



Denver Health Medicare Select (HMO) 2021 Provider Directory

This directory is current as of the date downloaded from the directory site goperspecta.com/VPD/dhmp.

This directory provides a list of Denver Health Medicare Select (HMO)'s current network providers.

This directory is for Adams, Arapahoe, Denver and Jefferson Counties.

This directory may not include all contracted providers. It may be filtered based on the requested information.

To access Denver Health Medicare Select (HMO)'s online provider directory, you can visit denverhealthmedicalplan.org. For any questions about the information contained in this directory, please call our Health Plan Services Department at 303-602-2111 or toll free at 1-877-956-2111, 8 a.m. to 8 p.m., seven days a week. TTY users should call 711.

ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Call 303-602-2111 or 1-877-956-2111 (TTY 711).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Para obtener más información llame al 303-602-2111 o al 1-877-956-2111. (Los usuarios de TTY deben llamar al 711).

This document is available in Braille, audio and large print upon request. Please contact Health Plan Services.

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Section 1 – Introduction

This directory provides a list of Denver Health Medicare Select (HMO)'s network providers. To get detailed information about your health care coverage, please see your Evidence of Coverage (EOC).

Your Primary Care Provider

You may choose one of our network providers listed in this directory to be your **Primary Care Provider (PCP)**. Generally, you must get your health care services from your PCP.

What is a PCP?

A PCP is a highly trained medical professional who is qualified to provide all of your routine medical care.

What type of providers may act as a PCP?

Family Medicine, Geriatricians and Internal medicine, physicians as well as Nurse Practitioners, Physician Assistants and Gynecologists are all qualified to serve as a PCP.

All of your routine health care is managed by your PCP. If you need specialty care, your PCP will arrange for a referral to a network specialist. If for some reason we are unable to provide a specialized service within the Denver Health Medical Plan, Inc. (DHMP) network, your PCP will arrange for an authorization to see an out-of-network provider. Please remember, if you see a provider outside our network without an appropriate referral, neither Medicare nor DHMP will pay for those services.

The network providers listed in this directory have agreed to provide you with your health care services. You may go to any of our network providers listed in this directory; however, some services may require a referral. If you have been going to one network provider, you are not required to continue to go to that same provider. In some cases, you may get covered services from non-network providers.

If you choose to see a provider who is not in the DHMP network without prior authorization from DHMP, you may need to pay for all of the charges. DHMP may not pay for these charges. If DHMP's Medical Management approves your prior authorization to send you outside of DHMP for services and you get a bill from that provider, you should send that bill to DHMP for review. Call Health Plan Services at 303-602-2111 or toll-free at 1-877-956-2111 if you have questions about a bill. TTY users should call 711. Our hours of operation are 8 a.m. to 8 p.m., seven days a week.

How to get covered services when you have an emergency or an urgent need for care?

As soon as possible, notify us about your emergency. We need to follow up on your emergency. You or someone else should call to tell us about your emergency care, usually within 48 hours. Our number is on the back of your plan member ID card.

If you have an emergency, we will talk with the doctors who are giving you emergency care to help manage and follow up on your care. If you will require an inpatient hospitalization, you will be transferred to DHMP once you are stable. When you are in the service area, it is recommended you

use in-network providers for Urgent Care. When out of the service area, urgent and emergent care may be obtained from the first available provider. In addition, when out of the service area, you can obtain dialysis treatment from any qualified dialysis provider, with prior approval from DHMP.

You must use network providers except in emergency or urgent care situations or for out-of-area renal dialysis or other services. If you obtain routine care from out-of-network providers, neither Medicare nor DHMP will be responsible for the costs.

What is the service area for Denver Health Medicare Select (HMO)?

The counties in our service area are listed below.

Adams, Denver, Jefferson and Arapahoe.

How do you find Denver Health Medicare Select (HMO) providers that serve your area?

Online: To view online, visit denverhealthmedicalplan.org.

STEP 1: Select Find a Provider

STEP 2: Click on Medicare

STEP 3: Choose Select from the drop down (select a product)

STEP 4: Click Continue

STEP 5: Search for your provider by name, specialty or location

You may also select Advanced Search to find a doctor by language, network affiliation, gender or if the provider is accepting new patients or not.

If you have questions about Denver Health Medicare Select (HMO), or want a printed copy, please call our Health Plan Services Department at 303-602-2111 or toll-free 1-877-956-2111, 8 a.m. to 8 p.m., seven days a week. TTY users should call 711. You can also visit denverhealthmedicalplan.org.

Section 2 – List of Network Providers