

Elevate CHP+ by Denver Health Medical Plan

2022 Member Guide
Guía para miembros 2022



ELEVATE
CHILD HEALTH PLAN PLUS

Denver Health Medical Plan Inc.™



CHP+
Child Health Plan Plus

WELCOME TO ELEVATE CHP+ BY DENVER HEALTH MEDICAL PLAN!

If you have questions about this notice, we can help you for free. We can also give it to you in other formats like large print, audio or in other languages. Please call 303-602-2100, toll free 1-800-700-8140, or 711 for callers with speech or hearing needs.

Si tiene preguntas acerca de este aviso, podemos ayudarlo sin costo alguno. También podemos ofrecerlo en otros formatos como letras grandes, audio u otros idiomas. Llame al 303-602-2100, sin costo al 1-800-700-8140 o al 711 para personas que llaman con necesidades auditivas o del habla.

Dear Member:

Your health is important to us and we are happy to have you as a member of Elevate Child Health Plan *Plus* (CHP+) by Denver Health Medical Plan (DHMP). For more in-depth information about your CHP+ benefits, your Member Handbook can be viewed online at denverhealthmedicalplan.org/chp-member-handbook.

Your New Elevate CHP+ ID Card

Please show your card every time you go to the doctor or pick up prescriptions. DHMP provides free auxiliary aids and services to members with disabilities to communicate effectively with us. Sign language and oral interpretation services are available in any language free of charge. If you have any questions regarding your insurance benefits, please call **Health Plan Services** at **303-602-2100** or toll free at **1-800-700-8140**. TTY users should call 711. They are available from

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**Visit our website at
DenverHealthMedicalPlan.org**

8 a.m. to 5 p.m. Monday - Friday.

Thank you for being a member of Elevate CHP+ by Denver Health Medical Plan! We look forward to helping you meet your health care goals!

QUICK TIPS FOR ACCESSING CARE AT DENVER HEALTH

DHMP assigns you a medical home based on where you live. This medical home can be changed at any time by calling the Appointment Center. You may choose from clinics at Denver Health's Main Campus, one of the eleven Community Health Centers, Stride Community Health Centers (PCP visits) or various School-Based Health Centers to receive your medical care. To better serve your needs, DHMP will be providing your Member Handbook, Provider Directory, Pharmacy Directory and Formulary documents to you electronically, in both English and Spanish, for the plan year. You can also request a paper copy of them, which will be sent to you within five business days, by calling Health Plan Services at 303-602-2100. To see a complete list of clinic locations and hours for Denver Health, visit denverhealth.org/locations. For more information about DHMP Providers, visit denverhealthmedicalplan.org/find-doctor. For Stride (PCP), visit stridechc.org/locations. For our Pharmacy Directory, visit denverhealthmedicalplan.org/chp-pharmacy.

There are 4 Urgent Care Clinics:

You do not need to get approval from DHMP to go to the nearest urgent care center. You may see any urgent care provider in the USA, even if the provider is outside



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the DHMP network. Below is a list of Denver Health Urgent Care Clinics:

- » Adult Urgent Care Clinic at Denver Health (777 Bannock St.) open 7 a.m. to 8 p.m. Monday - Friday and 8 a.m. to 7 p.m. on weekends, with reduced holiday hours you may find at denverhealth.org/services/emergency-medicine/adult-urgent-care.
- » Pediatric Urgent Care Clinic at Denver Health (777 Bannock St.) open 24 hours a day/7 days a week.
- » Adult and Pediatric Urgent Care Clinic at the Southwest Family Health Center (1339 S. Federal Blvd.) open 9 a.m. to 8 p.m. Monday - Friday and 9 a.m. to 4 p.m. on weekends, closed on Holidays.
- » Downtown Urgent Care Clinic (1545 California St.) open 7 a.m. to 6 p.m. Monday - Friday and 9 a.m. to 4 p.m. on weekends.

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

**The following are open 24 hours a day/
7 days a week:**

If you have an emergency, call 9-1-1 or go to the nearest hospital. There is no cost for covered health care services if you go to the hospital for an emergency health problem. For a list of Denver Health Emergency Departments, see below:

- » Pediatric Emergency Room (777 Bannock St.)
- » Adult Emergency Room (777 Bannock St.)
- » Denver Health **NurseLine** (free medical advice) available by telephone at **303-739-1261**.

Note: If you have trouble finding a Primary Care Provider (PCP) or you wish to change your PCP, please call the Denver Health Appointment Center at 303-436-4949 or Stride Community Health Center at 303-360-6276.

New Patients:

- » If you have not been seen at a Denver Health Clinic in the past 12 months or if you have never been seen at a Denver Health Clinic, call the **Appointment Center** at **303-436-4949** to make your appointment.

Existing Patients:

- » Once you have been seen at your Denver Health Clinic, you can schedule an appointment online by registering for MyChart at mychart.denverhealth.org or by calling the **Appointment Center** at **303-436-4949** to make all future appointments. The MyChart application provides you detailed information about your PCP or any Specialist providers you have seen and allows you to message your doctor, view test results and refill medications.
- » If you need to cancel your appointment, please call the Appointment Center at least one day before your appointment.
- » Bring your Elevate CHP+ ID Card and picture ID to all of your appointments.
- » The clinics and their phone numbers are included in the Elevate CHP+ Member Handbook located on our website at denverhealthmedicalplan.org/chp-member-handbook.
- » In most cases, you need a referral from your PCP to see a Specialist (a provider who is an expert in one or more areas of health care). You do not need a PCP referral to see a Specialist in Optometry or

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OB/GYN.

- » Be 15 minutes early for your appointment so you will have time to park and check in at the clinic. There is free patient parking on the Main Campus in the Delaware Garage at 6th and Delaware, and metered/paid parking throughout the Denver Health Campus.
- » All appointments can be made through the **Appointment Center at 303-436-4949**. This includes Women's Care, Primary Care, Specialty and Eye appointments.

Prenatal Care Program:

Prenatal care program members may choose an OB/GYN as their Primary Care Provider (PCP). Your PCP helps you get the care you need. He or she provides a wide range of health care services, including checkups, sick visits, shots, initial diagnosis and treatment, health supervision, management of chronic conditions, referrals to specialist when needed and ensuring continuity of care. Dental services will also be available through DentaQuest. Please contact **DentaQuest at 1-888-307-6561** for specific dental related benefits. This program is more than just prenatal care. It offers many benefits during and after pregnancy, including visits to a doctor when you are sick, prescriptions, vision and mental health services. The coverage is good through 60 days after the end of your pregnancy.

Presumptive Eligibility:

The Presumptive Eligibility (PE) program gives children under 19 and pregnant women temporary Health First Colorado or Child Health Plan Plus (CHP+) medical coverage right away. Your temporary medical coverage lasts for at least 45 days while your Medical Assistance application is processed. To qualify, you must:

- » Be a child under 19 or a pregnant woman;

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- » Appear to qualify for Medicaid or CHP+; and
 - » Complete an application for Medical Assistance
- Note: Dental services are not covered while you are in the Presumptive Eligibility program.

Coordination of Benefits:

- » If you have more than one insurance you must tell DHMP. 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.

Pharmacy Benefit -

Where You Can Fill Your Prescriptions:

- » Denver Health has 9 pharmacies located right outside of Denver Health clinics (see map at the end of this guide).
 - Denver Health Refill Request and Central Pharmacy Call Line: **303-389-1390**.
 - Denver Health Pharmacies can only fill prescriptions written by Denver Health providers.
- » Other pharmacies such as King Soopers, Safeway, Target, Walgreens and others are also in your pharmacy network.
- » You can use Denver Health Pharmacy by Mail to have medications sent to your home through the mail (if your prescription is written by a Denver Health provider).
 - Medications covered by DHMP are \$0. You do not need to keep a credit card on file to have covered medications sent to your home with Denver Health Pharmacy by Mail.
 - Set up Denver Health Pharmacy by Mail by:
 - Using the free MyChart app (MyChart.DenverHealth.org)
 - Calling the Refill Request Line at **303-389-1390**

- Calling the Pharmacy directly at **303-436-4488**
- Visit denverhealthmedicalplan.org/chp-pharmacy for:
- » Denver Health Pharmacy by Mail sign-up form and information.
 - » The Formulary/Drug List, which contains:
 - A list of covered pharmaceuticals (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 (exception request) and what information must be provided.
 - The list of drugs that are excluded from coverage.
 - » Pharmacy Portal Login
 - Pharmacy Locator to search for a pharmacy near you
 - » If you have questions about your pharmacy benefits, please call **Health Plan Services** at **303-602-2100** or **1-800-700-8140**. TTY users should call 711.

MEMBER RIGHTS & RESPONSIBILITIES

Your Rights:

Denver Health Medical Plan (DHMP) provides access to medical care for all of its members. We do not discriminate based on your religion, race, national origin, color, ancestry, handicap, gender, sexual orientation, gender identity or age.

We give care through a partnership that includes your provider, DHMP, other health care staff, and you – our

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member. DHMP is committed to partnering with you and your provider. As a DHMP member, you have all of the following rights:

- » To be treated with respect and with consideration to your dignity and privacy.
- » To get information from your provider about all of the treatment options and alternatives for your health condition in a way that makes sense to you.
- » To participate in decisions regarding your health care, including the right to refuse treatment.
- » To get a second opinion (have some other provider review your case) at no cost to you. DHMP will arrange a second opinion with an out-of-network provider if a DHMP provider is not available.
- » To make an Advance Directive.
- » To get detailed information about Advance Directives from your provider.
- » To be told up front if your provider cannot follow your Advance Directives because of their beliefs.
- » To be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation. (This means that DHMP providers and staff cannot hold you against your will to punish you, get you to do something they want, or get back at you for something you have done).
- » To get health care services from providers within the DHMP appointment standards timeframes (in the handbook).
- » To see providers who make you comfortable and who meet your cultural needs.
- » To use any hospital (inside of or outside of the Denver Health network) or other facility for emergency and urgent care services. Emergency and urgent care services do not require prior approval or referral.
- » To get health care services outside of the Denver Health Network if you are not able to get them in the Denver Health Network (DHMP must approve

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- non-emergency and non-urgent care services first).
- » To request and receive a copy of your medical records, and request that they be changed or corrected.
 - » To file a grievance, appeal or ask for a State Fair Hearing.
 - » To join the DHMP Consumer Advisory Committee.
 - » To get complete benefit information from DHMP. This information includes covered services, how to get all types of care like emergency care, detailed information about providers, and your disenrollment rights.
 - » To use your rights above, without fear of being treated poorly by DHMP.
 - » To be provided with health care services in accordance with requirements for access, coverage, and coordination of medically necessary services.

Your Responsibilities:

DHMP wants to give every member outstanding care and a great experience every time they come to Denver Health. That is why we expect our members, staff, and providers to treat each other with dignity and respect. As a DHMP member, you are also responsible for:

- » Selecting a Primary Care Physician (PCP) or Medical Home that is in the Denver Health Network.
- » Following all of the rules in the Member Handbook.
- » Following the rules of the DHMP appeal and grievance process.
- » Paying for any health care that you get without referral from your PCP (unless the services are emergency or urgent care services, or if they are "Wrap Around" benefits).
- » Paying for any services that are not covered by DHMP or CHP+.
- » Telling DHMP about any other insurance you have

besides CHP+.

- » Calling the **Appointment Center** at **303-436-4949** if you wish to change your PCP.

Connect with us:

As an Elevate CHP+ member, you are the heart of what we do at DHMP. Your feedback is important to us and helps us to improve our plan. Within our website, we ask for feedback on member materials that are sent to you. Please follow the link and provide us with your feedback at denverhealthmedicalplan.org/child-health-plan-plus-connect-us.

GRIEVANCES

What is a Grievance?

A Grievance is when you are not happy with something that DHMP does. This could be when you are not happy with any of the following:

- » The quality of care or services you get.
- » The way DHMP treats you.
- » Things DHMP does that you are not happy with.
- » A failure to respect your rights as a member.

You can file a grievance at any time to tell us (verbal or written) when you are not happy with your service or care.

What to do if you have a Grievance

If you have a grievance, you or your Designated Personal Representative (DPR) can call **Grievances & Appeals** at **303-602-2261**. You or your DPR can also write to Grievances and Appeals. Please be sure to include your name, Elevate CHP+ ID number, address and phone number in your letter. Please send your



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written grievance to this address:

**Denver Health Medical Plan
Attn: Grievances and Appeals Team
938 Bannock St.
Denver, CO 80204**

If you need help filing a Grievance

DHMP will help you file a grievance. If you need help filling out any forms or taking any of the steps to file a grievance, including using an interpreter or TTY services, please call **Grievances & Appeals** at **303-602-2261**.

After you file a Grievance

After you file a grievance, DHMP will send you a letter within 2 business days to let you know that your grievance was received. DHMP has to make a decision on your grievance no later than 15 business days of when you file your grievance. You or DHMP can extend the timeframe that DHMP has to make a decision on your grievance, and DHMP may take up to 14 more calendar days. For more information on Grievances, please look at your Member Handbook.

Timeframe To File Your Grievance	Anytime
Written Acknowledgement Letter	2 Business Days
Plan Decision Timeline	15 Business Days
Extension Allowed	14 Calendar Days

APPEALS

What is an Appeal?

An Appeal is a request that you or your DPR can make to review an Adverse Benefit Determination taken by DHMP. If you think an action taken by DHMP is not right, you or your DPR can call or write us to appeal the Adverse Benefit Determination. A provider may file an appeal for you if you make them your DPR. If you are still unhappy after your appeal decision, then you can ask for a state Fair Hearing after you have completed all the proper steps in the DHMP appeal process.

How to file an Appeal

You have 60 calendar days to file an appeal after you get a notice of Adverse Benefit Determination, which is a denial of payment or authorization of service. Once the appeal is received, DHMP will process the appeal within 10 business days from the date the appeal was received.

To appeal an Adverse Benefit Determination, you may:

- » Call **Grievances and Appeals** at **303-602-2261**, TTY users should call 711.
- » Fill out the Complaints/Appeals form found at denverhealthmedicalplan.org/chp-complaint-and-appeal-form, and mail it to **DHMP Grievances and Appeals, 938 Bannock St., Denver CO 80204**.

Filing an Expedited Appeal

If your life or health is in danger and you need DHMP to make a decision on your appeal right away, you can call **Grievances & Appeals** at **303-602-2261** to file an expedited appeal. If DHMP approves your request for an expedited appeal, DHMP will make a decision on your appeal no later than 72 hours from



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the date of your request. If DHMP denies your request for an expedited appeal, DHMP will call you as soon as possible to let you know. DHMP will also send you a letter within 72 hours from the receipt of your request. The letter will let you know that you have the right to file a grievance if you are unhappy with DHMP’s decision.

APPEALS:

Timeframe To File An Appeal	60 calendar days from the date of your notice of adverse benefit determination
Written Acknowledgement Letter	2 Business Days
Plan Decision Timeline (Pre-Service and Post-Service)	10 Business Days
Plan Decision Timeline (Expedited)	72 hours
Extensions	14 Calendar Days

State Fair Hearing

If you are unhappy with the actions DHMP takes, you **MUST** go through the appeal process explained above. After exhausting the DHMP appeal process, within 120 calendar days after you get a Notice of Adverse Appeal Resolution Letter, you or your DPR have the choice to ask for an Administrative Law Judge to review an action taken by DHMP. You may request a State Fair Hearing when:

- » Services you seek are denied or the ruling to approve services is not acted upon in a timely manner;
- » You believe an action taken is wrong.

To request a State Fair Hearing, you or your DPR must send a letter to the Office of Administrative Courts. This letter should contain:

- » Your name, address and Elevate CHP+ ID number;
- » The action, denial or failure to act quickly on which your request appeal is based; and
- » The reason for appealing the action, denial or failure to act quickly.

To submit a State Fair Hearing, you must mail your letter to:

Office of Administrative Courts
1525 Sherman Street, 4th Floor
Denver, CO 80203

If you need help requesting a state fair hearing, DHMP will help you. Call **Grievances & Appeals** at **303-602-2261** to ask for help. You can also call the **Office of Administrative Courts** at **303-866-2000**. Any ruling made in a State Fair Hearing is final.

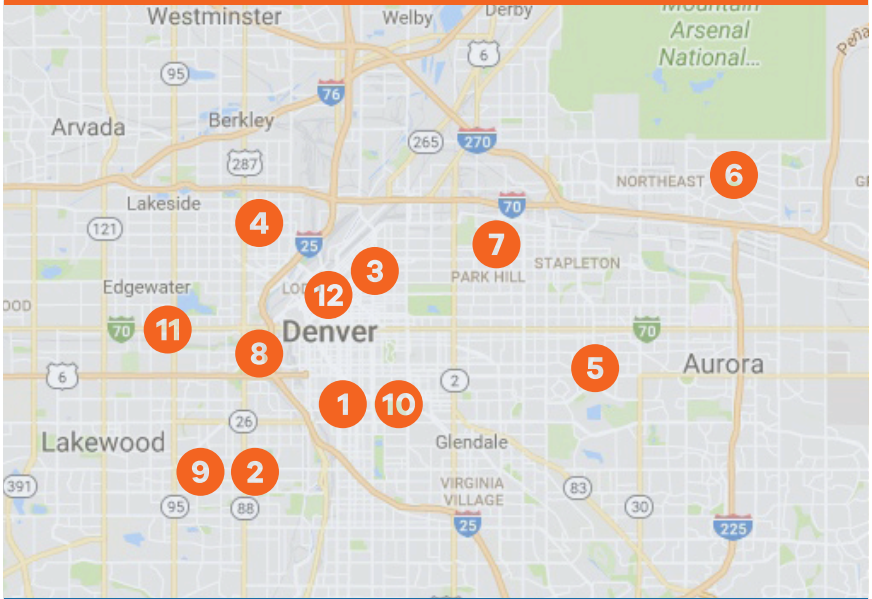
STATE FAIR HEARING:

Timeframe To File	120 days after you get a Notice of Adverse Appeal Resolution Letter
State Fair Hearing Decision Timeline	90 Calendar Days



**DENVER
HEALTH**
— est. 1860 —

NETWORK LOCATIONS



To view a complete
Provider Directory visit:
denverhealthmedicalplan.org

Para ver el *Directorio de proveedores*
completo, visite:
denverhealthmedicalplan.org



Pharmacy
at this clinic



Urgent Care
at this clinic

Visit our website at
DenverHealthMedicalPlan.org

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

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

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

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

5 Lowry Family
Health Center
1001 Yosemite St.
Rx

6 Montbello Family
Health Center
12600 Albrook Dr.
Rx

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

8 Sandos Westside
Family Health Center
1100 Federal Blvd.
Rx

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

10 Denver Health
Medical Center
777 Bannock St.
Rx +

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

12 Downtown Urgent
Care Center
1545 California St.
+



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Denver Health Medical Plan Inc.

777 Bannock St., MC 6000
Denver, CO 80204

Health Plan Services | Servicios del Plan de Salud:
303-602-2100

Toll-Free | Número gratuito:
1-800-700-8140

TTY: 711

DenverHealthMedicalPlan.org