

Exclusive ^[1]

2026–27 plan year information

This page provides details about the **2026–27 benefits plan year**. For plan year 2025–26 (ending June 30, 2026) information, visit the [Benefits & Wellness page](#) ^[2].

This 2026-27 Anthem-administered plan lets you choose health care providers within a single statewide network NetworkThe facilities, providers and suppliers with whom your health insurer or plan has contracted to provide health care services ^[3], giving you access to doctors and specialists across the Front Range.

You'll receive care at UHealth facilities by physicians from the CU School of Medicine, UHealth Medical Group and others. Your 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 ^[4] manages your care, but you do not need a referral Referral 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. ^[5] to see a specialist.

No out-of-network coverage is available except for urgent 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 ^[6] and/or 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. ^[7].

Plan details

- [CU Health Plan - Exclusive Benefits Coverage Summary](#) ^[8] (12 pages)
- [CU Health Plan - Exclusive Benefits Booklet](#) ^[9] (118 pages)
- [Anthem Preventive Care Guidelines](#) ^[10]

Covered providers and medications

- [Find a doctor or urgent care](#) ^[11]
 - Call 1-855-646-4752
- [Prescription coverage](#) ^[12]
 - [Access the CVS Formulary](#) ^[13]
 - For pharmacy questions, call 1-888-964-0121
- [Find an in-network pharmacy](#) ^[14]
- [WINFertility](#) ^[15]

CU Health Plan - Exclusive Guest Membership

If you have dependents covered by this plan who live out-of-state during the 2026-27 plan year, you may enroll them in CU Health Plan - Exclusive Guest Membership for additional, temporary coverage in participating states. [Guest Membership](#) [Guest Membership](#) An “away from home care” program that allows your dependent children to have coverage outside the CU Health Plan Exclusive service area and is available only in certain states. ^[16] coverage ends with the health plan year. To receive and maintain this benefit, **you must apply for and enroll in this program during each Open Enrollment.** See [Anthem's instructions for applying](#) ^[17] or call Anthem Blue Cross Blue Shield at 1-800-735-6072 to get started.

Features & Considerations

Plan Type	<p>HMO Health Maintenance Organization (HMO) A managed health care system designed to give you access to quality, cost-effective service while optimizing utilization and cost of service. With an HMO, such as the case of our CU Health Plan Exclusive, you must choose a primary care provider from a network of physicians, facilities and other providers affiliated to CU. Your primary care provider will manage and coordinate any care of most specialists you may need by providing you with a referral within the network. ^[18] - CU network Network The facilities, providers and suppliers with whom your health insurer or plan has contracted to provide health care services ^[3]</p>
Deductible	<p>\$500 per individual (Each member must meet their individual \$350)</p> <p>\$1,000 family maximum (2+ members)</p>
Out-of-Pocket Limits	<p>\$10,600/individual; \$21,200/family</p>

Features & Considerations

	<p><u>Primary care provider</u><u>Primary Care Provider (PCP)</u> <u>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</u> ^[4] - \$30/visit</p> <p><u>Specialist</u><u>Specialist</u><u>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.</u> ^[19] - \$40/visit</p> <p><u>Urgent Care</u><u>Urgent Care</u><u>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</u> ^[6] - \$30/visit</p>
Office Visit	<p><u>Office visit</u><u>copays</u><u>Copayment (copay)</u><u>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.</u> ^[20] do not apply toward the <u>deductible.</u><u>Deductible</u><u>An amount that you are required to pay before the plan will begin to reimburse for covered services.</u> ^[21]</p>
Outpatient/Inpatient Services	<p>Outpatient Services: \$100/visit, after deductible</p> <p>Inpatient Services: \$200/visit, after deductible</p>
Emergency Care	<p>\$250 copay (waived if admitted)</p>

Features & Considerations

Tier 1 \$10

Tier 3 \$75

Tier 2 \$50

Tier 4 \$100

Prescription Drug

Coverage (rx)

Up to 30-day supply*

*Maintenance and specialty medications may be purchased at a CVS Network Retail Pharmacy. After three fills, CVS Retail Pharmacies, Costco, King Soopers, City Market or CVS Mail Order must be used for up to a 90-day supply ^[12].

*Specialty medications may be purchased at a retail pharmacy. After three fills, CVS Specialty Pharmacy must be used.

Access the CVS formulary ^[13] to check your medication's coverage.

Tier 1: \$20

Tier 3: \$150

Mail Order Rx

Up to 90-day supply

Tier 2: \$100

Tier 4: \$75**

**30-day supply

Groups audience:

Employee Services

Right Sidebar:

ES: Benefits & Wellness - OE Enrollment Tool

ES: Benefits & Wellness - OE Resources

ES: Benefits & Wellness - OE Vendor Fair

Source URL:<https://www.cu.edu/employee-services/open-enrollment/retirees/pera-non-medicare-eligible-retirees/exclusive>

Links

[1] <https://www.cu.edu/employee-services/open-enrollment/retirees/pera-non-medicare-eligible-retirees/exclusive>

[2] <https://www.cu.edu/employee-services/benefits-wellness> [3] <https://www.cu.edu/es-benefits-glossary/network> [4] <https://www.cu.edu/es-benefits-glossary/primary-care-provider-pcp> [5] <https://www.cu.edu/es-benefits-glossary/referral> [6] <https://www.cu.edu/es-benefits-glossary/urgent-care> [7] <https://www.cu.edu/es-benefits-glossary/emergency-care> [8] <https://www.cu.edu/docs/cu-health-plan-exclusive-benefits-summary> [9] <https://www.cu.edu/docs/cu-health-plan-exclusive-benefits-booklet> [10] <https://www.anthem.com/preventive-care/> [11] <http://www.anthem.com/mcr/cuhealthplan/find-care> [12] <https://www.cu.edu/employee-services/benefits-wellness/cvs-caremark-pharmacy-services> [13] <https://info.caremark.com/dig/acsdruglist> [14] <https://www.caremark.com/> [15] <https://managed.winfertility.com/cuhealthplan/> [16] <https://www.cu.edu/es-benefits-glossary/guest-membership> [17] <https://www.cu.edu/docs/cu-health-plan-exclusive-guest-membership> [18] <https://www.cu.edu/es-benefits-glossary/health-maintenance-organization-hmo> [19] <https://www.cu.edu/es-benefits-glossary/specialist> [20] <https://www.cu.edu/es-benefits-glossary/copayment-copay> [21] <https://www.cu.edu/es-benefits-glossary/deductible>