

HUMAN RESOURCES COLORADO STATE UNIVERSITY

BENEFITS COMPARISON

STATE CLASSIFIED TO ADMINISTRATIVE PROFESSIONAL

Who We Are

We are pleased that you chose Colorado State University as the place to share your time, talents and successes. As part of your total rewards package, CSU is proud to provide access to highquality benefits that support your health and financial goals. Explore your benefits and take advantage of the helpful resources and tools to help you make the best plan decisions for you and your family.

Get In Touch



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Walk In

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FOR MORE INFORMATION

(970) 491-6947

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/londay through Friday 2:30 am - 4:30 pm

CSU TOTAL REWARDS

This benefit summary provides general information as of Spring 2024 and is not all-inclusive. It is not a replacement for more detailed information found in certificates of coverage or master plan documents. In case of discrepancies, official documents will govern. Plan design and rate setting are governed by the State of Colorado for state classified personnel and Colorado State University for administrative professionals. Additional plan details may be found on the Human Resources website.

MEDICAL PLANS

State Classified Rates: 7/1/2023 - 6/30/2024				
Cig	na or K	aiser HDH	P with HSA	
		Employee	Monthly Cost	
Tier	С	igna	Kaiser	
Emp Only	\$2	26.78	\$27.94	
Emp + Spouse	\$1	62.28	\$170.24	
Emp + Children	\$6	61.44	\$55.82	
Emp + Family	\$2	58.78	\$214.58	
Deductible		\$1,750 Individual / \$3,500 Family		
Preventative Care		Covered in full		
Office Visit				
Specialist Visit				
Urgent C	are	You pay 25% after deductible		
Emergency Room				
In and Out-patient Services				
Prescription (after deductible)			7 / \$40 copay / \$60 copay 5% up to \$120 copay	

Administrative Profesional Bates: 1/1/2024 - 12/31/2024				
	Anthem Ram HDHP with HSA			
	Employee Monthly Cost			
Tier		Anthem		
Emp Only		\$0		
Emp + 1		\$288		
Emp + Family		\$405		
Family Split*	\$50.50 each			
Deductible		\$1,600 Individual / \$3,200 Family		
Preventative Care		Covered in full		
Office Visit				
Specialist	Visit			
Urgent Care		-		
Inpatient Hospital		You pay 20% after deductible		
In and Out-patient Services				
Prescription				

+Generic / Brand Formulary / Non-Formulary

HEALTH SAVINGS ACCOUNT

If you enroll in a high deductible health plan (HDHP), you are eligible to participate in the health savings account (HSA). An HSA is designed to help you save and pay for healthcare expenses. The HSA belongs to you and the money in the account is yours to keep, even if you leave CSU.



State Classified Rates: 7/1/2023 - 6/30/2024				
Cigı	na (or Kaiser Copa	y Basic	
		Employee N	Ionthly Cost	
Tier		Cigna	Kaiser	
Emp Only		\$40.08	\$38	
Emp + Spouse		\$199.96	\$187.92	
Emp + Children		\$74.26	\$71.60	
Emp + Family		\$281.08	\$310.08	
Deductible		\$1,250 Individual / \$2,500 Family		
Preventative Care		Covered in full		
Office Visit		\$20 copay		
Specialist Visi	t	\$40 copay		
Urgent Care	Urgent Care		\$75 copay	
Emergency Room		20% after deductible		
In and Out-patient Services				
Prescription		+\$7 copay / \$30 copay / \$60 copay Specialty: 20% up to \$120 copay		

		Administrative Profesional Rates: 1/1/2024 - 12/31/2024		
		Anthem Green Plan		
		Employee Monthly Cost		
er	Tier	Anthem		
8	Emp Only	\$O		
.92	Emp + 1	\$288		
60	Emp + Family	\$405		
0.08	Family Split*	\$50.50/each		
mily	Deductible			
	Medi	cal \$1,100 Individual / \$2,200 Family		
	Prescripti	ion \$150 Individual / \$300 Family		
	Preventative Car	e Covered in full		
	Office Visit			
	Specialist Visit			
	Urgent Care			
	Inpatient Hospita	al 20% after deductible		
copay	In and Out-patier Services			
pay	Prescription			

State Classified Rates: 7/1/2023 - 6/30/2024				
Cigna or Kaiser Copay Plus				
		Employee N	lonthly Cost	
Tier		Cigna	Kaiser	
Emp Only		\$94.82	\$59.40	
Emp + Spouse		\$301.08	\$267.04	
Emp + Children		\$166.12	\$126.88	
Emp + Family		\$456.56	\$423.12	
Deductible		\$750 Individual / \$2,000 Family		
Preventative Care		Covered in full		
Office Visit		\$20 copay		
Specialist Visit		\$40 copay		
Urgent Care		\$75 copay		
Emergency Room		\$1,000 copay (waived if admitted)		
In and Out-patient Services		20% after deductible		
Prescription		+\$10 copay / \$30 copay / \$60 copay Specialty: 20% up to \$120 copay		

+Generic / Brand Formulary / Non-Formulary

Administrative Profesional Rates: 1/1/2024 - 12/31/2024			
	An	them POS Plan	
		Employee Monthly Cost	
Tier		Anthem	
Emp Only		\$251	
Emp + 1		\$779	
Emp + Family		\$1,117	
Family Split*		\$406.50/each	
Deductible		\$600 Individual / \$1,200 Family	
(out-of-network only)		plus copays	
Preventative Care		Covered in full	
Office Visit		\$17 copay	
Urgent Care			
Lab & X-Ray		10% coinsurance	
Emergency Room		10% coinsurance after \$75 copay	
In and Out-patient Services		10% coinsurance after \$155 copay	
Prescription		Tier 1 / Tier 2 / Tier 3 \$15 / \$30 / \$50	

DENTAL PLANS

State Classified Rates: 7/1/2023 - 6/30/2024		
Delta Dental Basic		
Employee Monthly Cost		
Tier	Delta Dental	
Emp Only	\$4.54	
Emp + Spouse	\$16.68	
Emp + Children	+ Children \$15.62	
Emp + Family	\$28.68	
Deductible	\$50 Individual / \$150 Family	
Maximum Benefits	\$1,500 per member/per year	
Preventative Services	100% covered	
Basic Services	70% covered	
Major Services	50% covered	
Orthodontics	No coverage	

Rates: 1/1/2024 - 12/31/2024			
Delta Dental Basic			
	Employee Monthly Cost		
Tier		Delta Dental	
Emp Only		\$0	
Emp + 1		\$10	
Emp + Family	\$16		
Family Split*	\$2.50/ea		
Reimbursement Plan		100% for the first \$100; plus 50% of the next \$1,800 per member	
Maximum Benefit		\$1,000 per member/per year	
Orthodontics		No coverage	

Administrative Professional



State Classified Rates: 7/1/2023 - 6/30/2024			
Delta Dental Basic Plus			
	Employee Monthly Cost		
Tier		Delta Dental	
Emp Only		\$10.46	
Emp + Spouse	\$28.52		
Emp + Children	\$28		
Emp + Family	\$47		
Deductible		\$50 Individual / \$150 Family	
Deductible			
Maximum Ben	efits	\$3,000 per member/per year	
Preventative Services		100% covered	
Basic Services		80% covered	
Major Services		50% covered	
Orthodontics		50% covered; \$3,000 lifetime maximum	

Administrative Professional Rates: 1/1/2024 - 12/31/2024

	Delta Dental Plus		
	Employee Monthly Cost		
Tier	Delta Dental		
Emp Only	\$23		
Emp + 1	\$50		
Emp + Family	\$96		
Family Split*	\$42.50/ea		
Deductible	\$50 Individual / \$150 Family		
Maximum Bene	efits \$2,000 per member/per year		
Preventative Ser	vices 100% covered		
Basic Service	es 80% covered		
Major Service	es 60% covered		
Orthodontic	s 50% covered; \$1,800 lifetime maximum		

*Available if both spouse/partners are benefits-eligible and have at least one child covered under The Plan(s).

VISION PLANS

Rates effective 7/1/2023 - 6/30/2024					
	EyeMed				
	Employee Monthly Cost				
Tier	EyeMed Basic (included with medical)	EyeMed Enhanced			
Emp Only	\$O	\$2.20			
Emp + Spouse	\$ 0	\$4.18			
Emp + Children	\$ 0	\$4.40			
Emp + Family	\$0	\$6.46			
Routine Eye Exam	100% after \$25 copay	100% after \$10 copay			
Frames (every 12 mos)	\$130 allowance, plus 20% off balance	\$225 allowance, plus 20% off balance			
Lenses (every 12 mos)	\$25 copay	\$25 copay			
Contact Lenses (in lieu of frames/lenses)	\$130 allowance	\$225 allowance			

State Classified

Administrative Professional Rates effective 1/1/2024 - 12/31/2024		
VSP Vision		
Employee Monthly Cost		
Tier	VSP Vision	
Emp Only	\$5.79	
Emp + 1	\$11.56	
Emp + Family	\$18.64	
Family Split	not available	
Routine Eye Exam	100% after \$40 copay	
Frames	\$175 allowance (every other calendar year)	
Basic Lenses	\$25 copay (each calendar year)	
Contact Lenses	\$175 allowance (each calendar year)	

BASIC LIFE INSURANCE

1x annual salary; min \$50,000 Provided at No Cost to the employee

Administrative Professional		
\$70,000*	Provided at No Cost to the employee	

*Additional amounts over \$50,000 are subject to imputed income.

Eligible employees may purchase additional insurance for themselves and their dependents through:



DISABILITY



In the event of illness, injury, surgery or pregnancy, CSU understands it's important to have financial security for you and your family. The short term (STD) and long term disability (LTD) plans offer either full or partial income replacement beyond the exhaustion of accrued paid sick and annual leave.

SHORT TERM DISABILITY

State Classified		
Provided at No Cost to the employee		
Waiting Period	30 Calendar Days	
Income Replacement	60% Pre-disability Income	
Maximum Benefit Period	180 Calendar Days	

Administrative Professional		
\$4 / month*		
Waiting Period	10 Working Days or when all sick and annual leave is exhausted, whichever is later	
Income Replacement	100% Covered Monthly Salary	
Maximum Benefit Period	60 Working Days	

LONG TERM DISABILITY

State Classified		
Age	PERA Vested	PERA Non-Vested
Under 34	\$0.0008	\$0.0025
35-39	\$0.0010	\$0.0030
40-44	\$0.0013	\$0.0037
45-49	\$0.0017	\$0.0052
50-54	\$0.0026	\$0.0079
55-59	\$0.0040	\$0.0118
60-64	\$0.0055	\$0.0174
65-69	\$0.0059	\$0.0178
70+	\$0.0072	\$0.0216
To determine your monthly rate, multiply your covered monthly salary by the rate of your age shown.		

Waiting Period	Six (6) Months
Income Replacement	60% Pre-Disability income
Maximum Benefit Period	Determined by your age when Disability begins - reference the Certificate of Insurance

Administrative Professional		
Retirement Plan Enrolled	Monthly Premium	
Defined Contribution Plan (DCP)	0.45% of your covered monthly salary* Maximum premium is \$168.75.	
PERA or Federal	0.15% of your covered monthly salary* Maximum premium is \$56.25.	

*The cost of the disability premiums are added as a supplemental amount to the employee's monthly salary and reflected on the pay advice as "STD/LTD Allowance".

Waiting Period	90 Calendar Days
Income Replacement	60% Monthly Salary PERA 69% Monthly Salary DCP
Maximum Benefit Period	Determined by your age when Disability begins - reference the Summary Plan Description

LEAVE ACCRUALS

State Classified		
Annual Leave		
Years of Service	Hours per Month	Max Accrual Rate
1-3 Years	8 hours	192 hours
4-5 Years	9	216
6-10 Years	11	264
11-15 Years	13	312
16+ Years	16	384
_		

Payout

Upon separation, unused annual leave is paid out, subject to the maximum accrual rate above.

Sick Leave		
Years of Service	Hours per Month	Max Accrual Rate
Years 1+	6.66 hours	360 hours

Payout

Upon retirement, employees are paid ¼ of their unused sick leave, up to their individual cap. Note: An employee may have an individual maximum accrual rate that is greater than 360 hours if continuously employed in the state personnel system prior to 7/1/1988.

Part-time employees who work regular, non-fluctuating schedules earn a pro-rated amount of leave based on their regular work schedules.

Administrative Professional

Annual Leave		
Employees	Hours per Month	Max Accrual Rate
Regular or Special 12 month employees only	16 hours	348 hours

Payout

Upon separation, unused annual leave is paid out up to a maximum number of 24 days, minus the number of annual leave days taken in the 30 working days immediately prior to the date of separation. (Must be employed by the University for at least six (6) months.)

	Sick Leave	
Employees	Hours per Month	Max Accrual Rate
9 or 12-Month Employees (Half-time or greater)	10 hours	No Max

Payout

Upon retirement from the University after at least 5 years of continuous benefits eligible service, employees are paid for ¼ of unused sick leave up to a maximum of 120 hours.

Appointments of less than full-time but at least half-time earn a prorated amount of leave based upon the number of days worked.

Sick Leave Advance

All new (or newly benefits eligible) faculty and admin pro employees receive an amount of sick leave equal to that which they are expected to earn during their first year of employment (up to 120 hours).

USING LEAVE

ANNUAL LEAVE

Paid leave used for personal needs including vacation, and advance approval is required.

SICK LEAVE

Paid leave is used for health needs, including appointments, of the employee and other eligible individuals (e.g. the employee's child, parent, spouse, etc.)

MANDATORY RETIREMENT

Colorado State University is required by law to provide this <u>Statement Concerning Your Employment in a Job</u> <u>Not Covered by Social Security (SSA 1945)</u>. Employees of CSU do not participate in the Social Security program and a pension from this job could affect future Social Security benefits to which employees may become entitled. Because earnings from this job are not covered under Social Security, employees are mandated to participate in one of the following retirement programs:

- Colorado Public Employees Retirement Association (PERA)
- The Defined Contribution Plan (DCP)

State employees are required to participate in PERA. Only those newly appointed Administrative Professional employees with qualifying prior service in PERA retirement system may be eligible to elect to continue membership in that retirement plan. All other new appointees must enroll in the DCP.



PERA Defined Benefit Plan 401(a)		
PERA		
Employee Contribution	Employer Contribution	
11%	21.61%*	
Eligibility	Must have 12 months of prior PERA service credit	
Retirement Benefit	Lifetime retirement benefit (pension)	
Investments	Managed by PERA, investing on employee's behalf	
Social Security offset applies	Yes	

*The State contributes a percentage of its total payroll to Colorado PERA according to State law. Legislation was enacted to require additional contributions for the Amortization Equalization Disbursement (AED) and the Supplemental Amortization Equalization Disbursement (SAED), which are reflected above.



University Defined Contribution Plan 401(a)		
Fidelity		
Employee Contribution	Employer Contribution	
8%	12%	
Retirement Benefit	Retirement benefits depend on the success of investment performance	
Investments	Employees manage own investments	
Social Security offset applies	Yes	

VOLUNTARY RETIREMENT

CSU offers employees the opportunity to contribute to tax-deferred investment accounts. These accounts can supplement the mandatory retirement plans.

- Fidelity 403(b)
- PERA 457
- PERA 401(k)





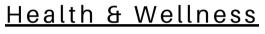


HEALTH & WELL-BEING

Human Resources has launched an online well-being hub to help employees navigate the complex maze of both official and unofficial benefits and support available to them. The hub organizes information by topic: health and wellness, home and family, financial and legal, integrating work and life, and arts, social and community.

bewell.colostate.edu

ACC -





<u>Home & Family</u>



<u>Financials & Legal</u>



Integrating Work & Life



Arts, Social & Community

PLAN RESOURCES



QUESTIONS? CONTACT HUMAN RESOURCES

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