

What's New? ^[1]

See our starting lineup for the 2025-26 plan year. Get ready to draft your MVPs (Most Valuable Plans).

At a glance

The new plan year that starts July 1 will feature some major changes to CU Health Plans:

- **CU Health Plan - Extended** is being discontinued. Employees currently enrolled in an Extended plan must choose a replacement medical plan this Open Enrollment or **they will lose medical coverage** for the 2025-26 plan year.
- **A new Anthem-administered plan, CU Health Plan — Pathway**, will be added and will offer coverage for Rocky Mountain Children's Hospital, Boulder Community Hospital, HCA hospitals and UC Health hospitals.
- **Deductibles will increase** for the High Deductible plan to meet IRS minimums.
- **Out-of-pocket maximums will increase** for the High Deductible, Exclusive and Kaiser.

- Faculty & Staff
- GME Medical Residents
- Non-Medicare retirees and surviving spouses

CU Health Plan - Extended is being discontinued

The university is discontinuing the Anthem-administered CU Health Plan — Extended. This plan was becoming increasingly expensive for the university and employees to maintain.

Employees currently enrolled in CU Health Plan — Extended must choose a replacement medical plan during the 2025 Open Enrollment window to continue having medical coverage in the 2025-26 plan year.

New Anthem-administered plan will debut July 1

The university will add a new Anthem-administered plan, **CU Health Plan — Pathway** ^[2].

Pathway Plan

- **Plan basics:**

- The Pathway plan provides access to high-quality health care in Colorado through Anthem's Pathway network. In-network hospital systems include Rocky Mountain Children's Hospital, Boulder Community Hospital, HCA Hospitals and UC Health Hospitals.
 - Children's Hospital Colorado will be out-of-network, except for emergencies.
- Members living outside of Colorado will have access to Anthem's full national PPO network on the Pathway plan, the same out-of-state network as the High Deductible plan and discontinued Extended Plan.
- **Find a doctor:** Visit Anthem's CU microsite ^[3] and select CU Health Plan — Pathway to find providers.
- **In-network deductibles:** \$500 for single coverage and \$1,000 for family coverage.
- **Annual out-of-pocket maximum:** \$9,200 for single and \$18,400 for family.
- **Plan document:** This plan requires copays and coinsurance. Review the **summary of benefits coverage** ^[2] for details.
- ID cards will be hardcoded with "Network Provider," meaning members can see any in-network provider and do not need to choose a primary care physician.
- **Rates:** Review the rate sheet ^[4] for full details.

High Deductible plan

- **Plan basics:**

- The High Deductible plan provides a national network of providers, but requires that enrollees first meet a deductible. Once enrollees have satisfied the deductible, they will be responsible for paying coinsurance. The portion of expenses that you have to pay for certain covered services, calculated as a percentage. For example, if the coinsurance rate is 20%, then you are responsible for paying 20% of the bill, and the insurance company will pay 80%. ^[5] for care.
- The plan can be paired with a Health Savings Account, which can be used to pay for qualified health care expenses now or in the future. You can enroll in an HSA at any time.
- This plan offers Anthem's nationwide network of providers and facilities, and you'll have the flexibility to schedule your own appointments with specialists — no primary care provider or referrals needed.
- **Find a doctor:** Visit Anthem's CU microsite ^[3] and select CU Health Plan — High Deductible to find providers.
- **In-network deductible:** CU Health Plan — High Deductible enrollees will see their in-network deductible increase to \$1,650 for single coverage and \$3,300 for family coverage (formerly \$1,600 and \$3,200 respectively).
 - This represents the lowest deductible allowed by the IRS for high deductible plans that pair with a Health Savings Account.
- **In-network out-of-pocket maximum:** The plan's out of pocket maximum will be \$3,300 for single in-network coverage and \$6,600 for family in-network coverage (formerly \$3,200 and \$6,400 respectively).
- **Out-of-network deductible:** The plan's out-of-network deductible will be \$3,300 for single coverage and \$6,600 for family coverage (formerly \$3,200 and \$6,400 respectively).
- **Out-of-network out-of-pocket maximum:** The plan's out-of-pocket maximum will be \$6,600 for single out-of-network coverage and \$13,200 for family out-of-network

coverage (formerly \$6,400 and \$12,800 respectively).

- **Plan document:** Review the **summary of benefits coverage** ^[6] for details.
- **Rates:** High Deductible plan monthly premiums will not change.
 - For full details, review the rate sheet ^[4].

Exclusive plan

- **Plan basics:**
 - The Anthem-administered plan provides access to health care providers within a single statewide network, with many doctors and specialists across Colorado.
 - The plan includes a low deductible and fixed copays for office visits and prescription drugs.
 - This Anthem-administered plan lets you choose health care providers within a single statewide network, giving you access to doctors and specialists across the Front Range.
 - **Find a doctor:** Visit Anthem's CU microsite ^[3] and select CU Health Plan — Exclusive to find providers.
- **Out-of-pocket maximum:** The CU Health Plan — Exclusive plan out-of-pocket maximum will increase to \$9,200 for single coverage and \$18,400 for family coverage (formerly \$9,100 and \$18,200 respectively).
- **Plan document:** Review the **summary of benefits coverage** ^[7] for details.
- **Rates:** Exclusive plan monthly premiums monthly premiums will not change.
 - For full details, review the rate sheet ^[4].

Kaiser plan

- **Plan basics:**
 - Kaiser provides a single statewide network of doctors, with a primary care doctor directing your care. In most cases, referrals are required but you may self-refer to certain specialists.
 - In place of deductible, enrollees will pay a copay for medical visits, diagnostic testing and hospital or facilities services.
 - This Kaiser-administered plan allows you to choose any health care provider within a single statewide network.
 - **Find a doctor:** Visit Kaiser's CU microsite ^[8] to find providers.
- **Out-of-pocket maximum:** The CU Health Plan — Kaiser out-of-pocket maximum will increase to \$9,200 for single coverage and \$18,400 for family coverage (formerly \$9,100 and \$18,200 respectively).
- **Plan document:** Review the **summary of benefits coverage** ^[9] for details.
- **Rates:** Kaiser plan monthly premiums will increase significantly, due to high administrative fees and continued migration of enrollees away from the plan.
 - For full details, review the rate sheet ^[4].

Additional plan changes

Dental insurance

- CU offers two dental plans — Essential and Choice.
- **Rates:** Monthly premiums for the Essential and Choice plans will increase from between

\$0 to \$6, depending on the plan and coverage level.

- For full details, review the [rate sheet](#) [4].

Optional vision insurance

- The voluntary Anthem Blue View Vision Plan covers annual eye exams for a \$20 copay, as well as \$225 toward the yearly purchase of frames or contact lenses, for each participant. The network of providers is extensive.
- **Rates:** Monthly premiums for the vision plan will increase from between 20 cents to 55 cents, depending on coverage level.
 - For full details, review the [rate sheet](#) [4].

Short-term disability

- For faculty and university staff, short-term disability insurance provides 60% of weekly pre-disability earnings up to a maximum of \$1,500.
- **Rates:** Rates for short-term disability coverage rate for faculty and university staff will decrease from .048 to .02 for every \$10 in coverage.
 - These coverage rates are used in conjunction with your salary to calculate the premium you'll pay each month. See the [benefits rate sheet](#) [4] for premium calculations.

Life insurance

- Optional Term Life insurance rates will decrease for the new plan year beginning July 1. See your [rate sheet](#) [4] for a full list of rates based on your age.

When to take action

- **CU Health Plan – Extended enrollees must take action:** CU Health Plan – Extended will be discontinued due to unsustainable rising plan costs. Failure to enroll in a new medical plan will result in **waived medical coverage** for the new plan year.
- **Passive enrollment for all other members:** If you are enrolled in the Exclusive, High Deductible or Kaiser plans and would like to keep the same benefit choices, no action is required. You will be automatically re-enrolled.
 - **There's one exception:** You must re-enroll in your Health Care Flexible Spending Account and your Dependent Care Flexible Spending Account for plan year 2025-26.
- **Now's a good time to consider other benefits:** Do you need to update your beneficiaries, enroll in or adjust voluntary retirement contributions or make changes to your life insurance policies? You can do these things any time of year, but Open Enrollment is a great time to take a closer look.
- **How to enroll:** You will make your Open Enrollment changes in the employee portal using the benefits enrollment tool. If you need a login or have access issues, visit the [enrollment tool access page](#) ^[10].
- **Questions?** Reach out to an Employee Services benefits professional at 303-860-4200, option 3, or by email at benefits@cu.edu ^[11].

CU Health Plan - Extended is being discontinued

The university is discontinuing the Anthem-administered CU Health Plan — Extended. This plan was becoming increasingly expensive for the university and employees to maintain.

Employees currently enrolled in CU Health Plan — Extended must choose a replacement medical plan during the 2025 Open Enrollment window to continue having medical coverage in the 2025-26 plan year.

New Anthem-administered plan will debut July 1

The university will add a new Anthem-administered plan, [CU Health Plan — Pathway](#) ^[2].

Plan features:

- **Plan basics:**
 - The Pathway plan provides access to high-quality health care in Colorado through Anthem's Pathway network. In-network hospital systems include Rocky Mountain Children's Hospital, Boulder Community Hospital, HCA Hospitals and UC Health Hospitals.
 - Children's Hospital Colorado will be out-of-network, except for emergencies
 - Members living outside of Colorado will have access to Anthem's full national PPO network on the Pathway plan, the same out-of-state network as the High Deductible plan and discontinued Extended Plan.
 - **Find a doctor:** Visit Anthem's CU microsite ^[3] and select CU Health Plan — Pathway to find providers.
- **Lower deductibles compared to the Extended Plan:** \$500 for single coverage and \$1,000 for family coverage.
- **Annual out-of-pocket maximum:** \$9,200 for single and \$18,400 for family.

- This plan requires copays and coinsurance. Review the **summary of benefits coverage** ^[2] for details.
- ID cards will be hardcoded with “Network Provider,” meaning members can see any in-network provider and do not need to choose a primary care physician.
- **Rates:** The Pathway plan's monthly premiums will be between \$16 to \$48 lower than Extended, depending on coverage level.
 - For full details, review the rate sheet ^[4].

High Deductible plan

- **Plan basics:**
 - The High Deductible plan provides a national network of providers, but requires that enrollees first meet a deductible. Once enrollees have satisfied the deductible, they will be responsible for paying coinsurance. The portion of expenses that you have to pay for certain covered services, calculated as a percentage. For example, if the coinsurance rate is 20%, then you are responsible for paying 20% of the bill, and the insurance company will pay 80%. ^[5] for care.
 - The plan can be paired with a Health Savings Account, which can be used to pay for qualified health care expenses now or in the future. You can enroll in an HSA at any time.
 - This plan offers Anthem's nationwide network of providers and facilities, and you'll have the flexibility to schedule your own appointments with specialists — no Primary Care Provider or referrals needed.
 - **Find a doctor:** Visit Anthem's CU microsite ^[3] and select CU Health Plan — High Deductible to find providers.
- **In-network deductible:** CU Health Plan — High Deductible enrollees will see their in-network deductible increase to \$1,650 for single coverage and \$3,300 for family coverage (formerly \$1,600 and \$3,200 respectively).
 - This represents the lowest deductible allowed by the IRS for high deductible plans that pair with a Health Savings Account.
- **In-network out-of-pocket maximum:** The plan's out of pocket maximum will be \$3,300 for single in-network coverage and \$6,600 for family in-network coverage (formerly \$3,200 and \$6,400 respectively).
- **Out-of-network deductible:** The plan's out-of-network deductible will be \$3,300 for single coverage and \$6,600 for family coverage (formerly \$3,000 and \$6,000 respectively).
- **Out-of-network out-of-pocket maximum:** The plan's out-of-pocket maximum will be \$6,600 for single out-of-network coverage and \$13,200 for family out-of-network coverage (formerly \$6,400 and \$12,800 respectively).
- **Plan document:** Review the **summary of benefits coverage** ^[6] for details.
- **Rates:** High Deductible plan monthly premiums will not change.
 - For full details, review the rate sheet ^[4].

Exclusive plan

- **Plan basics:**
 - The Anthem-administered plan provides access to health care providers within a single statewide network, with many doctors and specialists across Colorado.
 - The plan includes a low deductible and fixed copays for office visits and prescription drugs.

- This Anthem-administered plan lets you choose health care providers within a single statewide network, giving you access to doctors and specialists across the Front Range.
- **Find a doctor:** Visit Anthem's CU microsite ^[3] and select CU Health Plan — Exclusive to find providers.
- **Out-of-pocket maximum:** The CU Health Plan — Exclusive plan out-of-pocket maximum will increase to \$9,200 for single coverage and \$18,400 for family coverage (formerly \$9,100 and \$18,200 respectively).
- **Plan document:** Review the **summary of benefits coverage** ^[7] for details.
- **Rates:** Exclusive plan monthly premiums will increase slightly, between 79 cents and \$3.37 based on coverage level.
 - For full details, review the rate sheet ^[4].

Kaiser plan

- **Plan basics:**
 - Kaiser provides a single statewide network of doctors, with a primary care doctor directing your care. In most cases, referrals are required but you may self-refer to certain specialists.
 - In place of deductible, enrollees will pay to copay for medical visits, diagnostic testing and hospital or facilities services.
 - This Kaiser-administered plan allows you to choose any health care provider within a single statewide network.
 - **Find a doctor:** Visit Kaiser's CU microsite ^[8] to find providers.
- **Out-of-pocket maximum:** The CU Health Plan — Kaiser out-of-pocket maximum will increase to \$9,200 for single coverage and \$18,400 for family coverage (formerly \$9,100 and \$18,200 respectively).
- **Plan document:** Review the **summary of benefits coverage** ^[9] for details.
- **Rates:** Kaiser plan monthly premiums will increase significantly, due to high administrative fees and continued migration of enrollees away from the plan.
 - For full details, review the rate sheet ^[4].

Additional plan changes

Dental insurance

- CU offers two dental plans — Essential and Choice.
- **Rates:** Monthly premiums for the Essential dental will not change. Choice dental premiums will increase between \$1 to \$2.50, depending on the plan and coverage level.
 - For full details, review the rate sheet ^[4].

Optional vision insurance

- The voluntary Anthem Blue View Vision Plan covers annual eye exams for a \$20 copay, as well as \$225 toward the yearly purchase of frames or contact lenses, for each participant. The network of providers is extensive.
- **Rates:** Monthly premiums for the vision plan will increase from between 20 cents to 55 cents, depending on coverage level.
 - For full details, review the rate sheet ^[4].

When to take action

- **CU Health Plan – Extended enrollees must take action:** CU Health Plan – Extended will be discontinued due to unsustainable rising plan costs. Failure to enroll in a new medical plan will result in **waived medical coverage** for the new plan year.
- **Passive enrollment for all other members:** If you are enrolled in the Exclusive, High Deductible or Kaiser plans and would like to keep the same benefit choices, no action is required. You will be automatically re-enrolled.
 - **There's one exception:** You must re-enroll in your Health Care Flexible Spending Account and your Dependent Care Flexible Spending Account for plan year 2025-26.
- **Now's a good time to consider other benefits:** Do you need to update your beneficiaries, enroll in or adjust voluntary retirement contributions or make changes to your life insurance policies? You can do these things any time of year, but Open Enrollment is a great time to take a closer look.
- **How to enroll:** You will make your Open Enrollment changes in the employee portal using the benefits enrollment tool. If you need a login or have access issues, visit the [enrollment tool access page](#) ^[10].
- **Questions?** Reach out to an Employee Services benefits professional at 303-860-4200, option 3, or by email at benefits@cu.edu ^[11].

New health plan debuts

- Prior to this year, non-Medicare retirees and surviving spouses were limited to choosing only the High Deductible, Exclusive or Kaiser health plans if they wished to continue having medical coverage through the university.
- Starting with the 2025-26 plan year, these non-Medicare retirees and surviving spouses **can enroll in any active CU medical plan** until they reach Medicare eligibility.
- For retirees and surviving spouses enrolled in a Medicare/High Deductible combination plan, medical plan choices will not change.

Medical plan changes

New Anthem -administered plan will debut July 1

The university will add a new Anthem-administered plan, [CU Health Plan — Pathway](#) ^[2].

- **Plan basics:**
 - The Pathway plan provides access to high-quality health care in Colorado through Anthem's Pathway network. In-network hospital systems include Rocky Mountain Children's Hospital, Boulder Community Hospital, HCA Hospitals and UC Health Hospitals.
 - Children's Hospital Colorado will be out-of-network, except for emergencies
 - Members living outside of Colorado will have access to Anthem's full national PPO network on the Pathway plan, the same out-of-state network as the High Deductible plan and discontinued Extended Plan.

- **Find a doctor:** Visit Anthem's CU microsite ^[3] and select CU Health Plan — Pathway to find providers.
- **Lower deductibles compared to the Extended Plan:** \$500 for single coverage and \$1,000 for family coverage.
- **Annual out-of-pocket maximum:** \$9,200 for single and \$18,400 for family.
- This plan requires copays and coinsurance. Review the **summary of benefits coverage** ^[2] for details.
- ID cards will be hardcoded with “Network Provider,” meaning members can see any in-network provider and do not need to choose a primary care physician.
- **Rates:** The Pathway plan's monthly premiums will be between \$17 to \$52 lower than Extended, depending on coverage level.
 - For full details, review the rate sheet ^[4].

High Deductible plan

- **Plan basics:**
 - The High Deductible plan provides a national network of providers, but requires that enrollees first meet a deductible. Once enrollees have satisfied the deductible, they will be responsible for paying coinsurance. The portion of expenses that you have to pay for certain covered services, calculated as a percentage. For example, if the coinsurance rate is 20%, then you are responsible for paying 20% of the bill, and the insurance company will pay 80%. ^[5] for care.
 - The plan can be paired with a Health Savings Account, which can be used to pay for qualified health care expenses now or in the future. You can enroll in an HSA at any time.
 - This plan offers Anthem's nationwide network of providers and facilities, and you'll have the flexibility to schedule your own appointments with specialists — no Primary Care Provider or referrals needed.
 - **Find a doctor:** Visit Anthem's CU microsite ^[3] and select CU Health Plan — High Deductible to find providers.
- **In-network deductible:** CU Health Plan — High Deductible enrollees will see their in-network deductible increase to \$1,650 for single coverage and \$3,300 for family coverage (formerly \$1,600 and \$3,200 respectively).
 - This represents the lowest deductible allowed by the IRS for high deductible plans that pair with a Health Savings Account.
- **In-network out-of-pocket maximum:** The plan's out of pocket maximum will be \$3,300 for single in-network coverage and \$6,600 for family in-network coverage (formerly \$3,200 and \$6,400 respectively).
- **Out-of-network deductible:** The plan's out-of-network deductible will be \$3,300 for single coverage and \$6,600 for family coverage (formerly \$3,000 and \$6,000 respectively).
- **Out-of-network out-of-pocket maximum:** The plan's out-of-pocket maximum will be \$6,600 for single out-of-network coverage and \$13,200 for family out-of-network coverage (formerly \$6,400 and \$12,800 respectively).
- **Plan document:** Review the **summary of benefits coverage** ^[6] for details.
- **Rates:** High Deductible plan monthly premiums will not change.
 - For full details, review the rate sheet ^[4].

Exclusive plan

- **Plan basics:**
 - The Anthem-administered plan provides access to health care providers within a single statewide network, with many doctors and specialists across Colorado.
 - The plan includes a low deductible and fixed copays for office visits and prescription drugs.
 - This Anthem-administered plan lets you choose health care providers within a single statewide network, giving you access to doctors and specialists across the Front Range.
 - **Find a doctor:** Visit Anthem's CU microsite ^[3] and select CU Health Plan — Exclusive to find providers.
- **Out-of-pocket maximum:** The CU Health Plan — Exclusive plan out-of-pocket maximum will increase to \$9,200 for single coverage and \$18,400 for family coverage (formerly \$9,100 and \$18,200 respectively).
- **Plan document:** Review the **summary of benefits coverage** ^[7] for details.
- **Rates:** Exclusive plan monthly premiums will not change.
 - For full details, review the **rate sheet** ^[4].

Kaiser plan

- **Plan basics:**
 - Kaiser provides a single statewide network of doctors, with a primary care doctor directing your care. In most cases, referrals are required but you may self-refer to certain specialists.
 - In place of deductible, enrollees will pay to copay for medical visits, diagnostic testing and hospital or facilities services.
 - This Kaiser-administered plan allows you to choose any health care provider within a single statewide network.
 - **Find a doctor:** Visit Kaiser's CU microsite ^[8] to find providers
- **Out-of-pocket maximum:** The CU Health Plan — Kaiser out-of-pocket maximum will increase to \$9,200 for single coverage and \$18,400 for family coverage (formerly \$9,100 and \$18,200 respectively).
- **Plan document:** Review the **summary of benefits coverage** ^[9] for details.
- **Rates:** Kaiser plan monthly premiums will increase significantly, due to high administrative fees and continued migration of enrollees away from the plan.
 - For full details, review the **rate sheet** ^[4].

Additional plan changes

Dental insurance

- CU offers two dental plans — Essential and Choice.
- **Rates:** Monthly premiums for the Essential and Choice plans will increase from between \$0 to \$6.50, depending on the plan and coverage level.
 - For full details, review the **rate sheet** ^[4].

When to take action

- **Passive enrollment:** If you would like to keep the same benefit choices, no action is required. You will be automatically re-enrolled.
- **Now's a good time to consider other benefits:** Do you need to update your beneficiaries or your life insurance policies? You can do these things any time of year, but Open Enrollment is a great time to take a closer look.
- **How to enroll:** You will make your Open Enrollment changes in the employee portal using the benefits enrollment tool. If you need a login or have access issues, visit the enrollment tool access page ^[10].
- **Questions?** Reach out to an Employee Services benefits professional at 303-860-4200, option 3, or by email at benefits@cu.edu ^[11].

Groups audience:

Employee Services

Source URL: <https://www.cu.edu/employee-services/open-enrollment/whats-new>

Links

[1] <https://www.cu.edu/employee-services/open-enrollment/whats-new> [2] <https://www.cu.edu/docs/cu-health-plan-pathway-benefits-summary> [3] <https://www.anthem.com/mcr/cuhealthplan/find-care>
 [4] <https://www.cu.edu/employee-services/open-enrollment/monthly-rates> [5] <https://www.cu.edu/es-benefits-glossary/coinsurance> [6] <https://www.cu.edu/docs/cu-health-plan-high-deductible-benefits-summary> [7] <https://www.cu.edu/docs/cu-health-plan-exclusive-benefits-summary>
 [8] <https://healthy.kaiserpermanente.org/colorado/doctors-locations#/simple-form>
 [9] <https://www.cu.edu/docs/cu-health-plan-kaiser-benefits-summary> [10] <https://www.cu.edu/employee-services/benefits-enrollment-tool> [11] <mailto:benefits@cu.edu?subject=Open%20Enrollment>