

2022 Elevate Medicare Advantage Training

Elevate Medicare Advantage

Medicare Choice

- Must have Medicare Part A and B
- Must have Full Medicaid benefits
- Denver, Adams, Jefferson Counties
- 4 Stars

Medicare Select

- Must have Medicare Part A and B
- QMB and below
- Denver, Adams, Jefferson Counties
- 4 Stars

Elevate Medicare Select Highlights

- **Premium** - \$39.80
- Part B Deductible - \$0
- Part D Deductible - \$0
- OOP Max - \$4400
- **Copays and Coinsurance**
 - PCP - \$0
 - Specialist - \$20
 - ER - \$80
 - Urgent Care - \$20
 - Mental Health Care - \$0 (DH or MHCD)
 - Physical Therapy - \$10
 - Chiropractic Care - \$20 (Columbine Chiro)
 - Diabetic Supplies - \$0

* Cost sharing waived if member has QMB

Elevate Medicare Choice Highlights

- **Premium** - \$39.80
- Part B Deductible - \$185 - **Covered by Medicaid**
- Part D Deductible - \$435 - **Covered by LIS**
- OOP Max - \$7550 – **Covered by Medicaid**
- **No Copays - No Coinsurance**
- **Meals after Hospitalization** - 21 meals delivered to member's home, within a 10-day period, after each inpatient hospital or skilled nursing facility discharge.
- **Dental** - \$1500 for dental services at Denver Health or Delta Dental



Expanded Network

- UC Health
- SCL
- Lutheran Medical Center
- Platte Valley Medical Center
- St Joseph Hospital
- Good Samaritan Medical Center
- West Pines Behavioral Health
- Mental Health Center of Denver

*Referral required for Specialty visits

Provider Network

- Throughout the network, members have access to over 750 Primary Care Providers (PCP) and 3,600 Specialty providers

Provider Network	PCP	Specialist
Denver Health	234	845
SCL	196	292
UC Health	268	2,314
Stride Community	96	164

*Provider network may change depending on contract year.

Enhanced Benefits

- Vision – Up to \$250 for glasses or contacts
- Hearing - \$1500 for hearing aids every 3 years
- Transportation – Unlimited trips to medical appointments with Access 2 Care
- Parks & Rec membership – Denver only
- Dental – No Copay for routine services DH or Delta Dental (Select)
- OTC Benefits – Quarterly allowance for both Elevate Medicare Select and Elevate Medicare Choice members

Vision

- \$250 for contact lenses and/or eyewear
- \$20 copay for eye exam
- One-Hour Optical
- Reimbursements available

*Cost sharing waived if member has QMB

Transportation

- Non-Emergency Medical Transport for all Elevate Medicare Advantage members
- Unlimited trips to medical and dental appointments
- Members can call the A2C line at 1877-692-5315 or HPS at 303-602-2111 to schedule a ride
- 48-hour notice required along with appointment and member information
- Provided by Access2Care

Elevate Medicare Dental

Elevate Medicare Choice HMO DSNP

- \$1500 maximum benefit, subject to Delta Dental processing policies, exclusions and limitations
- Amount includes major services like partial, removable, and fixed dentures

Elevate Medicare Select HMO

- Comprehensive coverage subject to Delta Dental processing policies, exclusions and limitations
 - Cleanings two per year
 - Fluoride Treatment
 - Two fillings per year
 - Unlimited extractions
 - One deep cleaning every two years

Over the Counter Benefits

Elevate Medicare Choice HMO DSNP

- Mail order catalog
- \$220 quarterly allowance
- Unused allowance does not carry over

Elevate Medicare Select HMO

- Mail order catalog
- \$150 quarterly allowance
- Unused allowance does not carry over

Denver Parks & Rec Center Membership

- As a member of Elevate Medicare Choice (HMO-DSNP) or Elevate Medicare Select (HMO), you are eligible to receive an annual membership at Denver Parks & Rec Centers, at **no cost** to you*
- To enroll, take your member ID and a photo identification to the recreation center of your choice

* This membership does not include the cost to join classes. Members may be required to pay a small fee to sign up for fitness classes

Bringing Back the House Call



Dispatch Health is our on-demand health care provider that can treat a range of injuries and illnesses in the comfort and convenience of your home.

Their care team will come to your home or office for the cost of an urgent care visit

Dispatch Health is open 7 days a week, 8 am – 10 pm.
303-500-1518

Health Management: Medicare Wellness Rewards

- Attend your Annual Wellness Visit and get a \$30 reward
 - Annual wellness visit is a checkup or routine care visit and is one of the most important ways you can stay on top of your health. It is a chance to learn about your health and learn what preventative measure you can take to ensure your long-term wellbeing.
 - Prepaid card that can be used at participating drug stores, pharmacies, wholesale clubs, discount stores and grocery stores.
 - For more information or assistance submitting your reward, please contact Health Plan Services.

Health Management: Other Programs

- BeWell – Online Wellness Portal
 - Online portal where participants can complete a Personal Health Assessment
 - Ability to enroll in workshops to help you achieve your health goals
 - Ability to track progress towards health goals through a variety of logs
 - Access to health tips, articles, newsletters and a vast library of health content
- myStrength – Online Self-Management Tool
 - Offers emotional health modules directed at:
 - ❖ Mindfulness
 - ❖ Managing Depression
 - ❖ Improving Sleep
 - ❖ Opioid Recovery
 - ❖ Spirituality
 - ❖ Controlling Anxiety
 - ❖ Drug or Alcohol Recovery
 - ❖ LGBTQ+ Resources
- Visit our website for more info
<https://www.denverhealthmedicalplan.org/mystrength>

Health Management

- Care Management

Care Managers can help you...

- Get access to the health care services you need
 - Provide support for health-related decisions
 - Coordinate care among your health care team
 - Create a care plan, just for you!
- To ask for a Care Manager or to get more information on any of the care management programs, call the Care Management Team at 303-602-2184. Monday – Friday, 8am-5pm

Drug Delivery Service



Delivery Information

Hotline: 303-602-3253

Hours: Monday – Thursday
9 a.m. – 5 p.m.

Friday 8 a.m. – 4 p.m.

Available at no cost to
Medicare Select and
Medicare Choice Members

Prescription Copays for those without LIS

Tier	One-month supply	Two-month supply	Three-month supply
Tier 1 (Preferred Generic)	\$3 copay	\$6 copay	\$6 copay
Tier 2 (Generic)	\$9 copay	\$18 copay	\$18 copay
Tier 3 (Preferred Brand)	25% coinsurance	25% coinsurance	25% coinsurance
Tier 4 (Non- Preferred Brand)	50% coinsurance	50% coinsurance	50% coinsurance
Tier 5 (Specialty Tier)	33% coinsurance	Not covered	Not covered
Tier 6 (Select Care Drug)	\$0 copay	\$0 copay	\$0 copay

Grievance & Appeal Department

- Phone: 303-602-2261
- Monday – Friday, 8 a.m. – 5 p.m.
- Fax: 303-602-2078
- Address:

Denver Health Medical Plan, Inc.
Attn: Grievances and Appeals Department
777 Bannock St, MC 6000
Denver, CO 80204



Health Plan Services

- Benefit questions
- Eligibility questions
- Claim payment/billing questions
- Service authorization questions
- Grievances (complaints)
- Member Handbook questions

Health Plan Services

- Phone: 303-602-2111
- Toll free: 1-877-956-2111
- TTY Users: 711
- Daily: 8 a.m. – 8 p.m.



Financial Assistance

- LIS (Low Income Subsidy) – Helps cover the cost of prescriptions, Part D Premium and deductible
 - Also called the Low-Income Subsidy (LIS)
 - For people with limited income and resources
 - No coverage gap or late enrollment penalty if you qualify
 - Continuous Special Enrollment Period
- Qualifying for Extra Help
 - You automatically qualify for Extra Help if you receive:
 - Full Medicaid coverage
 - Supplemental Security Income
 - Help from Medicaid paying your Part B premium (Medicare Savings Program)

Financial Assistance

- Medicare Savings Programs
 - QMB (Qualified Medicare Beneficiary) – Pays for Part B Premium, copays and deductible
 - SLMB (Specified Low-Income Medicare Beneficiary) – Pays for Part B Premium only.
 - QI – (Qualifying Individual) - Pays for Part B Premium only
- Any type of financial assistance allows people to have a quarterly Special Enrollment Period (SEP)

Thank you!