



WHY IT'S IMPORTANT TO GET YOUR FLU VACCINE

We never know how serious flu season will be. It's always important to get an annual flu shot. With the continued risk of COVID-19, it's even more crucial. The symptoms of COVID-19 and the flu are quite similar. It can be difficult to know which virus you have. Also, the flu shot can help prevent you from catching both viruses at the same time. This could be dangerous.



WHO SHOULD GET A FLU SHOT?

The Colorado Department of Public Health and Environment (CDPHE) strongly recommends a flu vaccination for everyone six months of age or older. In addition to protecting yourself, you'll be helping to protect those at higher risk. They include children under five, adults 65 years and older, pregnant women and those with chronic conditions.

WHEN TO GET THE VACCINE

Early October is the ideal time to get a flu shot. This is because it takes about two weeks to become effective and lasts for about six months. It will help protect you through flu season's peak. This is from November through March. You may not be able to get your vaccine in October. But it's still important to get it later in the year. It will protect you through a majority of the season.

WHERE TO GET THE VACCINE

There is no cost for Denver Health Medical Plan members to get a flu vaccine. You need to present your member ID card. Choose where you get your flu vaccine:

- » If you have a visit scheduled with your primary care provider, you can get your flu vaccine at that time.
- » If you are a current Denver Health patient, you can schedule a flu vaccine only appointment at Denver Health by calling 303-436-4949.
- » Visit any in-network pharmacy* that offers the flu vaccine, such as Walgreens,



King Soopers or Target. Be sure to go to the pharmacy counter (not an in-store clinic).

*Some pharmacies have age limitations for children. Check with your pharmacy first. Only certain types of flu vaccines are covered at \$0.

STAYING SAFE

For your protection, please take the following precautions when getting your flu shot:

- » Stay 6 feet apart from others in the waiting area.
- » Try to get in and out quickly.
- » Don't touch your face.
- » Use hand sanitizer.
- » Wash your hands often and thoroughly, for at least 20 seconds.

IN SUMMARY

- » It's vitally important to get your flu shot.
- » Get it as soon as possible. This will protect

yourself and those around you.

» Schedule yours today at 303-436-4949 or through the free MyChart app for the Denver Health clinics.

Sources:

Verywell Health: https://www.verywellhealth.com/how-toget-a-flu-shot-during-pandemic-covid-19-5079462

PhillyVoice: https://www.phillyvoice.com/flu-shot-coronavirus-prevention-covid-19-research-study-/

Centers for Disease Control and Prevention: https://www.cdc.gov/flu/highrisk/index.htm



Health Plan Services Phone Numbers:

DHHA / CHP+ Members: 303-602-2100 Elevate Health Plans (Exchange/COOP) Members: 303-602-2090 Medicaid Choice Members: 303-602-2116 Medicare Advantage Members: 303-602-2111

If you need any of the information in this newsletter in Spanish or alternate format, please call Health Plan Services. Si necesita en español alguna parte de la información contenida en este boletín o en un formato alternativo, llame a Servicios del Plan de Salud.



Detecting Breast Cancer Early: We're Among the Best

JULIA BURTHESS, Breast Concer Survivo



Schedule your mammogram today.

Call 303-253-7679 or scan the QR code to make an appointment.

Learn more about our compassionate, comprehensive breast care team and all the services we offer at DenverHealth.org/services/breast-care.



IN THE

Curried Red Lentil Soup

INGREDIENTS

1 – large onion, chopped

1 – jalapeño pepper, seeded and minced

1tbsp. - ginger, minced

5 cloves - garlic, minced

2 tbsp. - curry powder

1tbsp. – ground cumin

1 - bay leaf

2½ c. - red lentils

8 c. – broth

1tbsp. - lemon juice

1 handful – cilantro leaves, chopped

2 tbsp. – mango chutney

1/3 c. – yogurt

Salt and pepper (to taste)



DIRECTIONS

Lentils are not only high in fiber and protein. They're low in calories. For a spicy take on lentil soup, you'll love this flavorful dish. Cook onion in oil over medium heat. Add jalapeño, ginger, garlic and spices. Stir for 1 minute more. Add in lentils. Stir. Add broth and boil. Reduce heat to simmer. Cover for 40 minutes. Lentils should be tender. Discard bay leaf. Add lemon juice, salt, pepper, cilantro, chutney and yogurt. The last 3 ingredients can be topped onto individual servinas.

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 FREE 24/7 NURSELINE IS HERE TO HELP YOU.

Call **303-739-1261**. 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. This may include any of the options below.





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. They are 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.

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 Clinic 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 DHMP 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 DHMP plan will cover you at any emergency room, anywhere in the U.S.

WHAT'S NEW WITH YOUR PHARMACY BENEFITS?

Depending upon your plan, your pharmacy benefits may be updated over the course of the year. To see what's changed, visit **DenverHealthMedicalPlan.org**. Hover over *Members*. Navigate to your plan's page. Click *Pharmacy* under "Member Resources." There you will find documents that provide any changes in your plan's formulary. These include newly added drugs, newly added generics and more.

Your plan's webpage and formulary documents, called *Formulary & Pharmacy Management* (for Exchange, CO Option or Employer Group plans), *Formulary/Drug List* (for Medicaid Choice and CHP+) or *Drug List* (for Medicare Advantage), provide:

- » A list of covered drugs, along with restrictions and preferences
- » Details on how to use the formulary and pharmaceutical management procedures
- » An explanation of limits or quotas
- » Details on how prescribing practitioners must provide information to support an exception request (non-urgent requests may be processed the next business day)
- » Your plan's process for generic substitution, therapeutic interchange and step-therapy protocols

\$25 REWARD: COMPLETE A HEALTH RISK ASSESSMENT



If you are an Elevate Medicare Choice (HMO D-SNP) member, you will have an opportunity to participate in a Health Risk Assessment (HRA) upon enrollment and annually thereafter!

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 a 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. They may be shared with your doctor. We can work with your doctor and health care team to try and improve your health.

We may mail you the HRA. We may provide an online option. Or we may follow-up with phone calls to complete the assessment. You can also call us to complete the HRA at **1-833-292-4893**. TTY users should call 711.

Completion of a health survey will qualify Elevate Medicare Choice (HMO D-SNP) members for the \$25 reward. Upon completion of the survey, the reward will be added to your FlexCard. You can purchase qualifying healthy food at approved stores. For more information or questions, call our Care Management Department at **303-602-2184** or visit **DenverHealthMedicalPlan.org**.

IMPORTANT PLAN INFORMATION



COMPLEX CASE MANAGEMENT & ACCESS TO 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 Program, we can:

- » Make doctor and specialty appointments
- » Make referrals to community resources
- » Help with transportation for your doctor's visits
- » Work with your care team on services you may need at home
- » Give info on your health care conditions
- » Work with your doctor to make sure you have the medicines you need

Our Care Management Program is a no-cost service to all DHMP members. You can take part in the Program for as long as you want. To be considered for the Program, members can be referred through a medical management program referral, discharge planner referral, practitioner referral, caregiver referral or self-referral. For more info or to refer, call **303-602-2184**.

COMMUNICATION SERVICES & ACCESS TO STAFF

DHMP gives access to staff for members and practitioners seeking info about Case Management (CM). Staff are available at least eight hours a day during normal business hours for collect or free calls. After hours, you can fax info. The staff will reply in the next business day. Staff are identified by name, title and organization name when they make a call. TTY services and language help are available.

UTILIZATION MANAGEMENT (UM)

UM decision-making is based on appropriateness of care, services, and existence of coverage. The UM department works to make utilization decisions in a fair, impartial, and consistent manner. They use standardized, measurable criteria based on sound clinical evidence. You can request a free copy of our UM criteria. UM criteria is also available on our website. Please see 'Services Requiring Prior Authorization' for the services that require prior authorization on the website at **DenverHealthMedicalPlan.org/For-Providers**.

The plan does not specifically reward practitioners or other individuals for issuing denials of care or services. The plan does not provide financial incentives to any Providers or UM decision makers to encourage decisions resulting in under-utilization. The UM department follows the Mental Health Parity Act to ensure equal treatment of mental health conditions and substance use disorders. Please refer to the member handbooks on the website for additional details.

IMPORTANT PLAN INFORMATION



Members: Members should contact their physician to initiate an authorization request. Members can call the customer service number on their health plan ID card for assistance or questions. For language assistance, call the Health Plan Services phone number on the back of your ID card and a representative will be able to assist you.

Providers: DHMP Health Plan Services staff is available for UM issues during normal business hours, Monday through Friday, 8 a.m. to 5 p.m., excluding holidays. Providers may contact Utilization Management by fax to send authorization requests and clinical information. The DHMP Utilization Management Department can receive faxes seven days a week, including holidays.

Our utilization management associates identify themselves to all callers by first name, title and our company name when making or returning calls. They can inform you about specific utilization management requirements, operational review procedures, and discuss utilization management decisions with you.

The following phone lines and faxes are for providers:

- » Outpatient fax: 303-602-2128
- » Inpatient Admit and Discharge Notification fax: 303-602-2127
- » Inpatient Clinical Records fax: 303-602-2004
- » Urgent/Expedited fax: 303-602-2160
- » Health Plan Services phone: 303-602-2100
- » Providers can also submit Prior Authorization Requests on the website at:
 DenverHealthMedicalPlan.org/For-Providers/UM-Prior-Authorization-Request-Form

HOW TO FILE AN APPEAL OR GRIEVANCE

As a member of DHMP, you have the right to file a complaint also known as a grievance about DHMP. You also have the right to file an appeal of a denial adverse decision from DHMP that you disagree with. When you decide to file a grievance or an appeal, your request must be received by DHMP in the prescribed time period. When you miss a deadline, we may decline to review your appeal. Info about how to file a grievance or appeal including time periods that you are allowed to file a grievance or appeal can be found on our website: **DenverHealthMedicalPlan.org**. Or you may call us for info or help with filing a grievance or appeal at **303-602-2261**.













Coming later this year! Get health support at your fingertips.



What is the Wellframe app?

The Wellframe app for your smartphone or tablet connects you to your Care Management (CM) team at Denver Health Medical Plan. Whenever you have a question about your health, use the app to send a message to your CM team. The app turns your CM team's instructions into an easy health checklist. You'll know what to do each day. And your CM team will be there to help along the way.

This free app can help you:

- Send secure messages about your health to your CM team at DHMP
- √ View and modify enrolled care programs, medication, and health reminders
- ✓ Track your blood pressure, weight, physical activity, and more – all in one place
- Read helpful articles about your condition(s)

MENTAL AND BEHAVIORAL HEALTH SERVICES ARE A COVERED BENEFIT

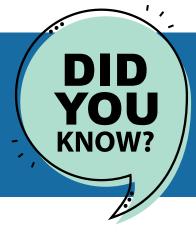
DHMP members can use health plan benefits for mental health, behavioral health and substance use disorder services and treatment. This can be done in person or virtually. To learn about your benefits and cost sharing, refer to your Member Handbook (Evidence of Coverage). You can also call Health Plan Services at the phone number listed on the back of your Member ID Card. It's always confidential.



Visit **DenverHealthMedicalPlan.org** for more information.

Quick Tip: Telehealth services are a covered benefit. Telehealth can be used for many services like PCP 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.

Share the health!



It's open enrollment! Tell your family and friends. Now is the time to enroll in a health insurance plan for 2025. We can help them get the coverage they need. Scan the QR Codes below to learn more!







Medicare Annual Enrollment Period runs from **October 15, 2024** to **December 7, 2024**.

To learn more or enroll, call 303-602-2451 or visit DHMP.info/Medicare.

Current members may call Health Plan Services at 303-602-2111.









Open Enrollment for individual and family coverage, including CO Option plans, runs from **November 1, 2024** to **January 15, 2025***.

To learn more or enroll, call 303-602-2451 or visit DHMP.info/Exchange.

*Dates are decided by the Division of Insurance (DOI). They may change.

Visit **DenverHealthMedicalPlan.org** for more info.



777 Bannock St., MC 6000 Denver, CO 80204

LARGE PRINT OR OTHER

LANGUAGES: If you have questions about this notice, we can help you for free. We can also give it to you in other formats. These include large print, audio or in other languages. Please call 303-602-2116. Toll free 1-855-281-2418. Or 711 for callers with speech or hearing needs.

Elevate Medicare Advantage is a Medicare-approved HMO plan. Enrollment in Elevate Medicare Advantage depends on contract renewal. The Plan also has a written agreement with the Colorado Medicaid Program to coordinate your Medicaid benefits. H5608_FallNwslttr24_M





A MESSAGE FROM OUR CEO

As we enter fall and winter months, flu and COVID-19 vaccines are a very important way to protect yourself and your community. These vaccines are a covered benefit for all of our health insurance plans. When you have questions about where to get the vaccines, talk to your Primary Care Provider (PCP) or call Health Plan Services at the phone number located on the back side of your Member ID Card.

With the 2024 year coming to a close, I hope you and your family enjoy a safe and happy holiday season.

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GREG MCCARTHY

Chief Executive Officer and Executive Director Denver Health Medical Plan, Inc.

