



MONTHLY RATES FOR THE 2024-25 PLAN YEAR

Non-Medicare eligible retirees (Rates based on a 100% CU Contribution)

| Medical Plans | 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 |
| Under age 65 | | | | | | | | | |
| Retiree only | \$803.50 | \$723.00 | \$80.50 | \$957.50 | \$723.00 | \$234.50 | \$723.00 | \$723.00 | \$0.00 |
| Retiree + Spouse | \$1,659.00 | \$1,424.50 | \$234.50 | \$1,983.00 | \$1,424.50 | \$558.50 | \$1,451.50 | \$1,424.50 | \$27.00 |
| Retiree + Child(ren) | \$1,528.50 | \$1,380.00 | \$148.50 | \$1,801.50 | \$1,380.00 | \$421.50 | \$1,404.00 | \$1,380.00 | \$24.00 |
| Family | \$2,438.50 | \$2,149.50 | \$289.00 | \$2,898.50 | \$2,149.50 | \$749.00 | \$2,188.50 | \$2,149.50 | \$39.00 |

| Medical Plans | CU Health Plan — Medicare/High Deductible | | |
|--|---|------------|-----------|
| Over/under age 65 | TOTAL RATE | CU COST | YOUR COST |
| 1 Medicare-Eligible + Spouse Under 65 | \$1,180.26 | \$718.06 | \$462.20 |
| 1 Medicare-Eligible + Child(ren) Under 65 | \$1,132.76 | \$718.06 | \$414.70 |
| 1 Medicare-Eligible + Spouse and Child(ren) Under 65 | \$1,917.26 | \$1,033.79 | \$883.47 |
| 2 Medicare-Eligible Spouses + Child(ren) Under 65 | \$1,662.36 | \$1,033.79 | \$628.57 |

| Dental Plans | CU Health Plan — Essential Dental | | | CU Health Plan — Choice Dental | | |
|----------------------|-----------------------------------|---------|-----------|--------------------------------|---------|-----------|
| | TOTAL RATE | CU COST | YOUR COST | TOTAL RATE | CU COST | YOUR COST |
| Under age 65 | | | | | | |
| Retiree only | \$30.00 | \$30.00 | \$0.00 | \$53.00 | \$35.50 | \$17.50 |
| Retiree + Spouse | \$60.00 | \$42.50 | \$17.50 | \$106.00 | \$53.50 | \$52.50 |
| Retiree + Child(ren) | \$64.50 | \$42.00 | \$22.50 | \$114.50 | \$53.00 | \$61.50 |
| Family | \$94.00 | \$43.50 | \$50.50 | \$167.00 | \$59.00 | \$108.00 |



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EMPLOYEE SERVICES

Address: 1800 Grant St.,
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Phone: 1-855-216-7740 (option 3)

On the Web

www.cu.edu/benefits



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OPTIONAL TERM LIFE

| Age | Standard rate per \$1,000 of coverage | Discount rate per \$1,000 of coverage* |
|--------------|---------------------------------------|--|
| 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 |

*No tobacco use in the last 12 months.



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