



DENVER HEALTH
MEDICAL PLAN INC.™

Elevate

**CITY & COUNTY OF DENVER
DENVER POLICE
DERP
2021 HDHP PLAN**

MEMBER QUICK REFERENCE GUIDE



TABLE OF CONTENTS

Welcome to DHMP..... 2

How to Access Care 4

Your DHMP Identification Card 5

Health Insurance 101..... 8

Same Day Care 9

Pharmacy Benefits..... 10

Summary of Benefits..... 12

Utilization Management/Authorization Process..... 13

Health Management 13

Quality Improvement Program..... 13

Important Plan Information 14

Health Plan Services/Language Assistance 15

DENVER HEALTH MEDICAL PLAN
WE TAKE YOUR HEALTH PERSONALLY



WELCOME TO DHMP

On behalf of Denver Health Medical Plan, Inc. (DHMP), we would like to thank you for choosing us as your health insurance carrier. We know you will find many advantages to being a member of DHMP, including personalized service and comprehensive health care benefits. Our members come first!

This Quick Reference Guide is filled with very important information on how to get the most out of your health insurance plan. The following tips will help you navigate the process and take advantage of your benefits.



1



SCHEDULE AN APPOINTMENT TO ESTABLISH CARE IF YOU'RE NEW TO DHMP, OR SCHEDULE YOUR PREVENTIVE CARE VISIT WITH YOUR PCP

Make sure you're up-to-date on your preventive care:

- Annual checkups
- Immunizations
- Cancer screenings
- Prenatal visits
- Well-child visits
- Well-woman exams



MEMBER TIP:

When you visit your provider for an annual preventive exam, it is a great time to also talk to your provider about chronic issues such as high blood pressure, diabetes, etc. or any new health issues. You and your provider can develop a plan that supports your health and well-being and fits your lifestyle. Cost-sharing may apply if additional services such as an ultrasound, x-rays, bloodwork, etc. are needed.

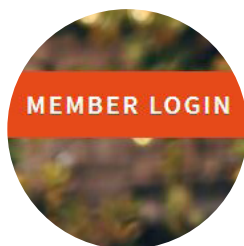
2 SAVE ON PRESCRIPTION COSTS

Prescription pricing at Denver Health pharmacies is lower than at National Network retail pharmacies. Prescriptions must be written by a Denver Health provider to be filled at a Denver Health pharmacy. You can save up to **50% off** your prescription costs at a Denver Health pharmacy.



3 MEMBER PORTAL

Manage your plan with our online Member Portal. Register for Member Portal access at **DenverHealthMedicalPlan.org**. Click on the **"MEMBER LOGIN"** tab on the home page.



4 DHMP PHARMACY PORTAL

DHMP has an online Pharmacy Portal where you can login to view your pharmacy claims, print tax documents, use search tools to find a pharmacy or check the price of a drug and get information on drug side effects. Register by visiting your plan's pharmacy page and click "Pharmacy Portal/Drug Information". You can also call our dedicated Pharmacy Department hotline at 303-602-2070.



5 DHMP WELL-BEING PORTAL

Good health is the best reward...but a **\$100 reward** doesn't hurt! DHMP has developed a comprehensive, interactive well-being program for your body and mind. See more program details and sign-up at:

BeWellDHMP.org





DH NETWORK: HOW TO ACCESS CARE

At DHMP, our main concern is that you receive quality health care services when you need them. Below is an overview of the network that is available to you. Please follow the chart to help you navigate your way to Primary Care, Specialty Care, Behavioral Health and Hospital Services. Visit **denverhealthmedicalplan.org** for the Provider Directory.

Members can obtain the following practitioner information by reviewing the Provider Directory available online, or by calling Health Plan Services: (1) Name, address and telephone numbers; (2) Professional qualifications; (3) Specialty; (4) Medical school attended; (5) Residency completion; (6) Board certification status; and (7) Practitioner and provider availability.



DENVERHEALTH.ORG



 **CALL**
APPOINTMENT CENTER
303-436-4949



MyChart

SCHEDULE APPOINTMENTS,
EMAIL YOUR DOCTOR AND
ACCESS YOUR LAB RESULTS

MYCHART.
DENVERHEALTH.ORG

YOUR DHMP IDENTIFICATION CARD

You, and each member of your family on this plan, will receive a Member Identification (ID) card upon enrollment. The ID card lists the most common services. You will need to have this card with you when accessing care. If you have misplaced it, login to the Member Portal to request a new one or call Health Plan Services at 303-602-2100 for a replacement card.

Front of card

Your plan description

Your unique Member ID information

Pharmacy information for your pharmacist

EMPLOYER GROUP HEALTH PLAN
CITY & COUNTY OF DENVER ELEVATE HDHP

Card Issued: _____ CO-DOI

Member ID #: _____

Name: _____

Group #: _____

MedImpact
RxBIN: 003585
RxPCN: ASPROD1
RxGrp: DHM05
Rx ID #: _____

Denver Health Network
Preventive: \$0
Primary Care Provider: Ded & Coins
Specialist: Ded & Coins
Emergency Room: Ded & Coins
Urgent Care: Ded & Coins
Hospital: Ded & Coins

Out of Network
Emergency Room: Ded & Coins
Urgent Care: Ded & Coins

Back of card

In case of emergency call 911 or go to the nearest hospital emergency room.
ER/UC is covered anywhere in the U.S.
This card does not prove membership or guarantee coverage.
Prior Authorization is required for some services.
denverhealthmedicalplan.org

Health Plan Services: 800-700-8140
TTY Users: 711
NurseLine: 303-739-1261

Pharmacy Providers
Rx Help Desk/Auths: 303-602-2070
MedImpact Help Desk: 800-788-2949

 **DENVER HEALTH MEDICAL PLAN**
P.O. Box 24992
Seattle, WA 98124-0992
EDI Payor ID # 84-135

 
P.O. Box 21524
Eagan, MN 55121
EDI Payor ID # 65456

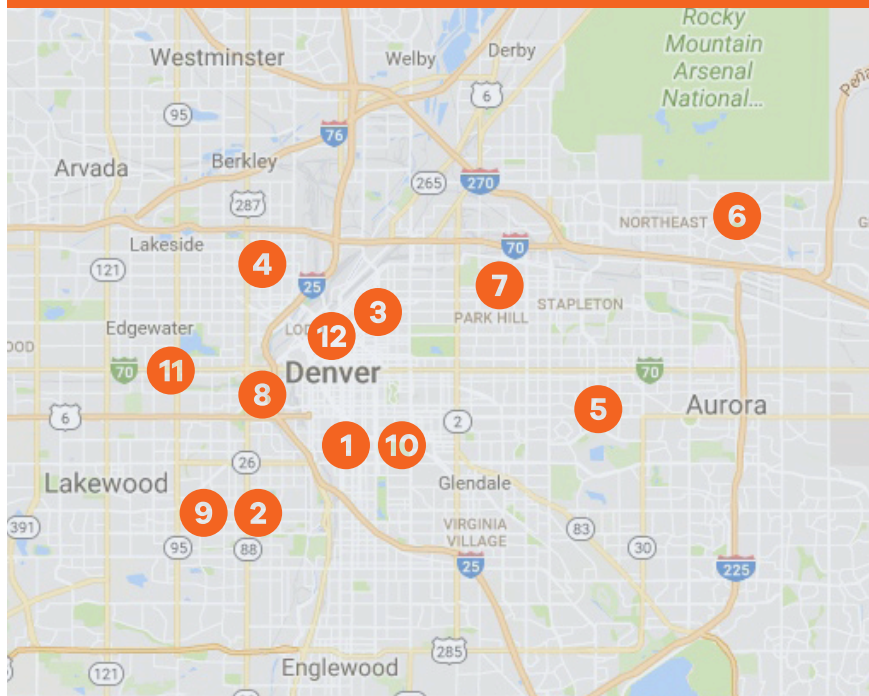
Cost sharing amounts.
Visit our website to
see details about your
specific plan.

Important phone
numbers for you and
your doctor.



**DENVER
HEALTH™**
— est. 1860 —

NETWORK LOCATIONS



**To view a complete
Provider Directory visit:
denverhealthmedicalplan.org**




**Pharmacy
at this clinic**



**Urgent Care
at this clinic**

1 Wellington Webb
Center for
Primary Care
301 W. 6th Ave.
R_x

2 Federico F. Peña
Southwest Family
Health Center
1339 S. Federal Blvd.
R_x 

3 Gipson Eastside
Family Health Center
501 28th St.
R_x

4 La Casa/Quigg
Newton Family Health
Center
4545 Navajo St.
R_x

5 Lowry Family
Health Center
1001 Yosemite St.
R_x

6 Montbello Family
Health Center
12600 Albrook Dr.
R_x


7 Park Hill Family
Health Center
4995 E. 33rd Ave.
R_x

8 Sandos Westside
Family Health Center
1100 Federal Blvd.
R_x

9 Westwood Family
Health Center
4320 W. Alaska Pl.
R_x

10 Denver Health
Medical Center
777 Bannock St.
R_x 

11 Sloan's Lake
Primary Care Center
4007 W. Colfax Ave.

12 Downtown Urgent
Care Center
1545 California St.




HEALTH INSURANCE 101: SIMPLE LANGUAGE

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

Out-of-Pocket Costs: What you pay for medical expenses that aren't paid by your health insurance plan. Your out-of-pocket costs include deductibles, copays and coinsurance for health care services. In other words, any costs you personally pay for covered medical or pharmacy services.

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.

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.

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.

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

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.



same day care

When you can't get in to see your Primary Care Provider or need care after normal business hours...



THE NURSELINE IS HERE TO HELP YOU.

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 the best plan to get the care you need, which may include any of the options below.

DISPATCHHEALTH WILL COME TO YOU.

DispatchHealth is our on-demand health care provider that can treat a range of injuries and illnesses in the comfort and convenience of your home. Visit **dispatchhealth.com** or call **303-500-1518**.

VISIT AN URGENT CARE CENTER.

Denver Health offers three Urgent Care centers:

- » Denver Health Main Campus for Pediatrics (open 24/7) and Adults (open Mon-Fri, 7 a.m. to 8 p.m. | Sat-Sun, 8 a.m. to 7 p.m.) at 777 Bannock St.
- » Southwest Clinic for Pediatrics and Adults (open Mon-Fri, 9 a.m. to 8 p.m. | Sat-Sun, 9 a.m. to 4 p.m., closed holidays) at 1339 Federal Blvd.
- » Downtown Urgent Care Center (open Mon-Fri, 7 a.m. to 6 p.m. | Sat-Sun, 9 a.m. to 4 p.m.) at 1545 California St.
- » In addition, Denver Health MyChart users (age 18 and above) can now have a virtual urgent care visit with one of our expert providers. It's easy and convenient to get the urgent care you need from the comfort of your home using your smartphone, tablet or computer. Learn more here: **denverhealth.org/services/emergency-medicine/urgent-care/virtual-urgent-care**

Note: You are covered at any urgent care center, anywhere in the U.S.

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. You are covered at any emergency room, anywhere in the U.S.





PHARMACY BENEFITS

WHERE YOU CAN FILL YOUR PRESCRIPTION

- » Want to lower your out-of-pocket costs? Denver Health pharmacies are conveniently located in many of the Denver Health clinics and will give you the lowest out-of-pocket costs.
 - Important: Prescriptions must be written by a Denver Health provider in order to be filled at a Denver Health pharmacy.
- » You can fill your prescription at one of thousands of pharmacies nationwide including Denver Health pharmacies, King Soopers, Safeway, Target, Walgreens and more.

WE PASS THE SAVINGS ON TO YOU

DHMP will never charge you more than your copay, and if the pharmacy submits a cost less than your copay, that savings is passed on to you. Example: If your copay is \$8 and the pharmacy submits a cost of \$10, you will pay \$8. However, if your copay is \$8 and the pharmacy submits a cost of \$6, you will only pay \$6.

HOW TO SAVE MONEY ON PRESCRIPTIONS

- » Ask your provider for a 90-day supply; the cost of a 90-day supply is less than getting a 30-day supply each month.
 - 90-day supplies can also be sent to your home through the mail using the plan's Mail Order Pharmacy.
- » Fill your prescriptions at a Denver Health pharmacy (if your prescription is written by a Denver Health provider).
 - Don't have time to get to a Denver Health pharmacy? Denver Health Pharmacy by Mail will send prescriptions directly to your home!

SPECIALTY DRUGS

- » If you fill prescriptions written by a specialist provider such as an infectious disease specialist, rheumatologist, neurologist or oncologist, you may have specialty drugs.
- » Specialty drugs can only be filled at a Denver Health pharmacy or the preferred specialty pharmacies chosen by DHMP.
- » Most specialty drugs can only be filled for a 30-day supply, even if they are sent to your home in the mail.



PHARMACY BENEFITS CONT.

VISIT [DENVERHEALTHMEDICALPLAN.ORG](https://denverhealthmedicalplan.org) FOR:

- » Mail order forms and information
- » The Formulary and Pharmaceutical Management Procedures, which contain:
 - A list of covered pharmaceuticals (i.e., the drug formulary)
 - Explanation of limits on refills, doses or prescriptions
 - Pharmaceuticals that require Prior Authorization (PA)
 - Use of generic substitution, therapeutic interchange and step-therapy protocols
 - How to start a PA (i.e., exception request) and what information must be provided
 - The list of drugs that are excluded from coverage
 - Procedures that affect coverage of pharmaceuticals
 - The copayment structure for restricted pharmaceuticals
- » Access to the Pharmacy Portal



If you do not have access to the internet, fax or email, please contact Health Plan Services at 303-602-2100 to request a mailed copy of your plan information.



Visit our website at denverhealthmedicalplan.org

2021 Summary of Benefits

HDHP PLAN	DENVER HEALTH NETWORK
	Individual Family
Deductible	\$1,450 \$2,900
Out-of-Pocket Maximum	\$2,900 \$5,800
Coinsurance	10%
Preventive Care	No charge
Primary Care Provider (PCP)/ Telehealth	10% coins after ded
Specialist/Telehealth	10% coins after ded
Lab/X-ray	10% coins after ded
Hospital Services	10% coins after ded
Emergency Care (Facility)	10% coins after ded
Urgent Care	10% coins after ded
Prescription Drugs	Denver Health Pharmacy (30-day) Discount: \$8 Generic: \$10 Non-Preferred Generics: \$15 Preferred Brands: \$30 Non-Preferred Brands: \$35 Specialty: \$40 National Network Pharmacy (30-day) Discount: \$16 Generic: \$20 Non-Preferred Generics: \$30 Preferred Brands: \$60 Non-Preferred Brands: \$70 Specialty: \$80
Note: Deductible applies, except for preventive drugs	

This is a summary of the most frequently asked about benefits. For a complete explanation and list of full benefits, please refer to the Member Handbook on our website at denverhealthmedicalplan.org.

UTILIZATION MANAGEMENT/ PRIOR AUTHORIZATION PROCESS

DHMP uses key Utilization Management (UM) procedures including, but not limited to: (1) Preservice review; (2) Urgent concurrent review; (3) Postservice review; and (4) Filing an appeal. Prior Authorization (PA) may be required for many services.

Please refer to the PA list on our website at:

denverhealthmedicalplan.org/medical-prior-authorization-list

For questions regarding PA, please call Health Plan Services at 303-602-2100 or Toll-Free 1-800-700-8140. TTY users call 711.

CARE MANAGEMENT

For information on our Care Management programs, call Health Plan Services at 303-602-2100.

QUALITY IMPROVEMENT PROGRAM

DHMP continually strives to improve the quality of care and service to our members by ongoing monitoring of services. Please visit:

denverhealthmedicalplan.org/quality-improvement-program

to learn more about our programs such as goals, processes, outcomes and specific measurements.



MEMBER TIP:

Telehealth services are a covered benefit. Telehealth can be used for many services like PCP office visits, some specialist visits, behavioral health services and more. Telehealth copays and cost-sharing work just like an in-person visit to your provider. There is no additional fee to use telehealth services.

WHERE TO LOCATE IMPORTANT PLAN INFORMATION

The following resources are located in the member handbook online at:
denverhealthmedicalplan.org

- » Benefits and services included in, and excluded from, coverage
- » Benefit restrictions that apply to services obtained outside the health insurance plan's system or service area
- » Copayments and other charges for which you are responsible
- » How the health insurance plan evaluates new technology for inclusion as a covered benefit
- » How to appeal a decision that adversely affects coverage, benefits or your relationship with the health insurance plan
- » How to obtain care and coverage when you are out of the health plan's service area, including information on covered and noncovered benefits
- » How to submit a claim for covered services, if applicable
- » How to submit a complaint, both orally and in writing
- » Member Handbook
- » Member Rights and Responsibilities
- » Potential network, service or benefit restrictions that apply to services obtained outside the health insurance plan's service area
- » Protected Health Information (PHI) Use and Disclosure, including:
 - DHMP's routine use and disclosures of PHI
 - Use of authorizations to approve the release of information
 - Access to medical records and PHI
 - Protection of oral, written and electronic information across the health insurance plan
 - Protection of information disclosed to health insurance plan sponsors or employers
- » Pharmacy benefits and pharmaceutical management procedures

If you do not have access to the internet, fax or email, please contact Health Plan Services at 303-602-2100 to request a mailed copy of your plan information.



HEALTH PLAN SERVICES

Phone: 303-602-2100

Toll-Free: 1-800-700-8140

Hours of Operation: Mon - Fri | 8 a.m. - 5 p.m.

Website: denverhealthmedicalplan.org

DENVER HEALTH APPOINTMENT LINE

Phone: 303-436-4949

Hours of Operation: Mon - Fri | 7 a.m. - 6 p.m.

LANGUAGE ASSISTANCE

We're here to help all members regardless of any language barriers that may exist. We offer translation services, bilingual staff and interpretation professionals to help members obtain information about benefits, access to medical services and more. DHMP contracts with certified translation services to provide translation assistance at no cost to our plan members. Some documents can also be translated upon request. To request language services at any point during an interaction, contact Health Plan Services at 303-602-2100 or Toll-Free at 1-800-700-8140. TTY users call 711.

COORDINATION OF BENEFITS

You must tell DHMP if you are covered by more than one health insurance plan. This helps us know which plan should pay your claims first and which should pay second. If this applies to you, please fill out the form found at:

denverhealthmedicalplan.org/coordination-benefits

and send it back using the instructions listed, or call Health Plan Services at 303-602-2100 with questions.





Local. Nonprofit. Health Insurance.

**777 Bannock St., MC 6000
Denver, CO 80204
Health Plan Services: 303-602-2100
Toll-Free: 1-800-700-8140
TTY: 711
denverhealthmedicalplan.org**

If you do not have access to the internet, fax or email, please contact Health Plan Services to request a mailed copy of your plan information.