



# 2018–2019 Sharp Direct Advantage<sup>SM</sup> Medicare Plan Enrollment Guide



*We believe health care should be personal.*



Exclusively for City of San Diego Medicare-Eligible Retirees and their Dependents



# The basics of Medicare

Have questions? We have answers! It's common for people to be confused about exactly what Medicare is and how they can benefit from it. Simply put, Medicare is a federal health insurance program available to you once you turn 65 or if you have certain disabilities. There are four parts to Medicare coverage.

## Part A – Hospital Insurance

Once you turn 65, or otherwise become eligible for Medicare, you can automatically receive Medicare Part A hospital insurance. For most people, Part A has no cost.

## Part B – Medical Insurance

Part B covers certain doctor services, other outpatient care, medical supplies and preventive services. Part B has a monthly premium. Together, Part A and Part B are known as Original Medicare.

## Part C – Medicare Advantage

Medicare Advantage plans, also known as Part C plans, are offered through private insurers and combine Part A, Part B and often Part D into one plan with more benefits than Original Medicare. Sharp Direct Advantage is a Medicare Advantage/Part C plan.

## Part D – Prescription Drug Coverage

Prescription drug coverage is Medicare Part D. Not all health plans include Part D, however, Sharp Direct Advantage includes prescription drug coverage as part of its Medicare Advantage plan.



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# The Sharp Direct Advantage difference

As part of Sharp HealthCare, we know you deserve more. That's why our plan is designed specifically with San Diegans in mind. We're proud to give our members direct access to The Sharp Experience, from card to care.



## Affordable

You could save money and get more with Sharp Direct Advantage



## Local

Medicare insurance by San Diegans, for San Diegans



## Simple

Easy to enroll and receive personalized support



# You could save money and get more

You've earned your Medicare benefits. Now it's time to enjoy them. Sharp Direct Advantage members have access to a comprehensive wellness program, fitness facilities, emergency care coverage worldwide and so much more.



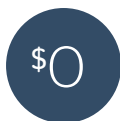
\$194 monthly premium\*\*



Free access to Silver&Fit gyms



\$10-20 generic prescriptions



A comprehensive wellness program with **free** health coaching



\$10 copays for Primary Care Physician visits



Vision care and hearing aid coverage



*We believe San Diegans deserve the best.*

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## Get to know us

Visit [sharphealthplan.com/cityretirees](https://sharphealthplan.com/cityretirees) for more information about our Sharp Direct Advantage plans or call 1-855-562-8853 (TTY 711).

\*\* You must continue to pay your Medicare Part B premium.

This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums and/or copayments/coinsurance may change each year.

# Elite-rated\* Medical Groups

With the Sharp Direct Advantage Network, you'll find a family of providers close to where you live and spend time. Our network includes Sharp Rees-Stealy Medical Group and Sharp Community Medical Group, both awarded "Elite" status\*, the highest possible rating for Standards of Excellence, in addition to our regional partner, Greater Tri Cities Medical Group. Providers are located throughout San Diego County and Oceanside, so no matter where you are, from Chula Vista to El Cajon to Del Mar, we've got you covered.



## A network of care

With Sharp Direct Advantage, you'll have access to doctors, hospitals and medical groups across San Diego County.

Plus, through our unique integration with Sharp HealthCare, San Diego's health care leader, we offer a direct connection to The Sharp Experience.

### Sharp Direct Advantage Network\*\*

- 1,200+ Doctors
- 7 Hospitals
- 48 Urgent Care Locations
- 440+ Pharmacies
- 400+ Vision Providers

Visit our Provider Directory online for the most current listings.

# Looking for a doctor?

Sharp Direct Advantage offers several ways to look for a Primary Care Physician or specialist. Access the Sharp Direct Advantage Provider Directory via our online search tool or as a downloadable file. If you want a Provider Directory mailed to you, or if you need help finding a network provider, please call 1-855-562-8853 (TTY 711) Monday through Friday, 8 a.m. – 6 p.m.



## Download the Provider Directory

To easily search our Provider Directory\*\* on our website, visit [sharpmedicareadvantage.com/findadoctor](https://www.sharpmedicareadvantage.com/findadoctor). Scroll down below the search tool and click “Access Medicare provider directors.” Then click “View provider and pharmacy directories” to find the Provider Directory for Group Plans. To easily look up a provider in the directory, use CTRL + F on your PC keyboard, or ⌘-F on a Mac.

Changes to our print directory are published monthly in an amendment that can be found at: <https://www.sharpmedicareadvantage.com/members/get-care/sharp-advantage-providers>.



## Find a doctor online

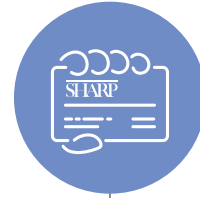
You can use the online search tool on our website at [sharpmedicareadvantage.com/findadoctor](https://www.sharpmedicareadvantage.com/findadoctor). Be sure to select “Sharp Direct Advantage” as the network in the drop-down menu.

\* Recipient of “Elite” status in 2017 by America’s Physician Groups: Taking Responsibility for America’s Health.

\*\* The Formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

# Get to know our plan

Our Sharp Direct Advantage plan is designed to give you the flexibility you need, at prices you like.



## Comprehensive benefits

Our Sharp Direct Advantage plan includes all of the benefits below, and much more!\*

- All of your Original Medicare benefits (Part A and Part B).
- Medicare Part D prescription drug coverage to help cover the cost of the medications that your doctor prescribes. Covered outpatient drugs must be obtained from Sharp Health Plan-contracted pharmacies. You also have the option of using mail-order pharmacy services for maintenance medications.
- Vision benefits, including routine eye exams and a \$130 allowance for glasses or contacts every two years.
- A free membership through Silver&Fit that allows you to choose from many different fitness facilities throughout San Diego County.
- Hearing aid allowance of \$1,000 every three years.



# Sharp Direct Advantage benefits at a glance

|                                                | Sharp Direct Advantage (HMO)            |
|------------------------------------------------|-----------------------------------------|
| Monthly Plan Premium*                          | \$194                                   |
| Deductible                                     | None                                    |
| Annual Out-of-Pocket Maximum (Medical)         | \$1,500                                 |
| Preventive Care                                | \$0                                     |
| Primary Care Physician Visit                   | \$10                                    |
| Specialist Physician Visit                     | \$10                                    |
| Lab Services                                   | \$0                                     |
| Diagnostic Radiology (e.g., MRIs)              | \$0                                     |
| X-Ray                                          | \$0                                     |
| Urgently Needed Services                       | \$10                                    |
| Emergency Room                                 | \$50                                    |
| Ambulance                                      | \$0                                     |
| Hospitalization                                | \$0 per day                             |
| Outpatient Surgery                             | \$50                                    |
| Skilled Nursing Facility                       | \$0 per day                             |
| Durable Medical Equipment                      | \$0                                     |
| Acupuncture and Chiropractic Expanded Coverage | \$10, limit 30 combined visits per year |
| Routine Eye Exam                               | \$20                                    |
| Hearing Aids                                   | \$1,000 allowance every 36 months       |
| <b>30-day Retail Prescription Drugs</b>        |                                         |
| Preferred Generic / Non-Preferred Generic      | \$10 / \$10                             |
| Preferred Brand                                | \$20                                    |
| Non-Preferred Brand / Specialty                | \$20 / 25%                              |
| <b>90-day Mail-Order Prescription Drugs</b>    |                                         |
| Preferred Generic / Non-Preferred Generic      | \$20 / \$20                             |
| Preferred Brand                                | \$40                                    |
| Non-Preferred Brand / Specialty                | \$40 / Not offered                      |

\* You must continue to pay your Medicare Part B premium. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums and/or co-payments/co-insurance may change each year.

# Best Health<sup>®</sup> wellness program

Best Health, our comprehensive wellness program, is available to all Sharp Direct Advantage members at no extra cost. Let us show you how being healthy can be easy and fun.



## Nationally accredited

Best Health, Sharp Health Plan's wellness program, is one of a select group of health plan wellness programs nationally to receive NCQA accreditation.

### Health coaching

Want personalized support? Our telephone-based, private health coaching is tailored to your wellness goals and scheduled at times convenient for you.

### Health Library

Want all the health and wellness information you need in one spot? We're here for you, ready to help with a library of resources and support.

### Wellness workshops

Want 24/7 support? Look no further than our self-guided online workshops with interactive videos, articles, tips, quizzes, meal and activity planners, and more.

### Best Health mobile app

Want all the perks of Best Health while you're on the move? The Best Health mobile app, available for Apple and Android devices, puts your favorite Best Health trackers and tools right in your pocket.



# Added benefits

We believe San Diegans deserve more. That's why our Sharp Direct Advantage plan includes these additional member benefits:

## Silver&Fit Gym Membership

We offer free access to fitness facilities for Sharp Direct Advantage members. Choose from 24 Hour Fitness, Curves, Jazzercise, LA Fitness and many other facilities throughout San Diego County. And, enjoy the flexibility to change facilities monthly with no hassles. If you prefer to exercise at home, at-home fitness options are available as well. See [silverandfit.com](http://silverandfit.com) to find participating clubs in your area. Participating gyms may change during the year.

## Emergency Travel Services

When faced with a medical emergency while traveling 100 miles or more away from home or in another country, we partner with Assist America® to connect Sharp Direct Advantage members to doctors, hospitals, pharmacies and other services.

## MinuteClinic®

MinuteClinic is the walk-in medical clinic located inside select CVS/pharmacy® stores. MinuteClinic provides convenient access to quality medical care without an appointment. It is open 7 days a week, including evenings and weekends. No appointment necessary. Your copay for MinuteClinic is the same as your Urgent Care copay.

## Vision Care

VSP Elements is included in Sharp Direct Advantage, so members have access to the highest-quality eye care services. These benefits include routine eye exams and an annual allowance for glasses or contacts.

VSP has more than 400 providers throughout San Diego County to ensure that you can find care close to home.

## Hearing Aid Coverage

Members receive a \$1,000 allowance every 36 months toward medically necessary hearing aids. To get started with accessing this benefit, members should contact their PCP.

## Sharp Nurse Connection®

When you have a health question or concern after regular business hours, a single phone call to Sharp Nurse Connection puts you in touch with a registered nurse. Sharp Nurse Connection is available from 5 p.m. to 8 a.m., Monday through Friday and 24 hours a day on weekends by calling (858) 499-8300 (TTY users call 711), and selecting the option to speak with a nurse.

## Acupuncture and Chiropractic Expanded Coverage

Like all Medicare Advantage plans, Sharp Direct Advantage offers medically necessary chiropractic benefits for spinal subluxation treatment. This is provided by referral from your PCP at your specialist visit copay.

In addition, Sharp Direct Advantage offers supplemental chiropractic benefits:

- Self-refer to any chiropractor in the American Specialty Health Network for any medically necessary chiropractic need.
- Up to 30 combined Acupuncture and Chiropractic visits per year for \$10 copay are covered.

Search for participating chiropractors at [sharpmedicareadvantage.com/chiro](http://sharpmedicareadvantage.com/chiro).

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## Learn more

Visit [sharphealthplan.com/cityretirees](http://sharphealthplan.com/cityretirees) to check out all of the added benefits available to Sharp Direct Advantage members.

# Understand when you can enroll

You can join during the following periods:

- Open enrollment, which for City of San Diego retirees occurs from June 4 – June 29, 2018. All eligible retirees can enroll during this period.
- Initial enrollment period (IEP), if this is your first time getting Medicare:
  - **Eligibility by birthday:** You can join during the 7-month period that runs 3 months before the month you turn 65 to 3 months after the month you turn 65. Your coverage will begin the first day of the month after you enroll. If you join before you turn 65, your coverage will begin the first day of the month you turn 65.
  - **Eligibility by disability:** You can join during the 7-month period that runs 3 months before your 25th month of getting disability benefits to 3 months after your 25th month of getting disability benefits. Your coverage will begin the first day of the month after you enroll. If you join during one of the 3 months before you first get Medicare, your coverage will begin the first day of your 25th month of entitlement to disability payments.
- Special enrollment period (SEP):

You may be able to join our plan when special life events happen.

These include situations such as, but not limited to:

- Retiring from your job if you're over 65
- Moving to a different area not covered by your plan
- Losing your current coverage
- When your current plan changes its contract with Medicare

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**Enroll today!**

Visit [sharphealthplan.com/cityretirees](http://sharphealthplan.com/cityretirees) to join.



# Enrolling is as easy as 1-2-3

## 1 Check your Medicare and plan eligibility

You must be age 65 or otherwise eligible for Medicare, have Medicare Part A and be eligible for Part B. You must also be a City of San Diego retiree or dependent and live in San Diego County.

## 2 Enroll in Medicare Part B

If you have not already enrolled, you can enroll online at [socialsecurity.gov](https://www.socialsecurity.gov). Visit [CMS.gov](https://www.cms.gov) to download the Request for Employment Information form, which needs to be completed by the applicant, the employer and then submitted to your local Social Security office. You may also visit your local Social Security office or call 1-800-772-1213. TTY users call 1-800-325-0778. If you are already receiving Social Security benefits or if you are receiving Railroad Retirement Board benefits, you will be automatically enrolled in Medicare.

## 3 Join Sharp Direct Advantage today

If you are eligible for Medicare and Sharp Direct Advantage, call us toll-free at 1-855-562-8853 (TTY 711) for personal assistance Monday through Friday, 8 a.m. - 6 p.m. or visit [sharpmedicareadvantage.com](https://www.sharpmedicareadvantage.com)

## Enrollment checklist

Enrolling is easy! Here's a checklist with the information you'll need to enroll:

- The Medicare Number and effective dates from your red, white and blue Medicare ID card.
- The name of your Sharp Direct Advantage Network Primary Care Physician (PCP). You'll need to list your doctor when you enroll. If you don't have a PCP, we will assign one to you. You may change your PCP at any time by contacting Customer Care. PCP changes are effective the 1st of the following month. Visit [sharpmedicareadvantage.com/findadoctor](https://www.sharpmedicareadvantage.com/findadoctor) to find a doctor.

# Frequently asked questions

## Which doctors or hospitals accept my plan?

Your plan is an HMO (Health Maintenance Organization) that gives you access to a broad network of local doctors and hospitals. Your Primary Care Physician (PCP) oversees your care and in general, you will need prior authorization to see a specialist.

## How do I find a doctor? Is my doctor in the network?\*

Your personal doctor, or Primary Care Physician (PCP), is your partner in health. Whether it's your first visit or an annual preventive care checkup, they will coordinate all of your care. They also provide referrals to other plan providers within your Plan Medical Group (PMG). A PMG is a designated group of physicians and hospitals associated with your Network. You have access to hospitals, specialty care and urgent care centers affiliated with your PMG. When you select a PCP, you are selecting your PMG.

To find a PCP or to see if your PCP is in one of our networks, visit [sharpmedicareadvantage.com/findadoctor](http://sharpmedicareadvantage.com/findadoctor). Select the "Sharp Direct Advantage" Network, then click "Search Providers." On the right-hand side of the page, you can search for a doctor by medical group, specialty, language, gender, location or last name. Once you select a doctor, notify Sharp Health Plan, and call the doctor's office directly to schedule a visit.

## Are emergency or urgently needed services covered?

Yes. You have worldwide coverage for urgent and emergency health services through Assist America. You will need to have your Sharp Health Plan Member ID number available when contacting them. To contact Assist America in the U.S., please call 1-800-872-1414. To contact Assist America outside of the U.S., please call (609) 986-1234. They will be available to assist you 24 hours a day, seven days a week.

## What do I pay for covered doctor or hospital services?

You only have to pay your plan copayment or coinsurance for visits to an in-network doctor or hospital. If you choose to go to a doctor outside of our network, you must pay for these services yourself. Neither the plan nor Original Medicare will pay for out-of-network services except in limited situations (for example, urgent or emergency care).

## Is there a limit to my total out-of-pocket spending for the year?

Yes. The maximum you will have to pay out-of-pocket for covered medical services for the benefit year will vary depending on the plan you choose. Part D prescription drug costs are not included in this maximum.

## Where can I get my prescriptions

\*The Formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

## filled if I join this plan?

You can fill prescriptions for any covered Part D drugs, some of which may be subject to prior authorization, at any network pharmacy.\*

## How can I learn if my prescription is covered?

Visit [sharpmedicareadvantage.com/druglist](http://sharpmedicareadvantage.com/druglist) and click "Formulary information." Then select the 2018 Group drug list to view our list of covered drugs. To see if your drug is in our formulary, use CTRL + F on your PC keyboard, or ⌘ -F on a Mac.

## Can I use a Sharp Direct Advantage plan with a Medicare Supplement plan?

No. Your Medicare Supplement Plan, also known as a Medigap policy, can't be used while enrolled in your Medicare Advantage plan to pay your Medicare Advantage plan copayments, deductibles or premiums. If you want to cancel your Medicare Supplement Plan, contact your insurance company.

## What if I'm already enrolled in a Medicare Advantage plan or prescription drug plan?

You will need to keep your Medicare Part A and B. You must continue to pay your Medicare Part B premium, if you have one and it is not paid by Medi-Cal or a third party. You can only be in one Medicare Advantage or prescription drug plan at a time. Your enrollment in this plan will automatically end your enrollment in another Medicare Advantage or prescription drug plan.

## Are my prescriptions covered?

Yes. Prescription drug coverage\* is included in Sharp Direct Advantage to help cover the cost of the medications that your doctor prescribes. You obtain covered outpatient prescription drugs from Sharp Direct Advantage-contracted pharmacies located throughout San Diego County and the U.S.

You have the option of using our mail order pharmacy for maintenance medications, available at [sharpmedicareadvantage.com/mailorder](http://sharpmedicareadvantage.com/mailorder). At [sharpmedicareadvantage.com/pharmacy](http://sharpmedicareadvantage.com/pharmacy), you can use our Pharmacy Directory to find a pharmacy near you.



# 2018 – 2019 Summary of Benefits

August 1, 2018 – July 31, 2019

This is a summary of what we cover and what you pay. It doesn't list every service that we cover or list every limitation or exclusion. To get a complete list of services we cover, call Customer Care and ask for the "Evidence of Coverage."

## Things to know about Sharp Direct Advantage (HMO)



Sharp Direct Advantage website  
[sharphealthplan.com/cityretirees](http://sharphealthplan.com/cityretirees)



Customer Care phone number  
1-855-562-8853 (TTY 711)



Hours of operation  
Monday through Friday, 8 a.m. – 6 p.m.



### Who can join?

To join the Sharp Direct Advantage (HMO) plan, you must be entitled to Medicare Part A, be enrolled in Medicare Part B, meet the eligibility requirements established by the employer/union group sponsor's employment-based health coverage and live in San Diego County.





## Which doctors, hospitals and pharmacies can I use?

Sharp Direct Advantage (HMO) has a network of doctors, hospitals, pharmacies and other providers. If you use providers that are not in our network, the plan may not pay for these services. You must generally use network pharmacies to fill your prescriptions for covered Part D drugs.

- You can see the complete plan provider and pharmacy directory on our website at [sharpmedicareadvantage.com/findadoctor](http://sharpmedicareadvantage.com/findadoctor), or call us for more information.

## How will I determine my drug costs?

Our plan groups each medication into one of five “tiers.” You will use the Sharp Direct Advantage formulary to determine the tier your drug is on and the associated cost. The amount you pay depends on the drug’s tier and the pharmacy you use. The amount you pay also depends on the benefit stage you are in: Initial Coverage, Coverage Gap and Catastrophic Coverage. These are explained later in this document.

- You can see the complete plan formulary (list of Part D prescription drugs) and the Evidence of Coverage on our website at [sharpmedicareadvantage.com/druglist](http://sharpmedicareadvantage.com/druglist), or call us for more information.

If you want to know more about the coverage and costs of Original Medicare, look in your current “Medicare & You” handbook. View it online at <http://www.medicare.gov> or get a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

This information is not a complete description of benefits. Contact the plan for more information.

Sharp Direct Advantage is offered by Sharp Health Plan. Sharp Direct Advantage plans are HMO plans with a Medicare contract. Enrollment in Sharp Direct Advantage depends on contract renewal.

Limitations, copayments, and restrictions may apply. Benefits, premiums and/or copayments/coinsurance may change each year. The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

This document is available in other formats such as large print.

# 2018-2019 Summary of Benefits

This is a summary of what we cover and what you pay. It doesn't list every service that we cover or list every limitation or exclusion. To get a complete list of services we cover, call Customer Care and ask for the "Evidence of Coverage."

| Benefit                                                                                 | Sharp Direct Advantage (HMO)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|-----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| How much is the monthly premium? You must continue to pay your Medicare Part B premium. | \$194 per month                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| How much is the deductible?                                                             | This plan does not have a deductible.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Is there any limit on how much I will pay for my covered services?                      | <p>Yes. Like all Medicare health plans, our plan protects you by having yearly limits on your out-of-pocket costs for medical and hospital care.</p> <p>If you reach the limit on out-of-pocket costs, you will keep getting covered hospital and medical services. We will pay the full cost for the rest of the year.</p> <p>Please note that you will still need to pay your monthly premiums and cost sharing for your Part D prescription drugs.</p> <p>\$1,500 yearly limit for services you receive from in-network providers.</p>                                                                     |
| Is there a limit on how much the plan will pay?                                         | No. There are no limits on how much our plan will pay.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Inpatient Hospital Care <sup>1,2</sup>                                                  | <p>\$0 per day</p> <p>The copays for hospital and skilled nursing facility (SNF) benefits are based on benefit periods. A benefit period begins the day you're admitted as an inpatient and ends when you haven't received any inpatient care (or skilled care in a SNF) for 60 days in a row. If you go into a hospital or a SNF after one benefit period has ended, a new benefit period begins. You must pay the inpatient hospital deductible for each benefit period. There's no limit to the number of benefit periods. Our plan covers an unlimited number of days for an inpatient hospital stay.</p> |

17 <sup>1</sup> Services may require prior authorization.

<sup>2</sup> Services may require a referral from your doctor.

| Benefit                  | Sharp Direct Advantage (HMO)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Doctor's Office Visits   | Primary Care Physician visit: \$10 copay<br>Specialist visit: \$10 copay                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Preventive Care          | \$0<br>Our plans cover many preventive services, including: <ul style="list-style-type: none"> <li>• Abdominal aortic aneurysm screening</li> <li>• Alcohol misuse screenings &amp; counseling</li> <li>• Bone mass measurements (bone density)</li> <li>• Cardiovascular disease screenings</li> <li>• Cardiovascular disease (behavioral therapy)</li> <li>• Cervical &amp; vaginal cancer screening</li> <li>• Colorectal cancer screenings (colonoscopy, fecal occult blood test, flexible sigmoidoscopy)</li> <li>• Depression screenings</li> <li>• Diabetes screenings</li> <li>• HIV screening</li> <li>• Mammograms (screening)</li> <li>• Nutrition therapy services</li> <li>• Obesity screenings &amp; counseling</li> <li>• Prostate cancer screenings (PSA)</li> <li>• Sexually transmitted infections screening and counseling</li> <li>• Tobacco use cessation counseling</li> <li>• Vaccines, including Flu shots, Hepatitis B shots, Pneumococcal shots</li> <li>• "Welcome to Medicare" preventive visit (one-time)</li> <li>• Yearly "Wellness" visit</li> </ul> |
| Emergency Care           | \$50 copay<br>If you are admitted to the hospital within 24 hours, you do not have to pay your share of the cost for emergency care. See the "Inpatient Hospital Care" section of this booklet for other costs.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Urgently Needed Services | \$10 copay                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |

## 2018-2019 Summary of Benefits (continued)

| Benefit                                                                                                                               | Sharp Direct Advantage (HMO)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Diagnostic Tests, Lab and Radiology Services, and X-Rays (costs for these services may vary based on place of service) <sup>1,2</sup> | <p>Diagnostic radiology services (such as MRIs, CT scans): \$0</p> <p>Diagnostic tests and procedures: \$0</p> <p>Lab services: \$0 copay</p> <p>Outpatient X-Rays: \$0 copay</p> <p>Therapeutic radiology services (such as radiation treatment for cancer): \$0</p>                                                                                                                                                                                                                                                                                       |
| Hearing Services <sup>1</sup>                                                                                                         | <p>Exam to diagnose and treat hearing and balance issues: \$10 copay</p> <p>Hearing aid fitting/evaluations: \$10 copay</p> <p>Hearing aid: Our plan pays up to \$1,000 every three years.</p>                                                                                                                                                                                                                                                                                                                                                              |
| Dental Services <sup>1</sup>                                                                                                          | <p>Limited dental services (this does not include services in connection with care, treatment, filling, removal or replacement of teeth):</p> <p>\$10 copay</p>                                                                                                                                                                                                                                                                                                                                                                                             |
| Vision Services <sup>1</sup>                                                                                                          | <p>Exam to diagnose and treat diseases and conditions of the eye (including yearly glaucoma screening): \$10 copay</p> <p>Routine eye exam (for up to 1 every year): \$20 copay</p> <p>Prescription glasses/lenses (every two years): \$20 copay for single vision, lined bifocal and lined trifocal lenses</p> <p>Our plan pays up to \$130 every two years for contact lenses in lieu of eyeglasses.</p> <p>Our plan pays up to \$130 every two years for eyeglass frames.</p> <p>Eyeglasses or contact lenses after cataract surgery: 0% of the cost</p> |

19 <sup>1</sup> Services may require prior authorization.

<sup>2</sup> Services may require a referral from your doctor.



| Benefit                                                             | Sharp Direct Advantage (HMO)                                                                                                                                                                                                                         |
|---------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Inpatient Mental Health Care <sup>1,2</sup>                         | Our plan covers an unlimited number of days for an inpatient hospital stay.<br>\$0 copay per day                                                                                                                                                     |
| Outpatient Mental Health Care                                       | Outpatient group therapy visit: \$10 copay<br>Outpatient individual therapy visit: \$10 copay                                                                                                                                                        |
| Skilled Nursing Facility (SNF) <sup>1</sup>                         | Our plan covers up to 100 days in a SNF<br>\$0 per day for days 1 through 100                                                                                                                                                                        |
| Rehabilitation Services <sup>1</sup>                                | Cardiac (heart) rehab services (for a maximum of 2 one-hour sessions per day for up to 36 sessions up to 36 weeks):<br>\$10 copay<br>Occupational therapy visit: \$10 copay<br>Physical therapy and speech and language therapy visit:<br>\$10 copay |
| Ambulance <sup>1</sup>                                              | \$0 copay                                                                                                                                                                                                                                            |
| Transportation                                                      | Not covered                                                                                                                                                                                                                                          |
| Foot Care (podiatry services) <sup>2</sup>                          | Foot exams and treatment if you have diabetes-related nerve damage and/or meet certain conditions: \$10 copay                                                                                                                                        |
| Medical Equipment/Supplies (wheelchairs, oxygen, etc.) <sup>1</sup> | \$0                                                                                                                                                                                                                                                  |



## 2018-2019 Summary of Benefits (continued)

| Benefit                                                          | Sharp Direct Advantage (HMO)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Wellness Programs                                                | <p>\$0 wellness programs include:</p> <p>Silver&amp;Fit gym membership<br/>Choose from many different facilities throughout San Diego County. Enjoy the flexibility to change facilities monthly with no hassle. If you prefer to exercise at home, at-home fitness options are available as well.</p> <p>Health Coaching<br/>Up to 30-minute confidential coaching sessions by phone on common health topics such as healthy weight management, smoking cessation, healthy eating, physical activity and stress management.</p> |
| Chiropractic Care and Acupuncture <sup>2</sup>                   | <p>Manipulation of the spine to correct a subluxation (when 1 or more of the bones of your spine move out of position):<br/>\$10 copay</p> <p>Supplemental chiropractic and acupuncture through American Specialty Health: \$10 copay, maximum 30 visits per year</p>                                                                                                                                                                                                                                                            |
| Diabetes Supplies and Services <sup>1,2</sup>                    | <p>Diabetes monitoring supplies: \$0</p> <p>Diabetes self-management training: \$0</p> <p>Therapeutic shoes or inserts: \$0</p>                                                                                                                                                                                                                                                                                                                                                                                                  |
| Home Health Care <sup>1</sup>                                    | \$0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Outpatient Surgery <sup>1</sup>                                  | <p>Ambulatory surgical center: \$50 copay</p> <p>Outpatient hospital: \$50 copay</p>                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Prosthetic Devices (braces, artificial limbs, etc.) <sup>1</sup> | <p>Prosthetic devices: \$0</p> <p>Related medical supplies: \$0</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Renal Dialysis <sup>1</sup>                                      | \$0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

## For Part B Drugs

|                              |                                                                                    |
|------------------------------|------------------------------------------------------------------------------------|
| Sharp Direct Advantage (HMO) | For all Part B drugs including chemotherapy drugs <sup>1</sup> :<br>0% of the cost |
|------------------------------|------------------------------------------------------------------------------------|

21 <sup>1</sup> Services may require prior authorization.

<sup>2</sup> Services may require a referral from your doctor.

## Part D Drugs<sup>1</sup>

You pay the Initial Coverage amounts until your total yearly drug costs reach \$5,000. Total yearly drug costs are the total drug costs paid by both you and our Part D plan. You may get your drugs at network retail pharmacies and mail order pharmacies. These plans do not have a deductible.

|                                | Initial Coverage           |                       |                                |
|--------------------------------|----------------------------|-----------------------|--------------------------------|
|                                | Standard Retail Cost Share |                       | Standard Mail Order Cost Share |
|                                | Retail 1-month supply      | Retail 3-month supply | Mail Order 3-month supply      |
| Tier 1 (Preferred Generic)     | \$10 copay                 | \$30 copay            | \$20 copay                     |
| Tier 2 (Non-Preferred Generic) | \$10 copay                 | \$30 copay            | \$20 copay                     |
| Tier 3 (Preferred Brand)       | \$20 copay                 | \$60 copay            | \$40 copay                     |
| Tier 4 (Non-Preferred Brand)   | \$20 copay                 | \$60 copay            | \$40 copay                     |
| Tier 5 (Specialty)             | 25% of cost                | Not Offered           | Not Offered                    |

| Coverage Gap                                                                                                                                                                                                                                                                                                                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| This plan has no coverage gap.                                                                                                                                                                                                                                                                                                                                               |
| Catastrophic Coverage                                                                                                                                                                                                                                                                                                                                                        |
| <p>After your yearly out-of-pocket drug costs (including drugs purchased through your retail pharmacy and through mail order) reach \$5,000, you pay the greater of:</p> <ul style="list-style-type: none"> <li>• 5% of the cost, or</li> <li>• \$3.35 copay for generic (including brand drugs treated as generic) and a \$8.35 copay for all other Part D drugs</li> </ul> |

### Learn more about Part D coverage

Visit [sharphealthplan.com/cityretirees](http://sharphealthplan.com/cityretirees) to access the Evidence of Coverage (EOC) or call Customer Care.

# Multi-Language Interpreter Services

**English:** We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-855-562-8853. Someone who speaks English/Language can help you. This is a free service.

**Spanish:** Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-855-562-8853. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

**Chinese Mandarin:** 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电1-855-562-8853。我们的中文工作人员很乐意帮助您。这是一项免费服务。

**Chinese Cantonese:** 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電1-855-562-8853。我們講中文的人員將樂意為您提供幫助。這是一項免費服。

**Tagalog:** Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-855-562-8853. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

**French:** Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-855-562-8853. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

**Vietnamese:** Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-855-562-8853 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

**German:** Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-855-562-8853. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

**Korean:** 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-855-562-8853 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

**Russian:** Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-855-562-8853. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.





# Non-discrimination notice

Sharp Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Sharp Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

## Sharp Health Plan:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact Director of Operations at (858) 499-8275.

If you believe that Sharp Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Sharp Health Plan  
Appeal/Grievance Department  
Attn: Director of Operations  
8520 Tech Way, Suite 201  
San Diego, CA 92123-1450  
Toll-free: 1-855-562-8853  
TTY: 711  
Fax: (858) 636-2256

You can file a grievance in person or by mail or fax. If you need help filing a grievance, Sharp Health Plan's Customer Care Department is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD).

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.





Consider us your personal  
health care assistant<sup>SM</sup>

[sharphealthplan.com/cityretirees](http://sharphealthplan.com/cityretirees)

Sharp Direct Advantage is offered by Sharp Health Plan. Sharp Direct Advantage is an HMO plan with a Medicare contract. Enrollment in Sharp Direct Advantage depends on contract renewal.

This information is available for free in other languages. Please call our Customer Care number at 1-855-562-8853 for additional information. (TTY users should call 711.) Hours are 8 a.m. to 6 p.m., Monday through Friday. Customer Care also has free language interpreter services available for non-English speakers. Please contact Sharp Direct Advantage if you need information in another format.

Esta información puede obtenerse sin cargo en otros idiomas. Si desea más información, llame a nuestro servicio de atención a los miembros al 1-855-562-8853. (Los usuarios de TTY deben llamar al 711.)

El horario es de 8 de la mañana a 6 de la tarde de lunes a viernes. Alguien que hable español le podrá ayudar. Este es un servicio gratuito. Por favor, póngase en contacto con Sharp Direct Advantage si usted necesita información en otro forma.

