



MONTHLY RATES FOR THE 2021-22 PLAN YEAR

COBRA Rates

Medical Plans	CU Health Plan — Exclusive		CU Health Plan — Extended		CU Health Plan — High Deductible		CU Health Plan — Kaiser	
	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability
Employee only	\$677.79	\$996.75	\$729.81	\$1,073.25	\$622.71	\$915.75	\$741.03	\$1,089.75
Employee + Spouse	\$1,405.56	\$2,067.00	\$1,534.08	\$2,256.00	\$1,228.59	\$1,806.75	\$1,530.00	\$2,250.00
Employee + Child(ren)	\$1,273.98	\$1,873.98	\$1,364.76	\$2,007.00	\$1,169.43	\$1,719.75	\$1,354.56	\$1,992.00
Family	\$2,026.74	\$2,980.50	\$2,198.61	\$3,233.25	\$1,799.79	\$2,646.75	\$2,181.27	\$3,207.75

Dental Plans	CU Health Plan — Essential Dental		CU Health Plan — Choice Dental		CU Health Plan — Premier Dental	
	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability
Employee Only	\$30.09	\$44.25	\$53.04	\$78.00	\$47.43	\$69.75
Employee + Spouse	\$60.18	\$88.50	\$106.08	\$156.00	\$84.15	\$123.75
Employee + Child(ren)	\$64.77	\$95.25	\$114.75	\$168.75	\$92.31	\$135.75
Family	\$94.35	\$138.75	\$167.28	\$246.00	\$128.52	\$189.00

Vision Plan	CU Health Plan — Vision	
	COBRA Rate	COBRA Disability
Employee Only	\$6.30	\$9.27
Employee + Spouse	\$11.02	\$16.20
Employee + Child(ren)	\$11.95	\$17.58
Family	\$18.26	\$26.85



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EMPLOYEE SERVICES

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