

High Deductible ^[1]

CU Health Plan - High Deductible/HSAHSA (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. ^[2] Compatible is perfect for planners and savers. This Anthem-administered plan gives you access to health care services inside and outside your networkNetworkThe 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 pay coinsuranceCoinsuranceThe 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 of providers and facilities, and you'll have the flexibility to schedule your own appointments with specialists — 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 ^[5] or referralsReferralA 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. ^[6] needed.

Plan details

- [CU Health Plan - High Deductible \(HSA Compatible\) Benefits Coverage Summary](#) ^[7] (14 pages)
- [CU Health Plan - High Deductible \(HSA Compatible\) Benefits Booklet](#) ^[8] (112 pages)
- [Anthem Preventative Care Guidelines](#) ^[9]

Covered providers and medications

- [Find a doctor or urgent care](#) ^[10]
 - Call 1-800-735-6072
- [Prescription Coverage](#) ^[11]
 - [Access the CVS Formulary](#) ^[12]
 - For pharmacy questions, call 1-888-964-0121
- [Find an in-network pharmacy](#) ^[13]

Over/Under Option

CU Health Plan — Medicare/High Deductible is available only to covered CU retirees and their spouses/dependents. Dependent: An employee’s spouse, common-law spouse, civil union partner, domestic partner, children under the age of 27, and qualifying disabled children over age 27 of the employee or of the spouse/partner who are biological, legally adopted or for whom there are parental responsibility documents issued by a court. [14] 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 (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. [2] with the Over/Under plan, but you may enroll in a 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. [2] outside of CU.

Features and Considerations

Plan Type	<u>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. [15]</u> /HSA Compatible	
	<u>In-Network</u> <u>The providers, facilities and suppliers that CU Health Plans have contracted with to provide health care services. [16]</u> Providers	<u>Out-of-Network</u> <u>Non-participating providers or facilities that do not enter into a network agreement, usually resulting in higher out of pocket expenses to you. [17]</u> Providers

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. [18]

\$1,600 Single Coverage
\$3,200 Family Coverage
(2+members)
Any member may contribute to
overall deductible.

\$3,200 Single Coverage
\$6,400 Family Coverage (2+
members)
Any member may contribute to
overall deductible.

Out-of-Pocket
Limit**Out-of-**
Pocket
Limit/Maximum
(OMP)**The**
maximum
amount of
money you will
pay for covered
medical
services during
the plan year.
These costs
include
deductibles,
copays and
coinsurance.
This maximum
is designed to
protect you
from
catastrophic
health care
costs. After
you reach this
amount, the
plan will pay
100% of the
allowed
amount. ^[19]

\$3,200 Single Coverage

\$6,400 Family Coverage (2+ members)

\$6,400 Single Coverage

\$12,800 Family Coverage (2+ members)

**Preventative
Care Visit
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. [20]**

\$0 coinsurance and no deductible

35% coinsurance after deductible

Office Visit

15% coinsurance after deductible

35% coinsurance after deductible

Emergency Room 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. [21]

15% coinsurance after deductible

Covered as In-Network

Urgent Care
Urgent 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 [22]

15% coinsurance after deductible

35% coinsurance after deductible

Prescription Benefits

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

	30-day supply	90-day supply
	<u>In-Network</u> <u>The providers, facilities and suppliers that CU Health Plans have contracted with to provide health care services.</u> ^[16] Providers	<u>Out-of-Network</u> <u>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.</u> ^[17] Providers
Tier 1	10% coinsurance after deductible at CVS Retail Network Pharmacies	5% coinsurance at CVS Retail Pharmacies or Mail Order
Tier 2	20% coinsurance after deductible at CVS Retail Network Pharmacies	15% coinsurance at CVS Retail Pharmacies or Mail Order
Tier 3	20% coinsurance after deductible at CVS Retail Network Pharmacies	15% coinsurance at CVS Retail Pharmacies or Mail Order
Tier 4	20% coinsurance after deductible at CVS Retail Network Pharmacies 15% coinsurance at CVS Retail Pharmacies or Mail Order	N/A
Maintenance medications ^[23] 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. 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 - OE Enrollment Tool

ES: Benefits & Wellness - OE Vendor Fair

Source URL:<https://www.cu.edu/employee-services/open-enrollment/retirees/401a-medicare-eligible-retirees/high-deductible>

Links

[1] <https://www.cu.edu/employee-services/open-enrollment/retirees/401a-medicare-eligible-retirees/high-deductible> [2] <https://www.cu.edu/es-benefits-glossary/hsa-health-savings-account> [3] <https://www.cu.edu/es-benefits-glossary/network> [4] <https://www.cu.edu/es-benefits-glossary/coinsurance> [5] <https://www.cu.edu/es-benefits-glossary/primary-care-provider-pcp> [6] <https://www.cu.edu/es-benefits-glossary/referral> [7] <https://www.cu.edu/docs/cu-health-plan-high-deductible-benefits-summary> [8] <https://www.cu.edu/docs/cu-health-plan-high-deductible-benefits-booklet> [9] <https://www.anthem.com/preventive-care/> [10] <http://www.anthem.com/cuhealthplan/find-a-doctor/> [11] <http://node/242837> [12] <http://info.caremark.com/dig/acsduglist> [13] <http://www.caremark.com/> [14] <https://www.cu.edu/es-benefits-glossary/dependent> [15] <https://www.cu.edu/es-benefits-glossary/preferred-provider-organization-ppo> [16] <https://www.cu.edu/es-benefits-glossary/network-0> [17] <https://www.cu.edu/es-benefits-glossary/out-network> [18] <https://www.cu.edu/es-benefits-glossary/deductible-high-deductible-plan> [19] <https://www.cu.edu/es-benefits-glossary/out-pocket-limitmaximum-omp> [20] <https://www.cu.edu/es-benefits-glossary/preventative-care-medical> [21] <https://www.cu.edu/es-benefits-glossary/emergency-care> [22] <https://www.cu.edu/es-benefits-glossary/urgent-care> [23] <https://www.cu.edu/employee-services/benefits-wellness/cvs-caremark-pharmacy-services>