

Kaiser Foundation Health Plan  
Colorado

# IMPORTANT DETAILS AND NOTICES

Kaiser Permanente for Individuals and Families



# TABLE OF CONTENTS

ELIGIBILITY REQUIREMENTS .....	2
NOTICES .....	3
PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY .....	4-17
<b>Medical offices</b>	
Arapahoe Medical Offices.....	4
Aurora Centrepont Medical Offices .....	4
Baseline Medical Offices.....	5
East Denver Medical Offices.....	5
Englewood Medical Offices .....	6
Franklin Medical Offices .....	6-7
Hidden Lake Medical Offices .....	8
Highlands Ranch Medical Offices.....	8
Ken Caryl Medical Offices.....	9
Lakewood Medical Offices .....	9
Longmont Medical Offices .....	10
Parker Medical Offices .....	10
Rock Creek Medical Offices .....	10-11
Skyline Medical Offices .....	12
Smoky Hill Medical Offices .....	13
Southwest Medical Offices .....	13
Westminster Medical Offices .....	14
Wheat Ridge Medical Offices.....	15
<b>Behavioral health locations</b>	
Executive Center Behavioral Health.....	15
Exempla St. Joseph Hospital .....	15
Exempla West Pines .....	16
Hidden Lake Behavioral Health .....	16
Highline Behavioral Health Center.....	16
<b>Continuing care</b> .....	17
INFORMATION FOR BUSINESS GROUPS OF ONE .....	17
<i>2010 COLORADO HEALTH BENEFIT PLAN DESCRIPTION FORMS</i> (for Business Groups of One).....	18-29

# ELIGIBILITY REQUIREMENTS

To be eligible for Kaiser Permanente for Individuals and Families, you must:

- live in the Denver metro service area (see the *2010 Rates* brochure for ZIP codes);
- not already qualify for coverage under an employer's small group plan;<sup>1</sup>
- sign a disclosure form declining Business Group of One coverage if you qualify for Business Group of One coverage;<sup>2</sup> and
- pass a required medical review that is a part of the application process.<sup>3</sup>

You may also cover certain dependents on your account. These include your spouse and your unmarried, dependent children, including natural children, stepchildren, legally adopted children, and children under permanent court-appointed legal guardianship. Dependent children are eligible for coverage until the end of the month in which they turn 19 or, if full-time students and financially dependent, until the end of the month in which they turn 24. An unmarried child medically certified as disabled and dependent upon the parent is covered at any age.

You may also enroll these dependents in separate plans.

<sup>1</sup>To make sure our Kaiser Permanente for Individuals and Families plan is right for you, please take a few moments to consider these questions:

- Do you work for an employer who has from one to 50 employees who work 24 hours or more a week?

If you answered No, you've picked the right health plan. If you answered Yes, please answer the following questions and read on:

- Will your employer receive a tax deduction for your health care coverage?
- Will your employer pay for your coverage or reimburse you for any portion of your premium?

**Important:** If you answered Yes to either of the last two questions, you are not eligible for Kaiser Permanente for Individuals and Families plan coverage. However, you may be eligible for small group health insurance coverage. If you are not eligible for Kaiser Permanente for Individuals and Families coverage based on your answers to the questions above, please contact our Sales and Marketing Department at **303-338-3700** for information about Small Group coverage.

<sup>2</sup>Learn about Business Groups of One on page 17.

<sup>3</sup>If you fail the medical review to qualify for Kaiser Permanente for Individuals and Families, you may be eligible to participate in CoverColorado, a state-sponsored guaranteed-issue health care coverage program. CoverColorado does not impose pre-existing conditions or limitations on coverage. In addition, Colorado has designated CoverColorado as the state alternative mechanism for health coverage of HIPAA (the Health Insurance Portability and Accountability Act of 1996) eligibles in accordance with federal law. You may be eligible for CoverColorado if you have a total of at least 18 months of creditable health coverage without a break in coverage of more than 62 days at any time (including now) and your most recent creditable coverage was under a group health plan. For information about CoverColorado, please contact CoverColorado by mail at 425 South Cherry Street, Suite 160, Glendale, Colorado 80246, or by phone at **303-863-1960**.

# NOTICES

## ACCESS PLAN

Colorado state law requires an Access Plan describing Kaiser Permanente's network of providers and services be available. To obtain a copy, call Member Services at **303-338-3800**.

## ARBITRATION

Except for: (1) claims filed in small claims court, (2) claims subject to the Colorado Health Care Availability Act, Section 13-64-403, C.R.S.; (3) claims subject to the provisions of Colorado Revised Statutes, Section 10-3-1116(1); (4) benefit claims under Section 502(a)(1)(B) of ERISA, pursuant to a qualified benefit plan; and (5) claims subject to Medicare Appeals procedures, Chapter 13 of the Medicare Managed Care Manual; your enrollment in this health benefit plan requires that all claims by you, your spouse, your heirs, or anyone acting on your or their behalf, against Kaiser Foundation Health Plan of Colorado, the Medical Group, the Permanente Federation, LLC, The Permanente Company, LLC, or any employees or shareholders of these entities, or Plan providers or affiliated physicians ("respondent(s)"), which arise from any alleged failure or violation, including but not limited to any duty relating to or incident to the *Evidence of Coverage* or the *Medical and Hospital Services Agreement*, must be submitted to binding arbitration before a single neutral arbiter. By enrolling in this health benefit plan, you have agreed to the use of binding arbitration in lieu of having any such dispute decided in a court of law before a jury.

## CONFIDENTIALITY PRACTICES

Your privacy is important to us. Our physicians and employees are required to keep your protected health information (PHI) confidential whether it is oral, written, or electronically transmitted. We have policies, procedures, and other safeguards in place to help protect your PHI from improper use and disclosure in all settings, as required by state and federal laws. We will release your PHI when you give us written authorization to do so, when the law requires us to disclose information, or under certain circumstances when the law permits us to use or disclose information without your permission. For example, in the course of providing treatment, our health care professionals may use and disclose your PHI in order to provide and coordinate your care, without obtaining your authorization.

Your PHI may also be used without your authorization to determine who is responsible to pay for medical care and for other health care operations purposes, such as quality assessment and improvement through the use of measurement data, customer service, and compliance programs. If you are enrolled in Kaiser Permanente through your employer or employee organization, we may be allowed under the law to disclose to them certain PHI, for example, regarding health plan eligibility or payment, or

regarding a workers' compensation claim. Sometimes we contract with others (business associates) to perform services for us, and in those cases, our business associates must agree to safeguard any PHI they receive.

Our privacy policies and procedures include information on your right to see, correct or update, and receive copies of your PHI. You may also ask us for a list of our disclosures of your PHI that we are required to track under the law.

For a more complete explanation of our privacy policies, please request a copy of our *Notice of Privacy Practices*, which is on our Web site, and in our medical offices, or by calling Member Services. If you have questions or concerns about our privacy practices, please contact Member Services at **303-338-3800**.

## NOT FEDERALLY QUALIFIED

Kaiser Permanente for Individuals and Families plans are not federally qualified health plans.

## SYNOPSIS ONLY

This is a synopsis of coverage, effective January 1, 2010, for eligible members that only briefly summarizes the major provisions of the *Agreement* between Kaiser Permanente and you. There are services or conditions that are excluded from coverage or that may only be covered under certain circumstances. Further information may be obtained by contacting Kaiser Permanente at **1-800-634-4579** or by referring to your *Membership Agreement*. In the event of ambiguity and/or conflict between this synopsis and/or the *Membership Agreement*, the *Membership Agreement* shall control.

## UTILIZATION MANAGEMENT PROCESSES

Kaiser Permanente's Utilization Management Program uses the advice and cooperation of practitioners and providers to help achieve quality care that is a good value for our members. Requests for authorization of care (preservice, concurrent, and retrospective) are reviewed for specific plan benefits, current eligibility, and medical appropriateness of hospital and outpatient services in order to determine a member's eligibility for coverage. In determining whether requests for authorization of care will be covered, nationally developed criteria, which have been reviewed and approved by Kaiser Permanente physicians, are applied along with medical expert opinion when necessary.

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

This guide is updated annually. Providers joining Kaiser Permanente after an update will be included in the next directory. Enrolling in Kaiser Permanente does not guarantee services by a particular provider listed in these pages. Please contact Member Services at **303-338-3800** for help selecting a primary care physician or to confirm the availability of providers listed here. View our current primary care physicians, specialists, and medical office locations on our Web site, **kp.org**.

## Arapahoe Medical Offices

5555 East Arapahoe Road, Centennial, CO 80122

**303-338-4545** Primary care

**303-850-2031** Pharmacy

### Clinical Pharmacy Services

Ann Nadrash, PharmD, BCPS  
Linda Weffald, PharD, BCPS, CDE

### Dermatology

David C Hahn, MD  
Walter J Lewis, MD  
Arun L Pathy, MD

### Dietary Counseling

Linda L Kwiatkowski, RD, CDE

### Family Medicine

Jonathan Albert, MD  
William L Gillaspie MD  
Brian D Williams, MD

### Internal Medicine

Lawrence S Allen, MD  
Kin Lun Chan, MD  
Anna F Cosyleon, MD  
Dennis P Genereux, MD  
Regina A Healy, MD  
Brian O'Sullivan, MD  
Melissa B Peters, MD

Innessa T Porter, MD  
Douglas Robertson, MD  
Thomas G Swanson, MD  
Tony J Toloczko, MD

### Obstetrics/Gynecology

Kimberley S Campbell, MD  
Cynthia J Celnik, MD  
Simon D Payne, MD  
Jerome H Ruderman, MD  
Lisa S Schwebach, MD

### Optometry

Kristine Ernewein, OD  
Scott Middlemist, OD  
Deborah L Murphy, OD

### Pediatrics

Amber E Bisgard, MD  
Philip S Clodfelter, MD  
Mark R Groshek, MD  
Christine Jelinek, MD  
Julie Marie Ley, MD  
Susan A Pharo, MD

### Specialty departments and other services

Contact Lens	303-850-2116
Dermatology	303-338-3376
Dietary Counseling	303-338-4545
Optical Dispensing	303-850-2015
Optometry	303-338-4545
Pharmacy	303-850-2031
Prescription Refills	303-340-5008
Mail-order Pharmacy	303-340-5077
Physical Therapy	303-850-5855
Radiology	303-338-3456
Weight Management	303-614-1070

### Physical Therapy

Allison Leisge, MSPT  
Shatu Misra, MSPT  
Wendy A Slattery, MSPT  
Andrew R Stephenitch, MPT  
Robert Webers, PT  
Kirby W Wilson, MSPT

## Aurora Centrepont Medical Offices

14701 East Exposition Avenue, Aurora, CO 80012

**303-338-4545** Primary care

**303-614-7300** Pharmacy

### Clinical Pharmacy Services

Kara Canty, PharmD, BCPS  
Erin Vogel, PharmD, BCPS

### Dietary Counseling

Rachel M Kester, RD, CDE

### Family Medicine

Glenn A Baker, MD  
Ozioma Thelma Evans-Nosu, MD  
Linda M Haney, MD  
Carl D Severin, MD  
Margret S Thompson, MD  
Albert C Ting, MD

### Internal Medicine

Karen Young Anderson, MD  
Brent M Arnold, MD  
Timothy J Clarkson, MD  
James C Geyman, MD  
Pierre T Onda, MD  
Angela T Tran, MD

### Obstetrics/Gynecology

Carol B Braun, MD

Dave W Kronbach, MD  
Danica J Larson, MD  
Peter M Schultze, MD

### Occupational Health

Paul D Fournier, MD

### Optometry

Joan Heller, OD  
Jason Juba, OD  
Diego Osuna, MD  
Stuart Stanton, OD  
Frank Ukockis, OD

### Pediatrics

Kimberly J Broxterman, MD  
Brian Jacquette, MD  
Deniz Y Kolozs, MD  
Michael K Ng, MD  
Alison R Yager, MD

### Physical Therapy

Loretta Barrett, MSPT  
Kimberly Douglas, PTA  
Laura Eral, MSPT

### Specialty departments and other services

Eye Care Department	303-614-7395
Dietary Counseling	303-338-4545
Contact Lens	303-614-7390
Optometry	303-338-4545
Pharmacy	303-614-7300
Prescription Refills	303-340-5032
Mail-order Pharmacy	303-340-5077
Physical Therapy	303-614-7878
Radiology	303-338-3456
Weight Management	303-614-1070

Ellen Guth, MPT  
Susan O'Connell, PT  
Andrew Snow, MSPT  
Brett Terrill, MSPT

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Baseline Medical Offices

580 Mohawk Drive, Boulder, CO 80303

303-338-4545 Primary care

303-554-5020 Pharmacy

### Clinical Pharmacy Services

Sarah Klockars, PharmD, BCPS  
Sarah Schwiesow, PharmD, BCPS

### Dietary Counseling

Sue Heikkinen, MS, RD, CDE

### Family Medicine

Micheline A Kuhr, MD  
Morris Moore, MD  
Kerry A Peel, MD

### Internal Medicine

Meighan W Elder, MD  
Eric J Harker, MD  
Mark S Hoskinson, MD  
David H Lookner, MD  
Kimberly M Mayhew, MD  
Robert D Pane, MD  
Michael J Perlman, MD  
Deborah L Skarda, MD

### Obstetrics/Gynecology

Jeffrey A Kerr-Layton, MD  
Thomas B Landry, MD  
Neva Phair, MD  
Audrey L Sheridan, MD

### Ophthalmology

John F Kloor, MD  
David Litoff, MD

### Optometry

Reid Oberer, OD  
Ron Pierce, OD

### Pediatrics

Lisa F Halperin, MD  
Robert J Miller, MD  
Wendy S Zerlin, MD

### Physical Therapy

Erica Burke, PT  
Jessica C Frankel, PT

### Specialty departments and other services

Dietary Counseling	303-338-4545
Ophthalmology	303-554-5060
Optical Dispensing	303-554-5080
Optometry	303-338-4545
Pharmacy	303-554-5020
Prescription Refills	303-340-5034
Mail-order Pharmacy	303-340-5077
Physical Therapy	303-554-5030
Radiology	303-338-3456
Weight Management	303-614-1070

Paul Mikolaj, DPT  
Chris D Ringdahl, PT  
Ellen B Tschida, PT

## East Denver Medical Offices

10400 East Alameda Avenue, Denver, CO 80247

303-338-4545 Primary care

303-360-1280 Pharmacy

### Allergy

Richard E Crockett, MD

### Clinical Pharmacy Services

Nathan Kanous, PharmD, BCPS  
Ryan Lowe, PharmD, BCPS-Asthma &  
Allergy  
Lori Miyashiro, PharmD, BCPS, CDE  
Cari Rice, PharmD, BCPS

### Dietary Counseling

Margaret M Green, RD, CDE

### Family Medicine

Faranghise S Bahhage, MD  
Ifeoma R Eleazu, MD  
T Kevin Hetherington, DO  
Jacqueline (Jill) Jamison, MD  
Jeffrey M Morse, MD

### Internal Medicine

Jennifer E Bajaj, MD  
David A Downs, MD  
Sonia S Durairaj, MD  
Glenn E Gade, MD  
Christopher M Hicks, MD

David C Hutchings, MD  
Helena Kane, MD  
Jill R Levy, MD  
Caryn E Orr, MD  
Terri L Richardson, MD  
John A Smits, MD  
Richard M Stiphout, MD

### Obstetrics/Gynecology

Mark F Bozeman, MD  
Gretchen L Bruno, MD  
Elizabeth M Buyers, MD  
Peter I Dwork, MD  
Toya A Ellis, MD  
Joyce E Gottesfeld, MD  
Mary E Moody, MD

### Ophthalmology

Matthew C Sanderson, MD  
Daniel H Sharp, MD

### Optometry

Morry Hsu, OD  
David Wiersma, OD

### Specialty departments and other services

Allergy	303-360-1278
Dietary Counseling	303-338-4545
Ophthalmology	303-360-1520
Optical Dispensing	303-360-1270
Optometry	303-338-4545
Pharmacy	303-360-1280
Prescription Refills	303-340-5006
Mail-order Pharmacy	303-340-5077
Radiology	303-338-3456
Weight Management	303-614-1070

### Pediatrics

Shira Belman, MD  
Jennifer Kempe-Biermann, MD  
Eileen E Moore, MD  
David S Showalter, MD  
Lisa D Whitesides, MD

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Englewood Medical Offices

2955 South Broadway, Englewood, CO 80113

**303-338-4545** Primary care

**303-788-1020** Pharmacy

### Clinical Pharmacy Services

Rebekah Hansmeier, PharmD, BCPS  
Jane Kerzee, PharmD, BCPS

### Dietary Counseling

Mary Englick, MS, RD, CDE

### Family Medicine

Sonya L Black, MD  
Felipe Hernandez, MD  
David R Kresin, MD  
Katrine Moreale, MD  
Timothy G Moser, MD

### Internal Medicine

Laura E Clark, MD  
Ronald R Harris, MD  
Lawrence W Roth, MD

### Specialty departments and other services

Dietary Counseling	303-338-4545
Pharmacy	303-788-1020
Prescription Refills	303-340-5014
Mail-order Pharmacy	303-340-5077
Regional Infusion Center	303-788-1118
Speech/Language- Pathology	303-788-1115
Radiology	303-338-3456
Weight Management	303-614-1070

## Franklin Medical Offices

2045 Franklin Street, Denver, CO 80205

**303-338-4545** Primary care

**303-764-4900** Pharmacy

### Audiology

Angela Allen, MS CCC-A, FAAA  
Sara Alley, MA CCC-A, FAAA  
Heather Davidson, AuD CCC-A, FAAA  
Linda Herzberger-Kimball, MS CCC-A  
Michael Rodel, MAT CCC-A, FAAA  
Elizabeth Vandyke, MS CCC-A, FAAA

### Cardiology

Joseph M Abruzzo, MD  
Adam S Betkowski, MD  
Stephen M Dodge, MD  
Daniel P Drake, MD  
Michael L Fisher, MD  
David N Flitter, MD  
Michael S Kim, MD  
Andrew J Kline, MD  
Christopher A Lang, MD  
Laurent Lewkowiez, MD  
Francis C Ngo, MD  
Robert Podolak, MD  
Steven H Resnick, MD  
John J Reusch, MD  
Andrew Jephtha Smith, MD  
Julie P Sutherland, MD

### Clinical Pharmacy Services

Adam Jackson, PharmD,  
BCPS-Infectious Disease  
Sam Johnson, PharmD,  
BCPS-Cardiology  
Susyn Plushner, PharmD,  
BCPS-Rheumatology

### Specialty departments and other services

Advanced Wound Care Center	303-764-4447	Nephrology	303-764-5360
Ambulatory Surgery	303-764-4444 or 303-764-4442	Neurology	303-861-3380
Audiology	303-861-3404	Neurosurgery	303-861-3303
Cardiovascular Services		Obstetrics/Gynecology	303-338-4545
Cardiac Rehab	303-861-3464	Oncology & Hematology	303-861-3302
Cardiology	303-861-3402 (Option 1)	Oncology Pharmacy	303-861-3300
Heart Failure	303-764-4794	Ophthalmology	303-861-3595
Holter Monitors	303-764-4723	Optical Dispensing	303-861-3430
Treadmill	303-861-3402	Optometry	303-338-4545
Central OR Scheduling	303-764-4400	Orthopedics	303-861-3408
Dermatology	303-338-3376	Otolaryngology (ENT)	303-861-3404
Dietary Counseling	303-338-4545	Pelvic Surgery	303-861-3495
Forms Processing	303-404-4600	PEEC (Pre-Operative Evaluation)	303-764-4425
Gastroenterology	303-861-3655	Perinatology	303-861-3570
General Surgery	303-861-3610	Pharmacy	303-764-4900
Genetic Counseling	303-764-4761	Prescription Refills	303-340-5002
Head & Neck Surgery	303-861-3404	Mail-order Pharmacy	303-340-5077
Hearing Aid Center	303-764-5285	Plastic Surgery	303-861-3368
Infectious Disease	303-861-3133	Radiology	303-338-3456
International Travel Clinic	303-283-2650 or 1-800-888-8540	Reproductive Endocrinology	303-861-3532
Medical Records/Release of Information	303-404-4700	Rheumatology	303-764-4480
		Urology	303-861-3406
		Weight Management	303-614-1070

(continues)



# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Franklin Medical Offices *(continued)*

2045 Franklin Street, Denver, CO 80205

303-338-4545 Primary care

303-764-4900 Pharmacy

### **Dermatology**

Joseph L Clayman, MD  
Kimberly A Lundstrom, MD  
Neil J Silverman, MD

### **Dietary Counseling**

Kristine Thornham, MS, RD, CDE

### **Gastroenterology**

Jasmin D Deneault, MD  
William H Farrar, MD  
Irfan Hussain, MD  
Louis A Morris, MD  
Mark E Powis, MD  
William G Rector Jr, MD  
John F Riopelle, DO  
Elizabeth Sofian-Conlan, MD  
Leslie S Stark, MD

### **General Surgery**

Leonardo Alfaro, MD  
Stephen B Creaghe, MD  
Nita G Ellis, MD  
Joyce L Haun, MD  
Vaughan F Kendall, MD  
Stefanie D Kolpak, MD  
Theodore Ron Lin, MD  
Karen M Lucas, MD  
Daniel P Maher, MD  
Stephen K Muckleroy, MD  
Steve P Panian, MD  
Wendy M Peterson, MD  
Charles F Pratt, MD  
Andrew J Schreffler, MD  
Margaret L Schrieber, MD  
Edward A Vaughn, MD  
Andrew S Weinfeld, MD

### **Hearing Aid Center**

Judy Drumright, MS CCC-A, FAAA  
Linda Herzberger-Kimball, MS CCC-A  
Sabina Mehta, MA CCC-A, FAAA  
Allison Wilson, MA CCC-A, FAAA

### **Infectious Diseases**

Timm A Edell, MD  
Janet S Kuhns, MD  
Miguel Mogyoros, MD

### **Neurosurgery**

John L Brugman, MD  
Edward V Colapinto, MD  
Todd Crawford, MD  
Alexander M Jones, MD

Saul S Schwarz, MD  
Mark C Watts, MD

### **Obstetrics/Gynecology**

Andrea M Jazbec, MD  
Ernest W Kandel, MD  
Wm Merrick Thomas, MD  
Lynette C Vialet, MD  
Kimberly D Warner, MD

### **Obstetrics/Gynecology-Oncology**

Shyamsunder Hatangadi, MD  
Ronald E Kimball, MD

### **Obstetrics/Gynecology- Reproductive Endocrinology**

Kenneth A Faber, MD  
Donald O Kreger, MD

### **Oncology & Hematology Clinic**

Catherine A Azar, MD  
Wilson C Bourg III, MD  
Catherine Fiola, PharmD  
Susan M Freeman, MD  
Anita Garcia, PharmD  
Brian E Koester, MD  
Karen E Kogel, MD  
Susan McInnes, MD  
Alexander R Menter, MD

### **Ophthalmology**

George A Chaitkin, MD  
Thomas A Gardner, MD  
Patricia Maurer, MD  
Bradley L Schuster, MD

### **Optometry**

Ed Dodge, OD  
Susan Fong, OD  
Norman Spivy, OD

### **Orthopedics**

Darin W Allred, MD  
David H Bristow, MD  
Edward F Bruck, MD  
Steve Conlan, MD  
John M Gargaro, MD  
David E Gladu, MD  
Richard A Hathaway, MD  
Paul V Hautamaa, MD  
David H Kim, MD  
Melissa Koenig, MD  
William J Mangione, MD  
Mark W Melberg, MD  
Joe K Ozaki, MD

Kerry G Perloff, MD  
Edward C Pino, MD  
Paul A Swenson, MD  
David F Wiener, MD

### **Otolaryngology (ENT)**

Peggy A Battalora, MD  
Jonathan E Blacker, MD  
Phyllis B Bouvier, MD  
Lorna S Brass, MD  
Robert J Fieman, MD  
Lawrence A Gordon, MD  
David K Nosan, MD

### **Perinatology**

Albert D Haverkamp, MD  
Robert S McDuffie, MD

### **Plastic Surgery**

Royal K Gerow, MD  
Mark W Kiehn, MD  
Brad C McDowell, MD  
Todd A Morton, MD

### **Retinal Surgery**

Wm Manning Mauldin, MD  
Charles A Wilson, MD

### **Rheumatology**

George F Breth, MD  
Robert C Hays, MD  
George Ho Jr, MD  
Philip H Huang, MD

### **Urology**

Michael E Chen, MD  
Justin Green, MD  
Robert S Lee, MD  
Stephen J Mohr, MD  
Eun Chil Park, MD  
Dustin R Ridout, MD  
Charles E Schaefer, MD  
Edward M Swartz, MD

### **Vascular Surgery**

Harris W Hollis, MD  
Christopher Johnnides, MD  
Stephen P Johnson, MD  
Michael J Podolak, MD  
Thomas F Rehring, MD  
Amit Sudan, MD

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Hidden Lake Medical Offices

7701 Sheridan Boulevard, Arvada, CO 80003

303-338-4545 Primary care

303-657-6700 Pharmacy

### Clinical Pharmacy Services

Amy Hughes, PharmD  
Erin Welch, PharmD, BCPSs

### Dietary Counseling

Melanie W Faight, RD, CDE

### Family Medicine

Paulanne Balch, MD  
Cara Christine Beatty, MD  
John R Burchinal, DO  
David J Davis, MD  
Paula S Kral, MD  
Angie N Martinez, MD  
Barbara A Morris, MD  
Janisse Rears, DO  
Kurt S Walters, MD

### Internal Medicine

Rebecca Levene Agnew, MD  
Terrence W Boland, MD  
Timothy E Holcomb, MD  
Wesley M Pearson, MD  
Mark W Ptaskiewicz, MD  
Sue E Williams, MD

### Pediatrics

Kathryn H Berger, MD  
M Ryn Wu Kreidl, MD

### Specialty departments and other services

Dietary Counseling	303-338-4545
Pharmacy	303-657-6700
Prescription Refills	303-340-5026
Mail-order Pharmacy	303-340-5077
Radiology	303-338-3456
Weight Management	303-614-1070

## Highlands Ranch Medical Offices

9285 Hepburn Street, Highlands Ranch, CO 80129

303-338-4545 Primary care

720-348-4600 Pharmacy

### Allergy

Peter J Cvietusa, MD

### Clinical Pharmacy Services

Rachel Digmann, PharmD, BCPS

### Dietary Counseling

Cassie Green, RD, CNSD, CDE

### Family Medicine

Sarah L Boyer, MD  
David A Craigie, MD  
Peter S Krogh, MD  
Jennifer E Kuhl, MD  
Deja S VanDeLoo, MD

### Internal Medicine

Brownie K Flesche, MD  
Jeffrey J Glaves, MD  
Ann M Wells, MD  
Camilla S Wright, MD

### Obstetrics/Gynecology

Steven P Gardner, MD  
Jodi L Gibson, MD  
Gerald E Nelson, MD

### Ophthalmology

Raymond J Nagashima, MD  
Lisa B Philpott, MD

### Optometry

Robert D Good, OD  
Milena Kysela, OD  
Carl Martinez, OD

### Pediatrics

Elizabeth DeSouza, MD  
Katherine S Richardson, MD  
Laurie D Schwanitz, MD

### Specialty departments and other services

Allergy	720-348-4100
Dietary Counseling	303-338-4545
Ophthalmology	720-348-4700
Pharmacy	720-348-4600
Prescription Refills	303-340-5044
Mail-order Pharmacy	303-340-5077
Radiology	303-338-3456
Weight Management	303-614-1070

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Ken Caryl Medical Offices

7600 Shaffer Parkway, Littleton, CO 80127

303-338-4545 Primary care

720-922-5050 Pharmacy

### Clinical Pharmacy Services

Stephanie Campbell, PharmD, BCPS

### Dietary Counseling

Linda J Daniels, RD, CDE

### Family Medicine

Amy K Chudik, DO  
David L Kauffman, MD  
John R Pearse, MD  
Petra C Soule, DO  
Donald G Ward, DO

### Internal Medicine

Fernando L Arroyo, MD  
Carleen C Chartier, MD

### Pediatrics

Manuel R Lorenzo, MD

### Specialty departments and other services

Dietary Counseling	303-338-4545
Pharmacy	720-922-5050
Prescription Refills	303-340-5045
Mail-order Pharmacy	303-340-5077
Radiology	303-338-3456
Weight Management	303-614-1070

## Lakewood Medical Offices

8383 West Alameda Avenue, Lakewood, CO 80226

303-338-4545 Primary care

303-239-7400 Pharmacy

### Allergy

Lynn Flach, PharmD, BCPS  
Beth Ann Kapadia, MD  
C. Ross Westley, MD

### Clinical Pharmacy Services

Lynn Flach, PharmD, BCPS  
Heather Hazeldine, PharmD, BCPS  
Kory Vanderschaaf, PharmD

### Dietary Counseling

Kristine Thornham, MS, RD, CDE

### Family Medicine

Janet Brown, MD  
Lucy M Budde, MD  
Tanya M Kern, MD  
David F Lieuwen, MD  
Stacey L Mason, MD  
Ronnie Thomas, MD

### Internal Medicine

Brandy M Allen, MD  
Jason V Barmore, MD  
Sarah Brodhead, MD  
Heather L Burton, MD  
Susan I Fixman, MD  
Mark A Huun, MD  
Jennifer B Jeans, MD  
Johan O Lane, MD  
Jonathan Jay Lee, MD  
Li-Fen Lee, MD  
Chia-Yen Lien, MD

Troy A Long, MD  
Atsuko J Ohtake, MD  
Heather A Shull, MD  
Jennifer Ann Ziouras, MD

### Obstetrics/Gynecology

Joyce D Davis, MD  
Kathleen A Doyle, MD  
David Martinez, MD  
James C Mosher, MD  
Thomas G Philipson, MD  
Mary Susan Schilling, MD  
Marta T Spain, MD

### Ophthalmology

Lee P Schelonka, MD  
Richard K Stiverson, MD

### Optometry

Michael Boendre, OD  
Edward Christie, OD  
Mark Kruchen, OD  
Lorna Ozawa, OD

### Pediatrics

Edward J Glasser, MD  
Mary E Maguire, MD  
Sandra H Stenmark, MD  
Pamela M Wendell, MD  
Karen B Wilson, MD  
Jennifer E Wood, MD  
Darren Scott Zimbelman, MD

### Specialty departments and other services

Allergy	303-239-7342
Centers for Complementary Medicine	303-239-7224
Contact Lens	303-239-7282
Dietary Counseling	303-338-4545
Ophthalmology	303-239-7474
Optical Dispensing	303-239-7290
Optometry	303-338-4545
Pharmacy	303-239-7400
Prescription Refills	303-340-5003
Mail-order Pharmacy	303-340-5077
Physical Therapy	303-239-7450
Radiology	303-338-3456
Weight Management	303-614-1070

### Physical Therapy

Catherine A Bilyeu, PT  
Charlotte O Brady, PT  
Traci Hurley, MSPT  
Steve Mullen, MSPT  
Brandi Palski, MSPT  
Louise E Rolofson, PT  
Susan E Ross, PT, AT/C, EdD

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Longmont Medical Offices

2345 Bent Way, Longmont, CO 80503

303-338-4545 Primary care

303-678-3300 Pharmacy

### Clinical Pharmacy Services

Jessica Milchak, PharmD, BCPS  
Robert Shanahan, PharmD, BCPS

### Dietary Counseling

Sue Heikkinen, MS, RD, CDE

### Family Medicine

Suzanne Parsons, MD  
Alison J Railsback, MD  
Suzanne S Stamm, MD  
Franklin T Thom, MD  
Pamela J Wannier, MD  
Paula J Zegob-Hartmann, MD

### Internal Medicine

Susan D Agrama, MD  
Kristen E Borbe, MD  
Trevor L Clayborn, MD  
Stuart G Geer, MD  
Stephen D Haley, MD  
Tracy Ellen Lippard, MD  
J Dugan Mahoney, MD  
Victoria L Moffatt, MD

### Pediatrics

Michael R Martinez, MD

### Specialty departments and other services

Dietary Counseling	303-338-4545
Pharmacy	303-678-3300
Prescription Refills	303-340-5019
Mail-order Pharmacy	303-340-5077
Radiology	303-338-3456
Weight Management	303-614-1070

## Parker Medical Offices

10168 Parkglenn Way, Parker, CO 80138

303-338-4545 Primary care

303-338-4503 Pharmacy

### Family Medicine

Brenda Hall, MD  
Julian Hsu, MD

### Internal Medicine

Brent Arnold, MD  
Luz Estefana Garcia, MD

### Pediatrics

Ulla Berringer, MD

### Specialty departments and other services

Dietary Counseling	303-338-4545
Health Education	303-614-1020
Pharmacy	303-338-4503
Prescription Refills	1-866-866-8450
Mail-order Pharmacy	303-340-5077

## Rock Creek Medical Offices

280 Exempla Circle, Lafayette, CO 80026

303-338-4545 Primary care

720-536-7888 Pharmacy

### Allergy

Jatinder S Aulakh, MD  
John M Williams, MD

### Audiology

Connie Berry, AuD CCC-A, FAAA  
Laura Kalstein, MS CCC-A, FAAA  
Sabina Mehta, MA CCC-A, FAAA  
Sally E Scholer, MS CCC-A, FAAA  
Melissa A Wood, MA CCC-A, FAAA

### Cardiology

Fred A Crawford III, MD  
Pamela J Decker, MD  
Anuradha Gudavalli, MD  
David R Kinnard, MD  
DeeAnn M Rivera, MD  
David J Zoloto, MD

### Clinical Pharmacy Services

Jared Freml, PharmD, BCPS-Oncology  
Sam Johnson, PharmD,  
BCPS-Cardiology  
Kerri Kraft, PharmD-Transplant  
Julie Sanchez, PharmD, BCPS

### Dermatology

Nicole M Annest, MD  
Anwell Chang, MD  
Timothy E Grayson, MD  
Tracy Haines, MD  
Peggy Liao, MD  
Nicole Neuschler, MD  
Lisa H Scatena, MD

### Dietary Counseling

Susan L Mindoro, MPH, RD, CDE

### Endocrinology

John J Orrego, MD

### Family Medicine

Robert B Beeson, MD  
Lea G Casperson, MD  
Eric T Christiansen, MD  
Michael D Feil, DO  
Edward P McAuliffe, MD  
Nicole A Nagel, MD  
Holly Runstadler, DO  
Christine Wildeman, MD

### Gastroenterology

William R Berry, MD  
Joseph E Cassara, MD  
Britt B Drake, MD  
Vaman Jakribettu, MD  
Tom G Matzakos, MD  
John Napierkowski, MD  
Barbara A Piasecki, MD

### General Surgery

Stephen E Brown, MD  
Bruce J Feigelson, MD

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Rock Creek Medical Offices *(continued)*

280 Exempla Circle, Lafayette, CO 80026

303-338-4545 Primary care

720-536-7888 Pharmacy

David D Gerding, MD  
Terry M Gilliland, MD  
Brian D Hess, MD  
Jeffery B Leftwich, MD  
Joseph Mehan, MD  
Brian P Murphy, MD  
Ricardo L Pena, MD  
Patrick P Ting, MD  
Dale E Varner, MD

### Hearing Aid Center

Judy Drumright, MS CCC-A, FAAA  
Jessica Schrock, AuD CCC-A, FAAA  
Karen Schroer, MA CCC-A, FAAA

### Hospital Services – Internal Medicine

Jennifer Bracher, MD

### Infectious Diseases

Amy N Duckro, DO  
Daniel M Mogyoros, MD

### Internal Medicine

Miles P Corkern, MD  
Michelle C Harris, MD  
Peter M Wolsko, MD

### Neurology

Paul A Foley, MD  
Bruce A Katuna, MD  
Lynsee A Hudson Lang, MD  
Karen E Rollins, MD

### Obstetrics/Gynecology

Scott M Barton, MD  
Melissa S Dunn, MD  
Kelly J Isbill, DO  
Lissa Pai McIntyre, MD  
Tamara Willis-Buckley, MD  
Diane M Winters, MD

### Oncology/Hematology

Kevin S Brown, MD  
Chamath R De Silva, MD  
Thomas P Hyde, MD  
Steven Kallick, MD

### Ophthalmology

Laryssa R Dragan, MD  
Nancy Flattem, MD  
Nancy M Leavenworth, MD

### Optometry

Alice Albert, OD  
Keith Bowen, OD  
Gregory Ellis, OD

### Specialty departments and other services

Advanced Wound Care Center	303-764-4447	Minor Procedures	720-536-7050
Allergy	720-536-7625	Neurology	720-536-7700
Anesthesia	303-861-3210	Obstetrics/Gynecology	303-338-4545
Audiology	720-536-6950	Oncology & Hematology	720-536-7200
Cardiovascular Services		Oncology Pharmacy	720-536-7222
Cardiac Rehab	303-861-3464	Ophthalmology	720-536-6650
Cardiology	303-861-3402	Optical Dispensing	720-536-6600
Heart Failure	720-536-6502	Orthopedics	303-861-3408
Holter Tester	720-536-6546	Otolaryngology (ENT)	720-536-6950
Central OR Scheduling	720-536-6250	Pathology	303-404-4029
Clinical Anesthesia Pain Service	303-861-3210	PEEC (Pre-Operative Evaluation)	720-536-6625
Contact Lens	720-536-6696	Pharmacy	720-536-7888
Dermatology	720-536-7750	Prescription Refills	303-340-5042
Dietary Counseling	303-338-4545	Mail-order Pharmacy	303-340-5077
Endocrinology (Franklin)	303-764-4665	Physical Therapy/ Occupational Therapy	720-536-7300
Gastroenterology	303-861-3655	Plastic Surgery	303-861-3368
General Surgery	720-536-6800	Pulmonology	303-861-3640
Head and Neck Surgery	720-536-6950	Radiology	303-338-3456
Health Education Resource Center	720-536-6425	Rheumatology	720-536-7350
Infectious Disease	303-861-3133	Urology	303-861-3406
		Weight Management	303-614-1070

Steve Thomas, OD  
Daniel Weber, OD

### Orthopedics

Peter P Chiang, MD  
Jeffrey M Hrutkay, MD  
Lance R Little, MD  
James F MacDougall, MD  
Michael E Margolis, MD  
Julie Anne Melchior, MD  
Ruth B Nauts, MD  
Tracy S Pursley, MD  
Leo Stelzer, MD  
Dimitrios J Zaronias, MD

### Otolaryngology (ENT)

Bradley A Andrews, MD  
Andy Tuan Anh Chung, MD  
Arthur J Dichard, MD  
Herman G Leong, MD  
Gary L McDonald, MD

### Pediatrics

Callie Gibbs Black, MD  
Stephanie Walker Grayson, MD

Tamara L Kusek, MD  
Albert Mehl, MD

### Physical Therapy

David Peterson, PT  
Robin S Pon, MSPT  
Shanti Rawlings, MSPT  
Laurie A Robin, MSPT  
Karl J Rodriguez, MSPT  
Deborah Stafford, MSPT  
Dona Tucker, OT

### Pulmonology

Tristan J Huie, MD  
William V Kinnard, MD  
Esther H Lum, MD  
Sarah J McKinley, MD  
Patricia Sato, MD

### Urology

John S Kang, MD  
Jonathan F Masoudi, MD

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Skyline Medical Offices

1375 East 20th Avenue, Denver, CO 80205

303-338-4545 Primary care

303-764-4669 Pharmacy

### Clinical Pharmacy Services

Bharati Bhardwaja, PharmD,  
BCPS-Nephrology  
Erin Herrera, PharmD, BCPS  
Shilpa Kinikar, PharmD,  
BCPS-Neurology  
Rachana Patel, PharmD, BCPS  
Melissa Rice, PharmD, BCPS  
Josh Schwiesow, PharmD,  
CCPS-Infectious Disease  
Monthuong Tran, PharmD, BCPS,  
CDE-Diabetes/Endocrinology

### Dietary Counseling

Cassie Greene, RD, CNSD,  
Nephrology  
Malena Perdomo, RD, CDE – Spanish  
speaking  
Kristine Thornham, MPH, RD, CDE

### Endocrinology

David J Depaolo, MD  
William J Georgitis, MD  
Katherine B Weber, MD

### Internal Medicine

Lillian M Coppola, MD  
Denise N Hunter, MD  
Cynthia Lou Justice, MD  
Alan S Lidsky, MD  
Satish A Madan, MD  
Patrick W Martin, DO  
Mark K Matthews, MD  
Jed E Olson, MD  
Sean P Riley, MD  
Andrew R Robinson, MD  
Juventino Saavedra, MD  
Kathryn E Schorr-Winchell, MD  
Daniel L Wright, MD  
Christine A Yang, MD  
Mary Jo Young, MD

### Neonatology

John R Britton, MD  
Maggie Chen, MD  
Mark P DeMarie, MD  
Michelle Feinberg, MD  
Elizabeth A Kincannon, MD  
Ellina Liptsen, MD  
Alfonso F Pantoja, MD  
Ann Ladd Ryan, MD

### Nephrology

Diane Marie Lanese, MD

### Neurology

William H Bentley, MD  
Deborah G Fisher, MD  
Karen A Hall, MD  
C Mindy Menaker-Wiener, MD  
Antoinette G Quigley, MD  
Robert W Schabbing, MD  
Jack Sylman, MD  
John B Woodward III, MD

### Occupational Health

James Bachman, MD

### Pediatrics

Sharisse M Arnold Rehring, MD  
Harvey P Bograd, MD  
Sorena M Kirkegaard, MD  
Stefan T Mokrohisky, MD

### Pediatrics-Neonatology

John R Britton, MD  
Maggie Chen, MD  
Mark P DeMarie, MD  
Michelle Feinberg, MD  
Elizabeth A Kincannon, MD  
Ellina Liptsen, MD  
Alfonso F Pantoja, MD  
Ann Ladd Ryan, MD

### Physical Medicine

David P Mulica, MD

### Physical Therapy

Scott Bilyeu, PT  
Holly Corwin, OT CHT  
Kelly Hansen, MSPT  
Gregory T Mills, MSPT  
Ginger L Pleuss, MSPT  
Leanne Weinschenker, MSPT  
Brian Williams, MPT

### Pulmonology

Christopher A Bates, MD  
Timothy R Collins, MD  
Michael L Darnell, MD  
Rebecca L Mortenson, MD  
Clara I Restrepo, MD  
Thomas J Stelzner, MD

### Specialty departments and other services

Clinical Anesthesia	303-861-3210
Dietary Counseling	303-338-4545
Endocrinology	303-764-4665
Neonatology Appointments	
	303-338-4545
Neurology	303-861-3380
Optometry	303-338-4545
Pharmacy	303-764-4669
Prescription Refills	303-340-5036
Mail-order Pharmacy	303-340-5077
Physical Therapy/Occupational Therapy	303-861-3105
Pulmonology/ Sleep Apnea	303-861-3640
Radiology	303-338-3456
Rehabilitation Medicine	
	303-861-3080
Weight Management	303-614-1070

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Smoky Hill Medical Offices

16290 East Quincy Avenue, Aurora, CO 80015

303-338-4545 Primary care

303-699-3820 Pharmacy

### Clinical Pharmacy Services

Ryan Schimmer, PharmD, BCPS

### Family Medicine

Sarita G Baker, MD  
Donna M Baldwin, DO  
Marcia Bourgeois, MD  
B Kevin Gordon, MD  
Julian T Hsu, MD  
Amy L Lemke, MD  
Pia B Lisle, MD  
Ian E Parsons, MD  
Craig W Robbins, MD

Mark D Rojec, MD  
Erin Woessner, DO  
Eric Youngblood, MD

### Internal Medicine

Linda S Cosgrove, MD  
Jennifer J Miller, MD

### Pediatrics

Jennifer C Arthur, MD  
Shellie K Sasscer, MD  
Sarah Beth Van Scoy, MD

### Specialty departments and other services

Centers for Complementary Medicine	303-699-3670
Dietary Counseling	303-338-4545
Pharmacy	303-699-3820
Prescription Refills	303-340-5012
Mail-order Pharmacy	303-326-6777
Radiology	303-338-3456
Weight Management	303-614-1070

## Southwest Medical Offices

5257 South Wadsworth Boulevard, Littleton, CO 80123

303-338-4545 Primary care

303-972-5010 Pharmacy

### Clinical Pharmacy Services

Amber Jerauld, PharmD

### Dietary Counseling

Linda Daniels, RD, CDE

### Family Medicine

Andrea M Fedele, MD  
Mark P Hayman, MD  
Karla C Pastrana, MD  
John H Yang, MD

### Internal Medicine

John M Fedack, MD  
Kathleen W Mayer, MD  
Jerald J Tantillo, MD  
Robert K Von Rueden, MD

### Obstetrics/Gynecology

Tracy L Anderson, MD  
Sally E Berga, MD  
Patrick McCrann, MD  
William A Shilling, MD

### Pediatrics

Pamela S Copp, MD  
Jeffrey Krwacek, MD  
Regina Opalach English, MD  
Jean F Stewart, MD

### Specialty departments and other services

Dietary Counseling	303-338-4545
Pharmacy	303-972-5010
Prescription Refills	303-340-5009
Mail-order Pharmacy	303-340-5077
Radiology	303-338-3456
Weight Management	303-614-1070

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Westminster Medical Offices

11245 Huron Street, Westminster, CO 80234

303-338-4545 Primary care

303-457-6200 Pharmacy

### Clinical Pharmacy Services

Jenel Deane, PharmD, BCPS  
Barbara Hoover, PharmD, BCPS  
Melissa Trapp, PharmD

### Dietary Counseling

Brenda Braslow, RD, CDE

### Family Medicine

Kevin A Briggs, MD  
Shane P Cass, MD  
Scott E Clemensen, MD  
Michael Gibson, MD  
Michelle L Glasgow, MD  
Dianne K Glenn, MD  
Sarah Younkin Goldberg, MD  
Ingrid M Justin, MD  
Kelly M O'Keefe, MD  
Karen S Ordelheide, MD  
Juanita R Redfield, MD

### Internal Medicine

Joshua Brauer, MD  
Dennis C Channel, MD  
Laurence J Connors, MD  
Rosemary Cushman, MD  
James T Hardee, MD  
Kelly C Jeong, MD  
Jerry E Markussen, MD  
Daniel S McAninch, MD  
Kathleen McGrady, MD  
Swarupa T Reddy, MD  
Teresa S Welsh, MD  
Soumya Yeturi, MD

### Obstetrics/Gynecology

Christina M Ballonoff, MD  
Amy H Le, MD  
Rory R Moore, MD  
Maurice A Mouchawar, MD  
Sonja F Nazareth, MD  
Charles D Parke, DO  
Antigone Parrish, MD  
Anita O Pierce, MD  
Maria A Salinas, MD  
Timothy L Sorrells, MD

### Ophthalmology

Mark L Peters, MD  
Thomas J Wescom, MD

### Optometry

Michele Jablonka, OD  
Jeff Peters, OD  
Tommy Wilson, OD

### Pediatrics

Keith F Battan, MD  
Bruce C Doenecke, MD  
Deanne M Fujii, MD  
Janet L Hartmann, MD  
Patrick A Kusek, MD  
Susan L Merrill, MD  
Lynn S Price, MD  
Cynthia Salazar, MD  
Jean S Stevenson, MD

### Specialty departments and other services

Centers for Complementary Medicine	303-457-6260
Dietary Counseling	303-338-4545
Disease Management– Asthma	303-457-6156
Diabetes	303-457-6606 or 303-457-6054
Ophthalmology	303-451-0200
Optical Dispensing	303-457-6570
Optometry	303-338-4545
Pharmacy	303-457-6200
Prescription Refills	1-866-668-0007
Mail-order Pharmacy	303-340-5077
Radiology	303-338-3456
Weight Management	303-614-1070



# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Wheat Ridge Medical Offices

4803 Ward Road, Wheat Ridge, CO 80033

303-338-4545 Primary care

303-421-5050 Pharmacy

### Clinical Pharmacy Services

Heather Hazeldine, PharmD, BCPS  
Karen McWay, PharmD, BCPS

### Dietary Counseling

Linda Daniels, RD, CDE

### Family Medicine

Dewey W Chin, MD  
Eric S Francis, MD  
Thomas P Merkert, MD  
Michele A Merritt, MD  
David C Miller, MD  
David Allen Richmond, MD  
Michele S Salli, MD

### Internal Medicine

Norse R Bear, MD  
Frank R Becky, MD  
Vivian I Chao, MD  
Y Ling Chu, MD  
Colin H Combs, MD  
Debra Anne Friesen, MD  
Jeffrey K Gori, MD  
Amanda B Grantham, MD

Michael K Miller, MD  
Kathleen A Moore, MD  
Dawn H Newell, MD

### Obstetrics/Gynecology

Camille S Calderwood, MD  
Peter Y Kim, MD  
Cristin S Panzarella, MD  
Sharman L Reed, MD

### Occupational Health

Paul Fournier, MD

### Ophthalmology

Judeth Jensen, MD

### Optometry

Donna Chen Ellinger, OD  
Norman Miller, OD  
Patricia Warner, OD

### Pediatrics

Katya Bograd, MD  
Lori M DiRusso, MD  
Steven K Gordon, MD  
Joyce Hahn Sedlacek, MD

### Specialty departments and other services

Dietary Counseling	303-338-4545
Hearing Aid Center	303-467-5186
Ophthalmology	303-421-5077
Optical Dispensing	303-421-5078
Optometry	303-338-4545
Pharmacy	303-421-5050
Prescription Refills	303-340-5010
Mail-order Pharmacy	303-340-5077
Physical Therapy	303-421-5044
Radiology	303-338-3456
Weight Management	303-614-1070

### Physical Therapy

Jennifer R Czarnecki, MSPT  
Kirsten S Fischer, PT  
Debbie K Maass, DPT  
William S Shirey, PT

## Behavioral Health Locations

### Executive Center Behavioral Health

4851 Independence Street, Wheat Ridge, CO 80033

303-467-5850 Appointments

Telephone hours:

8:30 a.m.–5 p.m., Monday–Friday

### Clinical Pharmacy Services

Daniel Dugan, PharmD, BCPP

### Mental Health

Patrick Brenner, LMFT  
Richard A Cohn, MD  
Peter Conrad, PhD  
Pamela Daniel, PhD  
Lisa Drey, CACIII, NP  
Joseph Esterl-Byrne, LPC

Becky B Estill, MD  
Linda Franklin, PhD  
Colleen Kibbie-Vest, LCSW  
Mary Kidd, LPC  
Julie Kobayashi, PhD  
Richard E Koken, MD  
Michelle Larson, LPC CACIII  
Cynthia Martinez, LPC  
Elizabeth Miller, PhD

Jeanne Pantone, PhD  
Shauna Reynolds, NP  
Mark W Rhine, MD  
Angela Romero, LCSW  
James Stevens, LCSW  
Jill Surber-Blackwell, LPC  
Carole Vogt, PsyD

### Exempla St. Joseph Hospital

1835 Franklin Street, Denver, CO 80218

Inpatient services only

### Clinical Pharmacy Services

Daniel Dugan, PharmD, BCPP

### Hospital Services – Mental Health

Jodi Cummins, PsyD  
Lori Greene, MD  
Gregory L Kirk, MD

John Romeo, LPC  
Annette Saunders, LCSW  
Mark Trubowitz, DO

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Exempla West Pines

3800 Lutheran Parkway, Wheat Ridge, CO 80033

**Inpatient services only**

### Clinical Pharmacy Services

Daniel Dugan, PharmD, BCPP

### Hospital Services – Mental Health

Jodi Cummins, PsyD

Lori Greene, MD

Gregory L Kirk, MD

John Romeo, LPC

Annette Saunders, LCSW

Mark Trubowitz, DO

## Hidden Lake Behavioral Health

7701 Sheridan Boulevard, Arvada, CO 80003

**303-650-3900** Appointments

Telephone hours:

**8:30 a.m.–5 p.m., Monday–Friday**

### Chemical Dependency

Carrie Herder, CACIII

Jim Milton, LCSW CACII

Thomas J. Moran, MD

Darla Oglevie, LAC/LPC

Debora Casuto, PsyD

Sallie Charles, NP

John A Cooper, MD

Jennifer Engle, PsyD

Molly Esterl, LCSW

John Fitzgibbons, PsyD

Nelson Goldhammer, PhD

Holly F Greenfield, MD

Kim Hagar, LPC

Terri Harlow, PhD

Michelle Larson, LPC CACIII

Maria Lasaga, PsyD

Veronica Laveta, LCSW

Cindy Lee-Lopez, PhD

Judy Libby-Lauwereins, LMFT

Marianne Mahoney, PhD

Sara May, PsyD

Carolee Nimmer, PhD

Stewart Nyholm, PhD

Laura Richardson, PhD

Nancy Rogers, LCSW

Michael S Seller, MD

David Soister, LPC

Martha Spano, PsyD (all locations)

Richard Summers, LCSW

Lisa Williams, LPC

### Clinical Pharmacy Services

Daniel Dugan, PharmD, BCPP

### Eating Disorders

Carrie Howard, LCSW

Carolee Nimmer, PhD

### Mental Health

Andreea I Arvinte, MD

Floyd Bubeck, LPC

## Highline Behavioral Health Center

10350 East Dakota Avenue, Denver, CO 80247

**303-367-2900** Mental Health

Telephone hours:

**8:30 a.m.–5 p.m., Monday–Friday**

### Chemical Dependency

Dorothy Broken-Leg, MA CACIII

Allan W Graham, MD

Douglas Hollinshed, BA CACIII

Consuelo Marroquin, CACIII

Thomas J Moran, MD

Kevin O'Brien, LCSW CAC

Terry K Schultz, MD

Amanda Bye, PsyD

Rick Carter, LPC

Catherine Corsello, MD

Kathleen Cramm, PsyD

R Edward Gibson, MD

Marge Golden, CNS

Steve Hochberg, LPC

Evelyn Lifsey, PhD

Debra Little, LCSW

Craig Mandel, LCSW

Laurie Mauro, LCSW

Abbie Miller, PsyD

Keith Miller, MD

Jean E Milofsky, MD

Rhonda Neiderhauser, PhD

Sue Nell, LCSW

Kimberly Nuffer, LCSW

Kirsty J O'Donovan, MD

Noah Reaven, PhD

Olyk Salas, MA, LPC

Jamie Spears, LCSW

Mark Spragins, LPC

Barry Sroloff, PsyD

Rachael St Claire, PsyD

Michael Tobin, PhD

Joanne Whalen, PsyD

Seth Wintroub, PsyD

### Clinical Pharmacy Services

Kerri Williams, PharmD, BCPP

### Eating Disorders

Pam Clark, LPC

Cindy Silvis, PsyD

### Mental Health

Danielle Abram, LCSW

Joe Barfoot, LCSW

### Regional Behavioral Health Administration

Kelli Kane, LCSW

Kathryn Bartsch, LCSW

# PRIMARY CARE PROVIDERS AND SPECIALISTS DIRECTORY

## Continuing Care

### Continuing Care

2550 South Parker Road, Aurora, CO 80014

**303-636-3300** Information

Telephone hours:

**8 a.m.–4:30 p.m., Monday–Friday**

#### **Clinical Pharmacy Services**

Jeanya Charles, PharmD, BCPS  
Jennifer Dugan, PharmD, BCPS

#### **Geriatrics, Skilled Nursing Facility, and Assisted Living Rounding Service**

Anna G Brou, MD  
Carrie Bamber, PA  
Martha Brown, NP

RaeAnn Frantz, MD  
Marie F Johnson, MD  
Jeremiah I Kaplan, MD  
Lisa Katchka, NP  
Ross S Kazer, MD  
Nancy J Kemp-Bell, MD  
Catherine Mascarenas-Dudley, NP  
Thomas T McCloskey, MD  
Nora E Morgenstern, MD  
Michael Mott, NP

Diane Price, NP  
Richard Ratigan, MD  
Leslie W Reitman, MD  
Nora Reznickova, MD  
Krista Rogman, NP  
Lorraine Slack, NP  
Barbara Solo, NP  
Aaron Snyder, MD  
Cheryl Stearns, MD

## INFORMATION FOR BUSINESS GROUPS OF ONE

If you are a Business Group of One, you have a choice about the type of plan in which you enroll. You may select a plan for individuals and families as described in this enrollment kit, or you may choose to enroll in a small group plan. In accordance with State of Colorado insurance regulations, the next pages contain the *Health Benefit Plan Description Form* for the Kaiser Permanente HMO Basic Limited Mandate Health Benefit Plan and the Kaiser Permanente HMO Standard Health Benefit Plan. For more information about small group coverage available for Business Groups of One, please call the Kaiser Permanente Sales and Marketing Department at **303-338-3700**.

If you choose to apply for a plan through Kaiser Permanente for Individuals and Families, please be sure to complete the *Business Group of One Determination Form* and the *Business Group of One Disclosure Form* as part of the application process.



**2010 Colorado Health Benefit Plan Description Form**  
**Kaiser Foundation Health Plan of Colorado**  
**Small Group HMO Basic Limited Mandate Health Benefit Plan for Colorado**  
**Denver/Boulder**

**PART A: TYPE OF COVERAGE**

<b>1. TYPE OF PLAN</b>	Health Maintenance Organization (HMO)
<b>2. OUT-OF-NETWORK CARE COVERED?<sup>1</sup></b>	Only for Emergency Care
<b>3. AREAS OF COLORADO WHERE PLAN IS AVAILABLE</b>	Plan is available <b>only</b> in the following areas: Adams, Arapahoe, Boulder, Broomfield, Clear Creek, Denver, Douglas, Elbert, Gilpin, Jefferson, Larimer, Park and Weld Counties as determined by zip code.

**PART B: SUMMARY OF BENEFITS**

**Important Note:** This form is not a contract, it is only a summary. The contents of this form are subject to the provisions of the policy, which contains all terms, covenants and conditions of coverage. Your plan may exclude coverage for certain treatments, diagnoses, or services not noted below. The benefits shown in this summary may only be available if required plan procedures are followed (e.g., plans may require prior authorization, a referral from your primary care physician, or use of specified providers or facilities). Consult the actual policy to determine the exact terms and conditions of coverage. Coinsurance and copayment options reflect the amount the covered person will pay.

	<b>IN-NETWORK ONLY</b> (Out-of-Network care is not covered except as noted)
<b>4. Deductible Type<sup>2</sup></b>	Not Applicable
<b>4a. ANNUAL DEDUCTIBLE<sup>2a</sup></b> a) Individual <sup>2b</sup> b) Family <sup>2c</sup>	a) No Deductibles b) No Deductibles
<b>5. OUT-OF-POCKET ANNUAL MAXIMUM<sup>3</sup></b> a) Individual b) Family c) Is deductible included in the out-of-pocket maximum?	a) \$8,000/Individual b) \$16,000/Family c) Not Applicable
<b>6. LIFETIME OR BENEFIT MAXIMUM PAID BY THE PLAN FOR ALL CARE</b>	No Lifetime Maximum
<b>7A. COVERED PROVIDERS</b>	Colorado Permanente Medical Group, P.C. See provider directory for a complete list of current providers.
<b>7B. With respect to network plans, are all the providers listed in 7A. accessible to me through my primary care physician?</b>	Yes
<b>8. MEDICAL OFFICE VISITS<sup>4</sup></b> a) Primary Care Providers b) Specialists	Applies toward Out-of-Pocket Maximum (OPM) a) \$40 Copayment each primary care office visit b) \$60 Copayment each specialist office visit Line 13 may apply for procedures performed during an office visit
<b>9. PREVENTIVE CARE</b> a) Children's services b) Adults' services	Applies toward OPM a) \$40 Copayment each visit b) \$40 Copayment each visit

**2010 Colorado Health Benefit Plan Description Form  
Kaiser Foundation Health Plan of Colorado**

**PART B: SUMMARY OF BENEFITS CONTINUED**

	<b>IN-NETWORK ONLY (Out-of-Network care is not covered except as noted)</b>
<b>10. MATERNITY</b> a) Prenatal care b) Delivery & inpatient well baby care <sup>5</sup>	Applies toward OPM a) Applicable Copayments for each type of service b) \$1,000 Copayment per day up to \$4,000 per admission
<b>11. PRESCRIPTION DRUGS<sup>6</sup></b> Level of coverage and restrictions on prescriptions.	Does not apply toward OPM \$150 annual Pharmacy Deductible per person \$20 Copayment – preferred generic, \$50 Copayment – preferred brand-name, or \$70 Copayment – non-preferred up to a 30-day supply. Mail-order drugs filled for up to a 90-day supply at two Copayments.  For drugs on our approved list, please contact your Clinical Pharmacy Call Center at <b>1-866-244-4119</b> or toll-free at <b>1-800-632-9700</b> or TTY <b>1-800-521-4874</b> .
<b>12. INPATIENT HOSPITAL</b>	Applies toward OPM \$1,000 Copayment per day up to \$4,000 per admission
<b>13. OUTPATIENT/AMBULATORY SURGERY</b>	Applies toward OPM \$500 Copayment each visit for outpatient surgery performed in any setting other than inpatient
<b>14. DIAGNOSTICS</b> a) Laboratory & X-ray b) MRI, nuclear medicine, and other high-tech services	Applies toward OPM a) <u>Diagnostic Lab and X-ray, including Therapeutic</u> – No Charge (100% covered) b) <u>MRI/CT/PET</u> - \$300 Copayment per procedure
<b>15. EMERGENCY CARE<sup>7, 8</sup></b>	Applies toward OPM \$250 Copayment each visit at a Kaiser Permanente designated Plan or non-Plan emergency room
<b>16. AMBULANCE</b>	Applies toward OPM 30% Copayment
<b>17. URGENT, NON-ROUTINE, AFTER-HOURS CARE</b>	Applies toward OPM \$100 Copayment each visit at a Kaiser Permanente designated Plan medical office, or when temporarily traveling outside the Service Area.
<b>18. BIOLOGICALLY-BASED MENTAL ILLNESS CARE<sup>9</sup></b>	Coverage is no less extensive than the coverage provided for any other physical illness
<b>19. OTHER MENTAL HEALTH CARE</b> a) Inpatient care b) Outpatient care	Not Covered
<b>20. ALCOHOL &amp; SUBSTANCE ABUSE</b>	Not Covered

**2010 Colorado Health Benefit Plan Description Form  
Kaiser Foundation Health Plan of Colorado**

**PART B: SUMMARY OF BENEFITS CONTINUED**

	<b>IN-NETWORK ONLY (Out-of-Network care is not covered except as noted)</b>
<b>21. PHYSICAL, OCCUPATIONAL, &amp; SPEECH THERAPY</b>	Applies toward OPM Limited to medically necessary therapeutic treatment <u>Inpatient</u> * – Hospital Copayment applies <u>Outpatient</u> * - \$40 Copayment each visit up to 25 visits per therapy (physical, speech and occupational therapy) per year *Therapy for congenital defects and birth abnormalities is covered for children from age 3 to age 6 for both acute and chronic conditions. This benefit is also available for eligible children under the age of 3 who are not participating in Early Intervention Services.
<b>22. DURABLE MEDICAL EQUIPMENT</b>	Applies toward OPM 30% Coinsurance, up to a maximum of \$1,500 paid by Plan per year, within the Service Area. The annual maximum benefit does not apply to prosthetic devices. See policy for types and circumstances of coverage.
<b>23. OXYGEN</b>	Included in DME benefit
<b>24. ORGAN TRANSPLANTS</b>	Applies toward OPM Applicable inpatient and outpatient charges apply - no waiting period. Covered transplants are limited to liver, heart, heart/lung, lung, cornea, kidney, kidney/pancreas, other single and multi-organ transplants, and bone marrow for Hodgkin's, aplastic anemia, leukemia, immunodeficiency disease, neuroblastoma, lymphoma, high risk stage II and III breast cancer, and Wiskott-Aldrich syndrome only. Peripheral stem cell support is a covered benefit for the same conditions as listed above for bone marrow transplants.
<b>25. HOME HEALTH CARE</b>	Applies toward OPM \$20 Copayment each visit for prescribed medically necessary part-time home health services. Not covered outside the Service Area. Limited to 60 visits per year.
<b>26. HOSPICE CARE</b>	Applies toward OPM a) <u>Inpatient</u> . \$50 Copayment per day b) <u>Outpatient</u> . \$20 Copayment per day
<b>27. SKILLED NURSING FACILITY CARE</b>	Applies toward OPM 30% Copayment per day up to 100 days per year for prescribed skilled nursing services at skilled nursing facilities approved by Kaiser Permanente
<b>28. DENTAL CARE</b>	Not covered except for accidental injuries. Additional coverage available as a separate dental care plan or as an optional benefit
<b>29. VISION CARE</b>	Excluded
<b>30. CHIROPRACTIC CARE</b>	Not Covered
<b>31. SIGNIFICANT ADDITIONAL COVERED SERVICES (list up to 5) (1) Spinal manipulation</b>	None

**2010 Colorado Health Benefit Plan Description Form  
Kaiser Foundation Health Plan of Colorado**

**PART C: LIMITATIONS AND EXCLUSIONS**

	<b>IN-NETWORK ONLY (Out-of-Network care is not covered except as noted)</b>
<b>32. PERIOD DURING WHICH PRE-EXISTING CONDITIONS ARE NOT COVERED<sup>10</sup></b>	Not Applicable. Plan does not impose limitation periods for pre-existing conditions.
<b>33. EXCLUSIONARY RIDERS Can an individual's specific, pre-existing condition be entirely excluded from the policy?</b>	No
<b>34. HOW DOES THE POLICY DEFINE A "PRE-EXISTING CONDITION"?</b>	Not Applicable. Plan does not exclude coverage for pre-existing conditions.
<b>35. WHAT TREATMENTS AND CONDITIONS ARE EXCLUDED UNDER THIS POLICY?</b>	Exclusions vary by policy. A list of exclusions is available immediately upon request from your carrier

**PART D: USING THE PLAN**

	<b>IN-NETWORK ONLY (Out-of-Network care is not covered except as noted)</b>
<b>36. Does the enrollee have to obtain a referral and/or prior authorization for specialty care in most or all cases?</b>	No
<b>37. Is prior authorization required for surgical procedures and hospital care (except in an emergency)?</b>	Yes
<b>38. If the provider charges more for a covered service than the plan normally pays, does the enrollee have to pay the difference?</b>	No
<b>39. What is the main customer service number?</b>	Member Services can be reached toll-free at <b>303-338-3800</b> or toll-free at <b>1-800-632-9700</b> or TTY <b>1-800-521-4874</b>
<b>40. Whom do I write/call if I have a complaint or want to file a grievance?<sup>11</sup></b>	Member Services 2500 South Havana Street Aurora, CO 80014 <b>303-338-3800</b> or toll-free <b>1-800-632-9700</b> or TTY <b>1-800-521-4874</b>
<b>41. Whom do I contact if I am not satisfied with the resolution of my complaint or grievance?</b>	Write to: Colorado Division of Insurance ICARE Section 1560 Broadway, Suite 850 Denver, CO 80202
<b>42. To assist in filing a grievance, indicate the form number of this policy; whether it is individual, small, or large group; and if it is a short-term policy.</b>	Policy form SG-BSEOC-DENCOS(01-10) and GA-Small-DENCOS(01-10) Small Group
<b>43. Does the plan have a binding arbitration clause?</b>	Yes

**2010 Colorado Health Benefit Plan Description Form**  
**Kaiser Foundation Health Plan of Colorado**

**Endnotes**

---

<sup>1</sup> “Network” refers to a specified group of physicians, hospital, medical clinics and other health care providers that your plan may require you to use in order to get any coverage at all under the plan, or that the plan may encourage you to use because it pays more of your bill if you use their network providers (i.e., go in-network) than if you don't (i.e., go out-of-network).

<sup>2</sup> “Deductible Type” indicates whether the deductible period is “Calendar Year” (January 1 through December 31) or “Benefit Year” (i.e., based on a benefit year beginning on the policy's anniversary date) or if the deductible is based on other requirements such as a “Per Accident or Injury” or “Per Confinement.”

<sup>2a</sup> “Deductible” means the amount you will have to pay for allowable covered expenses under a health plan during a specified time period (e.g., a calendar year or benefit year) before the carrier will cover those expenses. The specific expenses that are subject to deductible may vary by policy. Expenses that are subject to deductible should be noted in boxes 8 through 31.

<sup>2b</sup> “Individual” means the deductible amount you and each individual covered by a non-HSA qualified policy will have to pay for allowable covered expenses before the carrier will cover those expenses. “Single” means the deductible amount you will have to pay for allowable covered expenses under an HSA-qualified health plan when you are the only individual covered by the plan.

<sup>2c</sup> “Family” is the maximum deductible amount that is required to be met for all family members covered by a non-HSA qualified policy and it may be an aggregated amount (e.g., “\$3,000 per family”) or specified as the number of individual deductibles that must be met (e.g., “3 deductibles per family”). “Non-single” is the deductible amount that must be met by one or more family members covered by an HSA-qualified plan before any covered expenses are paid.

<sup>3</sup> “Out-of-pocket maximum” means the maximum amount you will have to pay for allowable covered expenses under a health plan, which may or may not include the deductibles or copayments, depending on the contract for that plan. The specific deductibles or copayments included in the out-of-pocket maximum may vary by policy. Expenses that are applied toward the out-of-pocket maximum should be noted in boxes 8 through 31.

<sup>4</sup> Medical office visits include physician, mid-level practitioner, and specialist visits, including outpatient psychotherapy visits for biologically-based mental illness.

<sup>5</sup> Well baby care includes an in-hospital newborn pediatric visit and newborn hearing screening. The hospital copayment applies to mother and well-baby together; there are not separate copayments.

<sup>6</sup> Prescription drugs otherwise excluded are not covered, regardless of whether preferred generic, preferred brand-name, or non-preferred.

<sup>7</sup> “Emergency care” means all services delivered in an emergency care facility, that are necessary to screen and stabilize a covered person. The plan must cover this care if a prudent lay person having average knowledge of health services and medicine and acting reasonably would have believed that an emergency medical condition or life or limb threatening emergency existed.

<sup>8</sup> Non-emergency care delivered in an emergency room is covered only if the covered person receiving such care was referred to the emergency room by his/her carrier or primary care physician. If emergency departments are used by the plan for non-emergency after-hours care, then urgent care copayments apply.

<sup>9</sup> “Biologically based mental illnesses” means schizophrenia, schizoaffective disorder, bipolar affective disorder, major depressive disorder, specific obsessive-compulsive disorder, and panic disorder.

<sup>10</sup> Waiver of pre-existing condition exclusions. State law requires carriers to waive some or all of the pre-existing condition exclusion period based on other coverage you recently may have had. Ask your carrier or plan sponsor (e.g., employer) for details.

<sup>11</sup> Grievances. Colorado law requires all plans to use consistent grievance procedures. Write the Colorado Division of Insurance for a copy of those procedures.



**Colorado Health Benefit Plan Description Form Addendum**  
**Kaiser Permanente Cancer Screening Guidelines**  
**(Charges may apply)**

*(Guidelines are for Basic and Standard, unless otherwise noted)*

**Breast Cancer:**

Screening	(frequency subject to Physician recommendation)	Kaiser Permanente Recommendation
Clinical breast exam	Beginning at age 40, 1 clinical breast exam every 1 to 2 years (annually, if high risk).	As jointly determined by physician and patient
Mammogram	Beginning at age 40, 1 screening mammogram every 1 to 2 years (annually, if high risk).	At least every 2 years, particularly after age 50
Genetic testing for inherited susceptibility for breast cancer	Available upon referral of a Kaiser Permanente provider	For those women who meet the following criteria: Patients with a 10% or greater risk of inherited gene defect

**Colon and Rectal Cancer:**

Screening	(frequency subject to Physician recommendation)	Kaiser Permanente Recommendation
Fecal occult blood test (FOBT)	Adults ages 50-75: Colorectal screening in accordance with the "A" or "B" recommendations of the U.S. Preventive Services Task Force	Annually beginning at age 50 through age 75 (if not screened with colonoscopy)
Flexible sigmoidoscopy	Adults ages 50-75: Colorectal screening in accordance with the "A" or "B" recommendations of the U.S. Preventive Services Task Force	Not a routine recommendation
Barium enema	On an individual basis	Not a routine recommendation
Colonoscopy	Adults ages 50-75: Colorectal screening in accordance with the "A" or "B" recommendations of the U.S. Preventive Services Task Force	Every 10 years, beginning at age 50 through age 75. High risk patients may start at an earlier age and may be screened more frequently.

**Cervical Cancer:**

Screening	(frequency subject to Physician recommendation)	Kaiser Permanente Recommendation
Pap test	Beginning at age 13, not to exceed 1 per year	Every 2 years, starting 3 years after becoming sexually active or at age 21; more frequently if high risk. For ages 65 and older, not recommended if long history of normal Pap smears and not high risk.

**Prostate Cancer:**

Screening	(frequency subject to Physician recommendation)	Kaiser Permanente Recommendation
Digital rectal exam	Basic: Not Covered* Standard: As specified in State law	As jointly determined by physician and patient.
Serum prostatic specific antigen (PSA)	Basic: Not Covered* Standard: As specified in State law	As jointly determined by physician and patient. Not recommended for those over 75.

\*Covered at Preventive Care Copayment

**2010 Colorado Health Benefit Plan Description Form**  
**Kaiser Foundation Health Plan of Colorado**  
**Small Group HMO Standard Health Benefit Plan for Colorado**  
**Denver/Boulder**

**PART A: TYPE OF COVERAGE**

<b>1. TYPE OF PLAN</b>	Health Maintenance Organization (HMO)
<b>2. OUT-OF-NETWORK CARE COVERED?<sup>1</sup></b>	Only for Emergency Care
<b>3. AREAS OF COLORADO WHERE PLAN IS AVAILABLE</b>	Plan is available <b>only</b> in the following areas: Adams, Arapahoe, Boulder, Broomfield, Clear Creek, Denver, Douglas, Elbert, Gilpin, Jefferson, Larimer, Park and Weld Counties as determined by zip code.

**PART B: SUMMARY OF BENEFITS**

**Important Note:** This form is not a contract, it is only a summary. The contents of this form are subject to the provisions of the policy, which contains all terms, covenants and conditions of coverage. Your plan may exclude coverage for certain treatments, diagnoses, or services not noted below. The benefits shown in this summary may only be available if required plan procedures are followed (e.g., plans may require prior authorization, a referral from your primary care physician, or use of specified providers or facilities). Consult the actual policy to determine the exact terms and conditions of coverage. Coinsurance and copayment options reflect the amount the covered person will pay.

	<b>IN-NETWORK ONLY</b> <b>(Out-of-Network care is not covered except as noted)</b>
<b>4. Deductible Type<sup>2</sup></b>	Not Applicable
<b>4a. ANNUAL DEDUCTIBLE<sup>2a</sup></b> a) Individual <sup>2b</sup> b) Family <sup>2c</sup>	a) No Deductibles b) No Deductibles
<b>5. OUT-OF-POCKET ANNUAL MAXIMUM<sup>3</sup></b> a) Individual b) Family c) Is deductible included in the out-of-pocket maximum?	a) \$4,000/Individual b) \$8,000/Family c) Not Applicable
<b>6. LIFETIME OR BENEFIT MAXIMUM PAID BY THE PLAN FOR ALL CARE</b>	No Lifetime Maximum
<b>7A. COVERED PROVIDERS</b>	Colorado Permanente Medical Group, P.C. See provider directory for a complete list of current providers.
<b>7B. With respect to network plans, are all the providers listed in 7A. accessible to me through my primary care physician?</b>	Yes
<b>8. MEDICAL OFFICE VISITS<sup>4</sup></b> a) Primary Care Providers b) Specialists	Applies toward Out-of-Pocket Maximum (OPM)  a) \$30 Copayment each primary care office visit b) \$50 Copayment each specialist office visit  Line 13 may apply for procedures performed during an office visit
<b>9. PREVENTIVE CARE</b> a) Children's services b) Adults' services	Applies toward OPM  a) \$30 Copayment each visit b) \$30 Copayment each visit  The Copayment or Coinsurance for certain preventive care services may differ from the Copayment or Coinsurance listed above.

**2010 Colorado Health Benefit Plan Description Form  
Kaiser Foundation Health Plan of Colorado**

**PART B: SUMMARY OF BENEFITS CONTINUED**

	<b>IN-NETWORK ONLY (Out-of-Network care is not covered except as noted)</b>
<b>10. MATERNITY</b> a) Prenatal care b) Delivery & inpatient well baby care <sup>5</sup>	Applies toward OPM  a) Applicable Copayments for each type of service b) \$500 Copayment per day up to \$2,000 per admission
<b>11. PRESCRIPTION DRUGS<sup>6</sup></b> Level of coverage and restrictions on prescriptions.	Does not apply toward OPM  \$10 Copayment – preferred generic, \$40 Copayment – preferred brand-name, or \$60 Copayment – non-preferred up to a 30-day supply. Mail order drugs filled for up to a 90-day supply at two Copayments.  For drugs on our approved list, please contact your Clinical Pharmacy Call Center at <b>1-866-244-4119</b> or toll-free at <b>1-800-632-9700</b> or TTY <b>1-800-521-4874</b> .
<b>12. INPATIENT HOSPITAL</b>	Applies toward OPM  \$500 Copayment per day up to \$2,000 per admission
<b>13. OUTPATIENT/AMBULATORY SURGERY</b>	Applies toward OPM  \$250 Copayment each visit for outpatient surgery performed in any setting other than inpatient
<b>14. DIAGNOSTICS</b> a) Laboratory & X-ray b) MRI, nuclear medicine, and other high-tech services	Applies toward OPM  a) <u>Diagnostic Lab and X-ray, including Therapeutic</u> – No Charge (100% covered) for physician ordered services b) <u>MRI/CT/PET</u> - \$150 Copayment per procedure
<b>15. EMERGENCY CARE<sup>7, 8</sup></b>	Applies toward OPM  \$150 Copayment each visit at a Kaiser Permanente designated Plan or non-Plan emergency room
<b>16. AMBULANCE</b>	Applies toward OPM  20% Copayment
<b>17. URGENT, NON-ROUTINE, AFTER-HOURS CARE</b>	Applies toward OPM  \$75 Copayment each visit at a Kaiser Permanente designated Plan medical office, or when temporarily traveling outside the Service Area.
<b>18. BIOLOGICALLY-BASED MENTAL ILLNESS CARE<sup>9</sup></b>	Coverage is no less extensive than the coverage provided for any other physical illness
<b>19. OTHER MENTAL HEALTH CARE</b> a) Inpatient care b) Outpatient care	Applies toward OPM  a) <u>Inpatient</u> - 50% Coinsurance of non-member rates. Limited to 45 inpatient or 90 partial days per year b) <u>Outpatient</u> - 50% Coinsurance of non-member rates for the greater of 20 visits or \$1,500 maximum per year

**2010 Colorado Health Benefit Plan Description Form  
Kaiser Foundation Health Plan of Colorado**

**PART B: SUMMARY OF BENEFITS CONTINUED**

	<b>IN-NETWORK ONLY (Out-of-Network care is not covered except as noted)</b>
<b>20. ALCOHOL &amp; SUBSTANCE ABUSE</b>	Applies toward OPM  50% Coinsurance for diagnosis, medical treatment and referral services only
<b>21. PHYSICAL, OCCUPATIONAL, &amp; SPEECH THERAPY</b>	Applies toward OPM  Limited to medically necessary therapeutic treatment <u>Inpatient*</u> – Hospital Copayment applies <u>Outpatient*</u> - \$30 Copayment each visit up to 25 visits per therapy (physical, speech and occupational therapy ) per year  *Therapy for congenital defects and birth abnormalities is covered for children from age 3 to age 6 for both acute and chronic conditions. This benefit is also available for eligible children under the age of 3 who are not participating in Early Intervention Services.
<b>22. DURABLE MEDICAL EQUIPMENT</b>	Applies toward OPM  20% Coinsurance, up to a maximum of \$2,500 paid by Plan per year, within the Service Area. The annual maximum benefit does not apply to prosthetic devices. See policy for types and circumstances of coverage.
<b>23. OXYGEN</b>	Included in DME benefit
<b>24. ORGAN TRANSPLANTS</b>	Applies toward OPM  Applicable inpatient and outpatient charges apply - no waiting period. Covered transplants are limited to liver, heart, heart/lung, lung, cornea, kidney, kidney/pancreas, other single and multi-organ transplants, and bone marrow for Hodgkin's, aplastic anemia, leukemia, immunodeficiency disease, neuroblastoma, lymphoma, high risk stage II and III breast cancer, and Wiskott-Aldrich syndrome only. Peripheral stem cell support is a covered benefit for the same conditions as listed above for bone marrow transplants.
<b>25. HOME HEALTH CARE</b>	No Charge (100% covered) for prescribed medically necessary part-time home health services. Not covered outside the Service Area.
<b>26. HOSPICE CARE</b>	No Charge (100% covered)
<b>27. SKILLED NURSING FACILITY CARE</b>	Applies toward OPM  20% Copayment per day up to 100 days per year for prescribed skilled nursing services at skilled nursing facilities approved by Kaiser Permanente
<b>28. DENTAL CARE</b>	Not covered except for accidental injuries and hospitalization and anesthesia for dependent children as required by law. Additional coverage available as a separate dental care plan or as an optional benefit
<b>29. VISION CARE</b>	Excluded
<b>30. CHIROPRACTIC CARE</b>	Not Covered [See line 31]
<b>31. SIGNIFICANT ADDITIONAL COVERED SERVICES (list up to 5) (1) Spinal manipulation</b>	Applies toward OPM  \$30 Copayment each visit

**2010 Colorado Health Benefit Plan Description Form  
Kaiser Foundation Health Plan of Colorado**

**PART C: LIMITATIONS AND EXCLUSIONS**

	<b>IN-NETWORK ONLY (Out-of-Network care is not covered except as noted)</b>
<b>32. PERIOD DURING WHICH PRE-EXISTING CONDITIONS ARE NOT COVERED<sup>10</sup></b>	Not Applicable. Plan does not impose limitation periods for pre-existing conditions.
<b>33. EXCLUSIONARY RIDERS</b> Can an individual's specific, pre-existing condition be entirely excluded from the policy?	No
<b>34. HOW DOES THE POLICY DEFINE A "PRE-EXISTING CONDITION"?</b>	Not Applicable. Plan does not exclude coverage for pre-existing conditions.
<b>35. WHAT TREATMENTS AND CONDITIONS ARE EXCLUDED UNDER THIS POLICY?</b>	Exclusions vary by policy. A list of exclusions is available immediately upon request from your carrier

**PART D: USING THE PLAN**

	<b>IN-NETWORK ONLY (Out-of-Network care is not covered except as noted)</b>
<b>36. Does the enrollee have to obtain a referral and/or prior authorization for specialty care in most or all cases?</b>	No
<b>37. Is prior authorization required for surgical procedures and hospital care (except in an emergency)?</b>	Yes
<b>38. If the provider charges more for a covered service than the plan normally pays, does the enrollee have to pay the difference?</b>	No
<b>39. What is the main customer service number?</b>	Member Services can be reached toll-free at <b>303-338-3800</b> or toll-free at <b>1-800-632-9700</b> or TTY <b>1-800-521-4874</b>
<b>40. Whom do I write/call if I have a complaint or want to file a grievance? <sup>11</sup></b>	Member Services 2500 South Havana Street Aurora, CO 80014 <b>303-338-3800</b> or toll-free <b>1-800-632-9700</b> or TTY <b>1-800-521-4874</b>
<b>41. Whom do I contact if I am not satisfied with the resolution of my complaint or grievance?</b>	Write to: Colorado Division of Insurance ICARE Section 1560 Broadway, Suite 850 Denver, CO 80202
<b>42. To assist in filing a grievance, indicate the form number of this policy; whether it is individual, small, or large group; and if it is a short-term policy.</b>	Policy form SG-STEOC-DENCOS(01-10) and GA-Small-DENCOS(01-10) Small Group
<b>43. Does the plan have a binding arbitration clause?</b>	Yes

**2010 Colorado Health Benefit Plan Description Form  
Kaiser Foundation Health Plan of Colorado**

**Endnotes**

---

<sup>1</sup> “Network” refers to a specified group of physicians, hospital, medical clinics and other health care providers that your plan may require you to use in order to get any coverage at all under the plan, or that the plan may encourage you to use because it pays more of your bill if you use their network providers (i.e., go in-network) than if you don't (i.e., go out-of-network).

<sup>2</sup> “Deductible Type” indicates whether the deductible period is “Calendar Year” (January 1 through December 31) or “Benefit Year” (i.e., based on a benefit year beginning on the policy’s anniversary date) or if the deductible is based on other requirements such as a “Per Accident or Injury” or “Per Confinement.”

<sup>2a</sup> “Deductible” means the amount you will have to pay for allowable covered expenses under a health plan during a specified time period (e.g., a calendar year or benefit year) before the carrier will cover those expenses. The specific expenses that are subject to deductible may vary by policy. Expenses that are subject to deductible should be noted in boxes 8 through 31.

<sup>2b</sup> “Individual” means the deductible amount you and each individual covered by a non-HSA qualified policy will have to pay for allowable covered expenses before the carrier will cover those expenses. “Single” means the deductible amount you will have to pay for allowable covered expenses under an HSA-qualified health plan when you are the only individual covered by the plan.

<sup>2c</sup> “Family” is the maximum deductible amount that is required to be met for all family members covered by a non-HSA qualified policy and it may be an aggregated amount (e.g., “\$3,000 per family”) or specified as the number of individual deductibles that must be met (e.g., “3 deductibles per family”). “Non-single” is the deductible amount that must be met by one or more family members covered by an HSA-qualified plan before any covered expenses are paid.

<sup>3</sup> “Out-of-pocket maximum” means the maximum amount you will have to pay for allowable covered expenses under a health plan, which may or may not include the deductibles or copayments, depending on the contract for that plan. The specific deductibles or copayments included in the out-of-pocket maximum may vary by policy. Expenses that are applied toward the out-of-pocket maximum should be noted in boxes 8 through 31.

<sup>4</sup> Medical office visits include physician, mid-level practitioner, and specialist visits, including outpatient psychotherapy visits for biologically-based mental illness.

<sup>5</sup> Well baby care includes an in-hospital newborn pediatric visit and newborn hearing screening. The hospital copayment applies to mother and well-baby together; there are not separate copayments.

<sup>6</sup> Prescription drugs otherwise excluded are not covered, regardless of whether preferred generic, preferred brand-name, or non-preferred.

<sup>7</sup> “Emergency care” means all services delivered in an emergency care facility, that are necessary to screen and stabilize a covered person. The plan must cover this care if a prudent lay person having average knowledge of health services and medicine and acting reasonably would have believed that an emergency medical condition or life or limb threatening emergency existed.

<sup>8</sup> Non-emergency care delivered in an emergency room is covered only if the covered person receiving such care was referred to the emergency room by his/her carrier or primary care physician. If emergency departments are used by the plan for non-emergency after-hours care, then urgent care copayments apply.

<sup>9</sup> “Biologically based mental illnesses” means schizophrenia, schizoaffective disorder, bipolar affective disorder, major depressive disorder, specific obsessive-compulsive disorder, and panic disorder.

<sup>10</sup> Waiver of pre-existing condition exclusions. State law requires carriers to waive some or all of the pre-existing condition exclusion period based on other coverage you recently may have had. Ask your carrier or plan sponsor (e.g., employer) for details.

<sup>11</sup> Grievances. Colorado law requires all plans to use consistent grievance procedures. Write the Colorado Division of Insurance for a copy of those procedures.

**Colorado Health Benefit Plan Description Form Addendum  
Kaiser Permanente Cancer Screening Guidelines  
(Charges may apply)**

*(Guidelines are for Basic and Standard, unless otherwise noted)*

**Breast Cancer:**

Screening	(frequency subject to Physician recommendation)	Kaiser Permanente Recommendation
Clinical breast exam	Beginning at age 40, 1 clinical breast exam every 1 to 2 years (annually, if high risk).	As jointly determined by physician and patient
Mammogram	Beginning at age 40, 1 screening mammogram every 1 to 2 years (annually, if high risk).	At least every 2 years, particularly after age 50
Genetic testing for inherited susceptibility for breast cancer	Available upon referral of a Kaiser Permanente provider	For those women who meet the following criteria: Patients with a 10% or greater risk of inherited gene defect

**Colon and Rectal Cancer:**

Screening	(frequency subject to Physician recommendation)	Kaiser Permanente Recommendation
Fecal occult blood test (FOBT)	Adults ages 50-75: Colorectal screening in accordance with the "A" or "B" recommendations of the U.S. Preventive Services Task Force	Annually beginning at age 50 through age 75 (if not screened with colonoscopy)
Flexible sigmoidoscopy	Adults ages 50-75: Colorectal screening in accordance with the "A" or "B" recommendations of the U.S. Preventive Services Task Force	Not a routine recommendation
Barium enema	On an individual basis	Not a routine recommendation
Colonoscopy	Adults ages 50-75: Colorectal screening in accordance with the "A" or "B" recommendations of the U.S. Preventive Services Task Force	Every 10 years, beginning at age 50 through age 75. High risk patients may start at an earlier age and may be screened more frequently.

**Cervical Cancer:**

Screening	(frequency subject to Physician recommendation)	Kaiser Permanente Recommendation
Pap test	Beginning at age 13, not to exceed 1 per year	Every 2 years, starting 3 years after becoming sexually active or at age 21; more frequently if high risk. For ages 65 and older, not recommended if long history of normal Pap smears and not high risk.

**Prostate Cancer:**

Screening	(frequency subject to Physician recommendation)	Kaiser Permanente Recommendation
Digital rectal exam	Basic: Not Covered* Standard: As specified in State law	As jointly determined by physician and patient.
Serum prostatic specific antigen (PSA)	Basic: Not Covered* Standard: As specified in State law	As jointly determined by physician and patient. Not recommended for those over 75.

\*Covered at Preventive Care Copayment

CHOOSE  
GOOD  
HEALTH

kp.org