <p>For additional amount beyond the Guarantee Issue, the spouse or partner will need approval by The Standard Insurance Company. To apply, they must submit a Medical History to The Standard Insurance Company as evidence of insurability. The Amount cannot exceed the employee's Optional Life amount or the policy limit of \$500,000.</p> <p>Beneficiary: Employee</p>
Child policy	<p>For a dependent child or children, the employee may elect, in flat amounts of \$5,000 or \$10,000. Policy cannot exceed employee's Optional Life amount. No medical history required.</p> <p>Beneficiary: Employee</p>

Current Employee Changes to Optional Life Insurance: If you are a current employee and want to apply for or increase your Optional Life Insurance, you must submit the Medical History Statement form to the Standard Insurance Company. (See [Adding or Increasing](#)).

Current Employee Enrolling or Increasing Life Insurance Amounts	
Employee policy	Employee can apply for or increase up to \$1 million dollars, at any time during the year. Subject to approval from the Standard Insurance Company. Beneficiary: Employee names beneficiary
Spouse/partner policy	Employee can apply for up to \$500,000, for an eligible spouse/partner (not to exceed employee's Optional Life insurance amount), at any time during the year. Subject to approval from the Standard Insurance Company. Beneficiary: Employee
Child policy	Employee can elect, in flat amounts of \$5,000 or \$10,000, for a eligible child or children not to exceed employee's Optional Life insurance amount, only during Open Enrollment or certain Qualifying Life Changes . No medical history is required. Beneficiary: Employee

Adding or Increasing Optional Life Insurance Amount

1. **Complete and sign** the [Medical History Statement](#) as evidence of insurability (EOI)*
2. **Submit Form**
The Standard Insurance Company
Medical Underwriting
900 SW Fifth Avenue
Portland OR 97204
3. **Approval**
 - a. The Standard will notify the applicant and the University when application is approved.
 - i. Effective date of the policy is the date of approval by The Standard.
 - ii. Premiums are effective the first day of the month following the approval date.
 - b. The University will notify the applicant when approval is received. At that time the applicant will designate beneficiaries and indicate tobacco usage via the provided form.

*EOI: By signing the [Medical History Statement](#), the applicant is authorizing the Standard Insurance Company to obtain information about the applicant's health, undergo a physical examination, if required, which may include blood testing, and provide any additional information about the applicant's insurability that The Standard may reasonably require.

[Qualifying Life Changes:](#) The employee and spouse or partner may increase up to \$10,000 without evidence of insurability for certain life changes. Please call Employee Services for more information at 303-860-4200, option 3.

Cancellations: The employee can decrease or revoke personal and dependent Optional Life Insurance at any time during the plan year by submitting a [Benefits Enrollment/Change Form](#).

Voluntary Accidental Death & Dismemberment (AD&D)

Who's covered: You, spouse/partner or child

Who pays the premium?: Employee

Enrollment: Optional – New Hire/New Eligible, certain Qualifying Life Changes or Open Enrollment

Effective: The benefits eligible date or new plan year

The Standard Insurance Company

1-800-628-8600

www.standard.com

[Group AD&D Certificate](#)

What the plan covers: In the event of the covered member's death, should it be ruled an accidental death under the terms of the group policy, the AD&D insurance pays a benefit in the amount of the policy. In the case of a loss other than death, such as the loss of a hand, sight, speech, hearing or other loss, the amount payable is a percentage of the AD&D Insurance policy and is determined according to the terms of the group policy table ([Group AD&D Certificate](#)).

Beneficiaries: Employee must name their beneficiaries at time of enrollment. A beneficiary is a person(s) or organization named to receive the benefit in the event of the employee's death. The employee can change their beneficiaries anytime in the [employee portal](#). For spouse/partner and/or child's policy, the employee is the beneficiary.

New Hire/New Eligible Enrollment in Voluntary AD&D: New hire/newly eligible employees are eligible to enroll in Voluntary AD&D at the time of their new hire/new eligible benefits enrollment in the [employee portal](#).

New Hire/New Eligible	
Employee policy	The employee can enroll in increments of \$10,000, up to 10 times their annual salary with a maximum of \$250,000. Medical history not applicable. Beneficiary: Employee names beneficiary
Spouse/partner policy	The employee can enroll a spouse or partner, provided the employee enrolls, in increments of \$10,000, up to the employee's policy amount. Medical history not applicable. Beneficiary: Employee
Child policy	The employee can elect a flat \$5,000 for a dependent child or children, provided the employee enrolls. Medical history not applicable. Beneficiary: Employee

Current Employee Changes to Voluntary AD&D: Current employees can enroll and/or increase their Voluntary AD&D life insurance amount **only** during Open Enrollment and certain [Qualifying Life Changes](#). No Medical History is required. The employee can decrease or revoke coverage at any time during the plan year by submitting a [Benefits Enrollment/Change Form](#).

Current Employee Changes to Voluntary AD&D	
Employee policy	The employee can elect or increase, in increments of \$10,000, up to 10-times their annual salary with a maximum of \$250,000. Medical history not applicable. Beneficiary: Employee names beneficiary
Spouse/partner policy	The employee can elect or increase a spouse/partner, in increments of \$10,000, provided the employee enrolls, up to the employee's policy amount. Medical history not applicable. Beneficiary: Employee
Child policy	The employee can elect a flat \$5,000 for a dependent child or children, provided the employee enrolls. Medical history not applicable. Beneficiary: Employee



Disability coverage insures that you will have some income in the event that you are unable to work due to injury, illness or pregnancy/child birth.

As a CU Faculty or University Staff member, you have short-term and long-term disability options. These benefits are administered by The Standard Insurance Company.

[Rate Sheet](#)

Short Term Disability

Short-term disability is optional, and you may enroll during your New Hire/newly eligible enrollment or at Open Enrollment.

This insurance will pay 60% of your pre-disability earnings after the benefit waiting period until you either return to work or the end of the 22-week maximum benefit period.

See the table below for further information and the advantage of enrolling during your New Hire enrollment.

[CU Faculty and University Staff Short-Term Disability Insurance Certificate](#)

[CU Short Term Disability: Amendment No. 10](#)

Long Term Disability

If you are unable to return to work after 180 days of disability, long-term disability will begin to provide 60% of your pre-disability earnings until the end of the maximum benefit period.

Enrollment is automatic following one year of employment in a benefits-eligible position. The university pays the premium.

[CU Faculty and University Staff Long-Term Disability Insurance Certificate](#)

The Standard Insurance Company

Life and Disability Policies

1-800-628-8600

www.standard.com



CU helps eligible Faculty and University Staff members, in an eligible position, save for retirement, by generously contributing to a mandatory retirement plan. CU also provides eligible employees with the opportunity to bolster their retirement savings with voluntary plan options.

When you are hired by the university, you are placed into a mandatory plan based on your job classification/eligibility and your PERA (Public Employee Retirement Association) history. Please follow the guidelines below, to determine your plan eligibility.

Mandatory Retirement Plans

The university has two mandatory retirement plans: University Retirement Plan (URP) and Public Employee’s Retirement Association (PERA). In most cases, your participation in your mandatory plan is dependent upon your job classification and eligibility.

Job Classification: Most of the time, employees are eligible for only one mandatory retirement plan. **Eligible Faculty and University Staff members are automatically enrolled in the University of Colorado 401(a) Mandatory Plan (URP).** However, if you have participated in a PERA Defined Benefit (DB) Plan you may be eligible for PERA Choice.*

Eligibility: You will need to understand if your position is an [eligible position](#) by referencing the [benefits eligibility matrix](#). Eligible positions must be:

- A regular, non-temporary, eligible job code
- A 50% or greater appointment, as a combination of all your eligible appointments.

*PERA CHOICE

If you come to the university and you have a PERA Defined Benefit (DB) Plan, you are eligible for CU PERA Choice. This one-time irrevocable choice allows you to continue with your PERA (DB) Plan or choose the University Retirement Plan (URP, which includes the CU 401(a) – Mandatory Plan for eligible employees and the CU 403(b) – Voluntary Plan). You will receive a CU PERA Choice letter detailing how to elect your plan and you will have 30 days to make your election.

- If the election is not made within 30 days, you will default into your PERA (DB) Plan.
- If you choose to remain in your PERA (DB) Plan you will remain in PERA throughout your CU career. Your one-time irrevocable CU PERA Choice remains in effect, even if you leave the university and return in another position.

	PERA Defined Benefit Mandatory Plan Plan Administrator: PERA
Plan Type	Defined Benefit Plan (pension)
Your Contributions	8.75% of your annual salary through monthly pretax deductions
CU Contributions	10.4% of your annual salary contributed monthly
Vesting	Employee contributions immediately vested Employer contributions have a 5-year vesting period

Your eligibility may impact your choice

If you choose the URP and are in an [eligible position](#), you will participate in the CU 401(a) – Mandatory Plan and may choose, but are not required, to participate in the CU 403(b) – Voluntary Plan. If you choose the URP and are NOT in an [eligible position](#), you will not be eligible for the CU 401(a) – Mandatory Plan. You may choose to participate in the CU 403(b) – Voluntary Plan. However, this plan is not subject to the required 5% employee contribution and CU does not make contributions.

Mandatory Plan Participation Details

University of Colorado 401(a) Mandatory Retirement Plan	
Plan Type	Defined Contribution Plan
Your Contributions	5% of your annual compensation* through monthly pretax deductions
CU Contributions	10% of your annual compensation contributed monthly
Vesting	Employee and Employer contributions immediately vested

*Compensation means the university-approved annual base salary, including employee mandatory and voluntary contributions into retirement plans.

IRS Limitations: The IRS imposes two limitations of defined contribution retirement plans

Limit on the amount of salary that can be considered for contributions – For calendar year 2019 there is a salary limit of \$280,000. (For employees who first participated in the CU 401(a) Plan July 1, 1996 or earlier, with no break in service, the calendar year salary limit is \$415,000 for 2019.)

Limit on the amount of contributions – Total combined employer and employee contributions (excluding catch-up contributions) cannot exceed \$56,000 for the 2019 calendar year.

Employee account: You will manage your account by logging in at www.tiaa.org/cu with your employee ID. Once logged in, you should name beneficiaries and you can begin allocating your investments.

TIAA

University Retirement Plan
401(a) Plan #406787
403(b) Plan #406788
1-800-842-2252
www.tiaa.org/cu

Public Employee Retirement Association

PERA Mandatory Plans
PERA 401(k), 457
303-832-9550
1-800-759-7372
www.copera.org



As a CU employee, you can get personalized financial guidance without any additional cost to you. Through your CU employment, you are entitled to one-on-one sessions with financial professionals from TIAA, the university's retirement plan service provider. Call 1-800-732-8353 or visit [TIAA to schedule](#) your no-cost appointment.

Voluntary Retirement Plans

If you would like to do more to prepare for retirement, CU offers employees three voluntary savings plans:

Retirement plans	Eligibility job code	Plan administrator
University Retirement Plans (URP)		
University of Colorado 403(b) – Voluntary Plan	All Employees	TIAA
PERA Plans		
PERA 401(k) – Voluntary Plan	All Employees	PERA/Voya
PERA 457 – Voluntary Plan	All Employees	PERA/Voya

You do not need to be a PERA member to have a PERA 401(k) or 457 account, and likewise, PERA participants can have 403(b) account.

How the plans work

These defined contribution plans allow you to create an individual account to set aside money on a pretax basis. Your benefits are based on the contributions credited to these accounts, plus or minus investment gains or losses. Investment risk and investment rewards are assumed by each individual, not by PERA or CU. These are 100% employee contributions, meaning there is no match from CU.

How much can you contribute?

The 2019 IRS contribution limits for voluntary retirement plans are as follows:

- The CU 403(b) and the PERA 401(k) have a combined limit of \$19,000. If you are age 50+, the IRS allows you 'catch-up' contributions of \$6,000, for a total limit of \$25,000.
- The PERA 457 plan, has a separate limit of \$19,000. If you are age 50+, the IRS allows you 'catch-up' contributions of \$6,000, for a total limit of \$25,000.

By using the correct combination of voluntary plans, the 2019 IRS limits allow you to contribute a combined total maximum of \$38,000 if you are under age 50, or \$50,000 if you are age 50 or older.

All three plans have no minimum contribution. You can decide how much of your pay to contribute.

Your contributions will be pretax and lower your taxable income.

How to enroll

You can enroll, increase or decrease contributions to your voluntary plans at any time. Contact a benefits professional at Employee Services for details at 303-860-4200, option 3.

TIAA

University Retirement Plan
CU 401(a) Plan #406787
CU 403(b) Plan #406788
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Public Employee Retirement Association

PERA Mandatory Plans
PERA 401(k), 457
303-832-9550
1-800-759-7372
www.copera.org

Tuition Assistance Benefit

TUITION ASSISTANCE BENEFIT



As a leader in education, we value strong, curious minds and continued growth, not just for our students, but also for our dedicated workforce.

As a benefits eligible Faculty or University Staff member you may be entitled to the Tuition Assistance Benefit for yourself, or your dependents at CU campuses.

Visit www.cu.edu/benefits to learn more.