

**AMENDMENT NO. EIGHT
TO THE
UNIVERSITY OF COLORADO HEALTH AND WELFARE PLAN**

WHEREAS, The Regents of the University of Colorado, a body corporate and a state institution of higher education of the State of Colorado (the “University” or “University of Colorado”) maintain the University of Colorado Health and Welfare Plan (the “Plan”) for the benefit of eligible employees; and

WHEREAS, Section 6.1 of the Plan reserves to the University the right to amend the Plan

NOW THEREFORE, the Plan is amended effective January 1, 2020, unless otherwise noted herein, to read as follows:

1. Appendix II Eligibility for Participation is amended in its entirety, effective January 1, 2020, to read as follows:

“APPENDIX II

ELIGIBILITY FOR PARTICIPATION

A. University

B. UCH

C. UPI

A. UNIVERSITY ELIGIBILITY

The eligibility matrix for the University is hereby incorporated by reference and any change in eligibility in the matrix is deemed to be an amendment made by the Plan Sponsor. The matrix can be found at <https://www.cu.edu/employee-services/policies/benefit-eligibility-matrix>.

Employees of the University and their dependents, former Employees of the University and their dependents, and Regent Board Members and their dependents are not eligible for CU Health Plan-International (unless located outside of the United States for six months or more conducting University business), CU Health Plan – Exclusive2, and CU Health Plan-HDHP2.

Employees of the University who are located outside of the United States for six months or more conducting University business and their dependents are only eligible for CU Health Plan – International.

B. UCH ELIGIBILITY

Eligible Employees:

All regular employees who have a FTE status of .5 or more, who are working at least 20 hours a week.

Effective Date of Coverage: The first day of the month coincident with or immediately after completing the eligibility requirements.

Special Category: PERA Guarantee Retiree – a person who: (1) was an employee of the University of Colorado Hospital (“University Hospital”) on or prior to the date the assets and liabilities of University Hospital were transferred to and assumed by UCH; (2) elected on or after such transfer date to become an employee of UCH; (3) retired from UCH with at least 10 years of service with University Hospital and/or UCH; and (4) is at least 55 but under 65 years of age.

Certain otherwise eligible Employees of UCH and their dependents and former Employees of UCH and their dependents are eligible for CU Health Plan-Kaiser, as determined by UCH.

Certain otherwise eligible Employees of UCH and their dependents and former Employees of UCH and their dependents are eligible for CU Health Plan-Extended, as determined by UCH.

Employees of UCH and their dependents and former Employees of UCH and their dependents are not eligible for CU Health Plan-Vision, CU Health Plan-Exclusive, CU Health Plan-High Deductible/HSA Compatible or CU Health Plan-International.

Employees of UCH and their dependents and former Employees of UCH and their dependents are not eligible for CU Health Plan – Essential Dental, CU Health Plan – Choice Dental, and CU Health Plan – Premier Dental.

C. UPI ELIGIBILITY

Eligible Employees: All regular employees who have a FTE status of .5 or more, and are on UPI's monthly pay cycle. Temporary employees are not eligible.

Effective Date of Coverage: The first day of the month coincident with or immediately following the regular employee’s start date.

Special Category: A retiree under 65 who has retired from UPI as an Administration Director who has met the qualifications described in the UPI Administration Executive Retirement Policy, Medical & Dental Insurance Benefit, Policy Statement.

Employees of UPI and their dependents and former Employees of UPI and their dependents are not eligible for CU Health Plan – Extended, CU Health Plan – Exclusive2, CU Health Plan-HDHP2 or CU Health Plan - International.”

2. Appendix III Component Documents is amended in its entirety, effective January 1, 2020, to read as follows:

“COMPONENT DOCUMENTS

Effective January 1, 2020, or unless otherwise noted herein, the terms, conditions and limitations of the benefits described in Article III of the Plan are contained in the Component Documents listed from time to time in this Appendix III which are incorporated herein by reference. All Component Documents are healthcare components subject to HIPAA. The Component Documents listed below can be found at <http://www.becolorado.org/plans>.

A. Medical and Prescription Benefits

1. Benefits Booklet for CU Health Plan - High Deductible/HSA Compatible
 2. Benefits Booklet for CU Health Plan – HDHP2
 3. Benefits Booklet for CU Health Plan - Exclusive
 - a. Includes Vision Benefits Booklet (Eye Exam only)
 4. Benefits Booklet for CU Health Plan – Exclusive2
 - a. Includes Vision Benefits Booklet (Eye Exam only)
 5. Benefits Booklet for CU Health Plan – Kaiser
 6. Benefits Booklet for CU Health Plan – International
 7. Benefits Booklet for CU Health Plan – Medicare
 8. Benefits Booklet for CU Health Plan – Vision
 9. Benefits Booklet for CU Health Plan – Extended
 10. Benefits Booklet for CU Health Plan – Essential Dental
 11. Benefits Booklet for CU Health Plan – Choice Dental
 12. Benefits Booklet for CU Health Plan – Premier Dental.”
3. The “Administrator” subsection of Appendix IV, “Administrative Facts” of the Plan is amended, effective January 1, 2020, by adding the following paragraph to the end of the subsection:
- “Worldwide Insurance Services, LLC, d/b/a GeoBlue and underwritten by 4 Ever Life Insurance Company (*for CU Health Plan –International*)
933 First Avenue, King of Prussia, PA 19406 ”
4. The “Named Fiduciary/Trustee Names and Addresses” subsection of Appendix IV, “Administrative Facts” of the Plan is amended in its entirety, effective November 11, 2019, to

read as follows:

<p>Named Fiduciary/Trustee Names and Addresses</p>	<p>Trustees:</p> <p>Kathy Nesbitt C. Dan Reiber Dallis Howard-Crow Elizabeth Kissick John D. McDowell Michael Cancro Todd Saliman</p> <p>Address: University of Colorado Health and Welfare Trust 1800 Grant Street, Suite 800 Denver, CO 80203</p>
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This Amendment No. Eight may be executed by original signature or electronic signature in multiple counterparts and may be delivered by fax or other electronic means, each of which shall be deemed to be an original, and all of which, when taken together shall constitute one (1) document.

The University of Colorado has caused this Amendment No. Eight to be effective as provided herein, and executed as provided below.

PLAN SPONSOR

THE REGENTS OF THE UNIVERSITY OF COLORADO, a body corporate and state institution of higher education of the State of Colorado

By: _____
Mark Kennedy
President

Date: _____

The Participating Employers agree to Amendment No. Eight to the University of Colorado Health and Welfare Plan effective as provided herein.

PARTICIPATING EMPLOYERS (IN ADDITION TO PLAN SPONSOR)

UNIVERSITY OF COLORADO HOSPITAL AUTHORITY, a body corporate and political subdivision of the State of Colorado

By: _____
Dallis Howard-Crow
Chief Human Resources Officer

Date: _____

UNIVERSITY PHYSICIANS, INCORPORATED

By: _____
Brian T. Smith
Executive Director

Date: _____

ACKNOWLEDGMENT

I, Kathy Nesbitt, Chairperson and Secretary of the Trust Committee of the University of Colorado Health and Welfare Trust (“Trust”), hereby acknowledge notification and receipt on behalf of the Trust, of Amendment No. Eight to the University of Colorado Health and Welfare Plan (“Plan”).

**UNIVERSITY OF COLORADO HEALTH
AND WELFARE TRUST**

By: _____
Kathy Nesbitt
Chairperson of the Trust Committee and
Secretary

Dated: December 10, 2019