

Changes to the  
Elevate Medicare Select (HMO)  
2025  
Evidence of Coverage

*April 28, 2025*

This is important information on changes in your Elevate Medicare Select (HMO) coverage.

We previously sent you the Evidence of Coverage (EOC) electronically which provides information about your coverage as an enrollee in our plan. This notice is to let you know there were errors in your EOC. Below you will find information describing and correcting the errors. Please keep this information for your reference. The correct EOC can be found on our website at [DenverHealthMedicalPlan.org](https://denverhealthmedicalplan.org)

### Changes to your EOC

Where you can find the error in your 2025 EOC	Original Information	Corrected Information	What does this mean for you?
On page 112, “These payments are included in your out-of-pocket costs.”	These payments are also included in your out-of-pocket costs if they are made on your behalf by certain other individuals or organizations. This includes payments for your drugs made by a friend or relative, by most charities, by AIDS drug assistance programs, by a State Pharmaceutical Assistance Program that is qualified by Medicare, employer or union health plans, <b>TRICARE</b> or by the Indian Health Service.”	<b>These payments are not included in your out-of-pocket costs:</b> Payments for your drugs that are made by TRICARE.	Payments from TRICARE <u>do not</u> count towards your Part D Out-of-Pocket Costs.
On page 114, Section 3.1 “We send you a monthly summary called the <i>Part D Explanation of Benefits</i> (the Part D EOB)”	We keep track of how much you have paid. This is called your Out-of-Pocket Costs. This includes what you paid when you get a covered Part D drug, any payments for your drugs	We keep track of how much you have paid. This is called your Out-of-Pocket Costs. This includes what you paid when you get a covered Part D drug, any payments for your drugs	Payments from TRICARE <u>do not</u> count towards your Part D Out-of-Pocket Costs.

	made by family or friends, and any payments made for your drugs by “Extra Help” from Medicare, employer or union health plans, <b>TRICARE</b> , Indian Health Service, AIDS drug assistance programs, charities, and most State Pharmaceutical Assistance Programs (SPAPs).	made by family or friends, and any payments made for your drugs by “Extra Help” from Medicare, employer or union health plans, Indian Health Service, AIDS drug assistance programs, charities, and most State Pharmaceutical Assistance Programs (SPAPs).	
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You are not required to take any action in response to this document, but we recommend you keep this information for future reference. If you have any questions, please call us at 1-877-956-2111, TTY 711 8 a.m. - 8 p.m. seven days a week.

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.

ATTENTION: If you speak Spanish, language assistance services are available to you at no cost. Please call our Health Plan Services at 303-602-2111 or toll free 1-877-956-2111. TTY should call 711. Our hours of operation are 8 a.m. to 8 p.m., seven days a week.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame a nuestros Servicios del Plan de Salud al 303-602-2111 o sin costo al 1-877-956-2111. Los usuarios de TTY deben llamar al 711. Nuestro horario de atención es de 8 a.m. a 8 p.m., los siete días de la semana