

## **MONTHLY RATES FOR THE 2025-26 PLAN YEAR**

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

Medical Plans	CU Health Plan — Exclusive			CU Health Plan — Pathway			
Under age 65	TOTAL RATE	CU CONTRIBUTION	YOUR COST	TOTAL RATE	CU CONTRIBUTION	YOUR COST	
Retiree only	\$846.50	\$766.00	\$80.50	\$943.50	\$766.00	\$177.50	
Retiree + Spouse	\$1,746.50	\$1,512.00	\$234.50	\$1,979.00	\$1,512.00	\$467.00	
Retiree + Child(ren)	\$1,613.00	\$1,464.50	\$148.50	\$1,793.00	\$1,464.50	\$328.50	
Family	\$2,571.00	\$2,282.00	\$289.00	\$2,880.00	\$2,282.00	\$598.00	
	CU Health Plan — High Deductible			CU Health Plan — Kaiser			
Under age 65	TOTAL RATE	CU CONTRIBUTION	YOUR COST	TOTAL RATE	CU CONTRIBUTION	YOUR COST	
Retiree only	\$766.00	\$766.00	\$0.00	\$1,068.00	\$766.00	\$302.00	
Retiree + Spouse	\$1,539.00	\$1,512.00	\$27.00	\$2,214.00	\$1,512.00	\$702.00	
Retiree + Child(ren)	\$1,488.50	\$1,464.50	\$24.00	\$2,011.50	\$1,464.50	\$547.00	
Family	\$2,321.00	\$2,282.00	\$39.00	\$3,208.50	\$2,282.00	\$926.50	

Medical Plans	CU Health Plan — Medicare/High Deductible			
Over/under age 65	TOTAL RATE	CU CONTRIBUTION	YOUR COST	
1 Medicare-Eligible + Spouse Under 65	\$1,224.76	\$718.06	\$506.70	
1 Medicare-Eligible + Child(ren) Under 65	\$1,174.26	\$718.06	\$456.20	
1 Medicare-Eligible + Spouse and Child(ren) Under 65	\$2,006.76	\$1,033.79	\$972.97	
2 Medicare-Eligible Spouses + Child(ren) Under 65	\$1,707.36	\$1,033.79	\$673.57	



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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



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Dental Plans	CU Health Plan — Essential Dental			CU Health Plan — Choice Dental		
Under age 65	TOTAL RATE	CU CONTRIBUTION	YOUR COST	TOTAL RATE	CU CONTRIBUTION	YOUR COST
Retiree only	\$32.00	\$32.00	\$0.00	\$56.00	\$37.50	\$18.50
Retiree + Spouse	\$64.00	\$45.50	\$18.50	\$112.00	\$56.50	\$55.50
Retiree + Child(ren)	\$69.00	\$45.00	\$24.00	\$121.00	\$56.00	\$65.00
Family	\$100.50	\$46.50	\$54.00	\$176.50	\$62.50	\$114.00

## **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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