

Monthly Premium Rate Sheet
 Adams State College / 2005 CHEIBA Trust Benefits
 (Colorado Higher Education Insurance Benefits Alliance Trust)

Health Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield BlueAdvantage Point-of-Service Plan, PRIME Health Plan and Custom Plus Health Plan		
Employee Only	\$299.00	\$104.77
Employee and Family	\$779.00	\$272.99

Dental Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield Anthem Dental BlueClassic or BluePreferred		
Employee Only	\$36.00	\$12.00
Employee and Family	\$89.00	\$32.06

Vision Service Plan (VSP)	<u>Total Cost</u>	<u>Your Cost</u>
Employee	\$ 9.78	\$ 9.78
Employee + 1	\$18.33	\$18.33
Employee and Family	\$26.63	\$26.63

Flexible Benefit Plan Administration Fees	(Employer Paid)
One or Both Spending Accounts	\$5.00 per month

Monthly Premium Rate Sheet

Auraria Higher Education Center / 2005 CHEIBA Trust Benefits (Colorado Higher Education Insurance Benefits Alliance Trust)

Health Insurance (Same rates for all choices) Total Cost Your Cost

Anthem Blue Cross and Blue Shield
BlueAdvantage Point-of-Service Plan,
PRIME Health Plan and Custom Plus Health Plan

Employee Only	\$299.00	\$ 00.00
Employee and Family	\$779.00	\$389.00

Dental Insurance (Same rates for all choices) Total Cost Your Cost

Anthem Blue Cross and Blue Shield
Anthem Dental BlueClassic or BluePreferred

Employee Only	\$36.00	\$00.00
Employee and Family	\$89.00	\$44.00

Vision Service Plan (VSP) Total Cost Your Cost

Employee	\$ 9.78	\$ 9.78
Employee + 1	\$18.33	\$18.33
Employee and Family	\$26.63	\$26.63

Basic Term Life Insurance (Life and AD&D) Total Cost Your Cost

Anthem Life (Premiums per \$10,000 death benefit)

Active Employees	\$0.33/\$1,000	\$0.00 / \$1,000
Retired Employees (Prior to 1/1/97)	\$1.28/\$1,000	\$0.00 / \$1,000
Retired Employees (After 1/1/97)	\$2.36/\$1,000	\$0.00 / \$1,000

Group Long Term Disability Total Cost Your Cost

Standard Insurance \$0.30 p/\$100 \$0.00 p/\$100

Paid to a maximum salary of
\$10,500 per month

Flexible Benefit Plan Administration Fees Total Cost Your Cost

One or Both Spending Accounts	\$5.00 p/mo	\$0.00 p/mo
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Monthly Premium Rate Sheet
 Colorado School of Mines / 2005 CHEIBA Trust Benefits
 (Colorado Higher Education Insurance Benefits Alliance Trust)

Health Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield BlueAdvantage Point-of-Service Plan, PRIME Health Plan and Custom Plus Health Plan		
Employee Only	\$299.00	\$ 00.00
Employee and Family	\$779.00	\$ 00.00

Dental Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield Anthem Dental BlueClassic or BluePreferred		
Employee Only	\$36.00	\$00.00
Employee and Family	\$89.00	\$00.00

Vision Service Plan (VSP)	<u>Total Cost</u>	<u>Your Cost</u>
Employee	\$ 9.78	\$ 9.78
Employee + 1	\$18.33	\$18.33
Employee and Family	\$26.63	\$26.63

Flexible Benefit Plan Administration Fees	<u>(Employee Paid)</u>
One or Both Spending Accounts	\$5.00 per month deducted from spending account

Monthly Premium Rate Sheet

Colorado State University at Pueblo / 2005 CHEIBA Trust Benefits (Colorado Higher Education Insurance Benefits Alliance Trust)

1) Health Insurance (Same rates for all choices) Total Cost Your Cost

Anthem Blue Cross and Blue Shield
BlueAdvantage Point-of-Service Plan,
PRIME Health Plan and Custom Plus Health Plan

Employee Only	\$299.00	\$149.50
Employee and Family	\$779.00	\$389.50

2) Dental Insurance (Same rates for all choices) Total Cost Your Cost

Anthem Blue Cross and Blue Shield
Anthem Dental BlueClassic or BluePreferred

Employee Only	\$36.00	\$18.00
Employee and Family	\$89.00	\$44.50

3) Basic Term Life Insurance (Employer pays 50% & Employee pays 50%)

Anthem Life (Premiums per \$10,000 death benefit)

	<u>Life</u>	<u>AD&D</u>
Active Employees	\$0.30/\$1,000	\$0.03/\$1,000
Retired Employees (Prior to 1/1/97)	\$1.25/\$1,000	\$0.03/\$1,000
Retired Employees (After 1/1/97)	\$2.33/\$1,000	\$0.03/\$1,000

4) Group Long Term Disability (Employer pays 50% & Employee pays 50%)

Standard Insurance \$0.30 p/\$100 of pay up to a
Max. salary of \$10,500 p/mo.

Vision Service Plan (VSP) Total Cost Your Cost

Employee	\$ 9.78	\$ 9.78
Employee + 1	\$18.33	\$18.33
Employee and Family	\$26.63	\$26.63

Flexible Benefit Plan Administration Fees Total Cost Your Cost

(Employee-Pays 50% of cost)

One or Both Spending Accounts	\$5.00	\$2.50
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*The following
six plans are
voluntary –
(here and on
back side)*

Monthly Premium Rate Sheet
 Fort Lewis College / 2005 CHEIBA Trust Benefits
 (Colorado Higher Education Insurance Benefits Alliance Trust)

Health Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield BlueAdvantage Point-of-Service Plan, PRIME Health Plan and Custom Plus Health Plan		
Employee Only	\$299.00	\$ 90.00
Employee and Family	\$779.00	\$348.00

Dental Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield Anthem Dental BlueClassic or BluePreferred		
Employee Only	\$36.00	\$ 8.41
Employee and Family	\$89.00	\$44.50

Vision Service Plan (VSP)	<u>Total Cost</u>	<u>Your Cost</u>
Employee	\$ 9.78	\$ 9.78
Employee + 1	\$18.33	\$18.33
Employee and Family	\$26.63	\$26.63

Basic Term Life Insurance	(Employee Paid)	
Anthem Life (Premiums per \$10,000 death benefit)		
	<u>Life</u>	<u>AD&D</u>
Active Employees	\$0.30/\$1,000	\$0.03/\$1,000

Long Term Disability Insurance	(Employee Paid)	
Standard Insurance	\$0.30 p/\$100 of pay up to Max. salary of \$10,500 p/mo.	

Monthly Premium Rate Sheet Monthly Premium Rate Sheet
Mesa State College / 2005 CHEIBA Trust Benefits
(Colorado Higher Education Insurance Benefits Alliance Trust)

Health Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield BlueAdvantage Point-of-Service Plan, PRIME Health Plan and Custom Plus Health Plan		
Employee Only	\$299.00	\$120.20
Employee and Family	\$779.00	\$313.13
Rocky Mountain Health Plans – Option 1 (C50) (Restricted - Available only if currently enrolled)		
Employee Only	\$314.43	\$114.47
Employee and Family	\$732.64	\$237.32
Dental Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield Anthem Dental BlueClassic or BluePreferred		
Employee Only	\$36.00	\$14.50
Employee and Family	\$89.00	\$38.06
Vision Service Plan (VSP)	<u>Total Cost</u>	<u>Your Cost</u>
Employee	\$ 9.78	\$ 9.78
Employee + 1	\$18.33	\$18.33
Employee and Family	\$26.63	\$26.63
Flexible Benefit Plan Administration Fees	(Employer Paid)	
One or Both Spending Accounts	\$5.00 per month	

Monthly Premium Rate Sheet

Metropolitan State College of Denver / 2005 CHEIBA Trust Benefits (Colorado Higher Education Insurance Benefits Alliance Trust)

Health Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
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Anthem Blue Cross and Blue Shield
BlueAdvantage Point-of-Service Plan,
PRIME Health Plan and Custom Plus Health Plan

Employee Only	\$299.00	\$120.77
Employee and Family	\$779.00	\$314.49

Dental Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
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Anthem Blue Cross and Blue Shield
Anthem Dental BlueClassic or BluePreferred

Employee Only	\$36.00	\$14.50
Employee and Family	\$89.00	\$38.06

Vision Service Plan (VSP)	<u>Total Cost</u>	<u>Your Cost</u>
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Employee	\$ 9.78	\$ 9.78
Employee + 1	\$18.33	\$18.33
Employee and Family	\$26.63	\$26.63

Flexible Benefit Plan Administration Fees	(Employer Paid)
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One or Both Spending Accounts	\$5.00 per month
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Monthly Premium Rate Sheet

University of Northern Colorado / 2005 CHEIBA Trust Benefits (Colorado Higher Education Insurance Benefits Alliance Trust)

Health Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield BlueAdvantage Point-of-Service Plan, PRIME Health Plan and Custom Plus Health Plan		
Employee Only	\$299.00	\$149.50
Employee and Family	\$779.00	\$389.50
Dental Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield Anthem Dental BlueClassic or BluePreferred		
Employee Only	\$36.00	\$18.00
Employee and Family	\$89.00	\$44.50
Vision Service Plan (VSP)	<u>Total Cost</u>	<u>Your Cost</u>
Employee	\$ 9.78	\$ 9.78
Employee + 1	\$18.33	\$18.33
Employee and Family	\$26.63	\$26.63
Basic Term Life Insurance (Life and AD&D)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Life (Premiums per \$10,000 death benefit)		
Active Employees	\$0.33/\$1,000	\$0.165/\$1,000
Retired Employees (Prior to 1/1/97)	\$1.28/\$1,000	\$1.28/\$1,000
Retired Employees (After 1/1/97)	\$2.36/\$1,000	\$2.36/\$1,000
Group Long Term Disability	<u>Total Cost</u>	<u>Your Cost</u>
Standard Insurance	\$0.30 p/\$100	\$0.15 p/\$100
	Paid to a maximum salary of \$10,500 per month	
Flexible Benefit Plan Administration Fees	<u>Total Cost</u>	<u>Your Cost</u>
One or Both Spending Accounts	\$5.00 p/mo	\$5.00 p/mo

Monthly Premium Rate Sheet
 Western State College / 2005 CHEIBA Trust Benefits
 (Colorado Higher Education Insurance Benefits Alliance Trust)

Health Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield BlueAdvantage Point-of-Service Plan, PRIME Health Plan and Custom Plus Health Plan		
Employee Only	\$299.00	\$120.77
Employee and Family	\$779.00	\$314.49
Dental Insurance (Same rates for all choices)	<u>Total Cost</u>	<u>Your Cost</u>
Anthem Blue Cross and Blue Shield Anthem Dental BlueClassic or BluePreferred		
Employee Only	\$36.00	\$14.50
Employee and Family	\$89.00	\$38.06
Vision Service Plan (VSP)	<u>Total Cost</u>	<u>Your Cost</u>
Employee	\$ 9.78	\$ 9.78
Employee + 1	\$18.33	\$18.33
Employee and Family	\$26.63	\$26.63
Flexible Benefit Plan Administration Fees	(Employer Paid)	
One or Both Spending Accounts	\$5.00 per month	

Voluntary Term Life Insurance (Employee and/or Spouse)

Anthem Life (Premium per \$10,000 death benefit)

<u>Attained Age</u>	<u>Smoker</u>	<u>Non-Smoker</u>
less than 35	\$ 1.40	\$.90
35-39	\$ 2.00	\$ 1.20
40-44	\$ 3.10	\$ 1.70
45-49	\$ 5.70	\$ 3.00
50-54	\$ 9.20	\$ 4.70
55-59	\$ 16.40	\$ 8.60
60-64	\$ 20.00	\$ 11.20
65-69	\$ 32.20	\$ 19.40
70-74	\$ 51.00	\$ 33.70
75-79	\$ 94.40	\$ 68.90
80-84	\$126.40	\$101.20
85-89	\$201.40	\$181.50

Voluntary Dependent Child Term Life (\$5,000 per child) \$1.50 total p/mo.

Voluntary Accidental Death & Dismemberment

Mutual of Omaha

<u>Employee Principal Sum</u>	<u>Employee Only</u>	<u>Employee and Family</u>
\$ 10,000.00	\$.40	\$.58
25,000.00	\$ 1.00	\$ 1.45
50,000.00	\$ 2.00	\$ 2.90
75,000.00	\$ 3.00	\$ 4.35
100,000.00	\$ 4.00	\$ 5.80
150,000.00	\$ 6.00	\$ 8.70
200,000.00	\$ 8.00	\$11.60
250,000.00	\$10.00	\$14.50
300,000.00	\$12.00	\$17.40

You may select any of the benefit amounts shown; however, your Principal Sum may not exceed 10 times your annual earnings. Employee and Family includes coverage for you, your spouse and eligible children.

Participant Advocate Link (P.A.L.)

Gallagher Benefit Services, Inc

303-889-2790
1-800-943-0650