

Annual Notice of Changes (ANOC)

2025

October 2024

Agenda

- » 2025 Plan Benefits
 - Elevate Medicare Choice HMO (D-SNP)
 - Elevate Medicare Select (HMO)
- » Provider Network
- » Extra Help for prescription drug costs
- » Medicaid
- » Resources



Elevate Medicare Advantage Plans

- Must live in Adams, Arapahoe, Denver or Jefferson County
- Must have Part A, Part B and Part D
- Elevate Medicare Choice (HMO D-SNP) only:
 - Full Medicaid
 - Qualified Medicare Beneficiary (QMB)



We offer all the benefits of Original Medicare... and more!



Hearing Aids



Prescription Eyeglasses/ Contacts



Fitness Membership



Preventive/ Comprehensive Dental Benefits



Elevate FlexCard:

★ Healthy Food,
Over-the-Counter
Items and Rewards



Unlimited
Transportation
to health-related
locations

★ Elevate Medicare Select: 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: Chronic alcohol and other drug dependence, Autoimmune disorders, Cancer, Chronic heart failure, Dementia, Diabetes, End-stage liver disease, End-stage renal disease (ESRD), Severe hematologic disorders, HIV/AIDS, Chronic lung disorders, Chronic and disabling mental health conditions, Neurologic disorders, Stroke.

Understanding Your Extra Benefits



Hearing

- \$0 for one routine hearing exam every three years
- \$0 for fitting/evaluation for hearing aids
- Up to \$1,500 allowance for hearing aids (both ears combined) every three years

Vision

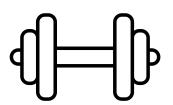
- \$0 routine eye exam annually
- Allowance for prescription contact lenses or eyeglasses
- Covered at the Denver Health Eye Clinic or any Eyecare Specialties of Colorado location





Understanding Your Extra Benefits

Fitness



- \$0 annual fitness membership
- Go to any Denver Parks and Recreation Center
- Provide your Elevate Member ID and a photo ID

Dental

- Annual Maximum Benefit
- \$0 for cleanings, x-rays, and fluoride treatment up to annual maximum allowance*
- Go to any provider in the Delta Dental Medicare Advantage network or Dental Clinic at Denver Health





FlexCard: Healthy Food, Over-the-Counter Items and Rewards

- Healthy Food* and Over-the-Counter Items
 - Quarterly allowance that will load onto a reusable flex card for use on eligible items at qualifying locations.
 - The new allowance starts on the first of January, April, July, and October. Unused amounts do not carry over quarter to quarter.
 - Check your balance on the Elevate FlexCard, or call 1-877-956-2111 (Option 2)

Elevate Select: *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: Chronic alcohol and other drug dependence, Autoimmune disorders, Cancer, Chronic heart failure, Dementia, Diabetes, End-stage liver disease, End-stage renal disease (ESRD), Severe hematologic disorders, HIV/AIDS, Chronic lung disorders, Chronic and disabling mental health conditions, Neurologic disorders, Stroke.



FlexCard: Healthy Food, Over-the-Counter Items and Rewards (Cont.)

- Rewards
 - \$30 Annual Wellness Visit Reward
 - See your provider in person or via telehealth to complete an annual check up. Submit your request at DenverHealthMedicalPlan.org/medicare-flexcard
 - \$25 Health Risk Assessment Reward
 - For Elevate Medicare Choice (HMO D-SNP) only. Automatically receive your reward for completing your annual assessment.
 - Your reward allowance will be loaded onto your FlexCard.
 - Use the funds for purchase of qualifying healthy food.



Understanding Your Extra Benefits



- Transportation
 - Unlimited, free trips to any plan-approved, health-related location
 - Call at least 48 business hours before your appointment. Wheelchair accessible vans available.
 - For return rides, make sure you call Access2Care directly and not the driver who took you to your appointment

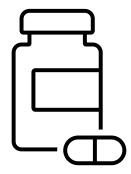


- Dispatch Health
 - Urgent care in the comfort of your own home
 - The same copay applies as an in-person urgent care visit
 - Available 8 a.m. 10 p.m. 7 days a week



Pharmacy

- Up to 100-Day Supply of your maintenance medications (save money and trips to the pharmacy)
- Pharmacy Mail Order
- Medication Therapy Management





Provider Network

Get access to care quickly with our large network of providers.



Denver Health

Intermountain Health (Denver Metro Area)

UC Health (Denver Metro Area)

Stride Community Health

National Jewish





In-Network Hospitals

- Denver Health Medical Center
- UCHealth University of Colorado Hospital
- UCHealth Highlands Ranch
- UCHealth Broomfield
- Lutheran Medical Center
- Platte Valley Medical Center
- St. Joseph Hospital
- Good Samaritan Medical Center
- West Pines Behavioral Health

What changed from 2024 to 2025?



Elevate Medicare Choice (HMO D-SNP)

- Removal of Plan required referrals for any servicework with your PCP if a specialist requires a referral
 - Your provider may still require a referral from a PCP
- Max Out-of-Pocket: \$8,200 to \$9,250
- Vision allowance changed from \$260 to \$245
- Healthy Food Allowance changed from\$260 to \$310
 - Change in eligibility requirements, all members qualify now.



Elevate Medicare Select (HMO)

- Removal of Plan required referrals for any service- work with your PCP if a specialist requires a referral
 - Your provider may still require a referral from a PCP
- Max Out-of-Pocket: \$4,900 to \$6,750
- Vision allowance changed from \$380 to \$220
- OTC Allowance changed from \$75 to \$130
- Inpatient hospital stay days 1-5: \$250 to \$350 per day
- Lifetime reserve day for IP stay: \$800 to \$816 per day
- Part D Drugs- introduction of preferred pharmacies that will result in lower drug copays if filled at these locations
 - Preferred Pharmacy Denver Health Pharmacies



"Extra Help" for Medication Costs



Program to help pay for Medicare prescription drug costs

For people with limited income and resources

No coverage gap or late enrollment penalty if you qualify



Qualifying for "Extra Help"

Have full Medicaid coverage

Receive Supplemental Security Income

Participate in a Medicare Savings Program (MSP)



All others must apply

Call Social Security (SSA) at 1-800-772-1213 or visit

ssa.gov/medicare/prescriptionhelp

Contact your state Medicaid agency

Understand the Medicaid Renewal Process

- If you have Medicaid or QMB and moved or changed your email in the last year, make sure you can get important information about your health coverage (including notification of when your renewal is due!).
 - If you need to update your address, phone number or email:
 - Visit CO.gov/PEAK, if you don't have a PEAK account, you can create one.
 - Use the Health First Colorado app on your smartphone or tablet. Download for free in the Google Play or Apple App Store for free.
 - Call the Colorado Medical Assistance Program at 800-359-1991 or visit them in-person at Pavilion I on the Denver Health Campus.



Understand the Medicaid Renewal Process (Continued...)

- Based on your entitlement month for Medicaid (or QMB), you will have an annual renewal.
- You will receive a renewal packet in the mail approximately 70 calendar days prior to your renewal.
- You must complete, sign and return the renewal packet to confirm your eligibility information (even if there is no change!).
- You can complete the renewal process:
 - Online at CO.gov/PEAK
 - Through the Health First Colorado App
 - By mail, fax, or brining the completed signature page and updated renewal forms to your local Human Resources
 - Calling the Colorado Medical Assistance Program at 800-359-1991 or visiting Pavilion I at the Denver Health Campus



Understand the Medicaid Renewal Process (Continued...)

- If you do not complete your renewal, you will lose your Medicaid or QMB status.
 - If you're enrolled in Elevate Medicare Choice (HMO D-SNP), we will put you on a Loss of SNP process.
 - We will give you a chance to regain your Medicaid or QMB process.
 - If you do not regain eligibility, we will try to contact you and inform you about our Elevate Medicare Select (HMO) plan. If you want to enroll in that plan, we will help you.
 - If you take no action, we will disenroll you from Elevate Medicare Choice (HMO D-SNP).



Dual-eligible members

(Members eligible for both Medicare and Medicaid or QMB)



Medicaid Benefits

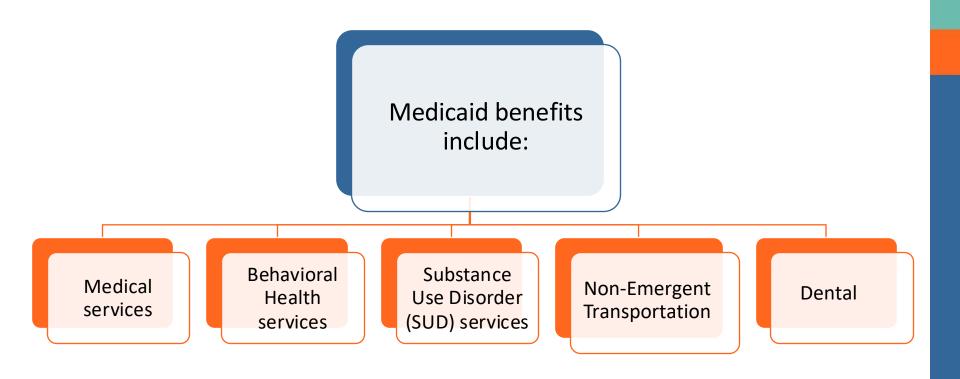
If you also qualify for Medicaid, you may be assigned to Elevate Medicaid Choice or your local Regional Accountable Entity (RAE), also called Fee-for-Service Medicaid (FFS)

Medicaid has additional benefits you are entitled to such as Dental, NEMT, Long-term care, etc.

Contact Health
Plan Services or
your Care Manager
for additional
information on
what benefits you
qualify for as a
Medicaid member.



Medicaid Benefits





Medicaid Benefits

As an Elevate Medicaid Choice member you can access:

- Primary Care Provider (PCP) visits via Denver Health or STRIDE
- Specialty care no referral within Denver Health, with referral can receive services at partner hospitals and clinics
- For additional details, please visit the website: <u>DenverHealthMedicalPlan.org/medicaid-choice</u>

For FFS Medicaid, please refer to your RAE



Medicaid Coverage

- Do you have a question for Elevate Medicaid Choice?
 - In addition to contacting Health Plan Services, the DHMP website has a member "Connect With Us" tab at the bottom of the members tab.
 - <u>DenverHealthMedicalPlan.org/medicaid-choice</u>
 - To email a question to Elevate Medicaid Choice, click on the Medicaid Choice Consumer Advisory Form tab under Member Feedback

Member Feedback

As a Medicaid Choice member, you are at the heart of what we do at Denver Health Medical Plan. Your feedback is important to us and helps us improve our plan. Let us know what we could do better by sharing your suggestions and experiences via our Consumer Advisory form.

> MEDICAID CHOICE CONSUMER ADVISORY FORM





Medicaid Member Feedback

- DHMC would greatly appreciate members providing feedback on member materials
 - The "Connect With Us" tab provides members the opportunity to review and comment on commonly mailed member materials.
 - DenverHealthMedicalPlan.org

There are some forms or letters you might see more often than others. If you would like to provide feedback or have suggestions for these forms, they can be found below. You can provide your feedback in the Consumer Advisory form.

Member Handbook	
Quick Reference Guide	
Verification of Services Letter	



Important Numbers



Contact	Number
Denver Health Appointment Center	303-436-4949
Eye Care Specialists of Colorado	303-802-4650
Delta Dental of Colorado	1-800-610-0201
Access2Care	1-877-692-5315
DHMP Health Plan Services	1-877-956-2111 TTY 711
DHMP Care Management	303-602-2184
Denver Health Nurse Line	303-739-1261
Over-The-Counter Ordering	844-330-7780
Dispatch Health In-Home Urgent Care	303-500-1518

DenverHealthMedicalPlan.org



Thank you for being a member!

