

Elevate Medicaid Choice by Denver Health Medical Plan

*Member Quick Reference Guide
Guía de referencia rápida
para miembros*



**ELEVATE
MEDICAID CHOICE**

Denver Health Medical Plan Inc.™



**Health First
COLORADO™**

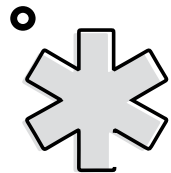
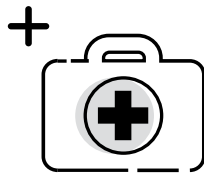
Colorado's Medicaid Program

In partnership to better serve you

WELCOME TO ELEVATE MEDICAID CHOICE BY DENVER HEALTH MEDICAL PLAN!

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.

Si tiene preguntas acerca de este aviso, podemos ayudarlo sin costo alguno. También podemos ofrecerlo en otros formatos como letras grandes, audio u otros idiomas. Llame al 303-602-2116, sin costo al 1-855-281-2418 o al 711 para personas con necesidades auditivas o del habla.



**Visit our website at
DenverHealthMedicalPlan.org**

Dear Member:

Welcome to Health First Colorado Administered by Elevate Medicaid Choice. Your health is of great value to us and we are happy to have you as a member. Please use this new member list to help you get the most out of your health plan. More in depth information about your benefits can be found in your online Handbook at **www.denverhealthmedicalplan.org/elevate-medicaid-choice-member-handbook**. Thank you for being a member of Elevate Medicaid Choice – we look forward to helping you meet your healthcare goals.

Your New Elevate Medicaid Choice ID Card:

Your ID Card will come in the mail with this guide, shortly after joining our plan. Please show this card every time you go to the doctor or pick up prescriptions. If you have any questions regarding your benefits or services, please call Health Plan Services at 303-602-2116 or toll free at 1-800-700-8140. TTY users should call 711. They are available from 8 a.m. to 5 p.m., Monday - Friday. Elevate Medicaid Choice offers free auxiliary aids and services to members with disabilities to help communicate with us. Sign language and oral interpretation services are available in any language for free.

**QUICK TIPS FOR GETTING CARE AT
DENVER HEALTH**

Elevate Medicaid Choice gives you a medical home based on where you live. You may choose a primary care provider from clinics at Denver Health’s Main Campus, one of the Community Health Centers, the Stride Community Health Centers network or School-Based Health Centers to get your medical care. See a full list of clinic addresses and hours here for Denver Health: **www.denverhealth.org/locations** and here for Stride: **www.stridechc.org**. For more

information about Elevate Medicaid Choice Providers, visit **dhmp.goperspecta.com/dhmp/public/ProviderSearch/SelectProduct**. For the Pharmacy Directory, visit **www.denverhealthmedicalplan.org/medicaid-and-chp-pharmacy-directory**.

To better serve your needs, Medicaid Choice will be providing your Member Handbook, Provider Directory, Pharmacy Directory, and Formulary documents electronically in either English or Spanish for the program year. You can request a paper copy or a different language or format, which will be sent to you within five business days by calling Health Plan Services at 303-602-2100.

Urgent Care Clinics:

You do not need approval to go to the nearest urgent care. You may see any urgent care provider in the USA, even if they are outside the network. A list of Denver Health Urgent Care Clinics is available online at **www.denverhealth.org/services/emergency-medicine/urgent-care**. For Denver Health MyChart users (age 18 and above), a virtual urgent care visit can be done using your smartphone, tablet, or computer. Learn more at **www.denverhealth.org/services/emergency-medicine/urgent-care/adult-virtual-urgent-care**.

Emergency Department:

If you have an emergency, call 9-1-1 or go to the nearest hospital. There is no cost for covered healthcare services if you go to the hospital for an emergency health problem. Denver Health provides emergency services for both adults and children. The children’s emergency department has a separate waiting area in a child-friendly environment. A list of Denver Health Emergency Departments is available online at **www.denverhealth.org/services/emergency-medicine**. Denver Health NurseLine (free medical advice) is available by telephone at 303-739-1261.

**Visit our website at
DenverHealthMedicalPlan.org**

Appointment Center:

Call the Appointment Center at 303-436-4949 when you need help finding or changing a Primary Care Provider (PCP). For Stride Community Health Center, call 303-360-6276.

New Patients:

If you haven't been seen at a Denver Health Clinic in the past 12 months or if you have never been seen at a Denver Health Clinic, call the Appointment Center at 303-436-4949 to schedule an appointment.

Disenrollment (changing your plan):

A new member may request disenrollment at any time during the initial ninety (90) days following the date of the Member's initial enrollment with the Elevate Medicaid Choice Plan. You can contact Health First Colorado 303-839-2120 and request to change your plan.

Existing Patients:

Once you have been seen at a Denver Health Clinic, schedule future visits online by calling the Appointment Center at 303-436-4949. You can also sign up for the MyChart application (app) at **mychart.denverhealth.org/mychart/authentication/login**. The MyChart app allows you to schedule appointments, message your doctor, view test results, refill medications, and much more.

To learn more about Denver Health's appointment center, the clinics and their phone numbers are in the Member Handbook located on our website at **www.denverhealthmedicalplan.org/elevate-medicaid-choice-member-handbook**.

In most cases, you need a referral from your PCP to see a Specialist (a health expert who is an expert in one or more

areas of health care). You do not need a PCP referral for Optometry or OB/GYN specialists.

Tips for appointments:

- » Bring your Elevate Medicaid Choice ID Card and picture ID to all of your visits.
- » Arrive 15 minutes early for your visit to allow time to park and check in at the clinic. All visits can be made through the Appointment Center at 303-436-4949.
- » If you need to cancel your visit, please call the Appointment Center at least one day before your visit date.

Open Enrollment:

During open enrollment you can change your plan. The two (2) months before your birthday month is your chance to switch to a different health plan for any reason.

Newborns:

If you have a baby, please remember to add them to your Medicaid case. You can do this by calling your local Department of Health and Human Services office or calling the Colorado Medical Assistance Program at 1-800-359-1991. Adding your baby to your Medicaid case will give them their own Medicaid ID and coverage.

Babies born to a mother on Elevate Medicaid Choice should also be assigned to Elevate Medicaid Choice after they are discharged from the hospital and have received a Medicaid identification number. Once your baby is assigned to Elevate Medicaid Choice, you have 90 days to begin care with a Denver Health provider or opt out of the Elevate Medicaid Choice plan. To change your plan, please call Health First Colorado at 303-839-2120. If you are unsure on your timeframe to change your plan, please call Health Plan Services at 303-602-2116 and we can help you count how many days you have to opt out.

Coordination of Benefits:

If you have more than one insurance, you must tell DHMP. This tells us which plan should pay your claims first and which should pay second. Please fill out the form found at **www.denverhealthmedicalplan.org/coordination-benefits-form** and send it back using the instructions listed or call Health Plan Services at 303-602-2116 with questions.

Behavioral Health:

Elevate Medicaid Choice partners with Colorado Access to provide full health care benefits to members. As a member of Elevate Medicaid Choice, Colorado Access provides behavioral health and substance use disorder services for members, while Elevate Medicaid Choice provides physical health care benefits. You can contact Colorado Access by visiting their website at **www.coaccess.com/members/care** or calling 800-511-5010.

You can also call Health Plan Services at 303-602-2116 with questions on how to support your behavioral health needs.

Dental Benefits:

Dental services are provided by Health First Colorado and available through DentaQuest. Contact DentaQuest at 1-888-307-6561 for dental-related benefits.

Pharmacy Benefit – Where You Can Fill Your Prescriptions:

Denver Health has pharmacies connected to Denver Health clinics, for information on the Denver Health pharmacy’s location and hours, please visit **www.denverhealth.org/patients-visitors/prescription-refill-pharmacy-services**. For more general details including the formulary (the lists of covered drugs and

their requirements), please visit the website at **www.denverhealthmedicalplan.org/current-members/elevate-medicaid-choice/medicaid-pharmacy**. Medications that are covered by Elevate Medicaid Choice are \$0.

More pharmacies in your network include King Soopers, Safeway, Target, Walgreens, and others. If you need help, please call the Denver Health Refill Request and Central Pharmacy Call Line at 303-436-4488.

Pharmacy by Mail:

Elevate Medicaid Choice offers Pharmacy by Mail. Pharmacy by Mail saves you time by sending your 90-day supply prescriptions to your home. Because Pharmacy by Mail prescriptions are for a 90-day supply, you will only need to have your prescriptions filled four (4) times a year. You can sign up for Pharmacy by Mail by using the MyChart application or by calling the Pharmacy Call Center at 303-436-4488.

You do not need to keep a credit card on file if you only want to have medications that are covered by DHMC sent to your home with Pharmacy by Mail. If your address changes call the Pharmacy Call Center at 303-436-4488 or fill out and mail a new sign-up form to 500 Quivas St., Suite A, Denver, CO 80204. Be sure to mark on the form that this is a change of address. The pharmacy can only ship your prescriptions in the state of Colorado. If you are having an issue at the Pharmacy, call us before paying out of pocket. We can verify what is covered and what is not. If you are having an eligibility issue, call us. We can help you if you have another health plan and don't know which one is primary. For Elevate Medicaid Choice to pay for your prescription, you must bring your Elevate Medicaid Choice ID card with you when you go to the pharmacy.

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 8 a.m. to 10 p.m., 365 days a year). Visit **www.dispatchhealth.com**, download the free app or call 303-500-1518. Refer to your plan coverage for cost sharing details. The NurseLine can help make the request to DispatchHealth.
- » **Visit an urgent care center.**
Denver Health offers multiple urgent care centers across the Denver area. In addition, virtual urgent care is available for Denver Health MyChart users. For more information, locations and hours, please visit **www.denverhealth.org/services/emergency-medicine/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.
- » **Emergency room.**
You can access 24/7 emergency care for both children and adults on the Denver Health's Main Campus, 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 **www.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.

MEMBER RIGHTS & RESPONSIBILITIES

Your Rights:

Elevate Medicaid Choice gives access to health care for all its members. We do not discriminate based on your religion, race, national origin, color, ancestry, handicap, sex, sexual orientation, gender identity or age. You have various rights as a Elevate Medicaid Choice member, including being treated with respect, participating in healthcare decisions, and accessing emergency and urgent care services without prior approval. For a full list of your rights, refer to the Member Handbook available at **www.denverhealthmedicalplan.org/elevate-medicaid-choice-member-handbook**. As a Elevate Medicaid Choice member, you have all of these rights:

- » To be treated with respect and with thought to your dignity and privacy.
- » To get facts from your provider about all the care options for your health issue in a way that makes sense to you.
- » To take part in choices on your health care, including the right to say no to care.
- » To get a second opinion (have a different provider review your case) at no cost to you. Elevate Medicaid Choice will arrange a second opinion with an out-of-network provider if a Elevate Medicaid Choice provider is not able to.
- » To make an Advance Directive.
- » To get detailed facts about Advance Directives from your provider and to be told up front if your provider cannot follow your Advance Directives because of their values.
- » To be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or

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retaliation. This means that Elevate Medicaid Choice providers and staff cannot hold you against your will to punish you, get you to do something they want or get back at you for something you have done.

- » To get health care from providers in the Elevate Medicaid Choice visit standards timeframes (timeframes can be found in the handbook).
- » To see providers who make you comfortable and who meet your cultural needs.
- » To use any hospital or urgent care for emergency and urgent care needs. Emergency and urgent care do not need prior approval or referral.
- » To get health care outside of the Denver Health Network if you are not able to get them in the Denver Health Network. Elevate Medicaid Choice must approve non-emergency and non-urgent care first.
- » To get family planning care from any family planning provider even if the provider is outside of the Elevate Medicaid Choice network, without approval or referral.
- » To ask for a copy of your medical records and ask that they be changed or fixed.
- » To file a grievance (complaint), appeal or ask for a State fair hearing.
- » To join the Elevate Medicaid Choice Member Advisory Committee.
- » To get all benefit facts from Elevate Medicaid Choice. This includes covered services, how to get all types of care like emergency care, detailed facts about providers, and your disenrollment rights.
- » To be provided with care services in accordance with requirements for access, coverage and coordination of medically necessary services.
- » To freely exercise your rights. Using those rights will not affect the way Elevate Medicaid Choice, its network providers, or the State Medicaid agency treats you.
- » To use your rights above, without fear of being treated poorly by Elevate Medicaid Choice, network providers or the State Agency.

Your Responsibilities:

Elevate Medicaid Choice wants to give all members the best care and a great experience every time they come to Denver Health. That is why we expect our members, staff, and providers to treat each other with dignity and respect. As a Elevate Medicaid Choice member, you are also in charge of:

- » Picking a Primary Care Physician (PCP) or Medical Home that is in the Elevate Medicaid Choice Network.
- » Following all the rules in the member handbook.
- » Following the rules of the Elevate Medicaid Choice appeal and grievance (complaint) process.
- » Getting an approval from your PCP before you see a Specialist when it is required (refer to the member handbook for details).
- » Paying for any services that are not covered by Elevate Medicaid Choice or Health First Colorado.
- » Telling Elevate Medicaid Choice about any other health plan you have other than Health First Colorado.
- » Calling the Appointment Center at 303-436-4949 if you wish to change your PCP.
- » Calling the Appointment Center 24 hours before your appointment date if you need to cancel your appointment.

Connect with us:

Your feedback is essential to us and helps improve our program. Please provide feedback on member materials at www.denverhealthmedicalplan.org/member-advisory-council.

GRIEVANCES/COMPLAINTS

What is a Complaint?

A complaint is when you are not happy with something that Elevate Medicaid Choice, staff, or provider does. This could be when you are not happy with:

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- » The quality of care or service you get.
- » The way Elevate Medicaid Choice treats you.
- » Things Elevate Medicaid Choice does that you are not happy with.
- » A failure to respect your rights as a member.

What to do if you have a Complaint:

If you have a complaint, you or your Designated Personal Representative (DPR) can call the Complaint and Appeal Dept. at 303-602-2261. You or your DPR can also write to the Complaint and Appeal Dept. Be sure to add your name and Medicaid ID number (a letter and 6 numbers) found on your card. Also, include address and phone number in your letter if you write to the Complaint and Appeal Dept. You may also fill out the Complaint and Appeal Form in the back of the Member Handbook and send it in. The member portal has a form you can fill out online.

Send your written complaint to this address:
Denver Health Medical Plan - Elevate Medicaid Choice
Attn: Complaint and Appeal Department
777 Bannock St., MC 6000
Denver, CO 80204-4507

You will not lose your Health First Colorado Enrollment benefits by filing a complaint. It is the law!

If you need help filing a Complaint:

Elevate Medicaid Choice will help you file a complaint. If you need help filling out any forms or taking any of the steps to file a complaint, including using an interpreter or TTY services, please call the Complaint and Appeal Dept. at 303-602-2261.

After you file a Complaint:

After you file a Complaint, Elevate Medicaid Choice will send you a letter within 2 business days to let you know

that your Complaint was received. Elevate Medicaid Choice has to make a decision on your Complaint no later than 15 business days of when you file your grievance. You or Elevate Medicaid Choice can extend the timeframe that Elevate Medicaid Choice has to decide on your Complaint and Elevate Medicaid Choice may take up to 14 more calendar days. For more information on Complaints, please look at your Member Handbook.

Timeframe To File Your Complaint	Anytime
Written Acknowledgement Letter	2 Business Days
Plan Decision Timeline	15 Business Days
Extension Allowed	14 Calendar Days

APPEALS

What is an Appeal?

An Appeal is a request that you, or your Designated Personal Representative (DPR), can make to review an Adverse Benefit Determination (denial of payment or service) by Elevate Medicaid Choice. If you think the action taken is wrong, you or your DPR can appeal by calling or writing us. A provider can also appeal on your behalf if they are your DPR. If you’re still unhappy after the appeal decision, you can request a State Fair Hearing after completing all steps in the Elevate Medicaid Choice appeal process.

How to file an Appeal

You have 60 days to appeal after receiving a notice of Adverse Benefit Determination (denial of payment or service). Elevate Medicaid Choice will process the appeal within 10 business days. To appeal, you can call the Complaint and Appeal Dept. at 303-602-2261 (TTY 711) or fill out the Complaint and Appeal Form at

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Visit our website at
DenverHealthMedicalPlan.org

www.denverhealthmedicalplan.org/member-complaint-grievance-and-appeal-form and mail it to:

Denver Health Medical Plan – Elevate Medicaid Choice
Attn: Complaint and Appeal Department
777 Bannock St., MC 6000
Denver, CO 80204-4507

Filing an Expedited Appeal

If your health is at risk and you need Elevate Medicaid Choice to decide on your appeal quickly, call the Complaint and Appeal Dept. at 303-602-2261. If approved, Elevate Medicaid Choice will decide within 72 hours. If denied, you'll be notified by phone and receive a letter within 72 hours, explaining your right to file a complaint if you're unhappy with their decision.

Timeframe To File Your Appeal	60 calendar days from the date of your notice of adverse benefit determination
Written Acknowledgement Letter	2 Business Days
Plan Decision Timeline (Pre-Service and Post-Service)	10 Business Days
Plan Decision Timeline (Expedited)	72 hours
Extensions	14 Calendar Days

State Fair Hearing

If you are unhappy with Elevate Medicaid Choice actions, you **MUST** go through the appeal process first. After completing the Elevate Medicaid Choice appeal process, within 120 calendar days after receiving a Notice of Adverse Appeal Resolution Letter, you or your DPR can request an Administrative Law Judge review by asking for

- a State Fair Hearing if:
- » Services are denied or delayed.
 - » You believe the action taken is wrong.

If you need help requesting a State Fair Hearing, Elevate Medicaid Choice will help you. Call the Complaint and Appeal Dept. at 303-602-2261 to ask for help. For more information on State Fair Hearings, please check your Member Handbook at **www.denverhealthmedicalplan.org/elevate-medicaid-choice-member-handbook**.



ELEVATE MEDICAID CHOICE

Denver Health Medical Plan Inc.[™]

777 Bannock St., MC 6000
Denver, CO 80204

Health Plan Services | Servicios del Plan de Salud:
303-602-2116

Toll-Free | Número gratuito:
1-855-281-2418

TTY: 711

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