

STRONG **body**  
**mind**



MEMBER NEWSLETTER //  
**2025 IMPORTANT INFORMATION**



**DENVER HEALTH**  
**MEDICAL PLAN** INC.™

# *Why it's important* **TO GET THE FLU VACCINE**

**It's always important to get an annual flu shot. The flu vaccine can help prevent you from catching the virus or lessen the severity of illness if you do get the flu.**



## **WHO SHOULD GET A FLU SHOT?**

The Colorado Department of Public Health and Environment (CDPHE) 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, such as children under five, adults 65 years and older, pregnant women and those with chronic conditions.

## **WHEN TO GET THE VACCINE**

Fall months are the ideal time to get a flu shot since it takes about two weeks to become effective and lasts for about six months. It will help protect you through flu season's peak, from November through March. If you're not able to get your vaccine in the fall, it's still important to get it during winter months, as it can 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 when you present your member ID card. Choose where you get your flu vaccine:

- » If you have a visit scheduled with your doctor, you can get your flu vaccine at that time.
- » If you are a current Denver Health patient, you can schedule a flu vaccine appointment at Denver Health by calling **303-436-4949** or through the MyChart patient portal app.
- » Visit any retail 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.

## IS IT A COLD OR THE FLU?

Many cold and flu symptoms are the same, such as runny nose, cough, fever, sore throat, headache, body aches, vomiting and diarrhea.

The Denver Health NurseLine nurses can provide care advice and help you know if you need to be seen right away by a doctor.

You can call the NurseLine 24 hours a day, 7 days a week at **303-739-1261**.

## HELPFUL TIPS FOR FLU SEASON

- » Wash your hands often with soap and water for 10 to 15 seconds. Wash hands before preparing food or eating and after using the bathroom or handling animals.

- » Avoid sharing drinks, food or eating utensils.
- » Try to keep your hands away from the face. Viruses/germs enter the body through the mouth, nose or eyes.
- » Keep your distance from people who are sick or aren't feeling well.
- » Keep tissues handy for runny noses, coughs and sneezes. Cough/sneeze into the upper arm area if no tissues are available.

### Sources:

Healthline. (2025), Everything You Need to Know About the Flu, [www.healthline.com/health/cold-flu/flu](http://www.healthline.com/health/cold-flu/flu)

Healthline. (2025), Everything You Need to Know About the Common Cold, [www.healthline.com/health/cold-flu/cold#protect-others](http://www.healthline.com/health/cold-flu/cold#protect-others)

Centers for Disease Control and Prevention. (2024), People at Increased Risk for Flu Complications, [www.cdc.gov/flu/highrisk/index.htm](http://www.cdc.gov/flu/highrisk/index.htm)

Verywell Health. (2022), Can You Get a Flu Shot and a COVID Vaccine at the Same Time?, [www.verywellhealth.com/flu-shot-covid-shot-at-the-same-time-5199469](http://www.verywellhealth.com/flu-shot-covid-shot-at-the-same-time-5199469)

Denver Health Medical Plan. (2025), Flu and COVID-19 Vaccines, [www.denverhealthmedicalplan.org/flu-and-covid-19-vaccines](http://www.denverhealthmedicalplan.org/flu-and-covid-19-vaccines)

### **Health Plan Services Phone Numbers (TTY 711):**

DHHA / CHP+ Members: 303-602-2100

Exchange/COOP Members: 303-602-2090

Medicaid Choice Members: 303-602-2116

Medicare 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.*

*Get the most from your Medicare coverage.*



## **New Benefit for 2026! Receive a No-Cost Smartphone with Unlimited Data, Talk and Text\***



- » **No monthly bill – save \$300 per year**
- » **Schedule appointments, view lab results and message your providers**
- » **Your own personal smartphone to connect with family and friends**
- » **Connect with your care manager and FlexCard benefits**

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.

\*This benefit is part of special supplemental program for the chronically ill. Not all members qualify. Other eligibility and coverage criteria apply. Eligible conditions include: Cancer, Chronic heart failure, Diabetes, Chronic lung disorders, and Chronic and disabling mental health conditions. Other conditions also apply that are not listed.

## Slow Cooker Chili

### INGREDIENTS

- 1 lb. – lean ground beef, turkey, chicken or plant-based
- ½ tbs. – olive oil
- 1 – red or yellow onion (peeled and diced)
- 1 – bell pepper (diced)
- 2 cloves – garlic (minced)
- 2 – chipotle chiles in adobo sauce (chopped)
- 2 cans (15 oz.) – kidney, pinto or black beans (rinsed and drained)
- 1 can (15 oz.) – tomato sauce
- 2 cans (14 oz.) – diced tomatoes
- 1 can (4 oz.) – chopped green chiles (mild, medium or hot, depending on taste)
- 1½ tbs. – chili powder
- ½ tbs. – ground cumin
- 1½ cups – beef, chicken or vegetable broth/stock (low or reduced sodium)
- Salt and pepper to taste



### DIRECTIONS

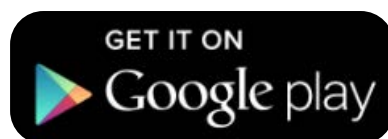
Heat oil in a large pan over medium heat. Add ground meat, onion, pepper and garlic. Cook until meat is completely browned, crumbling the meat with a spatula or spoon as it cooks. Drain excess fat; then transfer to a slow cooker. Add remaining ingredients to the slow cooker and stir to combine. Cover and cook on low for 6 hours or high for 3 hours. Add more seasoning if needed. Optional: add healthy toppings, like green onions or plain Greek yogurt, which tastes very similar to sour cream!



## DOWNLOAD OUR 'MYDHMP' MEMBER PORTAL MOBILE APP!

Have you registered for our 'MyDHMP' member portal? If not, do so now and download the mobile app on your tablet or smartphone! It's your one-stop resource for managing your health insurance anytime, anywhere. With the app, you will be able to access important plan info. You can view member materials, including ID Cards and claims, check your explanation of benefits, and more.

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



Stay in the know –  
follow us on social media!



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Learn more: [linktr.ee/denverhealthmedicalplan](https://linktr.ee/denverhealthmedicalplan)



## MEDICAID CHOICE MEMBERS: EARLY AND PERIODIC SCREENING, DIAGNOSTIC AND TREATMENT

Early and Periodic Screening, Diagnostic and Treatment (EPSDT) is a Health First Colorado (Colorado's Medicaid Program) program that covers prevention, diagnostic and treatment services for members aged 20 and under, as well as pregnant people. This program is set up to find health problems early. The goal is for children and adolescents to get appropriate preventive, dental, mental, developmental, and specialty care. Your child can get these services at **NO COST** to you:

- » Screening Services
- » Well Child Check-Ups
- » Immunizations
- » Vision Screening/Eyeglasses
- » Physical or Occupational Therapies
- » Hearing Screening Services

Most EPSDT services will be available within Denver Health. Your doctor may also refer you to services outside Denver Health. If you have questions about EPSDT services or scheduling an appointment, you or your doctor may call Health Plan Services at **303-602-2116**. If you have questions about transportation to and from an appointment, you can call Transdev Health Solutions at **855-489-4999**. For more information about the American Academy of Pediatrics (AAP) Preventive Care Recommendations please visit: **[downloads.aap.org/AAP/PDF/periodicity\\_schedule.pdf](https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf)**.



# 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**. 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 (available 7 a.m. to 10 p.m., 365 days a year). Visit **DispatchHealth.com**, download the free app or call **720-487-9530**. Refer to your plan coverage for cost sharing details.



## VISIT AN URGENT CARE CENTER.

Denver Health offers multiple urgent care centers across the Denver area. In addition, Denver Health offers virtual urgent care for adults through MyChart. For more information, locations and hours, please visit **DenverHealth.org/Urgent-Care**. 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. Refer to your plan coverage for cost sharing details.*



## 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. For more information, please visit **DenverHealth.org/Services/Emergency-Medicine**. 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. Refer to your plan coverage for cost sharing details.*



# 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

## COMPLETE A HEALTH RISK ASSESSMENT



**ELEVATE  
MEDICARE ADVANTAGE**  
Denver Health Medical Plan Inc..

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 that 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. 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.

For more information or questions, call our Care Management Department at **303-602-2184** or visit **DenverHealthMedicalPlan.org**.



**Denver Health School-based Health Centers provide convenient care, right in your child's school and through virtual appointments.**

- Care for chronic conditions like asthma
- Health education
- Mental health counseling
- Physicals and dental care
- Prescriptions and medications
- Vaccines

To schedule your child's visit, please reach out to our school-based team at **303-602-8958**.



## Get health support at your fingertips.

### WELLFRAME AND DHMP ARE COMMITTED TO YOUR HEALTH

Wellframe is a mobile app that enables you to stay connected with your Denver Health Medical Plan (DHMP) care team and is available to you at no cost. The Wellframe app is a secure platform that provides direct access to your care team, right from your smartphone or tablet.

- » Send a mobile message to your DHMP care team when it's convenient for you. Get the answers you need – when you need them.
- » Track appointments, set medication reminders and get alerts about important health screenings.
- » Access articles, videos, and other health resources with information for your health needs.

### CONNECT WITH YOUR CARE TEAM TODAY

1. Download the Wellframe app.
2. Enter the access code provided by your DHMP care team.
3. Follow the prompts to complete your registration.

If you need help getting started, call us at **303-602-2184** or email us at **[dhmpcc@dhha.org](mailto:dhmpcc@dhha.org)**.





# IMPORTANT PLAN INFORMATION



As a valued DHMP member, you should be aware of certain rights and responsibilities that you are entitled to and responsible for.

## MEMBERS HAVE THE RIGHT TO:

- » Have access to practitioners and staff who are committed to providing quality health care to all members without regard for race, religion, color, creed, national origin, age, sex, sexual preference, political party, disability or participation in a publicly financed program.
- » Obtain available and accessible services covered by the contract.
- » Receive medical/behavioral health care that is based on objective, scientific evidence and human relationships.
- » Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation.
- » Have a partnership based on trust, respect and cooperation among the provider, staff and member that will result in better health care.
- » Be treated with courtesy, respect and recognition of your dignity and right to privacy.
- » Receive equal and fair treatment, without regard to race, religion, color, creed, national origin, age, sex, sexual preference, political party, disability or participation in a publicly financed program.
- » Choose or change your Primary Care Provider (PCP) within the network of providers, to contact your PCP whenever a health problem is of concern to you and arrange for a second opinion at no cost to you, if desired.
  - Note: You may change your PCP at any time. The change will be effective immediately when you make an appointment with a new provider. You do not need to notify DHMP.
- » Expect that your medical records and anything that you say to your provider will be treated confidentially and will not be released without your consent, except as required or allowed by law.
- » Get copies of your medical records or limit access to these records, according to state and federal law.
- » Know the names and titles of the doctors, nurses and other persons who provide care or services for you.
- » Have a candid discussion with your provider about appropriate or medically necessary treatment options for your condition, regardless of cost or benefit coverage.
- » Participate with providers in making decisions about your health care.
- » Request or refuse treatment to the extent of the law, and to know what the outcomes may be.
- » Receive quality care and be informed of the DHMP Quality Improvement (QI) Program.
- » Receive information about DHMP, its services, its practitioners and providers and members' rights and responsibilities, as well as prompt notification of termination or other changes in benefits, services or the DHMP network. This includes how to get services during regular hours, emergency care, after-hours care, out-of-area care, exclusions and limits on covered services.
- » Learn more about your PCP and their qualifications, such as medical school attended or residency. Go to **DenverHealthMedicalPlan.org/Find-Doctor** for our web-based directories or call Health Plan Services.

# IMPORTANT PLAN INFORMATION



- » Express your opinion about DHMP or its providers to legislative bodies or the media without fear of losing health benefits.
- » Receive an explanation of all consent forms or other papers DHMP or its providers ask you to sign; refuse to sign these forms until you understand them; refuse treatment and to understand the consequences of doing so; refuse to participate in research projects; cross out any part of a consent form that you do not want applied to your care; or to change your mind before undergoing a procedure for which you have already given consent.
- » Instruct providers about your wishes related to advance directives, such as durable power of attorney, living will or organ donation.
- » Receive care at any time, 24 hours a day, 7 days a week, for emergency conditions, and care within 48 hours for urgent conditions.
- » Have interpreter services if you need them to get health care.
- » Change enrollment during the times when rules and regulations allow.
- » Have referral options that are not restricted to less than all providers in the network that are qualified to provide covered specialty services; applicable copays apply.
- » Expect that referrals approved by DHMP cannot be changed after prior authorization or retrospectively denied except for fraud, abuse or change in eligibility status at the time of service.
- » Make recommendations regarding DHMP's Member Rights and Responsibilities policies.
- » Voice a complaint or appeal a decision concerning the DHMP organization or the care provided and receive a reply

according to the complaint/appeal process.

## **MEMBERS HAVE A RESPONSIBILITY TO:**

- » Treat providers and their staff with courtesy, dignity and respect.
- » Pay all premiums and applicable cost sharing (i.e., deductible, coinsurance, copays).
- » Make and keep appointments. Be on time or call if you will be late or must cancel an appointment. Have your DHMP identification card available at the time of service and pay for any charges for non-covered benefits.
- » Report symptoms and problems to your PCP, ask questions and take part in your health care.
- » Learn about any procedure or treatment and think about it before it is done.
- » Think about the outcomes of refusing treatment that your PCP suggests.
- » Follow plans and instructions for care that you have agreed upon with your provider.
- » Provide, to the extent possible, correct and necessary information and records that DHMP and its providers need in order to provide care.
- » Understand your health problems and participate in developing mutually agreed upon treatment goals, to the degree possible.
- » State complaints and concerns in a civil and appropriate way.
- » Learn and know about plan benefits (i.e., which services are covered and non-covered) and to contact a DHMP Health Plan Services representative with any questions.
- » Inform providers or a representative from DHMP when not pleased with care or service.
- » Notify DHMP of any third-party insurance, including Medicare.

## QUALITY IMPROVEMENT PROGRAM

Making sure our members get good care and help is the mission of Denver Health Medical Plan, Inc. (DHMP). To help in that effort, we have a Quality Improvement (QI) Program. The goal of the QI Program is to review how well we have done as your health plan. We will compare this work to our goals. We will learn how we can do better. Each year, we look at data on how we handle members' care. Then, we measure our work and progress against benchmarks used by the whole country.

The goal of our QI Program is to make sure you have:

- » The right to get good care
- » Programs that meet your needs
- » Help with lifelong sicknesses you may have
- » Support when you need extra help, such as after a hospital stay
- » Care from high-quality doctors

You can find information about our QI Program on the DHMP website:

**[DenverHealthMedicalPlan.org/Quality-Improvement-Program](https://denverhealthmedicalplan.org/Quality-Improvement-Program)**

## TRANSITION OF CARE

You or your dependent is seeing a pediatrician and are ready to change to a General or Family provider. There are three ways to get help.

- » Call the Denver Health Appointment Center at **303-436-4949** to get help finding a new provider.
- » Make your first appointment
- » Use the online Provider Directory at **[DenverHealthMedicalPlan.org](https://denverhealthmedicalplan.org)**
- » Ask your provider for help with the transition

## 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 and 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.

## 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**.

## DHMP'S AFFIRMATIVE STATEMENT ABOUT UTILIZATION DECISIONS

Denver Health Medical Plan, Inc. (DHMP) has a Utilization Management (UM) Program to ensure that members have access to quality health care. The Program utilizes a team of health care professionals to evaluate the medical necessity of services by using nationally-recognized, evidence-based clinical guidelines and community standards. The decisions are based on the appropriateness of care and services available to members within their contracted benefits. DHMP affirms the following UM Program practices:

- » UM decision-making is based only on the appropriateness of the care and services requested and the existing coverage and benefits available to the members;
- » DHMP does not specifically reward or otherwise incentivize practitioners or other individuals to issue denials of coverage or services; and
- » UM decision-making staff members do not receive financial incentives that encourage decisions resulting in underutilization.

Please contact DHMP's Health Plan Medical Management Department at **1-800-700-8140** if you have any questions regarding the Program and its practices.

## BENEFIT MAXIMUMS

If you are using benefits such as outpatient therapy visits, durable medical equipment or chiropractic and are close to reaching your benefit maximum, contact Health Plan Services at **303-602-2100** to speak to a representative about any options you may have.

## ANNUAL REPORT

Now is the time when we release our Annual Report showing our previous year's financials. The 2024 Annual Report is available on our website at the link below, or you can scan the QR code to the right: **dhmp.info/annualreport2024**



SCAN ME



**DENVER HEALTH  
MEDICAL PLAN INC.**

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 like 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.  
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**IT'S TIME!**



**A MESSAGE  
FROM OUR CEO**

As we enter the 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. If you have questions about where to get the vaccines, talk to your Primary Care Provider (PCP), schedule through the MyChart app, or visit **[DenverHealthMedicalPlan.org/Flu-Vaccines](https://denverhealthmedicalplan.org/flu-vaccines)**.

With the 2025 year coming to a close, I hope you and your family enjoy a safe and happy holiday season!

**GREG MCCARTHY**

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

