



**ELEVATE
HEALTH PLANS**

Denver Health Medical Plan Inc.™



ELEVATE HEALTH PLANS
2024 ENROLLMENT GUIDE

WELCOME!

Dear Prospective Member:

Thank you for considering Elevate Health Plans as your health insurance carrier! Elevate Health Plans is offered by Denver Health Medical Plan (DHMP), 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 expanded our plans and benefits with your best health in mind. This enrollment guide contains an overview of your plan options and highlights the unique benefits that Elevate Health Plans has to offer. Use this guide to help you make the best decision for you and your family. We are committed to helping you achieve your best health and well-being so that you can lead a healthy and fulfilling life. Please don't hesitate to contact our team with any questions you may have or visit our website at **ElevateHealthPlans.org**.

At Elevate Health Plans, we take your health personally.



Greg McCarthy
Chief Executive Officer
Denver Health Medical Plan, Inc.

Elevate Health Plans by Denver Health Medical Plan

We provide health insurance to residents of Adams, Arapahoe, Denver, Jefferson, Park, Grand, Summit, Lake, Dolores, San Juan, Montezuma, La Plata and Archuleta counties.



**Open Enrollment for 2024
starts on 11/1/2023**

Shop now at ElevateHealthPlans.org!

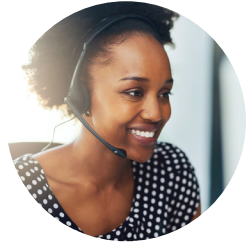
If you have a Qualifying Life Change Event (QLCE) during a Special Enrollment Period (SEP), such as marriage, divorce, the birth or adoption of a child, you just turned 26 or are new to Colorado, you may qualify to enroll outside of Open Enrollment. For more information, please call one of our Licensed Insurance Agents at **303-602-2999**.

6

REASONS YOU SHOULD CHOOSE ELEVATE HEALTH PLANS

1 LOCAL. NONPROFIT. HEALTH INSURANCE.

As your hometown insurance carrier, our health plan services team is easily accessible, providing you with personalized service. We are Colorado taking care of Colorado!



2 SAVE ON PRESCRIPTION COSTS

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.



3 MENTAL AND BEHAVIORAL HEALTH BENEFITS

Elevate Health Plans include mental health, behavioral health and substance use services.

- » Outpatient services from any in-network provider are covered without a referral.
- » Elevate Mind is an easy, fast way to get the mental health care you need, when you need it, via phone or video.



4 URGENT CARE AND E.R., ANYWHERE IN THE U.S.

Have peace of mind knowing that you can get care whether you're close to home or on-the-go. Our members are covered at any urgent care center or emergency department, anywhere in the U.S.



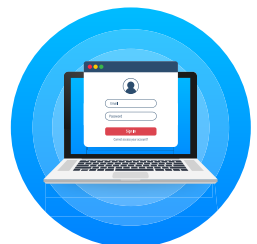
5 TELEHEALTH SERVICES

As an Elevate Health Plans member, you have access to telehealth services – which means you and your provider will conduct your appointments as either phone or video conferences. Specific telehealth resources vary by plan. Telehealth cost-sharing works just like an in-person visit to your provider.



6 MEMBER PORTAL

You'll have access to our member portal, your go-to resource for managing your health insurance plan any place, any time. With it, you can access important information, and your member materials (including ID cards), communicate with your health plan, check claim status and more – all from your desktop, tablet or smartphone.





WHICH PLAN IS RIGHT FOR YOU?

BRONZE

Lowest monthly premiums, higher out-of-pocket costs:

- » If you don't access care often but want the security of knowing you have coverage when you need it
- » You may qualify for the Advance Premium Tax Credit (APTC) subsidy that can lower monthly premiums based on your income

SILVER

Moderate monthly premiums, moderate out-of-pocket costs:

- » Good option if you require some health care services but don't want to pay higher premiums
- » You may qualify for subsidies, including the Advance Premium Tax Credit (APTC), Cost Sharing Reduction (CSR) and SilverEnhanced Savings

GOLD

Higher monthly premiums, lower out-of-pocket costs:

- » Good choice if you have a lot of health care needs — you'll pay a slightly higher monthly premium to cover your health care costs
- » You may qualify for the Advance Premium Tax Credit (APTC) subsidy that can lower monthly premiums

SUBSIDY TYPES

There are 3 types of subsidies available for those who qualify:

Advance Premium Tax Credit (APTC):

The Advance Premium Tax Credit (APTC) subsidy that can lower monthly premiums.

Cost Sharing Reduction (CSR):

The Cost Sharing Reduction (CSR) subsidy that can lower deductibles, copays and coinsurance costs (available on the Silver plans only).



SilverEnhanced Savings:

The SilverEnhanced Savings comes with a \$0 monthly premium, lower deductibles and out of pocket costs (available only on the Colorado Option Silver Enhanced plan through the OmniSalud program).

WE CAN HELP YOU THROUGH THE ENROLLMENT PROCESS

Give us a call. We can answer your questions and help you through the process of enrolling over the phone or in person, no matter where you are in the enrollment process. Set aside just one hour and we will help you complete every step. Contact us at **303-602-2090** or visit **ElevateHealthPlans.org**.



1. Gather documentation

Have personal information ready for all household members that will be covered. This includes information like names, dates of birth and all employer and income information for your household (pay stubs, W2 or tax statements).



3. Start an application

After you find the plan that's best for you, our team can help you enroll. Call us at **303-602-2999**.



2. Choose your plan

Visit **ElevateHealthPlans.org** or scan the QR code to the left to shop our plans.



4. Pick a payment method

Please see your payment options at **ElevateHealthPlans.org**.



TAKE A LOOK: COMPARE OUR PLANS

At Elevate Health Plans,
we want to make choosing the right health insurance plan easy.

Protect Yourself When Accidents Happen:



Without insurance, the cost of a broken wrist from something as simple as a cycling injury can cost up to \$5,000...

but with our **Colorado Option Gold** plan, the cost for an Urgent Care visit is only

\$50

To compare plan costs, scan this QR code
or visit: [DenverHealthMedicalPlan.org/
Become-Member/Elevate-Exchange-
Colorado-Option/Plan-Comparison](https://denverhealthmedicalplan.org/Become-Member/Elevate-Exchange-Colorado-Option/Plan-Comparison)



SCAN ME





SAME DAY CARE OPTIONS

If you need care today and can't get in to see your Primary Care Provider, we have options for you:



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**. 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 or office (available 8 a.m. to 10 p.m., 365 days a year). Visit **DispatchHealth.com**, download the free app or call **303-500-1518**. Refer to your plan coverage for cost sharing details. Note: DispatchHealth is not available in all coverage areas.



VISIT AN URGENT CARE CENTER.

Denver Health offers multiple urgent care centers. There are separate Pediatric (open 24/7 at 777 Bannock St.) and Adult (open daily, 7 a.m. to 8 p.m. at 660 Bannock St.) urgent care centers on its Main Campus, as well as the Federico F. Peña 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) and the Downtown urgent care center at 1545 California St. (open daily, 7 a.m. to 7 p.m.). In addition, virtual urgent care is now available for Denver Health MyChart users. Refer to your plan coverage for cost sharing details.

Note: You can visit any urgent care center that is convenient for you. Your plan will cover you 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. Refer to your plan coverage for cost sharing details.

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



HEALTH INSURANCE 101: SIMPLE LANGUAGE

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 a 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 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.

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 own and control the money in your HSA and 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.

Note: Elevate Health Plans does not administer HSA accounts. You can open an HSA account through your bank or other financial institutions.

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.

** All of our Elevate Health Plans have embedded deductibles.*



Health insurance for the community where we live.

303-602-2999 | ElevateHealthPlans.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.

