Extended [1]

You'll have access to Anthem's nationwide network of physicians and facilities under this Anthem-administered plan. A primary care physicianPrimary Care Provider (PCP)A physician (medical doctor or doctor of osteopathic medicine), nurse practitioner, clinical nurse specialist or physician assistant, as allowed under state law, who provides, coordinates or helps a patient access a range of health care services [2] is not required, and members can refer themselves to doctors of their choice within Anthem's networkNetworkThe facilities, providers and suppliers with whom your health insurer or plan has contracted to provide health care services [3], including specialistsSpecialistA physician specialist focuses on a specific area of medicine or a group of patients to diagnose, manage, prevent, or treat certain types of symptoms and conditions. A non-physician specialist is a provider who has more training in a specific area of health care. [4].

This plan provides one no-cost preventative mental health visit per plan year. Learn more about your mental health benefit options on our Mental Health Resources page [5].

There is no out-of-network coverage except for urgent and/or emergency care.

Plan details

- CU Health Plan - Extended Benefits Coverage Summary [6](13 pages)
- CU Health Plan - Extended Benefits Booklet [7] (117 pages)
- Anthem Preventative Care Guidelines [8]

Covered providersProviderAn individual or facility that provides health care services such as a doctor, nurse, chiropractor, hospital, rehabilitation center, etc. [9] and medications

- Find a provider/urgent care [10]
  - Call 1-855-646-4752
- Prescription coverage [11]
  - CVS Formulary [12]
  - Call 1-888-964-0121
- WINFertility [13]

Features and considerations

Plan type	PPOPreferred Provider Organization (PPO)A health care plan that has a contractual agreement with providers to offer health care services at discounted, negotiated fees within a network. The PPO plans may require some cost-sharing with deductibles, copays and/or coinsurance. [14] - Anthem's Nationwide Network

DeductibleDeductible An amount that you are required to pay before the plan will begin to reimburse for covered services. [15]	**Plan Year 2023-24**: $750 per Individual (each member must meet their $750) **Plan Year 2024-25**: $1,000 per Individual (each member must meet their $1,000) **Plan Year 2023-24**: $1,500 family max (2+ members) **Plan Year 2024-25**: $2,000 family max (2+ members) 10% coinsurance after deductible is met
Out-of-pocket limit	$9,100/individual; $18, 200/family for in-network providers
Office visit	Primary care provider - $40/visit SpecialistSpecialistA physician specialist focuses on a specific area of medicine or a group of patients to diagnose, manage, prevent, or treat certain types of symptoms and conditions. A non-physician specialist is a provider who has more training in a specific area of health care. [4] - $50/visit Urgent CareUrgent CareCare for an illness, injury or condition serious enough that a reasonable person would seek care right away, but not so severe as to require emergency room care [16] - $40/visit Office visit copaysCopayment (copay)A fixed-dollar amount that you must pay out of your pocket at the time of service to a provider or a facility for a specific health covered service. Copays do not apply to the deductible requirement. For example, an office visit may have a copay of $30 under the Exclusive Plan and $40 under the Extended. You must pay the amount at the time of service. [17] do not apply toward the deductible.DeductibleAn amount that you are required to pay before the plan will begin to reimburse for covered services. [15]

Emergency care **Emergency Care** **A medical or behavioral health condition that must be treated at the emergency department of a hospital due to an illness, injury, symptom or condition severe enough to risk serious danger to your health (or, with respect to a pregnant woman, the health of her unborn child) if you didn't get medical attention. See where and when to get care.** [18]	$250 copayCopayment (copay)A fixed-dollar amount that you must pay out of your pocket at the time of service to a provider or a facility for a specific health covered service. Copays do not apply to the deductible requirement. For example, an office visit may have a copay of $30 under the Exclusive Plan and $40 under the Extended. You must pay the amount at the time of service. [17] (waived if admitted)
Prescription Drug (Rx) **30-day supply***	Tier 1: $10 Tier 3: $75 Tier 2: $50 Tier 4: $100 *Maintenance medications may be purchased at a CVS Network Retail Pharmacy. After three fills, a CVS Retail Pharmacy, Costco, King Soopers, City Market or CVS Mail Order [19]must be used for up to a 90-day supply. Specialty medications (Tier 4) may be purchased at a CVS Network Retail Pharmacy. After three fills, CVS Specialty Pharmacy must be used.
Mail Order Rx **90-day supply**	Tier 1: $20 Tier 3: $150 Tier 2: $100 Tier 4 $75** **For a 30-day supply

Groups audience:
Employee Services

Right Sidebar:
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ES: Benefits & Wellness - Contact

Source URL:https://www.cu.edu/employee-services/extended

Links
[1] https://www.cu.edu/employee-services/extended [2] https://www.cu.edu/es-benefits-glossary/primary-care-provider-pcp [3] https://www.cu.edu/es-benefits-glossary/network [4] https://www.cu.edu/es-benefits-glossary/specialist [5] https://www.cu.edu/employee-services/benefits-wellness/mental-health-resources [6] https://www.cu.edu/docs/cu-health-plan-extended-benefits-summary [7] https://www.cu.edu/docs/cu-health-plan-extended-benefits-booklet [8] https://www.anthem.com/preventive-care/ [9] https://www.cu.edu/es-benefits-glossary/provider [10] https://www.anthem.com/cuhealthplan/find-a-doctor/ [11] https://www.cu.edu/employee-services/benefits-wellness/cvs-caremark-pharmacy-services [12] https://info.caremark.com/dig/acsdruglist [13] https://managed.winfertility.com/cuhealthplan/ [14] https://www.cu.edu/es-benefits-glossary/preferred-provider-organization-ppo [15] https://www.cu.edu/es-benefits-glossary/deductible [16] https://www.cu.edu/es-benefits-glossary/urgent-care [17] https://www.cu.edu/es-benefits-glossary/copayment-copay [18] https://www.cu.edu/es-benefits-glossary/emergency-care [19] http://node/242837