DENVER HEALTH MEDICAL PLAN INC.™

CITY & COUNTY OF DENVER | POLICE | DERP

2020 ENROLLMENT GUIDE

LOCAL. NONPROFIT.
HEALTH INSURANCE.

WELCOME!

Dear Prospective Member:

Thank you for considering Denver Health Medical Plan (DHMP) as your health insurance carrier! DHMP is a local, nonprofit organization with a fresh approach to health insurance. We put our members first and were founded on the premise that health care should be easy to understand and affordable for everyone. We have designed our plans with you in mind. This enrollment guide contains an overview of your plan options and highlights the unique benefits that DHMP has to offer. Use this guide to help you decide on the best health plan for you and your family. DHMP is committed to helping you take charge of your well-being and to help you lead a healthier, more fulfilling life. Please don't hesitate to contact our team with any questions you may have or visit our website at denverhealthmedicalplan.org.

At Denver Health Medical Plan, we take your health personally.

Greg McCarthy
Chief Executive Officer
Denver Health Medical Plan

A UNIQUE NETWORK

offered only by
Denver Health Medical Plan

Make the best of your health by selecting the health plan with a network that meets your needs.
We've got you covered.

DENVER HEALTH est. 1860

uchealth

Health Partners UNIVERSITY OF COLORADO

Children's Hospital Colorado

Cofinity

6 REASONS YOU SHOULD CHOOSE DHMP

1 LOCAL. NONPROFIT. HEALTH INSURANCE.

As your hometown insurance carrier, our support team is easily accessible, providing you with personalized service.

2 SAVE ON PRESCRIPTION COSTS

Prescription pricing at Denver Health pharmacies is lower than at National Network retail pharmacies. You can save as much as 75% off your prescription costs at a Denver Health pharmacy. (Note: prescriptions must be written by a Denver Health provider in order to be filled at a Denver Health pharmacy.)

3 MENTAL HEALTH BENEFITS

DHMP plans include mental health and other behavioral health services:

- You can obtain mental health services from any in-network mental health professional, no referral necessary.
- Individual and group therapy sessions are covered from any professional in the expanded mental health network, no referral needed.

4 MATERNITY & DELIVERY

As a DHMP member receiving prenatal care at a Denver Health facility, you will be auto-enrolled in the Nest Rewards program. This program allows you and your baby to earn up to $300 in eGift cards (an electronic gift card that is sent to you via email) to your choice of Target or Walmart for simply receiving your prenatal, postpartum and well-baby care at any Denver Health facility.

5 PREMIUM PERKS: EXTRA SAVINGS

As an added bonus for being a member of our plans, you receive discounts on a variety of services:

- Crunch Fitness
- Lyft
- Weight Watchers
- Food delivery and more!

6 DISPATCHHEALTH

Urgent Care that comes to you! DispatchHealth brings back the house call by providing convenient, high-quality acute care in the comfort of your home. DispatchHealth offers services ranging from treating the common flu to minor fractures and more.

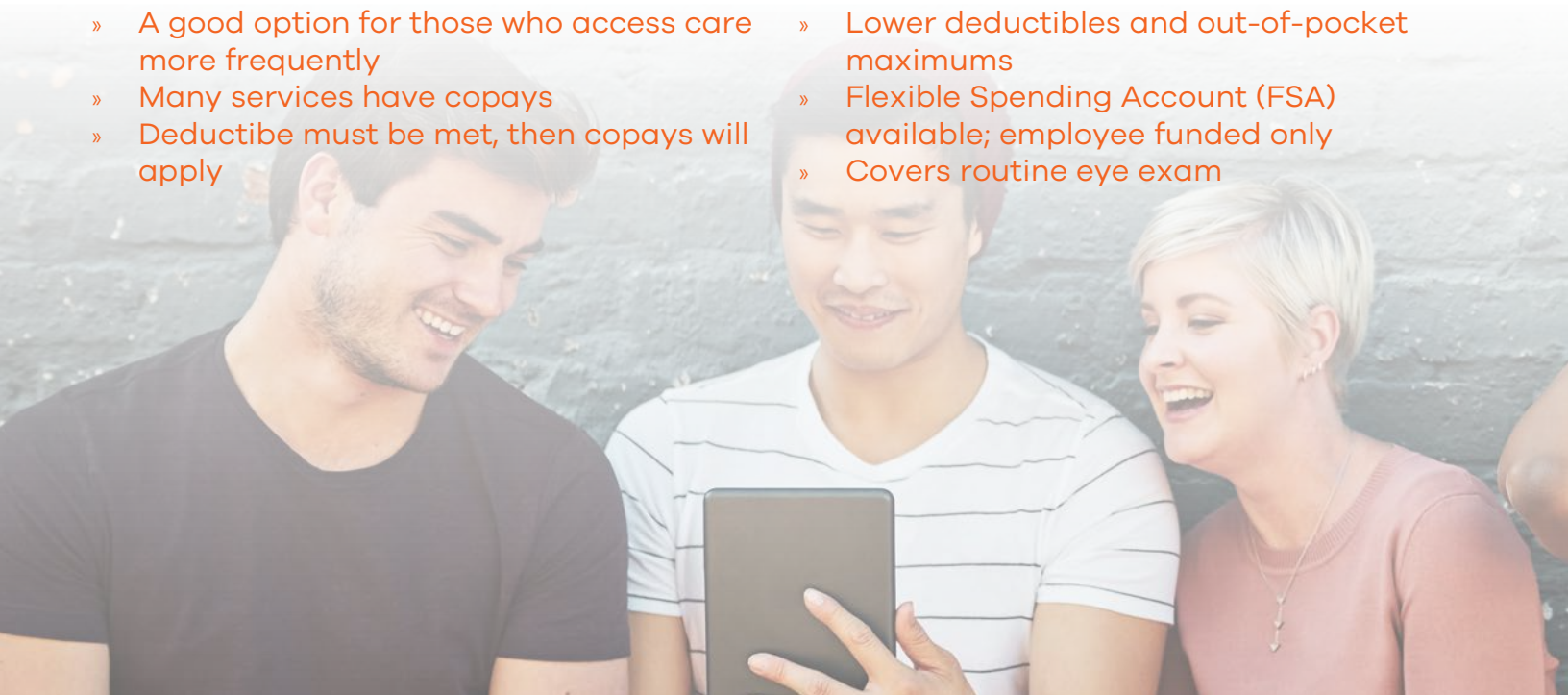
PLAN OPTION A: DENVER HEALTH DHMO

DENVER HEALTH DHMO PLAN (FSA Eligible)	TIER 1: DENVER HEALTH NETWORK ONLY	TIER 2: HIGHPOINT & COFINITY NETWORK
	Individual | Family	Individual | Family
Deductible *	$500 | $1,500	$750 | $1,750
Out-of-Pocket Maximum *	$3,000 | $6,000	$3,000 | $6,000
Preventive Care	No Charge	No Charge
Primary Care Provider (PCP)	$25 copay per visit	$30 copay per visit
Specialist	$50 copay per visit	$50 copay per visit
Lab/X-ray	20% coins after ded	30% coins after ded
Hospital Services (Inpatient)	20% coins after $150 per occurrence ded and annual ded	30% coins after $150 per occurrence ded and annual ded
Emergency Care (Facility)	$300 copay per visit	$300 copay per visit
Urgent Care | DispatchHealth	$75 copay per visit	$75 copay per visit
Prescription Drugs (30 day supply)	Denver Health Pharmacy $10 | $12 | $35 | $45 | $55 | $65 Tiers: 1 | 2 | 3 | 4 | 5 | 6 National Network Pharmacy $20 | $24 | $70 | $90 | $110 | $130 Tiers: 1 | 2 | 3 | 4 | 5 | 6	National Network Pharmacy $20 | $24 | $70 | $90 | $110 | $130 Tiers: 1 | 2 | 3 | 4 | 5 | 6

* This plan uses an Embedded Deductible and Out-of-Pocket Maximum. See the 'Health Insurance 101' page for details. NOTE: Because deductibles accrue separately for each plan and each tier, it will be most cost-effective to select either Tier 1 or Tier 2 and then stick with providers from that particular tier.

QUICK TIPS:

- A good option for those who access care more frequently
- Many services have copays
- Deductibe must be met, then copays will apply
- Lower deductibles and out-of-pocket maximums
- Flexible Spending Account (FSA) available; employee funded only
- Covers routine eye exam



PLAN OPTION B: DENVER HEALTH HDHP

DENVER HEALTH HDHP PLAN (HSA Eligible)	TIER 1: DENVER HEALTH NETWORK ONLY	TIER 2: HIGHPOINT & COFINITY NETWORK
	Individual | Family	Individual | Family
Deductible †	$1,450 | $2,900	$2,500 | $4,000
Out-of-Pocket Maximum †	$2,900 | $5,800	$5,000 | $8,000
Preventive Care	No Charge	No Charge
Primary Care Provider (PCP)	10% coins after ded	20% coins after ded
Specialist	10% coins after ded	20% coins after ded
Lab/X-ray	10% coins after ded	20% coins after ded
Hospital Services (Inpatient)	10% coins after ded	20% coins after ded
Emergency Care (Facility)	10% coins after ded	10% coins after ded
Urgent Care | DispatchHealth	10% coins after ded	10% coins after ded
Prescription Drugs (30 day supply) *Note: Deductible Applies.*	Denver Health Pharmacy $8 | $10 | $15 | $30 | $35 | $40 Tiers: 1 | 2 | 3 | 4 | 5 | 6 National Network Pharmacy $16 | $20 | $30 | $60 | $70 | $80 Tiers: 1 | 2 | 3 | 4 | 5 | 6	National Network Pharmacy $16 | $20 | $30 | $60 | $70 | $80 Tiers: 1 | 2 | 3 | 4 | 5 | 6

† This plan uses an Aggregate Deductible and Out-of-Pocket Maximum. See the 'Health Insurance 101' page for details. NOTE: Because deductibles accrue separately for each plan and each tier, it will be most cost-effective to select either Tier 1 or Tier 2 and then stick with providers from that particular tier.

QUICK TIPS:

- Lower monthly premiums
- A good option for those who receive medical care less often
- Deductible must be met first, then coinsurance applies
- All covered medical expenses count toward out-of-pocket maximums
- Health Savings Account (HSA) available for eligible employees with employer funding

WHAT'S INCLUDED IN MY PLAN?

All DHMP Plans Include:

Community Health Centers
9

Denver Health Medical Center

More than
500
providers

Over 85% are Board Certified in their field

- **Access to any urgent care center or emergency department** in the United States
- **Access to the entire Denver Health provider network:**
  - 9 Family Health Centers
  - Many School-Based Health Centers
  - Denver Health Medical Center
- **Access to Mental/Behavioral Health providers**
- **Integrated care** through your PCP who coordinates all aspects of your health needs — from your primary care, specialty care and pharmacy needs to lab work, behavioral/mental health care and hospitalization (Denver Health network only)
- **24/7 NurseLine** to answer your questions and call in certain prescriptions
- **50-75% off prescription costs** at Denver Health Pharmacies (prescription must be written by a Denver Health provider)
- **DispatchHealth** (in-home urgent care, 8 a.m. - 10 p.m., 365 days a year)
- **Low cost labor and delivery at Denver Health**
- **Nest Rewards** incentive program that provides gift cards to expecting moms and their babies when they receive care in the Denver Health network
- **MyChart** for online/mobile, private access to your health records: message your provider, schedule an appointment, request prescription refills and more from your smart phone or computer (Denver Health network)
- **Premium Perks** to receive discounts on a variety of services, such as Crunch Fitness, Lyft and Weight Watchers
- Large network of **chiropractic providers**

DENVER HEALTH™
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FOR LIFE'S JOURNEY

DENVER HEALTH™
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THE DENVER HEALTH ADVANTAGE

98% Trauma Survival Rate

Denver Health is a national leader in emergency and trauma care.

9 Community Health Centers

stretch from Southwest Denver to Montbello.

500,000

patient visits are achieved through our Family Health Centers each year.

MyChart

to message providers, schedule an appointment, request prescription refills and more!

FREE PARKING

Parking is free at all Denver Health facilities.

1/3 POPULATION

Denver Health treats one-third of Denver County's population annually.

18 School-Based Health Centers

where students of Denver Public Schools may receive their care.

24/7

Denver Health's NurseLine is staffed by trained nurses 24 hours a day, 7 days a week to answer your medical questions and is available to all DHMP members.

LEADER in healthcare equality

We proudly serve all members of the community from all walks of life.

Plus, you'll have access to the entire Cofinity network

HOW DOES MY PLAN WORK?

DHMP Network Options:

TIER ONE:
DENVER HEALTH

TIER TWO:
UCHEALTH, CHILDREN'S HOSPITAL COLORADO AND COFINITY

denverhealth.org

Call the Appointment Center: 303-436-4949

Denver Health's MyChart:

mychart.denverhealth.org *

uchealth.org

Call provider directly or make an appointment online.

UC Health's MyHealth:

uchealth.org/access-my-health-connection *

childrenscolorado.org

Call provider directly or make an appointment online.

Children's Hospital Colorado MyChart:

mychart.childrenscolorado.org *

cofinity.net

Call provider directly and be sure to tell the provider that Cofinity is in your plan's network.

** These patient portals give you access to your health records. You can easily message your provider, schedule an appointment, request prescription refills and more from your smart phone or computer.*

HOW DO THE TWO TIERS WORK?

As a member of DHMP, you can choose where you receive your health care. The Denver Health DHMO and Denver Health HDHP plans provide you with two options for obtaining covered health care services under one plan. Each time you or a family member access care you can choose between Tier 1 and Tier 2 providers.

Tier 1: Providers and facilities at Denver Health

Tier 2: HighPoint Denver contracted providers and facilities, including UCHealth and Children's Hospital Colorado, CU Medicine and also includes Cofinity contracted providers and facilities

See the provider directory on our website at denverhealthmedicalplan.org/find-doctor or call Health Plan Services at 303-602-2100.

The cost sharing is different for each tier of service. Be sure to check your benefit schedule.
If you have an eligible dependent residing outside the network area, they may qualify to access the First Health national network. You must call Health Plan Services to set this up.

SAME DAY CARE OPTIONS

When you need care today but aren't sure of the best option, we're here to help:

THE NURSELINE IS HERE TO HELP 24 HOURS A DAY/7 DAYS A WEEK.
Call **303-739-1261** and speak to a Denver Health nurse about your health concerns at no cost to you. Sometimes they can even call in a prescription for you. NurseLine nurses can help you decide on the best plan to get the care you need.

VISIT AN URGENT CARE CENTER.
Denver Health offers three Urgent Care centers. There are separate Pediatric (open 24/7) and Adult (open Mon-Fri, 7 a.m. to 8 p.m. | Sat-Sun, 8 a.m. to 7 p.m.) Urgent Care centers on its Main Campus at 777 Bannock St., as well as the Southwest Clinic for Pediatrics and Adults at 1339 Federal Blvd. (open Mon-Fri, 9 a.m. to 8 p.m. | Sat-Sun, 9 a.m. to 4 p.m., closed holidays).

Note: You can visit any urgent care center that is convenient for you. Your DHMP plan will cover you at any urgent care center, anywhere in the U.S.

DISPATCHHEALTH WILL COME TO YOU.
DispatchHealth is in your network and acts as urgent care on-the-go. They can treat a range of injuries and illnesses in the comfort and convenience of your home. Visit **dispatchhealth.com**, download the free app or call **303-500-1518**.

EMERGENCY ROOM.
You can access 24/7 emergency care for both children and adults on the Denver Health Main Campus at 777 Bannock St. The Denver Health Pediatric Emergency Department is designed just for kids and is completely separate from the Adult Emergency Department.

Note: If you need emergency care, go to the nearest hospital or call 9-1-1. Your DHMP plan will cover you at any emergency room, anywhere in the U.S.

HEALTH INSURANCE 101: SIMPLE LANGUAGE

AGGREGATE DEDUCTIBLE

A deductible is the amount you have to pay for allowable covered expenses under a health plan during a specified time period (e.g., a plan year or benefit year) before the plan will begin paying for covered expenses. In an aggregate deductible plan, cost sharing will begin after an individual family member, or combination of family members, reaches the family deductible amount. The family members then pay copayments and/or coinsurance where applicable for the remainder of the plan year, or until the family out-of-pocket maximum is met. Once a family member, or combination of family members, reaches the family out-of-pocket maximum, then the plan will pay 100% of covered services for the remainder of the plan year.

"ALLOWED" AMOUNT

DHMP negotiates a discount with each provider in our network. You have the advantage of this discount (allowed amount) and will never pay more than this negotiated price.

"BILLED" AMOUNT

This is what the provider bills to the insurance plan for a service you received. These are the "full" charges and the discount DHMP negotiated has not been applied yet.

COINSURANCE (COINS)

This is the charge, stated as a percentage of eligible expenses, that you are required to pay for certain covered health services.

COPAY

The predetermined amount, stated as a percentage or a fixed dollar, an enrollee must pay to receive a specific service or benefit. Copayments are due and payable at the time of receiving service.

DEDUCTIBLE (DED)

The amount you will have to pay for allowable covered expenses under a health plan during a specified time period (e.g., a plan year or benefit year) before the carrier will cover expenses. The specific expenses that are subject to the deductible vary by policy.

EMBEDDED DEDUCTIBLE

A deductible is the amount you have to pay for allowable covered expenses under a health plan during a specified time period (e.g., a plan year or benefit year) before the plan will begin paying for covered expenses. In an embedded deductible plan, cost sharing for a member will begin when that member reaches their individual deductible, or when a combination of members reaches the family deductible. This means that a member will start to pay copays and/or coinsurance for the remainder of the plan year or until the individual out-of-pocket maximum is met. Once the individual reaches their out-of-pocket maximum, then the plan will pay 100% of covered services for that member for the remainder of the plan year.

Note: an individual who meets their individual deductible will initiate cost sharing with the plan prior to other members on the plan.

FSA

A Flexible Spending Account (FSA) is a special account you put money into that you use to pay for certain out-of-pocket health care costs. You don't pay taxes on this money if pre-tax payroll deductions are elected. This can lower your taxable income and allows you to pay for qualified medical expenses with tax-free dollars.

HDHP

A High Deductible Health Plan (HDHP) has a higher annual deductible than typical health plans. In exchange for that higher deductible, you will pay a lower premium each month for your health insurance.

HSA

A Health Savings Account (HSA) is like a personal savings account, but the money in it is used to pay for health care expenses. You — not your employer or insurance company — own and control the money in your Health Savings Account. You have the option to deduct a portion of your pre-tax earnings each pay period to go directly into your HSA to help pay your deductible, coinsurance and other qualified health care expenses. These contributions do not expire at the end of the year and may also be invested if you choose

Note: You cannot spend HSA dollars directly from your investment account.

MONTHLY PREMIUM

Monthly charge to a subscriber for medical benefit coverage for the subscriber and their eligible, enrolled dependents.

OUT-OF-POCKET MAXIMUM

The maximum amount you will have to pay for allowable covered expenses under a health plan. The specific deductibles or cost sharing included in the out-of-pocket maximum may vary by policy.

GET THE ANSWERS YOU NEED

303-602-2100 | denverhealthmedicalplan.org

ABOUT US

Denver Health Medical Plan, Inc. (DHMP) is a local, nonprofit health insurance company established in 1997 to provide quality, accessible and affordable health insurance. We work to improve the health and well-being of our members by promoting wellness and disease prevention, providing access to comprehensive health services and enabling members to play an active role in their health care.