Extended [1]

You'll have access to Anthem's nationwide network of physicians and facilities under this Anthem-administered plan.

A primary care physician (PCP) is 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. 

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.

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 providers are providers who have contracted with your health insurer or plan to provide health care services, including specialists. A non-physician specialist is a provider who has more training in a specific area of health care.

Features & Considerations

- Find a provider/urgent care [10]
  - Call 1-855-646-4752
- Prescription coverage [11]
  - CVS Formulary [12]
    - Call 1-888-964-0121
- WINFertility [13]
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. [14]
- Anthem's Nationwide Network

Deductible
An amount that you are required to pay before the plan will begin to reimburse for covered services. [15]

$1,000 per Individual (each member must meet their $1,000)
$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
Specialist - $50/visit
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.

Urgent Care - $40/visit
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.

Office visit copays
Copayment (copay) - $30 under the Exclusive Plan and $40 under the Extended. You must pay the amount at the time of service. Copays do not apply toward the deductible requirement.
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 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. [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 must be used for up to a 90-day supply [11].

*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: