



MONTHLY RATES FOR THE 2023-24 PLAN YEAR

For Non-Medicare eligible Retirees and Dependents

- For **regular retirement** (meets the required years of service with CU), the CU Cost is based on a 100% CU contribution, and retiree only pays the amount on the **Your Cost** column.
- For **early retirement** (does not meet the required years of service with CU), the CU Cost is prorated according to years of service, and retiree pays **a portion of the CU cost** plus the amount on the **Your Cost** column.
- Visit the [Retirement Ready section of the Employee Services website](#) for additional details on retirement eligibility.

For 401(a) and PERA participants

Medical Plans Under age 65	CU Health Plan — Exclusive			CU Health Plan — Kaiser			CU Health Plan — High Deductible		
	TOTAL RATE	CU COST *	YOUR COST *	TOTAL RATE	CU COST *	YOUR COST *	TOTAL RATE	CU COST *	YOUR COST *
Retiree only	\$780.00	\$699.50	\$80.50	\$850.00	\$699.50	\$151.00	\$699.50	\$699.50	\$0.00
Retiree + Spouse	\$1,615.50	\$1,381.00	\$234.50	\$1,763.50	\$1,381.00	\$382.50	\$1,408.00	\$1,381.00	\$27.00
Retiree + Child(ren)	\$1,486.00	\$1,337.50	\$148.50	\$1,602.00	\$1,337.50	\$264.50	\$1,361.50	\$1,337.50	\$24.00
Family	\$2,374.50	\$2,085.50	\$289.00	\$2,578.50	\$2,085.50	\$493.00	\$2,124.50	\$2,085.50	\$39.00

Dental Plans Under age 65	CU Health Plan — Essential Dental			CU Health Plan — Choice Dental		
	TOTAL RATE	CU COST *	YOUR COST *	TOTAL RATE	CU COST *	YOUR COST *
Retiree only	\$29.50	\$29.50	\$0.00	\$52.00	\$35.00	\$17.00
Retiree + Spouse	\$59.00	\$42.00	\$17.00	\$104.00	\$52.50	\$51.50
Retiree + Child(ren)	\$63.50	\$41.50	\$22.00	\$112.50	\$52.00	\$60.50
Family	\$92.50	\$43.00	\$49.50	\$164.00	\$58.00	\$106.00



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EMPLOYEE SERVICES

Address: 1800 Grant St.,
Suite 400, Denver, CO 80203

Email: benefits@cu.edu

Phone: 1-855-216-7740 (option 3)

On the Web
www.cu.edu/benefits



MONTHLY RATES FOR THE 2022-23 PLAN YEAR

Optional Term Life

For eligible retirees (employees with Optional Term Life at time of retirement)

Age	Standard rate per \$1,000 of coverage (Tobacco use in the last 12 months.)	Discount rate per \$1,000 of coverage (No tobacco use in the last 12 months.)
49 and under	\$0.336	\$0.224
50-54	\$0.42	\$0.28
55-59	\$0.69	\$0.48
60-64	\$1.30	\$0.90
65-69	\$2.10	\$1.51
70-74	\$3.69	\$2.74
75+	\$6.65	\$5.10



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