CU Health Plan - Medicare, provided by Anthem Blue Cross Blue Shield, is available to surviving spouses/dependents who are enrolled in Medicare Parts A and B. **You cannot participate in this plan if you are not enrolled in Medicare Parts A and B. This is not a Medicare supplement or MediGap plan.**

Medicare Parts A and B is your primary coverage for any claim. CU Health Plan - Medicare pays secondary for services covered by Medicare. The plan will not cover services that Medicare does not pay. CU Medicare will pay up to the allowable amount set by Medicare Parts A and B for that specific service. Most medical services or supplies not covered under Medicare are not covered benefits under this plan.

**Plan Details**

- CU Health Plan - Medicare Benefits Coverage Summary [2] (7 pages)
- CU Health Plan - Medicare Benefits Booklet [3](74 pages)
- Anthem Preventative Care Guidelines [4]

**Covered providers and medic**

- Find a doctor or urgent care [5]
  - Call 1-800-735-6072
- Access the CVS Formulary [6]
  - For pharmacy questions, call 1-888-964-0121
- Find an in-network pharmacy [7]

**Over/Under Plan**

CU Health Plan - Medicare/High Deductible is available only to covered CU surviving spouses and their spouses/dependents when at least one member is eligible for Medicare and at least one member is non-Medicare eligible. The partner who is not Medicare-eligible must enroll in CU Health Plan - High Deductible to keep their CU medical coverage. Please review details of both the Medicare and High Deductible Plans if you are considering this option.

You cannot pair the University of Colorado's Health Savings Account with the Over/Under plan, but you may enroll in a HSA outside of CU.

Features and Considerations
Plan Type: PPO

Network: Medicare has a nationwide service.
CU Health Plan - Medicare pays secondary for services covered by Medicare.

Deductible: $240 per individual, per plan year
Out-of-Pocket Limit: $2,400/Single; $7,200/Family

Preventative Care Visit: $0 coinsurance and no deductible

Office Visit (Primary/Specialist): 20% coinsurance after deductible - Coverage for Medicare-approved charges not reimbursed by Medicare
Diagnostic Tests/Imaging: 20% coinsurance after deductible - Coverage for Medicare-approved charges not reimbursed by Medicare
Emergency/Urgent Care: 20% coinsurance after deductible - Coverage for Medicare-approved charges not reimbursed by Medicare

Prescription Benefits

Plan coverage is determined by medication type, supply amount and pharmacy services:

<table>
<thead>
<tr>
<th>Tier</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1</td>
<td>10% coinsurance after deductible at CVS Retail Network Pharmacies</td>
</tr>
<tr>
<td></td>
<td>5% coinsurance after deductible at CVS Retail Pharmacies or CVS Mail Order Pharmacy</td>
</tr>
<tr>
<td>Tier 2</td>
<td>20% coinsurance after deductible at CVS Retail Network Pharmacies</td>
</tr>
<tr>
<td></td>
<td>15% coinsurance after deductible at CVS Retail Pharmacies or CVS Mail Order Pharmacy</td>
</tr>
<tr>
<td>Tier 3</td>
<td>20% coinsurance after deductible for up to a 30-day supply at CVS Retail Network Pharmacies</td>
</tr>
<tr>
<td></td>
<td>15% coinsurance after deductible for up to a 30-day supply at CVS Retail Pharmacies or CVS Mail Order Pharmacy</td>
</tr>
</tbody>
</table>
Maintenance medications may be purchased at a CVS Network Retail Pharmacy. After three fills, a CVS Retail Pharmacy or CVS Mail Order 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.

Groups audience:
Employee Services

Right Sidebar:
ES: Benefits & Wellness - SS Medicare Eligible
ES: Benefits & Wellness - IWT SS Medicare Eligible Medical
ES: Benefits & Wellness - Contact

Source URL: https://www.cu.edu/employee-services/benefits-wellness/surviving-spouse/surviving-spouse-medicare-eligible/mcicare

Links