



ELEVATE
MEDICARE ADVANTAGE

Denver Health Medical Plan Inc.™

**2024 MEDICARE
ADVANTAGE PLAN
ELEVATE MEDICARE CHOICE
(HMO D-SNP)**



MEMBER QUICK REFERENCE GUIDE

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IMPORTANT NOTICE FOR YOUR 2024 PLAN YEAR

Elevate Medicare Advantage provides the following documents to you electronically for the 2024 plan year.

Evidence of Coverage (EOC):

[DenverHealthMedicalPlan.org/Medicare-Choice-EOC](https://denverhealthmedicalplan.org/Medicare-Choice-EOC)

Provider Directory:

[DenverHealthMedicalPlan.org/Find-Doctor](https://denverhealthmedicalplan.org/Find-Doctor)

Pharmacy Directory:

[DenverHealthMedicalPlan.org/Medicare-Pharmacy-Directory](https://denverhealthmedicalplan.org/Medicare-Pharmacy-Directory)

Part D Formulary:

[DenverHealthMedicalPlan.org/Medicare-Choice-Comprehensive-Formulary](https://denverhealthmedicalplan.org/Medicare-Choice-Comprehensive-Formulary)

WELCOME TO ELEVATE MEDICARE ADVANTAGE!

On behalf of Elevate Medicare Advantage, we would like to thank you for choosing us as your health insurance plan. There are many ways to elevate your health with benefits like healthy food, over-the-counter, dental, vision, hearing, transportation and more. Use this guide to start your year off strong!



1 Schedule an appointment to establish care if you are new to the plan (see pages 6-7).

If you're not a new member, be sure to schedule your annual check-up or routine care visit with your Primary Care Provider (PCP).

Stay up-to-date on your preventive care:

- » Annual wellness check-up
- » Immunizations
- » Preventive screenings

PRO TIPS:

- When you visit your PCP for an annual check-up or routine care visit, it is a great time to also discuss chronic issues such as high blood pressure, diabetes, etc.
- Take advantage of our reward program for completing your visit! For more information, look at the section 'Earn Your Rewards' in this booklet or contact Health Plan Services.
- If you need help getting to your appointment, call to schedule a free round-trip ride with Access2Care as part of your benefits!

2

Set up your medications.

As an Elevate Medicare Advantage member, you have multiple ways to fill your medications. See the 'Pharmacy Benefit' section for more information.

- » Pharmacy by Mail
- » Home Delivery
- » Vacation Supplies
- » \$0 copays

PRO TIP:

Ask your PCP for a 100-day supply and reduce your trips to the pharmacy.

3

Schedule an appointment to see the dentist.

It is important to use your dental benefits because your oral health is connected to your overall health. Your dentist can spot early signs of heart disease, diabetes and other diseases. Making preventive dental care a priority by visiting your dentist twice per year can help you avoid painful and costly dental procedures in the future. For help finding an in-network dentist, call **1-800-610-0201** or visit **DeltaDentalCO.com** to find a dentist near you.

PRO TIP:

Your dental benefit allows you to see any Delta Dental provider in the Medicare Advantage PPO Network; Delta Dental has many dentists/dental offices in your area.

4

Schedule an appointment to get an eye exam.

As part of your Elevate Medicare Advantage benefits, your 2024 plan benefit covers up to \$260 in prescription eyewear per calendar year.

PRO TIP:

You can see any in-network 'EyeCare Specialties of Colorado' provider. Call **303-802-4650** for an appointment.



5

Schedule a ride for your medical visits.

If you need help getting to a doctor appointment or pharmacy, you can get unlimited round-trip rides at no cost to you. Call **Access2Care** at **1-877-692-5315** 6 a.m. to 9 p.m., Monday through Friday. Make sure to call at least 48 business hours before your appointment.

PRO TIP:

Download the Access2Care mobile app to manage your rides through the app.



6

Log in to our Member Portal.

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

SIGN-UP TODAY:

Visit DenverHealthMedicalPlan.org and click on 'MyDHMP Portal' or download the 'MyDHMP' mobile app for iPhone and Android devices!



7

Keep Your FlexCard in a Safe Place.

Shortly after enrollment, you will receive your Elevate Medicare FlexCard in the mail, which holds your Healthy Food* and Over-The-Counter allowance. See the section of this booklet called 'FlexCard Healthy Food and Over-The-Counter (OTC) Allowances' for more information.



*Healthy food is a benefit for the chronically ill.
Not all members qualify.

HOW TO ACCESS CARE

Our goal is for you to receive health care services when you need them. Below is an overview of the network providers in your plan. Visit **DenverHealthMedicalPlan.org/Find-Doctor** or call Health Plan Services for help.



**intermountain
healthcare.org**

Call provider directly
or make an
appointment online.

**Intermountain Health's
Patient Portal:**
MyChart.SCLHealth.org



UCHealth.org

Call the
Appointment Center:
720-848-0000

**UC Health's
Patient Portal:**
UCHealth.org/Access-My-Health-Connection



**DENVER
HEALTH™**
— est. 1860 —

DenverHealth.org

Call the
Appointment Center:
303-436-4949

**Denver Health's
Patient Portal:**

DenverHealth.org/
MyChart

Patient portals give you access to your health records. You can easily view lab results, schedule an appointment, request prescription refills and more from your smart phone, tablet or computer.



STRIDE
COMMUNITY HEALTH CENTER

StrideCHC.org

Call the
Appointment Center:
303-360-6276

**STRIDE's
Patient Portal:**

Stridechc.org/Patients



**National Jewish
Health®**

NationalJewish.org

Call the
Appointment Center:
1-877-225-5654

**National Jewish's
Patient Portal:**

My.NJHealth.org

YOUR MEMBER IDENTIFICATION CARD

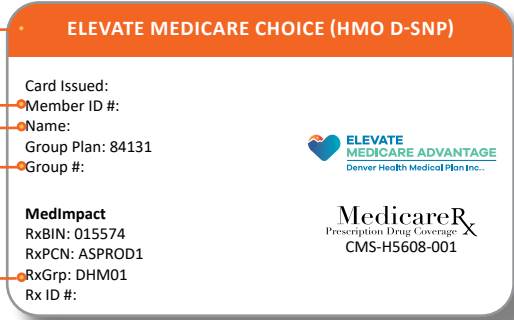
You will receive a Member Identification (ID) card upon enrollment. If you need a new ID card, you can request one in the member portal or call Health Plan Services.

Front of card

Your plan description — ELEVATE MEDICARE CHOICE (HMO D-SNP)

Your unique Member ID information — Member ID #:
Name:
Group Plan: 84131
Group #:

Pharmacy information for your pharmacist — MedImpact
RxBIN: 015574
RxPCN: ASPROD1
RxGrp: DHM01
Rx ID #:



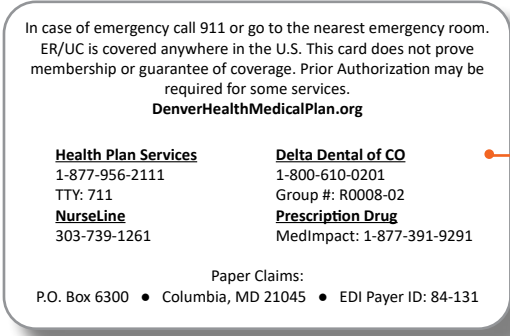
Back of card

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

Health Plan Services 1-877-956-2111 TTY: 711	Delta Dental of CO 1-800-610-0201 Group #: R0008-02
NurseLine 303-739-1261	Prescription Drug MedImpact: 1-877-391-9291

Paper Claims:
P.O. Box 6300 • Columbia, MD 21045 • EDI Payer ID: 84-131

Important phone numbers for you and your doctor.



Get Your Free Denver Parks and Recreation Membership!

To get your membership, take your Member ID card and a photo ID to your local Denver Parks and Recreation Center. For a list of locations, visit **DenverHealthMedicalPlan.org/Current-Members/Elevate-Medicare-Advantage/Denver-Parks-Recreation-Membership**.

FLEXIBLE OPTIONS FOR SAME DAY CARE

When you need care, it is best to see your Primary Care Provider (PCP). If you can't, your Elevate Medicare Advantage plan offers several flexible options to help you get needed care right away.



The NurseLine is here to help.

The NurseLine is available 24/7 to provide free health care advice to see if you need to be seen by a doctor right away: **303-739-1261**.

DispatchHealth will come to you.

DispatchHealth makes urgent care house calls to the comfort of your own home – at no cost. Visit **DispatchHealth.com** or call **303-500-1518**, 8 a.m. – 10 p.m., 365 days a year.

Visit an Urgent Care Center or Emergency Room.

You are covered at any urgent care center or emergency room in the U.S.

ELEVATE MIND MENTAL HEALTH SERVICES

Elevate Mind is a virtual mental health service available to you 24/7; no referral is necessary. This is an easy, fast option to get the mental health care you need. Simply visit **ElevateMind.org**, download the Elevate Mind mobile app or scan the QR code below, then select a provider to connect. Therapists are U.S. trained and board-certified; available by video or phone.



FLEXCARD: HEALTHY FOOD* AND OVER-THE-COUNTER (OTC) ALLOWANCES

One Card, Two Benefits - allowances are automatically loaded onto a reusable card!

Enjoy flexible spending on items and brands you prefer! When you checkout, scan all items and swipe your FlexCard first. The card will automatically pay for qualifying items from the correct benefit allowance.

- » Your allowance is available on your reloadable card at the beginning of each quarter in the plan year (January, April, July and October).
- » Funds must be used at participating retailers for eligible items only (King Soopers, Safeway, Walmart, CVS and Walgreens).
- » Download the 'Elevate Medicare FlexCard' mobile app for iPhone and Android devices.



- » Check your balance or view qualifying items through the app! For more information, visit **DenverHealthMedicalPlan.org/Medicare-Flexcard**

Healthy Food* Allowance:

If our records show you have one or more qualifying chronic conditions, you will receive \$260 a quarter on a reloadable card to purchase qualifying items at participating locations. Examples of qualifying items include breads, dairy, fruits, vegetables, meat and more.

*Healthy food is a benefit for the chronically ill. Not all members qualify.



Over-the-Counter Allowance:

You will receive a \$260 quarterly allowance to be used toward the purchase of OTC health and wellness products at participating locations. Examples of qualifying items include first aid, vitamins/minerals, bladder products, oral hygiene and more.

EARN YOUR REWARDS

Get your Annual Wellness Visit – Get a \$30 Reward!

Getting your Medicare Wellness Rewards Prepaid Mastercard®* is easy! Complete a check-up or routine care visit with your PCP and submit your request. This Mastercard cannot be redeemed for cash.

An Annual Wellness Visit is one of the most important ways you can stay on top of your health. It is a chance to learn about your current health, discuss any concerns and learn what preventive measures you can take to ensure your long-term well-being.

Complete your visit with an in-network provider by December 31, 2024, then visit **MedicareWellnessRewards.com** to request your card. If you need help, call Health Plan Services.

*Wellness Reward offered on a Prepaid Mastercard for annual wellness visits completed between 01/01/2024 and 12/31/2024. Reward request must be submitted on or before 01/31/2025. Reward issued once per calendar year.

Complete a Health Risk Assessment - Get a \$25 Reward!

You will need to complete a Health Risk Assessment (HRA) each year. We want you to be healthy and feel good. By answering the questions on the HRA, we will identify your health risks and try to lower them. Each year, we will ask you to complete an HRA so we know if there were any changes in your health. This will also help us know if you need more help.

Your answers to these questions do not affect your insurance coverage and may be shared with your doctor. We can work with your doctor and health care team to try and improve your health.

We will call you to complete the HRA over the phone, or we may mail you the HRA. You can also call us to complete the HRA at **1-833-292-4893** or email us at **DHMPC@dhha.org**. Once we receive your completed HRA, we will send you a \$25 Elevate Medicare Advantage Visa® Prepaid Card* to the mailing address on file.

*HRA Reward offered on a Prepaid Visa for HRAs completed. Cards are issued by Pathward, N.A., Member FDIC, pursuant to a license from Visa U.S.A. Inc. Card valid for up to 12 months, funds do not expire and may be available after card expiration date, fees may apply.

PHARMACY BENEFITS

As an Elevate Medicare Choice (HMO D-SNP) member, your cost for prescription drugs is \$0.

Pharmacy by Mail

Denver Health's (DH) Pharmacy by Mail is an easy and safe way to get your prescriptions delivered right to your mailbox. This is only available through DH pharmacies, and only if prescribed by a DH provider. Below are ways to sign up for Pharmacy by Mail:

- » Through MyChart
 - Online at **DenverHealth.org/MyChart**
 - MyChart app for smartphone
- » Call the pharmacy directly Monday – Friday, 8 a.m. – 5 p.m. at **303-436-4488**
- » In-person at any Denver Health Pharmacy

To learn more, visit: **DenverHealthMedicalPlan.org/**
Denver-Health-Pharmacy-Mail

Vacation Supplies

If it is too early to refill your medication and you will run out of medication while out of town, we have you covered!

- » Call our Pharmacy team at **303-602-2070** at least one week before you leave and tell us you are going out of town and need more medication than usual.

FLU VACCINE

Thank you for getting your annual flu shot!

There is **no cost** to get a flu vaccine. You can visit any in-network provider or pharmacy, such as Walgreens, King Soopers or Target. Be sure to present your member ID card. If you have questions about how to get your annual flu vaccine, call Health Plan Services.



IMPORTANT PLAN BENEFITS

- » \$0 Primary Care and Specialty Copays
- » \$0 Prescription Copays
- » Healthy Food Allowance: \$260 per quarter*
- » Over-the-Counter Allowance: \$260 per quarter
- » Dental: \$5,000 annual maximum for comprehensive services
- » Vision: \$260 in eyewear every calendar year
- » Hearing Aids: \$1,500 in coverage every three years
- » \$0 annual Denver Parks and Recreation membership
- » Unlimited non-emergency medical transportation
- » DispatchHealth (in-home urgent care, 8 a.m. – 10 p.m., 365 days a year)
- » Meal delivery to your home following discharge from the hospital or skilled nursing facility
- » 24/7 NurseLine to answer your medical questions

For more information on these benefits, refer to your Evidence of Coverage or call Health Plan Services.

*The healthy food allowance is a special benefit for the chronically ill. Not all members qualify.

PRIOR AUTHORIZATIONS

Some services you need may require a Prior Authorization (PA). Prior authorization (also called “preauthorization” and “precertification”) refers to a requirement by health plans for patients to obtain approval of a health care service or medication before the care is provided. This allows the plan to decide whether care is medically necessary and otherwise covered. Most care within your contracted network is covered without a prior

authorization. There are certain types of care that require an authorization even within your network such as Home Health, certain surgeries, etc. Please refer to this link for a full list: **DenverHealthMedicalPlan.org/Services- Requiring-Prior-Authorization**. For questions, please call Health Plan Services.

CARE MANAGEMENT

Our Care Managers are here to help you! We will work with you and your doctor to make sure you get the help you need. In our Care Management Programs, we can:

- » Make doctor and specialty appointments
- » Make referrals to resources
- » Help with scheduling transportation for your medical appointments
- » Work with your care team on services you may need at home
- » Provide information on your health care conditions
- » Work with your doctor to make sure you have the medicines you need

To reach a Care Manager, please call **303-602-2184** or email **DHMPCC@dhha.org**.

GRIEVANCE AND APPEALS

What is a grievance?

A grievance is a complaint about the operations, activities, or behavior of our plan. This could include problems related to the quality of care you receive, wait times, or our plan's benefits.

What is an appeal?

An appeal is a type of complaint you make when you disagree with our decision to deny your request for

health care services or payment for services you already received. You may also make a complaint if you disagree with a decision to stop services that you are receiving.

For more information, visit: **DenverHealthMedicalPlan.org/Current-Members/Elevate-Medicare-Advantage/Medicare-Coverage-Decisions-Appeals-Grievances.**

If you'd like to file a grievance or appeal with Elevate Medicare Advantage, you may:

- » Call our Grievance and Appeals department at **303-602-2261**.
- » You may send a fax to **303-602-2078**.
- » Submit a Medicare Complaint and Appeal Form online at **DenverHealthMedicalPlan.org**.
- » You may write to us at:
Denver Health Medical Plan, Inc.
Attn: Grievance and Appeals
777 Bannock St., MC 6000
Denver, CO 80204

HEALTH PLAN SERVICES

Health Plan Services is dedicated to helping you get the most out of your benefits. They are here to listen to you, help answer any questions you have, and help you navigate your benefits.

When you have a question about your Elevate Medicare Advantage plan or your benefits, call them. They are specially trained to help you!

Health Plan Services can assist you with things like:

- » Finding a Primary Care Provider (PCP) or Specialist
- » Knowing where to get care when you need to be seen right away

- » Understanding your provider network and covered benefits
- » Helping you fill prescriptions
- » How to access your benefits
- » And more!

IMPORTANT CONTACT INFORMATION

Contact	Phone Number
Health Plan Services	1-877-956-2111 (TTY 711)
Pharmacy	303-602-2070
Grievance and Appeals	303-602-2261
Care Management	303-602-2184
Access2Care	1-877-692-5315
DispatchHealth	303-500-1518
NurseLine	303-739-1261
EyeCare Specialties of Colorado	303-802-4650
Delta Dental of Colorado	1-800-610-0201

IF YOU MOVE OR GET A NEW NUMBER

Our way of communicating with you is through mail and phone. We send important information about your plan and benefits to keep you updated and make sure you are safe and healthy.

Any time you move or change your number, please make sure to update Health Plan Services.

LANGUAGE ASSISTANCE

We are 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 get information about benefits, access to medical services and more. To request language services at any point during an interaction, contact Health Plan Services.

JOIN OUR ADVISORY COUNCIL

The feedback we get from our members makes a difference! Your insights will help us better respond to the needs and preferences of our valued members.

Topics will include access to covered services, coordination of services and health equity. Advisors will also assist in reviewing our health plan benefits, member materials and performance data. Feedback will have an impact on plan policies, future plan benefits and member experience.

For dates and more information, visit

DenverHealthMedicalPlan.org/Member-Advisory-Council or call Health Plan Services.

HOW ARE WE DOING?

Our loyal members, like you, are important to us and we value your opinion. Tell us about your latest experience or something you love about your medical plan.

Your feedback will help us continue to improve our health plans and help others like you find us and get the most out of their health benefits. Visit **DenverHealthMedicalPlan.org/Member-Reviews** or scan the QR code below.





ELEVATE
MEDICARE ADVANTAGE

Denver Health Medical Plan Inc..

**Health insurance for the
community where we live.**

777 Bannock St., MC 6000
Denver, CO 80204

CONTACT US:



Health Plan Services: 303-602-2111

Toll-Free: 1-877-956-2111

TTY: 711

[DenverHealthMedicalPlan.org](https://www.DenverHealthMedicalPlan.org)



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