High Deductible [1]

CU Health Plan - High Deductible/HSA Compatible

A tax-savings account that must be paired with a High-Deductible Health Plan, which can be used to pay for qualified health care expenses now or in the future. An HSA is a savings account that you own. The funds in an HSA carry forward year after year, even if you change employers or retire. [2] is perfect for planners and savers. This Anthem-administered plan gives you broad access to health care services inside and outside your network. The facilities, providers and suppliers with whom your health insurer or plan has contracted to provide health care services [3] — but requires that you first meet your deductible. Once you've satisfied the deductible, you'll be responsible for paying coinsurance. The portion of expenses that you have to pay for certain covered services, calculated as a percentage. For example, if the coinsurance rate is 20%, then you are responsible for paying 20% of the bill, and the insurance company will pay 80%. [4] for care. This plan offers Anthem's nationwide network. The facilities, providers and suppliers with whom your health insurer or plan has contracted to provide health care services [3] of providers and facilities. You'll also have the flexibility to schedule your own appointments with specialists. 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. [5] - no Primary Care Provider. 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 or referrals. [6] A written order from your primary care provider for you to see a specialist or receive certain health care services for any covered service that cannot be performed by your primary care provider. This applies to our Anthem Exclusive and Kaiser plans. [7] needed.

Plan details

- CU Health Plan - High Deductible (HSA Compatible) Benefits Coverage Summary [8]
- CU Health Plan - High Deductible (HSA Compatible) Benefits Booklet [9]
- Anthem Preventative Care Guidelines [10]

Covered providers

An individual or facility that provides health care services such as a doctor, nurse, chiropractor, hospital, rehabilitation center, etc. [11] and medications

- Find a provider/urgent care [12]
- Call Anthem at 1-855-646-4752
- Learn about prescription coverage and see FAQs [13]
- Call CVS Caremark at 1-888-964-0121
Features and considerations

Plan type

PPO
Preferred 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.

HSA
Health Savings Account
A tax-savings account that must be paired with a High-Deductible Health Plan, which can be used to pay for qualified health care expenses now or in the future. An HSA is a savings account that you own. The funds in an HSA carry forward year after year, even if you change employers or retire.

Deductible
Deductible -
High
Deductible Plan
An amount that you are required to pay before the plan will begin to reimburse for covered services. This plan has $1,500 deductible for single coverage or an “aggregate deductible” of $3,000 for family coverage (2+ members). This means that one or all members can contribute collectively to the $3,000 deductible.

In-network Providers

Out-of-network
Non-participating providers or facilities that do not enter into a network agreement, usually resulting in higher out of pocket expenses to you.

Providers

$1,500 single coverage
$3,000 single coverage

$3,000 family coverage (2+ members)
$6,000 family coverage (2+ members)

Any member may contribute to overall deductible.
Any member may contribute to overall deductible.
<table>
<thead>
<tr>
<th>Preventative care</th>
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<tbody>
<tr>
<td>Preventative Care - Medical</td>
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<td>A routine health care check-up that will include tests or exams, flu and routine shots, and patient counseling to prevent or discover illness, disease or other health problems. All recommended preventive services would be covered as required by the Affordable Care Act (ACA) and applicable state law. [17]</td>
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<tr>
<th>Out-of-pocket limit</th>
<th>$3,000 single coverage</th>
<th>$6,000 single coverage</th>
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<td></td>
<td>$6,000 family coverage (2+ members)</td>
<td>$12,000 family coverage (2+ members)</td>
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| Office visit | 15% coinsurance after deductible | 35% coinsurance after deductible |
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]

15% coinsurance after deductible
Covered as In-Network

15% coinsurance after deductible

Prescription drug [13] (Rx)
30-day supply

20% coinsurance after deductible

20% coinsurance after deductible

Mail order Rx
UCHealth

Available for 90-day supply maintenance medications (not required)

N/A

Source URL: https://www.cu.edu/employee-services/benefits-wellness/current-employee/medical-plans/high-deductible

Links
[1] https://www.cu.edu/employee-services/benefits-wellness/current-employee/medical-plans/high-deductible