



University of Colorado

Boulder | Colorado Springs | Denver | Anschutz Medical Campus

Faculty Council Personnel & Benefits Committee Meeting

1:00 to 3:00 PM, Friday, October 3rd, 2025

Zoom Video Conference <https://cusystem.zoom.us/j/92766685761>

MINUTES

Attending: Sherry McCormick (Chair, UCCS), Jeffrey Zax (Vice-Chair, UCB), Jeffrey Schrader (UCD), Katie Sullivan (UCCS), Lindsay Yates (AMC), Melanie Joy (AMC), Michelle Martinez (SYS), Diana White (UCD), Sloan G Speck (UCB), Celine Dauverd (UCB), Joseph Rosse (UCB), Erin Tilbury (SYS), Tony DeCrosta (SYS)

I. Chair's Report

- Motion to approve minutes from September. Motion to approve; seconded; vote (APPROVED)
- Policy 11F: Faculty Council committees have provided consistent feedback which was influential. Regents announced that it will not move forward at the October meeting. However, it could potentially reappear in November at the Board of Regents meeting. Faculty should remain attentive.
- Chair announced that the Tuition Assistance Benefit proposal was approved at the September Faculty Council meeting.
- Will invite Michael Lightner, VP Office of Academic Affairs to the next PBC meeting to discuss what the process is for resolutions that are approved by Faculty Council.

II. CU Health Plan Presentation-Delta Dental Overview, Associate VP Tony DeCrosta and Assistant VP Erin Tilbury

A. Overview of Dental Plan Administration

- All CU dental plans (Essential, Choice, and Premier) are self-insured and administered by Delta Dental.
- CU pays administrative fees to Delta Dental for claims processing, network access, and reporting.

B. Enrollment and Utilization Trends

- Presentation included plan enrollment data and usage statistics across all three plans.
- Preventive and restorative utilization patterns show low use of enhanced benefits, such as:
 - Four covered cleanings per year
 - Right Start for Kids (comprehensive coverage for children under 13)
- Fewer than 2% of members reach annual maximum benefit limits (\$2,000–\$2,500).

C. Member Awareness and Communication

- Committee members emphasized that many long-term employees are unaware of newer plan benefits.
- The committee agreed that improved communication campaigns are needed to promote awareness of preventive and family benefits.

D. Provider Participation and Reimbursement

- Committee raised concerns regarding declining provider participation in Delta Dental networks.
- Providers report that reimbursement rates are not competitive and comparable to Medicaid levels.
- CU Health Plan agreed to obtain updated provider participation data by geographic area for follow-up review.

E. Plan Structure and Cost Efficiency

- Committee members questioned the overall plan design and cost allocation, suggesting that preventive benefit structures may not be optimized for long-term cost effectiveness.
- Committee recommended exploring adjustments that could reallocate funds toward higher provider reimbursements.

F. Coverage Limitations and Benefit Maximums

- Committee members shared examples of members reaching coverage maximums early in

the plan year.

- Committee noted that annual maximum benefits have not increased in decades, limiting coverage adequacy.
- Tony DeCrosta acknowledged the concern and stated that any adjustment to benefit limits would affect CU's and employees' cost shares; CU Health Plan will review options.

G. CU Health Plan Action Items

1. Provide updated provider network participation data and trends.
2. Review benefit utilization and cost projections for potential plan adjustments.
3. Return to a future PBC meeting (tentatively November or December) to present findings and recommendations.

H. PBC Action Items

1. Compile and prioritize member feedback and questions for the next CU Health Plan session.
2. Continue examining employee experience and benefit equity within CU's dental coverage.

III. CU System Update-Michelle Martinez, Director of Strategic Benefits Initiatives

A. Secure 2.0

- Affects employees age 50+ who make catch-up contributions to voluntary savings plans (contributions above the standard limit).
- IRS guidance was finalized since the last update.
 - All catch-up contributions must go into a Roth plan starting 2027, but the rule applies in 2026.
 - IRS allows a one-year period (2026) for payroll systems to prepare; organizations should make a good-faith effort to implement the provision.
 - PeopleSoft will provide necessary tools only in January 2026, requiring a reassessment of project timelines.
 - 2026 is a busy year with other initiatives (Time & Labor implementation, mid-year open enrollment), which may affect implementation planning.
- **Tax Implications:**

- Retroactive corrections are possible in 2027 if employees contribute pre-tax dollars in 2026, but this could create a tax burden.
- CU aims to avoid placing employees in a position where they must convert pre-tax contributions to Roth after the fact.
- **Operational Notes:**
 - For employees exceeding the 402G limit in 2027, catch-up contributions will automatically go into a Roth (“deemed election”) without requiring additional employee permission.
 - Implementation is complex due to several factors:
 - Employee Classification – Faculty and staff are categorized differently, and PERA members are not subject to this provision.
 - Income Threshold – The salary threshold for Roth catch-up contribution is currently set at \$145,000, but this amount will be indexed annually, requiring ongoing monitoring.
 - Age-Based Limits - Catch-up limits vary for employees over the age of 50, with enhanced limits for employees aged 60-63.
 - Volume of Impacted employees – A good number of employees are over age 50, increasing the scope of communication support needed.
- **Follow-Up:**
 - Michelle Martinez will work with legal to finalize implementation strategy and communicate updates to employees at year-end.

IV. Adjourned

Next meeting: Friday, November 7th, 2025