

Medical Plan Options

Comprehensive and preventive healthcare coverage is important in protecting you and your family from the financial risks of unexpected illness and injury. Routine exams and regular preventive care provide an inexpensive review of your health. Small problems can potentially develop into large expenses, but identifying the problems early can often be treated at minimal cost to you. Comprehensive healthcare also provides peace of mind. In case of an illness or injury, you and your family are covered with excellent medical benefits through the University of Denver's medical plan offerings. You will have access to innetwork benefits from health care providers and facilities. The University of Denver offers you a choice of two plans through Cigna Healthcare and Kaiser Permanente: a Copay and DHMO Plus Plan and a High Deductible Health Plan (HDHP).

Which Plan Is Best For You?

The Copay and DHMO Plus Plans

- Set copays for less expensive and most utilized services and a coinsurance for higher cost and lesser utilized services.
- Copays and coinsurance apply towards your annual out-of-pocket maximum.
- The plan splits higher costs services with you (80% paid by the plan and 20% paid by you) up to the out-of-pocket maximum.
- If you reach your out-of-pocket maximum, all services are paid at 100% for the remainder of the year.

The High Deductible Health Plans (HDHP)

- Tax-qualified plan for a Health Savings Account (HSA). With an HSA you are able to set aside pre-tax funds into an account to be used for qualified medical expenses. For more information on how your HSA works, please see the HSA section of this booklet starting on page 25.
- You pay the full negotiated cost for medical services and prescription drugs until you meet your annual deductible (with the exception of preventive care which is covered at 100%).
- There are no copays with the exception of prescription drugs (once your deductible has been met).
- After the deductible is met, you and the plan share the costs (80% paid by the plan and 20% paid by you) until you reach the annual out-of-pocket maximum.
- If you reach your out-of-pocket maximum, all services are paid at 100% for the remainder of the year.

All Plans

■ Cover 100% of the cost for preventive care services like annual physicals and routine immunizations.

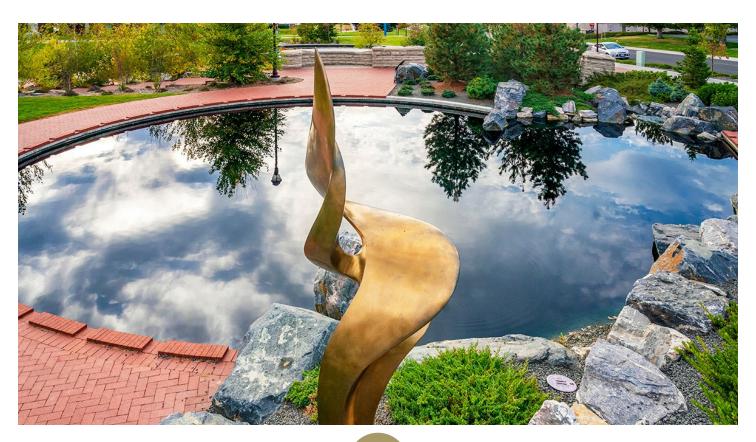
Copay and DHMO Plus Plans vs. HDHP Plans

Depending on which carrier you decide to enroll with (Cigna or Kaiser), the Copay and DHMO and HDHP (High Deductible Health Plan) plans use the same doctors and hospitals. Both options cover 100% of the cost for preventive care services like annual physicals and routine immunizations. The way you plan for care is different with each plan.

Below is a chart highlighting the key differences in the plans:

	Copay and DHMO Plus Plans	HDHP Plans
Per-Paycheck Cost for Coverage	Highest	Lowest
Calendar Year Deductible	Lowest	Highest
Calendar Year Out-of-Pocket Maximum	Lowest	Highest
Using the Plan	Pay more with each paycheck and less when you need care	Pay less with each paycheck and more when you need care
Savings/Spending Account Options	Healthcare FSA	Health Savings Account (HSA) Limited Purpose FSA

^{**}Please see the example on pages 10 and 18 for further clarification on the differences between the Copay and DHMO Plus plans vs. the High Deductible Health Plans.





Cigna Medical Network Options



LocalPlus Provider Network

If you live in the LocalPlus service area, you will have access to Cigna's LocalPlus provider network. The LocalPlus network is designed to improve the quality of care that you receive from all of your medical providers. LocalPlus is designed to deliver cost-effective, quality care for today's busy, on-the-go families.

More providers make it easier to choose and use quality care. The LocalPlus provider network has roughly 5,000 primary care physicians and over 14,000 specialists in the Denver metro area alone.

While traveling, or for dependents who live away from home and outside of the LocalPlus Network area, you will have full access to providers available through the Away From Home Care network. This feature provides coverage at the same innetwork cost you would pay at home. There are no out-of-network benefits other than urgent and emergency care for the LocalPlus network.

To find out if your doctor is a participating provider in the LocalPlus network, please visit Cigna's website, www.cigna.com.

- The LocalPlus network is available in the following CO Counties*: Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Eagle, Jefferson, La Plata, Larimer, Mesa, Montezuma, Routt, Summit, Weld
- The LocalPlus network includes the following major provider groups*: Boulder Valey IPA, Community Medical Associates, Colorado Care Partners, Colorado Health Neigborhoods**, PHP Prime, UCHealth Integrated Network, New West Physicians and Optum Medical Group
- The LocalPlus network includes the following major Hospitals* and Hospital Systems:
 - Front Range: Boulder Community Health, Centura Health**, Children's Hospital Colorado, Craig Hospital, Denver Health Medical Center, HealthONE, National Jewish Health, SCL Health System, UCHealth
 - Mountain (Eagle, Routt and Summit counties): Centura St. Anthony Summit Medical Center, UCHealth Yampa Valley Medical Center, Vail Valley Medical Center West
 - West (La Plata, Mesa and Montezuma counties): Animas Surgical Hospital, Centura Mercy Regional Medical Center, Southwest Memorial Hospital, St. Mary's Medical Center

This listing is not all-inclusive. For a complete listing, contact the Cigna OneGuide by calling **800.CIGNA24** (800.244.6224) or visit **Cigna.com**.

Open Access Plus (OAP) Provider Network

If you do not live or work inside the LocalPlus service area, you have access to the Cigna Open Access Plus provider network. The OAP Network contains participating physicians nationwide. To find out if your doctor is a participating provider in the network, please visit Cigna's website, www.cigna.com.

^{*}Listing is not all-inclusive. For a complete listing, contact your Cigna representative or visit Cigna.com.

^{**}Colorado Health Neighborhoods practices in Denver Metro and Boulder counties only.

^{***}Excludes Penrose Hospital and St. Francis Medical Center.

Cigna Medical Plan Options

Summary of Covered Benefits	Copay Plan	HDHP Plan
Network Type	Open Access Plus (OAP) and LocalPlus****	Open Access Plus (OAP) and LocalPlus****
Calendar Year Deductible* (single / family)	\$0 / \$0	\$1,600 / \$3,200***
Calendar Year Out-of-Pocket Max (single / family)*	\$2,000 / \$4,500**	\$3,200 / \$6,400**
DOCTOR'S OFFICE		
Virtual Care Visit	\$25 copay	20% after deductible
Primary Care Office Visit	\$25 copay	20% after deductible
Specialist Office Visit	\$40 copay	20% after deductible
Preventive Care	100% covered	100% covered
DIAGNOSTIC TESTING/ IMAGING		
Diagnostic Lab and X-ray	Based on place of service	20% after deductible
Advanced Imaging (MRI, CT/PET Scan)	\$100 copay	20% after deductible
HOSPITAL SERVICES		
Emergency Room	20% coinsurance	20% after deductible
Urgent Care	\$50 copay	20% after deductible
Inpatient	20% coinsurance	20% after deductible
Outpatient Surgery	20% coinsurance	20% after deductible
Chiropractic Care (80 days per calendar year combined with cognitive, occupational, physical, pulmonary & speech therapy)	\$25 copay	20% after deductible
PRESCRIPTION DRUGS		
Retail (30-day supply)	Plan deductible then,	
Tier 1	\$15 copay	\$15 copay
Tier 2	\$30 copay	\$30 copay
Tier 3	\$60 copay	\$60 copay
Specialty	20% coinsurance up to \$75 20% up to \$75	
Mail Order (90-day supply)	lail Order (90-day supply) Plan deductible then	
Tier 1	\$30 copay	\$30 copay
Tier 2	\$60 copay	\$60 copay
Tier 3	\$120 copay	\$120 copay

^{*}Deductibles and out-of-pocket maximums reset every calendar year.

^{**}Important: If you have other family members on the plan, each family member must meet their own individual deductible/out-of-pocket maximum until the total amount of expenses paid by all family members meets the overall family amount.

^{***}Important: All family members contribute towards the family deductible. An individual cannot have claims covered under the plan coinsurance until the total family deductible has been satisfied.

^{****}Important: The LocalPlus network does not cover out-of-network services other than urgent and emergency care. You will have a lower out-of-pocket cost when using in-network providers within the OAP network.

Cigna Copay Plan vs. HDHP Plan Examples

Member Pays \$0, covered at 100% \$0, covered at 100%		Copay Plan	HDHP Plan	
Member Pays \$0, covered at 100% \$0, covered at 100%				
Deductible \$0 \$1,600 \$2,000 \$3,200 Claim 2—Member goes to an in-network pharmacy and fills their 30 day prescription for a tier 2 drug—Total cost = \$200 Member Pays \$30 copay \$200 deductible Member's Remaining Balance Deductible \$0 \$1,400 \$1,400 \$1,400 \$1,400 \$1,400 \$1,400 \$1,400 \$1,400 \$1,400 \$1,400 \$1,400 \$1,400 \$1,400 \$1,200 coinsurance Member Pays \$0 \$0 \$1,400 deductible \$1,200 coinsurance \$1,200 coinsurance Member Pays \$0 \$0 \$0 \$0 \$1,400 deductible \$1,200 coinsurance Member Pays \$1,200 coinsurance \$1,200 coinsurance Member's Remaining Balance Deductible \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$1,400 deductible \$1,200 coinsurance Member's Remaining Balance Deductible \$0 \$770 \$4400 Estimated Employee Contribution Monthly \$97.76 \$0.00 Annual \$1,173.12 \$0.00 EXAMPLE OF EMPLOYEE + FAMILY COVERAGE WITH THREE CLAIMS THROUGHOUT THE PLAN YEAR Claim 1—Member and their 3 dependents goes for their preventive care, annual physicals, including age appropriate routine lab and immunizations, utilizing an in-network provider—Total cost = \$600 Member Family Pays \$0, covered at 100% \$0, covered at 100% Member's Family Remaining Balance Deductible \$0 Individual / \$0 Family \$3,200 Family Out-of-Pocket Max \$2,000 Individual / \$4,500 Family \$6,400 Family Claim 2—Member's spouse/partner goes to an in-network pharmacy and fills their 30 day prescription for a tier 2 drug, 4 months—Total cost = \$800 Member Family Pays \$120 copay (\$30/month) \$800 deductible (\$200/month) Member's Family Remaining Balance Deductible \$0 Individual / \$0 Family \$2,400 Family \$5,600	Claim 1— Member goes for their preventive care, annual physical, including routine lab (blood work to check cholesterol levels and routine exam), utilizing an in-network provider,—Total cost = \$150			
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lab and immunizations, utilizing an in-network provider—Total cost = \$600 Member Family Pays \$0, covered at 100% \$0, covered at 100% Member's Family Remaining Balance Deductible \$0 Individual / \$0 Family \$3,200 Family Out-of-Pocket Max \$2,000 Individual / \$4,500 Family \$6,400 Family Claim 2—Member's spouse/partner goes to an in-network pharmacy and fills their 30 day prescription for a tier 2 drug, 4 months— Total cost = \$800 Member Family Pays \$120 copay (\$30/month) \$800 deductible (\$200/month) Member's Family Remaining Balance Deductible \$0 Individual / \$0 Family \$2,400 Family Out-of-Pocket Max \$1,880 Individual / \$4,380 Family \$5,600 Family Claim 3—Member's child (dependent) has an emergency room an in-network facility—Total cost = \$3,000	EXAMPLE OF EMPLOYEE + FAMILY COVERAGE WITH THREE CLAIMS THROUGHOUT THE PLAN YEAR			
Member's Family Remaining Balance So Individual / \$0 Family			sicals, including age appropriate routine	
Deductible \$0 Individual / \$0 Family \$3,200 Family \$6,400 Family Out-of-Pocket Max \$2,000 Individual / \$4,500 Family \$6,400 Family Claim 2—Member's spouse/partner goes to an in-network pharmacy and fills their 30 day prescription for a tier 2 drug, 4 months— Total cost = \$800 Member Family Pays \$120 copay (\$30/month) \$800 deductible (\$200/month) Member's Family Remaining Balance Deductible \$0 Individual / \$0 Family \$2,400 Family Out-of-Pocket Max \$1,880 Individual / \$4,380 Family \$5,600 Family Claim 3—Member's child (dependent) has an emergency room an in-network facility—Total cost = \$3,000	Member Family Pays	\$0, covered at 100%	\$0, covered at 100%	
Out-of-Pocket Max \$2,000 Individual / \$4,500 Family \$6,400 Family Claim 2—Member's spouse/partner goes to an in-network pharmacy and fills their 30 day prescription for a tier 2 drug, 4 months— Total cost = \$800 Member Family Pays \$120 copay (\$30/month) \$800 deductible (\$200/month) Member's Family Remaining Balance Deductible \$0 Individual / \$0 Family \$2,400 Family Out-of-Pocket Max \$1,880 Individual / \$4,380 Family \$5,600 Family Claim 3—Member's child (dependent) has an emergency room an in-network facility—Total cost = \$3,000	Member's Family Remaining Balance			
Out-of-Pocket Max \$2,000 Individual / \$4,500 Family \$6,400 Family Claim 2—Member's spouse/partner goes to an in-network pharmacy and fills their 30 day prescription for a tier 2 drug, 4 months— Total cost = \$800 Member Family Pays \$120 copay (\$30/month) \$800 deductible (\$200/month) Member's Family Remaining Balance Deductible \$0 Individual / \$0 Family \$2,400 Family Out-of-Pocket Max \$1,880 Individual / \$4,380 Family \$5,600 Family Claim 3—Member's child (dependent) has an emergency room an in-network facility—Total cost = \$3,000	Deductible	\$0 Individual / \$0 Family	\$3,200 Family	
Total cost = \$800 Member Family Pays \$120 copay (\$30/month) \$800 deductible (\$200/month) Member's Family Remaining Balance Deductible \$0 Individual / \$0 Family \$2,400 Family Out-of-Pocket Max \$1,880 Individual / \$4,380 Family \$5,600 Family Claim 3—Member's child (dependent) has an emergency room an in-network facility—Total cost = \$3,000	Out-of-Pocket Max		\$6,400 Family	
Member's Family Remaining Balance Deductible \$0 Individual / \$0 Family \$2,400 Family Out-of-Pocket Max \$1,880 Individual / \$4,380 Family \$5,600 Family Claim 3—Member's child (dependent) has an emergency room an in-network facility—Total cost = \$3,000				
Deductible\$0 Individual / \$0 Family\$2,400 FamilyOut-of-Pocket Max\$1,880 Individual / \$4,380 Family\$5,600 FamilyClaim 3—Member's child (dependent) has an emergency room an in-network facility—Total cost = \$3,000	Member Family Pays	\$120 copay (\$30/month)	\$800 deductible (\$200/month)	
Out-of-Pocket Max \$1,880 Individual / \$4,380 Family \$5,600 Family Claim 3—Member's child (dependent) has an emergency room an in-network facility—Total cost = \$3,000	Member's Family Remaining Balance			
Claim 3—Member's child (dependent) has an emergency room an in-network facility—Total cost = \$3,000	Deductible	\$0 Individual / \$0 Family	\$2,400 Family	
	Out-of-Pocket Max	\$1,880 Individual / \$4,380 Family	\$5,600 Family	
A0 1- 1				
Member Family Pays \$0 deductible \$2,400 deductible \$200 coinsurance \$800 coinsurance	Member Family Pays	\$0 deductible \$600 coinsurance	\$2,400 deductible \$800 coinsurance	
Member's Family Remaining Balance	Member's Family Remaining Balance			
Deductible \$0 Individual / \$0 Family \$0 Family	•	\$0 Individual / \$0 Family	\$0 Family	
Out-of-Pocket Max \$1,400 Individual/ \$3,780 Family \$2,400 Family		•	-	
Estimated Employee Contribution				
Monthly \$640.40 \$307.40	Monthly	\$640.40	\$307.40	
Annual \$7,684.80 \$3,688.80	Annual	\$7,684.80	\$3,688.80	

Health Advocate

The University of Denver wants to ensure that you and your family have the information you need to make the best health and wellness decisions for you. To assist with this, the University offers 24/7 access to help when you need it for all your health care or medical bill needs – for you and your family, including parents and parents-in-law. Health Advocate offers you expert assistance with all of your insurance needs including medical, dental, vision, life & disability. Get the answers you need, when you need them, at no additional cost to you. You do not have to be enrolled in the University's health plan to access this benefit.

Health Advocate compliments the services available from Cigna One Guide, and is the primary resource for individuals not enrolled in the Cigna medical plans.

Don't know where to turn? We point the way.

- Find the right professionals based on your needs
- Locate specialists, schedule appointments, arrange tests or special treatments
- Answer questions about diagnoses, test results, treatments, medications and more

Want to maximize your benefit dollars? We can help you save.

- Get the estimated fees for services in your area
- Find options for non-covered and alternative health services
- Receive information about generic drug options
- Address questions and concerns related to your medical bills
- Get help negotiating discounts on medical or dental bills over \$400 not covered by insurance

Need eldercare or special needs services?

- Find in-home care, adult day care, group homes, assisted living and long-term care
- Get access to a range of services for parents of children with special needs or autism spectrum disorders
- Clarify or get help applying for Medicare, Medicare Supplement plans and Medicaid
- Coordinate care among multiple providers
- Arrange transportation to appointments

How it works

Employees and their family members can call 866.799.2725.

Caller speaks to a dedicated personal health advocate and receives live, individualized assistance.

Personal health advocate continues to support the individual until the issue is resolved.



Services for the whole family

Employees, spouses/partners, dependent children, parents and parents-in-law are all eligible.

^{*} Health advocacy services are NOT health insurance or medical services, and this program does not provide either for health care services or for the reimbursement for financial losses of health care services.

Cigna One Guide

Navigating healthcare can be complex. With Cigna One Guide, employees don't have to do it alone. One Guide combines intelligent technology with empathetic human support to help guide employees to engage in their health and get the most value from their health plan.

It's personal, proactive and predictive.

One Guide leverages powerful data analytics that your One Guide team will use for everything from health status to communication preferences. As a result, One Guide can anticipate employees' needs and proactively recommend the programs and resources that are more relevant to them – such as incentives and coaching opportunities.

It's effective. The One Guide solution drives results such as:

21% **7**% **50%** higher more use of more customers lower medical high-value utilization of engaged in costs for those preventive care providers chronic condition with highest coaching engagement with One Guide

Technology powers the experience.

Easier to navigate. Easier to use. Easier to manage benefits.

Personalized Opportunities

- Immediate access to information customers value most
- Dynamic content based on each customer's plans
- Content prioritized and displayed based on extensive user analytics
- Account balances, coverage and claims information
- Health assessments and incentives

Quick Access to Finding and Getting Care

- Guidance in finding the right doctor, lab, pharmacy or convenience care center
- Easy connection to health coaches, case managers, pharmacists and other resources

One-click Access to Live Support

- Personal guides accessible via phone, app, web or click to chat
- Dedicated one-on-one support in complex situations, for those who need it most
- Education on plan features, ways to maximize benefits and earn incentives

If you are currently enrolled in a Cigna medical plan, you can start using Cigna's One Guide by downloading the myCigna app or call 800.244.6224 to talk with your personal guide.

If you are not currently enrolled in a Cigna medical plan, you can reach out to the One Guide pre-enrollment line at 888.806.5042.

myCigna and Motivate Me

Manage Your Health through myCigna

Your online account will be available once your eligibility is received by Cigna. **myCigna** gives you access to these features:

- Search for in-network providers, procedures, cost estimates, and more.
- See a list of your most recent claims, their status, and reimbursements.
- Make sure your contact information is up-to-date so you don't miss out on important notifications about your plan.

It's as easy as 1, 2, 3.

- 1. Visit www.mycigna.com using your computer or mobile device.
- 2. Follow the registration instructions. You will need your DU ID or Cigna ID number (found on the front of your ID card).
- 3. Start managing care for you and your family find a doctor, schedule an appointment, transition your prescriptions and more.

Cigna MotivateMe

The University of Denver wants to assist you in achieving your health goals. When you get involved in wellness goals sponsored by the University through myCigna.com, you can earn up to \$100 in a Visa gift card mailed to your address. Incentives are given for completing the following activities:

- Health assessment
- Biometric screening
- Annual preventive exams
- Pharmacy steerage
- Digital Diabetes Prevention Program
- Coach by phone
- And a variety of other healthy activities

How Do I Participate in the MotivateMe® Program?

- 1. Create an account on www.myCigna.com.
- 2. Once you reach the Home Dashboard, select the "Wellness" tab on the far right.
- 3. Click "Wellness Incentives" in the drop-down menu.
- 4. Scroll down to see your available incentives. Not all incentives are immediately listed, so make sure you select "View All Incentives."
- 5. Select "Let's Go" to begin completing each incentive.
- Once an incentive is complete, select "Redeem."

Once you select Redeem, this will initiate the mailing process for your gift card. For more information, please visit www.du.edu/human-resources/employee-wellbeing/cigna-motivateme.



The rest is up to you

For more information or help setting up your account, vis it myCigna.com or call 800.244.6224. You can also find information by downloading the myCigna Mobile App for your mobile device.**

*Incentive awards may be subject to tax; you are responsible for any applicable taxes. Please consult with your personal tax advisor for assistance.

**The downloading and use of the myCigna Mobile App is subject to the terms and conditions of the App and the online stores from which it is downloaded. Standard mobile phone carrier and data usage charges apply.

Cigna Virtual Care Options

TeleHealth Through MDLive

Convenient, low cost option.

Virtual care for minor medical conditions costs less than the ER or urgent care visits, and may be even less than an inoffice primary care provider visit.

- Get care via video or phone, 24/7/365 even on weekends and holidays.
- Connect with board-certified doctors and pediatricians.
- Have a prescription sent directly to a local pharmacy, if appropriate.

Board-certified doctors and pediatricians can diagnose, treat and prescribe most medications for minor medical conditions, such as:

■ Acne	■ Constipation	■ Infections	■ Shingles
■ Allergies	■ Diarrhea	Joint aches	■ Sinus infection
■ Asthma	■ Earaches	■ Pink eye	■ Skin infection
■ Bronchitis	■ Fever	Rash	■ Sore throats
■ Cold and Flu	■ Headaches	■ Respiratory infection	■ Urinary tract infection

Cigna partners with MDLive for minor medical virtual care. This can be accessed via www.myCigna.com.

Virtual Behavioral Health

MDLIVE is available for behavioral/mental health virtual care too.

Licensed counselors and psychiatrists can diagnose, treat and prescribe most medications for nonemergency behavioral conditions, such as:

Depression	■ Men's issues	■ Stress	
Child/Adolescent issues	Marriage and Relationship issues	Postpartum depression	
■ Bipolar disorders	■ Grief/Loss	Parenting issues	■ Women's issues
Addictions	Eating disorders	Panic disorders	■ Trauma/PTSD

Schedule an appointment online with a counselor or psychiatrist within minutes by logging onto www.myCigna.com or call 888,726,3171.

Cigna Behavioral Programs

Challenges to mental well-being come in many forms, and so do the ways we can work through them. Whether you need help reducing stress, are feeling motivated to make a change in your life, or need to talk to someone, Cigna offers a variety of behavioral support tools and services through myCigna to help ensure you get the support that works best for you.

Virtual Counseling

- Schedule appointments online with licensed counselors or psychiatrists through our virtual only provider groups.
- Get access to providers with a wide variety of specialties such as autism and substance use, as well as providers who specialize in treating emergency responders.
- Use new modality options, such as private text therapy with providers
- Receive confidential treatment for conditions such as stress and anxiety.

Cigna's Employee Assistance Program

- Up to three free face-to-face sessions with a licensed mental health provider in Cigna's network.
- On-demand seminars, community resources and referrals on a range of topics.
- Virtual behavioral care allows you to speak with a counselor on your phone, tablet or home computer.
- Self-service digital tools and resources
 - iPrevail: provides on-demand coaching, personalized learning and caregiver support. Complete an assessment, receive a program tailored to your needs, and get connected to a peer coach.
 - Happify: self-directed program with activities, sciencebased games and guided meditations, designed to help reduce anxiety, stress and boost overall health.

Mental Health and Substance Use

- Centers of Excellence (COEs)
- Coaching & Support
- Modality options, such as private text messaging with providers
- Behavioral Awareness Series

Coaching and Support

- Understand a behavioral diagnosis.
- Address challenges with autism spectrum disorders, eating disorders, substance use, opioid use and pain management.
- Learn about treatment choices and how your choices can affect what you'll pay out of pocket.
- Identify and manage triggers that affect your condition.

Lifestyle Management Programs

- Smoking, obesity and stress pose significant threats to physical and behavioral wellness
- These conditions can be managed through healthy lifestyle habits, and we offer services that can help.

Meru Health

www.meruhealth.com/cigna

- 12-week app-based counseling program
- Daily support from licensed clinicians and anonymous peers to treat anxiety, depression and burnout.

Talkspace

www.talkspace.com/cigna

- An online therapy platform that makes it easy and convenient for you to connect with a licensed behavioral therapist from anywhere, at any time.
- Unlimited text, video, and voice messages to your dedicated therapist via web browser or the Talkspace mobile app.



Kaiser Medical

In-Person Care Options



You Asked! We Listened!

Kaiser will now be offered to employees that live and work in Colorado.

If you live in the Kaiser service area, you have access to Kaiser's provider network. The Kaiser provider network has 13,000+ Kaiser Permanente primary care physicians and over 14,000 affiliated plan providers across Colorado.

At most Kaiser Permanente medical offices, you can see a doctor, fill a prescription, and have lab and imaging services done in the same place.

Kaiser Away From Home Care

If you are traveling or have dependents that will be living outside of the Kaiser Colorado service area, you have full access to the Kaiser Away From Home Care program. This program provides coverage at the same in-network cost you would pay at home. Outside of the Kaiser Permanente Colorado Service area, members can get urgent and emergency care through Cigna's PPO network providers and urgent care at various MinuteClinic (in select CVS and Target stores) and Concentra urgent care centers.

For the most up-to-date information, visit kp.org/travel or call the Away From Home Travel Line at 951.268.3900.

Note: There are no out-of-network benefits other than urgent and emergency care for the Kaiser Network.

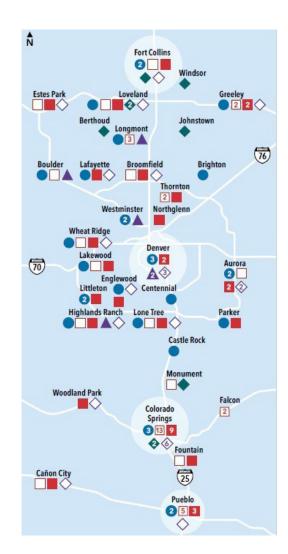
For the most up-to-date list of providers and facilities included in your plan, visit kp.org/locations or call:

Denver/Boulder: 303.338.3800

Northern Colorado: 844.201.5824

Southern Colorado: 888.681.7878

■ TTY 711



Colorado medical facilities				
30	Kaiser Permanente medical offices	•		
41	Urgent care facilities			
35	Emergency care facilities			
6	Behavioral health offices			
9	Affiliated providers with extended hours	•		
24	Affiliated hospital/inpatient care	\Diamond		

^{*}Choice of providers varies by plan, service area, and availability at the time of selection and is subject to change.

Kaiser Medical Plan Options

Summary of Covered Benefits	DHMO Plus Plan****	HDHP Plus Plan****
Network Type	Kaiser Providers	Kaiser Providers
Calendar Year Deductible* (single / family)	\$0 / \$0	\$1,600 / \$3,200***
Calendar Year Out-of-Pocket Max (single / family)*	\$2,000 / \$4,500**	\$3,200 / \$6,400**
DOCTOR'S OFFICE		
Virtual Care Visit	100% covered	20% after deductible
Primary Care Office Visit	\$25 copay	20% after deductible
Specialist Office Visit	\$40 copay	20% after deductible
Preventive Care	100% covered	100% covered
DIAGNOSTIC TESTING/ IMAGING		
Diagnostic Lab and X-ray	Based on place of service	20% after deductible
Advanced Imaging (MRI, CT/PET Scan)	\$100 copay	20% after deductible
HOSPITAL SERVICES		
Emergency Room	20% coinsurance	20% after deductible
Urgent Care	\$50 copay	20% after deductible
Inpatient	20% coinsurance	20% after deductible
Ambulatory Surgical Center	10% coinsurance	10% after deductible
All Other Outpatient Facilities	20% coinsurance	20% after deductible
Chiropractic Care (80 days per calendar year combined with cognitive, occupational, physical, pulmonary & speech therapy)	\$25 copay	20% after deductible
PRESCRIPTION DRUGS		
Retail (30-day supply)	Plan deductible then,	
Tier 1	\$15 copay	\$15 copay
Tier 2	\$30 copay	\$30 copay
Tier 3	\$60 copay	\$60 copay
Specialty	20% coinsurance up to \$75	20% up to \$75
Mail Order (90-day supply)	ail Order (90-day supply) Plan deductible then,	
Tier 1	\$30 copay	\$30 copay
Tier 2	\$60 copay	\$60 copay
Tier 3	\$120 copay	\$120 copay

^{*}Deductibles and out-of-pocket maximums reset every calendar year.

^{**}Important: If you have other family members on the plan, each family member must meet their own individual deductible/out-of-pocket maximum until the total amount of expenses paid by all family members meets the overall family amount.

^{***}Important: All family members contribute towards the family deductible. An individual cannot have claims covered under the plan coinsurance until the total family deductible has been satisfied.

^{****}Within your first year with Kaiser, you have the opportunity to take advantage of the **PLUS** benefits where you can choose to see any licensed provider. Services can include primary care, specialty care, and mental health office visits. Plus Benefits outside the Kaiser Network offers 20 service visits and 10 prescriptions per member per year. For more information, please visit **choiceproducts-Colorado.kp.org**.

Kaiser DHMO Plus Plan vs. HDHP Plus Plan Examples

	DHMO Plus Plan	HDHP Plan		
EXAMPLE OF EMPLOYEE ONLY COVER	EXAMPLE OF EMPLOYEE ONLY COVERAGE WITH THREE CLAIMS THROUGHOUT THE PLAN YEAR			
Claim 1— Member goes for their preventive care, annual physical, including routine lab (blood work to check cholesterol levels and routine exam), utilizing an in-network provider,—Total cost = \$150				
Member Pays	\$0, covered at 100%	\$0, covered at 100%		
Member's Remaining Balance				
Deductible	\$0	\$1,600		
Out-of-Pocket Max	\$2,000	\$3,200		
Claim 2—Member goes to an in-network	k pharmacy and fills their 30 day prescription	n for a tier 2 drug—Total cost = \$200		
Member Pays	\$30 copay	\$200 deductible		
Member's Remaining Balance				
Deductible	\$0	\$1,400		
Out-of-Pocket Max	\$1,970	\$3,000		
Claim 3—Member is hospitalized at an i	n-network facility for 2 days—Total cost = \$6			
Member Pays	\$0 deductible \$1,200 coinsurance	\$1,400 deductible \$1,200 coinsurance		
Member's Remaining Balance				
Deductible	\$ 0	\$ 0		
Out-of-Pocket Max	\$770	\$400		
Estimated Employee Contribution				
Monthly	\$97.76	\$0.00		
Annual	\$1,173.12	\$0.00		
EXAMPLE OF EMPLOYEE + FAMILY COVERAGE WITH THREE CLAIMS THROUGHOUT THE PLAN YEAR				
Claim 1—Member and their 3 dependents goes for their preventive care, annual physicals, including age appropriate routine lab and immunizations, utilizing an in-network provider—Total cost = \$600				
Member Family Pays	\$0, covered at 100%	\$0, covered at 100%		
Member's Family Remaining Balance				
Deductible	\$0 Individual / \$0 Family	\$3,200 Family		
Out-of-Pocket Max	\$2,000 Individual / \$4,500 Family	\$6,400 Family		
Claim 2—Member's spouse/partner goes to an in-network pharmacy and fills their 30 day prescription for a tier 2 drug, 4 months— Total cost = \$800				
Member Family Pays	\$120 copay (\$30/month)	\$800 deductible (\$200/month)		
Member's Family Remaining Balance				
Deductible	\$0 Individual / \$0 Family	\$2,400 Family		
Out-of-Pocket Max	\$1,880 Individual / \$4,380 Family	\$5,600 Family		
Claim 3—Member's child (dependent) has an emergency room an in-network facility—Total cost = \$3,000				
Member Family Pays	\$0 deductible \$600 coinsurance	\$2,400 deductible \$800 coinsurance		
Member's Family Remaining Balance				
Deductible	\$0 Individual / \$0 Family	\$0 Family		
Out-of-Pocket Max	\$1,400 Individual/ \$3,780 Family	\$2,400 Family		
Estimated Employee Contribution				
Monthly	\$640.40	\$307.40		
Annual	\$7,684.80	\$3,688.80		

Kaiser Resources

Manage Your Health through Kaiser's Website and App

Managing your health online has never been more convenient. Whether you're at home or on the go, **kp.org** and the Kaiser Permanente app give you a simple, secure way to keep up with your care.

- Schedule, view, and cancel routine appointments and see information about past visits.
- View your medical history, including allergies and immunizations, ongoing health conditions, and most lab test results.
- Refill most prescriptions, check the status of a prescription order, and see a list of all your medications.

Kaiser New Member Connect Team

We understand that joining a new health care organization can be disruptive which is why we want to make sure each member has an enjoyable experience. All new Kaiser members will have access to the New Member Connect Team to help with transitioning your care. Connect at anytime by using the following:



Mobile Access

Get the Kaiser Permanente mobile app from the Apple App Store or the Android app from Google Play. Manage your health, find locations and care, refill prescription, view lab results, and more!



Kaiser Permanente DigiDeck—Digital Resource Guide

With Kaiser, you have access to the University of Denver Digideck to help you make an informed healthcare decision for you and your family with resources available in one convenient location. Resources include:

- Easy ways to transition care through New Member Connect
- Wellness Resources
- Benefits
- And much more!

To access, click on the link below or scan the QR code.

University of Denver DigiDeck



Kaiser Virtual Care Options

Get the Right Care—When You Need It and How You Want It

You may not always feel like you have time to visit the doctor. Kaiser's doctors are committed to getting you care however it works best for you — from home, work, or in person.



PHONE

Save yourself an office visit by scheduling a call with a doctor.



VIDEO VISIT

An online alternative to an in-person appointment.



EMAIL

Message your doctor's office with nonurgent questions anytime.



IN-PERSON

Same-day or next-day appointments are often available.

Call 303-338-4545 (TTY 711)



E-VISIT

Fill out a short online questionnaire about your symptoms and a nurse will get back to you - usually within 6 hours. Great for coughs, colds, nausea, allergies and more.



CHAT ONLINE

Connect in real time with a physician by logging into **www.kp.org** and click "Chat". Available Mon-Fri 7am to 10pm and Sat-Sun 8am to 10pm.

Kaiser Employee Assistance Program through TELUS HEALTH

Employees who are enrolled in a Kaiser medical plan are offered the EAP Program through TELUS Health which provides:



- Three free sessions with a licensed mental health professional through all visit formats (in-person, phone, and video counseling).
- Digital self-guided therapy through CareNow which offers self-help resources based on cognitive behavior principles, interactive content, exercises, podcasts, meditation, and videos.

For more information, visit www.kp.org or the Kaiser Mobile app.

Virtual Behavioral Health

Everyone needs support for total health — mind, body, and spirit. These wellness apps can help you navigate life's challenges, and make small changes to improve your sleep, mood, relationships, and more. It's self-care made easy, designed to help you live well and thrive.



headspace

Calm

The number one app for sleep and mediation—designed to help lower stress, anxiety, and more.

- More than 100 guided meditations
- Sleep stories for deeper, more restful sleep
- Exclusive music tracks for focus, relaxation, and sleep

Headspace Care

Text one-on-one with an emotional support coach anytime, anywhere. Support is just a text message away.

- 24/7 text-based emotional support coaching
- Discuss goals, share challenges, and create an action plan with your coach
- Self-care resources recommended for your need

my

myStrength

Build a personalized plan to strengthen your emotional health whenever, wherever you need to.

- A personalized support plan
- Tools to manage stress, depression, sleep, and more.
- Hundreds of activities, articles, and videos



Care Options With Cigna and Kaiser

From strains to pains, you never know when you might need treatment. But when that time comes, you can get the care that's right for you by choosing from a number of options that meet your care and financial needs.

For minor illness or injury at times when you can't see your doctor, a call to a nurse helpline or your telemedicine advocate or a visit to a retail clinic may be able to provide the care you need, saving you time and the high costs of an urgent care or an emergency room visit.



VIRTUAL CARE \$

Access a doctor by phone when, where, and how it works best for you. Get treatment for minor conditions like allergies, cold/flu, and rashes at your finger tips.

- Sinus infections
- Allergies
- Rashes
- Cold/Flu symptoms
- Diarrhea
- UTI



Your best place to go for routine or preventive care, medication tracking, or getting a referral for unique services e.g. durable medical equipment etc.

- Immunizations/ Preventive care
- Lab services
- Medication concerns
- Lingering pain
- Minor to moderate illnesses
- Non-urgent treatment



DISPATCHHEALTH \$\$\$

DispatchHealth brings comfortable healthcare to your home or location convenient to you. They treat everything an urgent care center can, plus more! Hours of care are 8 AM to 10 PM*. Visit www.dispatchhealth.com or download the phone app.

- Cold/flu symptoms
- Asthma & respiratory
- Nausea, vomiting diarrhea
- UTI

- Ear, nose & throat
- Stitches & minor fractures
- Back, neck & joint pain



URGENT CARE \$\$\$

Sometimes you need medical care fast but a trip to the emergency room may not be necessary. Visit a Cigna or Kaiser in-network urgent care center when you can't get in to see your primary doctor and are in need of afterhours care. Urgent care centers can generally treat many minor illnesses and injuries while saving you the time and expenses of an emergency room visit.

- Sprains, dislocations, Minor to moderate fractures
- Concussions
- Minor allergic reactions
- asthma attacks
- Sore throats, ear pain
- Small cuts



EMERGENCY ROOM \$\$\$\$

When you feel you need immediate treatment for critical injuries or illnesses that may result in serious injury or are life threatening.

If you believe you are experiencing a medical emergency, go to the nearest emergency room or call 911.

- Heavy bleeding
- Heart attack/chest pain
- Stroke

- Spinal injuries
- Difficulty breathing