

## **Extended** <sup>[1]</sup>

### **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 <sup>[2]</sup> 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 <sup>[3]</sup>, including specialists <sup>[4]</sup>.  
SpecialistA 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. <sup>[4]</sup>.

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 <sup>[5]</sup>.

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

#### **Plan details**

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

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

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

## **Features & Considerations**

<b>Plan type</b>	<p><u>PPOPreferred Provider Organization (PPO)</u>  <u>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.</u> <sup>[14]</sup>  - Anthem's Nationwide Network</p>
<p><u><b>DeductibleDeductibleAn amount that you are required to pay before the plan will begin to reimburse for covered services.</b></u> <sup>[15]</sup></p>	<p>\$1,000 per Individual (each member must meet their \$1,000)</p> <p>\$2,000 family max (2+ members)</p> <p>10% coinsurance after deductible is met</p>
<b>Out-of-pocket limit</b>	<p>\$9,100/individual; \$18,200/family for in-network providers</p>

Primary care provider -  
\$40/visit

SpecialistSpecialist

A 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. <sup>[4]</sup>

- \$50/visit

Urgent CareUrgent Care

Care 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 <sup>[16]</sup> - \$40/visit

## Office visit

Office visit copays

Copayment (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. <sup>[17]</sup> do  
not apply toward the

**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.** <sup>[18]</sup>

**\$250 copay****Copayment (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.** <sup>[17]</sup>  
(waived if admitted)

Tier 1: \$10

Tier 3: \$75

Tier 2: \$50

Tier 4: \$100

**Prescription Drug (Rx)  
30-day supply\***

\*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 must be used for up to a 90-day supply <sup>[11]</sup>.

\*Specialty medications (Tier 4) may be purchased at a CVS Network Retail Pharmacy. After three fills, CVS Specialty Pharmacy must be used.

Tier 1: \$20

Tier 3: \$150

Tier 2: \$100

Tier 4 \$75\*\*

\*\*For a 30-day supply

**Mail Order Rx  
90-day supply**

**Groups audience:**  
Employee Services  
**Right Sidebar:**

ES: Benefits & Wellness - New Employee Sidebar

ES: Benefits & Wellness - Contact

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**Source URL:**<https://www.cu.edu/employee-services/benefits-wellness/new-employee/medical-plans/extended>

### Links

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[8] <https://www.anthem.com/preventive-care/> [9] <https://www.cu.edu/es-benefits-glossary/provider>  
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