High Deductible [1]

CU Health Plan - High Deductible/HSA Compatible

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 [4]. 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

Primary 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 [6] or referrals. 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] (12 pages)
- CU Health Plan - High Deductible (HSA Compatible) Benefits Booklet [9] (111 pages)
- 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
- Call Anthem at 1-855-646-4752
- Learn about prescription coverage and see FAQs
- Call CVS Caremark at 1-888-964-0121

### Features and considerations

<table>
<thead>
<tr>
<th>Plan type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPO</td>
<td>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.</td>
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<tr>
<td>HSA Compatible</td>
<td>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.</td>
</tr>
</tbody>
</table>

**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.
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 than one or all members can contribute collectively to the $3,000 deductible. [16]

Out-of-pocket limit

<table>
<thead>
<tr>
<th>Single Coverage</th>
<th>Family Coverage (2+ members)</th>
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<td>$1,500</td>
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Preventative care
Preventative Care - Medical
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] visit

Office visit 15% coinsurance after deductible 35% coinsurance after deductible
Emergency care

An emergency care condition is 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

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

Groups audience:
Employee Services

Right Sidebar:
ES: Benefits & Wellness - New Employee Sidebar
ES: Benefits & Wellness - Contact

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

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