

Early Retiree Rates & Contributions

Medical

	Cigna Copay Plan - LocalPlus			Cigna HDHP Plan – LocalPlus	
	University of Denver's Contribution	Retiree's Contribution	Total Cost	Retiree's Contribution	Total Cost
Retiree Only	\$60.00	\$729.58	\$789.58	\$550.83	\$610.83
Spouse/Partner Only	N/A	\$789.58	\$789.58	\$610.83	\$610.83
Retiree & Spouse/Partner	\$60.00	\$1,513.54	\$1,573.54	\$1,156.57	\$1,216.57
Retiree & Child(ren)	\$60.00	\$1,356.71	\$1,416.71	\$1,035.38	\$1,095.38
Family	\$60.00	\$2,140.81	\$2,200.81	\$1,641.02	\$1,701.02

	Cigna Copay Plan – OAP			Cigna HDHP Plan – OAP	
	University of Denver's Contribution	Retiree's Contribution	Total Cost	Retiree's Contribution	Total Cost
Retiree Only	\$60.00	\$844.34	\$904.34	\$668.77	\$728.77
Spouse/Partner Only	N/A	\$904.34	\$904.34	\$728.77	\$728.77
Retiree & Spouse/Partner	\$60.00	\$1,749.56	\$1,809.56	\$1,398.54	\$1,458.54
Retiree & Child(ren)	\$60.00	\$1,568.88	\$1,628.88	\$1,252.71	\$1,312.71
Family	\$60.00	\$2,474.15	\$2,534.15	\$1,982.43	\$2,042.43

	Kaiser DHMO Plus			Kaiser HDHP Plus	
	University of Denver's Contribution	Retiree's Contribution	Total Cost	Retiree's Contribution	Total Cost
Retiree Only	\$60.00	\$688.94	\$748.94	\$543.81	\$603.87
Spouse/Partner Only	N/A	\$748.94	\$748.94	\$603.81	\$603.81
Retiree & Spouse/Partner	\$60.00	\$1,437.87	\$1,497.87	\$1,147.62	\$1,207.62
Retiree & Child(ren)	\$60.00	\$1,288.09	\$1,348.09	\$1,026.86	\$1,086.86
Family	\$60.00	\$2,037.02	\$2,097.02	\$1,630.67	\$1,690.67

*Costs outlined above are shown monthly.



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Dental and Vision

	Dental			Vision	
	Delta Base PPO Plan	Delta Enhanced PPO Plan	Beta Health Alpha Plan	Base Plan	Enhanced Plan
Retiree/Spouse/Partner Only	\$ 32.91	\$54.93	\$10.75	\$6.80	\$9.50
Retiree & Spouse/Partner	\$64.87	\$108.29	\$20.25	\$12.95	\$18.04
Retiree & Child(ren)	\$78.04	\$130.24	\$23.25	\$13.64	\$19.01
Family	\$121.81	\$203.00	\$29.75	\$20.05	\$27.93

***Costs outlined above are shown monthly.**