



2019 Sharp Direct AdvantageSM Medicare Enrollment Guide

Including Summary of Benefits



Sharp Direct Advantage Basic (HMO) and Sharp Direct Advantage Premium (HMO)
Exclusively for Medicare-Eligible Former Sharp HealthCare Employees and Their Dependents



Table of Contents

The Sharp Direct Advantage SM difference	3
Elite-rated medical groups	5
The Sharp Direct Advantage Network	7
Your prescription drug benefits	11
Get to know your plan options	13
Benefits at a glance	14
Added benefits	15
Comprehensive dental coverage by Delta Dental	17
Best Health wellness program	19
sharpmedicareadvantage.com , at your service	21
Understand when you can enroll	23
Pre-enrollment Checklist	25
Enrolling is as easy as 1-2-3	26
2019 Summary of Benefits	27
Frequently asked questions	37
Multi-Language Interpreter Services	39
Nondiscrimination notice	41

The basics of Medicare

Have questions? We have answers! It's common for people to be confused about Medicare 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 Health Plan offers a Medicare Advantage / Part C plan.


Part D – Prescription Drug Coverage


Prescription drug coverage is Medicare Part D. Sharp Health Plan includes prescription drug coverage as part of its Medicare Advantage plan.





The Sharp Direct AdvantageSM difference

As part of the Sharp HealthCare family, we provide direct access to The Sharp Experience, from Card to Care. The Sharp Experience isn't one thing we do. It's everything we do. It's our culture, our care philosophy and our promise to transform the health care experience for each other and those we serve. We believe San Diegans deserve more, so our Medicare Advantage plans are designed specifically to do just that.

 Affordable \$0 and \$59 monthly premium plan options

 Direct Discover The Sharp Experience, from Card to Care

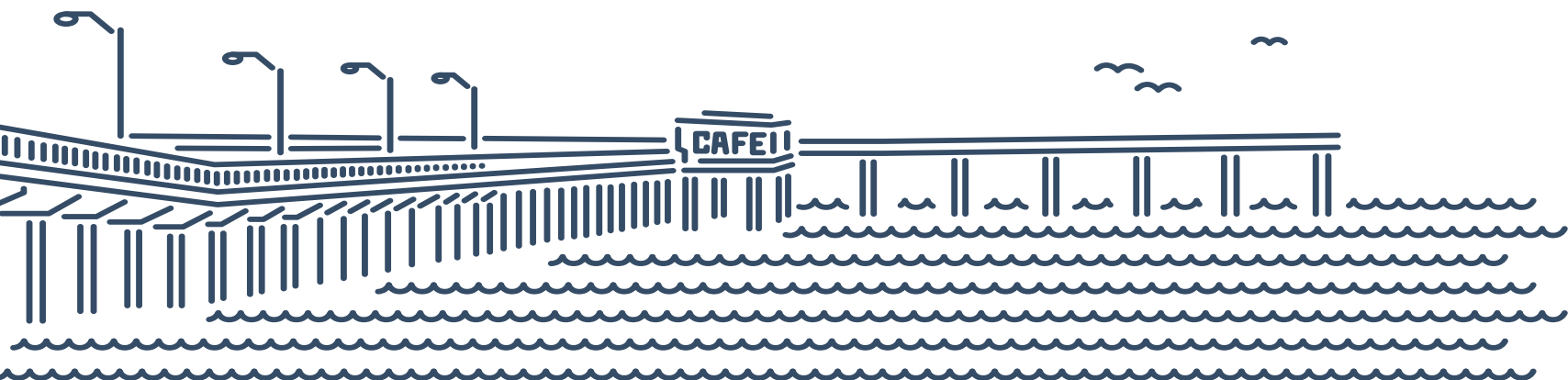
 Local Medicare by San Diegans, for San Diegans

 Simple Easy to enroll with personalized support



From Card to Care

Choose the Sharp Direct Advantage Basic (HMO) or the Sharp Direct Advantage Premium (HMO) for a plan you can trust, and your key to The Sharp Experience.



You could save money and get more

You've earned your Medicare benefits, now it's time to enjoy them. Sharp Health Plan members have access to extensive prescription drug benefits and dental plan, emergency care coverage worldwide and so much more.



\$0 monthly premium for Sharp Direct Advantage Basic, or **\$59** monthly premium for Sharp Direct Advantage Premium



Comprehensive dental coverage



\$4 mail-order preferred generic prescriptions



Expanded chiropractic coverage



\$5 copays for primary care physician visits



Vision care and **hearing** coverage



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



\$0 gym access through Silver&Fit®



Emergency Travel Services

Get to know us

Visit sharpmedicareadvantage.com/sharpretirees for more information about our Medicare plans or call 1-855-562-8853 (TTY/TDD 711).

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



Elite-rated¹ 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" status¹, the highest possible rating for Standards of Excellence, in addition to our regional partner, Greater Tri Cities IPA. Providers are located throughout San Diego County, 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 and access to the Sharp doctors you know and trust.

Plus, through our unique integration with Sharp HealthCare, we offer a direct connection to The Sharp Experience.

Sharp Direct Advantage Network

- 3 Medical Groups
- 1,200+ Physicians and Specialists
- 7 Hospitals
- 25+ Urgent Care Locations
- 400+ Pharmacies
- 375+ Vision Providers

Looking for a doctor?

Sharp Health Plan offers several ways to look for a primary care physician or specialist. Access our Provider and Pharmacy Directory via our online search tool or as a downloadable file. If you want a Provider and Pharmacy Directory mailed to you, or if you need help finding a network provider, please call 1-855-562-8853 (TTY/TDD 711) Monday through Friday, 8 a.m. – 6 p.m.



Download the Provider and Pharmacy Directory

To easily search our Provider and Pharmacy Directory on our website, visit sharpmedicareadvantage.com/findadoctor. Click on “Access Medicare provider directories,” then click on “Downloadable provider and pharmacy directories” to select your Group Plan directory.



Find a doctor online

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

Did you know?

Your primary care physician (PCP) choice will determine the medical group, specialists and urgent care centers you’ll be able to use. In most cases, you must go to network doctors / providers in our HMO plan, except in an emergency. You may also need to get a referral from your PCP.

¹ Recipients of “Elite” status in the 2018 national Standards of Excellence™ survey by America’s Physician Groups, formerly CAPG.

The Sharp Direct Advantage Network



Medical Groups

At Sharp Health Plan, we understand the importance of selecting a network that fits your lifestyle and budget. As a member, you'll join a family of award-winning medical groups, physicians and hospitals dedicated to meeting your health care needs.

The Sharp Direct Advantage Network offers access to more physicians and hospitals, making it easy for you to get quality care that's close to home.

Sharp Rees-Stealy Medical Group

This medical group offers a network of more than 500 physicians, including primary care physicians and specialists. Admitting hospitals include Sharp hospitals listed on page 9. Sharp Rees-Stealy physicians are located throughout San Diego County, including:

- Carmel Valley
- Chula Vista
- Del Mar
- Downtown San Diego
- El Cajon
- Frost Street / Frost Street North
- Genesee
- La Mesa / La Mesa West
- Mira Mesa
- Mount Helix
- Murphy Canyon
- Otay Ranch
- Point Loma
- Rancho Bernardo
- San Carlos
- San Diego
- Scripps Ranch
- Sorrento Mesa



Sharp Community Medical Group (SCMG)

This medical group offers a network of more than 1,000+ physicians, including primary care physicians and specialists. Admitting hospitals include Sharp HealthCare facilities and Palomar Medical Centers listed on page 9. **SCMG, SCMG Inland North, SCMG Graybill** and **SCMG Arch Health Medical Group** physicians are located throughout San Diego County, including:

- Alpine
- Campo
- Carlsbad
- Chula Vista
- Clairemont
- College Area
- Coronado
- Del Cerro
- Downtown San Diego
- East San Diego
- El Cajon
- Encinitas
- Escondido
- Fallbrook
- Hillcrest
- Imperial Beach
- Kearny Mesa
- La Jolla
- La Mesa
- Lakeside
- Linda Vista
- Mira Mesa
- Mission Valley
- National City
- Oceanside
- Point Loma
- Poway
- Ramona
- San Diego
- San Marcos
- Santee
- University City
- Vista

Greater Tri Cities IPA

This medical group offers 400+ primary care physicians and specialists. The admitting hospital is Palomar Medical Center Escondido. This network also includes Vista Community Clinic, a Federally Qualified Health Center (FQHC). Greater Tri Cities IPA physicians are located primarily in northern San Diego County, including:

- Carlsbad
- Encinitas
- Escondido
- Oceanside
- Solana Beach
- Vista

The Sharp Direct Advantage Network, continued



Hospitals

Sharp Direct Advantage provides extensive coverage with access to a broad selection of hospitals across San Diego, including:

Sharp Hospitals

- Sharp Chula Vista Medical Center
- Sharp Coronado Hospital
- Sharp Grossmont Hospital
- Sharp Mary Birch Hospital for Women & Newborns
- Sharp Memorial Hospital

Additional Network Hospitals

- Palomar Medical Center Escondido
- Palomar Medical Center Poway



Urgent Care Centers

Sharp Health Plan members have access to urgent care centers across San Diego. Please visit sharpmedicareadvantage.com/findadoctor to learn more about the urgent care centers affiliated with Sharp Direct Advantage and your medical group.





Pharmacies

Sharp Health Plan members have access to hundreds of pharmacy locations and almost all major national pharmacies, including the below. Please visit sharpmedicareadvantage.com to find a pharmacy near you.

- Albertsons® / Sav-on® Pharmacy
- Costco® Pharmacy
- CVS Pharmacy® locations, including those at Target®
- Ralphs® Pharmacy
- Rite Aid® Pharmacy
- Sharp Rees-Stealy Pharmacy
- Vons® Pharmacy
- Walgreens® Pharmacy
- Walmart® Pharmacy
- Independently contracted neighborhood pharmacies



Your prescription drug benefits

Prescription drug coverage is included to help cover the cost of the medications that your doctor prescribes. Our list of covered drugs is called a formulary or “drug list.” You can obtain covered outpatient prescription drugs from Sharp Health Plan-contracted pharmacies located throughout San Diego County. You also have the option of using mail-order pharmacy services for maintenance medications.



What is prior authorization?

Some medications require prior authorization before you can pick them up from a pharmacy. This means a physician must complete a prior authorization request form and submit it with relevant medical information to Sharp Health Plan. The health plan will evaluate the information submitted and make a decision based on established clinical criteria for that drug. This is called a Coverage Determination.

View your prescription drug benefits online

Log in to Sharp Connect at sharpmedicareadvantage.com to view your full prescription drug benefit information. You can also see if your medication is covered and if there are any restrictions or prior authorization (Coverage Determination) requirements for your medications. To view the formulary online, select “Pharmacy” from the Members menu, then click “Formulary information.”

Filling your prescriptions

As a Sharp Direct Advantage member, you can visit hundreds of local pharmacies and almost all major national pharmacies. Review your Provider and Pharmacy Directory to see a complete list of Sharp Direct Advantage pharmacies.

If you get sick while traveling and need to pay for an emergency prescription, you can submit your pharmacy receipt for reimbursement.

Generic vs. Brand-Name Drugs

Term	Definition
Generic Drug	A drug that is referred to by its chemical makeup without advertising. Generics are required to have the same active ingredient, strength, dosage form and route of administration as their brand-name equivalents.
Brand-Name Drug	A drug that has a trade name used for marketing and advertising. These drugs are patented and can only be sold by the company with the patent.

Sharp Health Plan usually does not cover a brand-name drug when a generic is available. If for some reason you cannot use the generic version of a medication, your physician will need to submit a prior authorization (Coverage Determination) request form to request the brand-name drug and explain why you cannot use a generic drug.

Prescription drug mail order

Mail order is a convenient, cost-effective way to obtain maintenance drugs. A maintenance drug is prescribed to treat or stabilize a chronic condition such as diabetes or hypertension. Maintenance drugs are available for a 90-day supply through our mail-order program. Tier 5 drugs are not available through mail-order.

Postal Prescription Services (PPS), our mail-order service provider, will ship a 90-day supply of your medication. PPS can mail your medications to any address you specify in the United States. Standard shipping is free for prescribed medication orders. Visit sharpmedicareadvantage.com/mailorder or call 1-800-552-6694 for more information on eligible medications and to get an application for mail-order services.

Get to know your plan options

We offer two Medicare Advantage plans, so you can choose the option that best fits your unique needs. Our plans are designed to give you the flexibility you need at prices you like.



Benefits at a glance^{*}

To see the Summary of Benefits, flip to pages 29 through 36.

	Sharp Direct Advantage Basic (HMO)	Sharp Direct Advantage Premium (HMO)
Monthly Plan Premium	\$0	\$59
Deductible	\$0	\$0
Annual Out-of-Pocket Maximum (medical)	\$3,400	\$3,400
Inpatient Hospital Coverage	\$125 per day for days 1 – 5 \$0 per day for days 6+	\$50 per day for days 1 – 6 \$0 per day for days 7+
Outpatient Hospital Coverage	\$150	\$50
Primary Care Physician Visit	\$5	\$5
Specialist Physician Visit	\$20	\$10
Preventive Care	\$0	\$0
Emergency Room	\$50	\$50
Urgently Needed Services	\$25	\$10
Diagnostic Radiology Services (e.g., MRIs)	10% of the cost	5% of the cost
Lab Services / X-rays	\$5	\$0
Hearing Aids (per 36 months)	\$1,000 allowance	\$1,000 allowance
Comprehensive Dental Coverage**	\$11 monthly premium	\$11 monthly premium
Routine Eye Exam (every 12 months)	\$20	\$20
Skilled Nursing Facility	\$0 per day for days 1 – 20 \$150 per day for days 21 – 57 \$0 per day for days 58 – 100	\$0 per day for days 1 – 20 \$75 per day for days 21 – 48 \$0 per day for days 49 – 100
Ambulance	\$200	\$200
Durable Medical Equipment	20% of the cost	15% of the cost
Expanded Chiropractic Care	\$10, limit 30 visits per year	\$10, limit 30 visits per year
Retail Prescriptions (up to 30 days)***		
Preferred Generic / Generic	\$2 / \$6	\$2 / \$6
Preferred Brand	\$40	\$40
Non-preferred / Specialty / Select Care	\$90 / 33% of the cost / \$0	\$90 / 33% of the cost / \$0
Mail-Order Prescriptions (up to 90 days)***		
Preferred Generic / Generic	\$4 / \$12	\$4 / \$12
Preferred Brand	\$80	\$80
Non-preferred / Specialty / Select Care	\$180 / not offered / \$0	\$180 / not offered / \$0

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

** Dental benefit is optional for Sharp Direct Advantage Basic and Premium members.

*** Drug Tiers: Preferred Generic / Generic / Preferred Brand / Non-preferred / Specialty / Select Care

Added benefits

We believe San Diegans deserve more. That's why our plans include these additional member benefits¹:



Vision Care

Vision Service Plan (VSP) Elements is included in our plans. Benefits include annual routine eye exams and an allowance for glasses or contacts every 24 months. VSP has more than 375 providers throughout San Diego County to ensure that you can find care close to home.



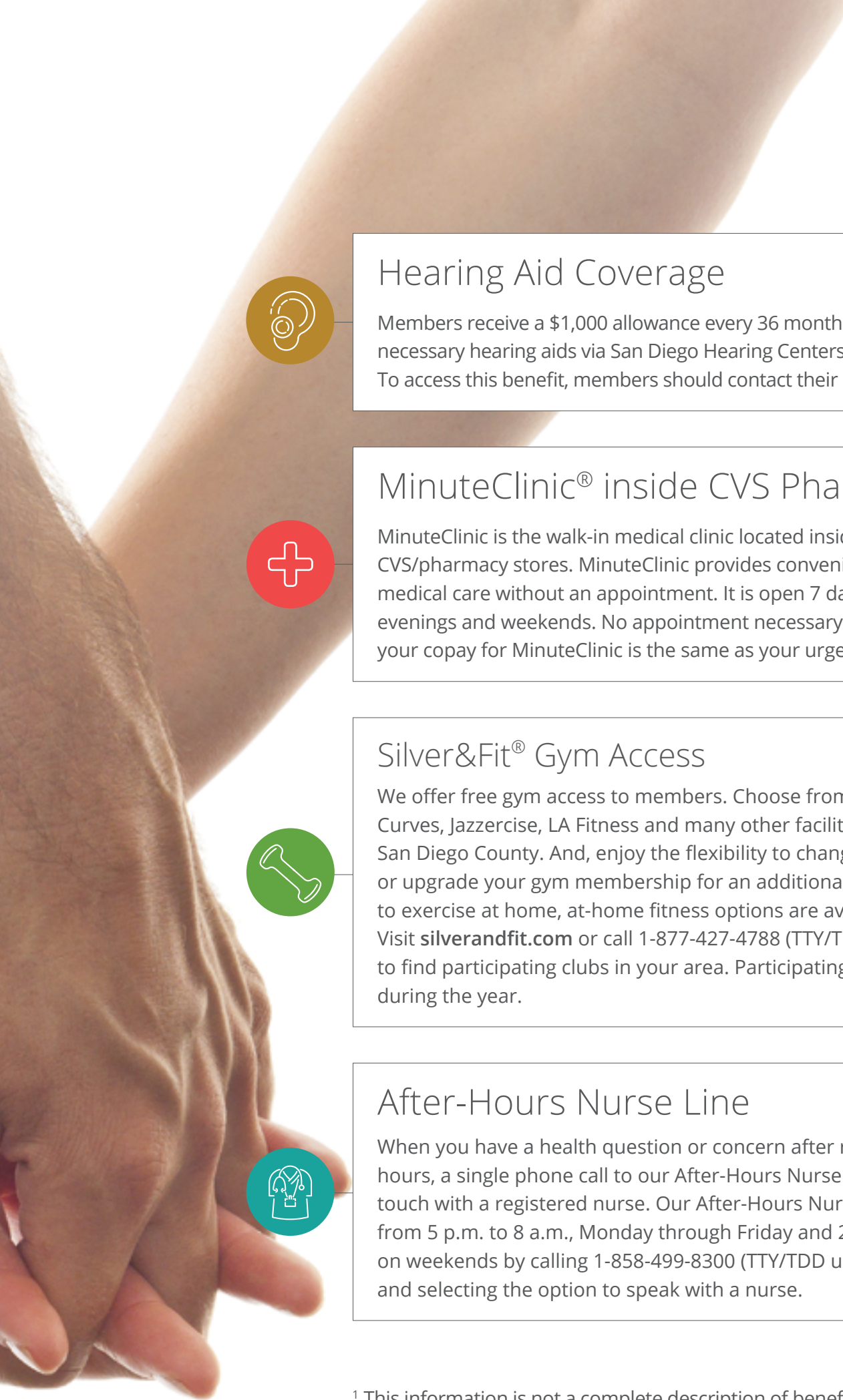
Expanded Chiropractic Coverage

Like all Medicare Advantage plans, Sharp Direct Advantage offers chiropractic benefits for spinal subluxation treatment. This is provided through your medical group by referral from your primary care physician (PCP) at your specialist visit copay. In addition, Sharp Direct Advantage offers a supplemental chiropractic benefit through American Specialty Health. This means you can self-refer to any specialist in the network for up to 30 visits per year with a \$10 copay.



Emergency Travel Services

When faced with a medical emergency while traveling 100 miles or more away from home or in another country, our partner connects members to doctors, hospitals, pharmacies and other services. Our members are guaranteed to receive hospital admission if needed. We also offer prescription assistance, referrals for interpretation and legal services, pre-trip information, as well as assistance with lost luggage, documents and personal belongings while you're on your trip.



Hearing Aid Coverage

Members receive a \$1,000 allowance every 36 months toward medically necessary hearing aids via San Diego Hearing Centers and HearUSA. To access this benefit, members should contact their PCP.



MinuteClinic[®] inside CVS Pharmacy[®]

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. For most members, your copay for MinuteClinic is the same as your urgent care copay.



Silver&Fit[®] Gym Access

We offer free gym access to 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 or upgrade your gym membership for an additional fee. If you prefer to exercise at home, at-home fitness options are available as well. Visit silverandfit.com or call 1-877-427-4788 (TTY/TDD 1-877-710-2746) to find participating clubs in your area. Participating gyms may change during the year.



After-Hours Nurse Line

When you have a health question or concern after regular business hours, a single phone call to our After-Hours Nurse Line puts you in touch with a registered nurse. Our After-Hours Nurse Line is available from 5 p.m. to 8 a.m., Monday through Friday and 24 hours a day on weekends by calling 1-858-499-8300 (TTY/TDD users call 711), and selecting the option to speak with a nurse.







¹ This information is not a complete description of benefits. Call 1-855-562-8853 (TTY/TDD: 711) for more information.

Comprehensive dental coverage by Delta Dental¹

We are proud to offer a comprehensive dental HMO plan to our Basic and Premium members, Dental Advantage by Delta Dental of California. And with low copays and no hidden costs for dental services, we think that's something to smile about.



With Dental Advantage by Delta Dental, you'll enjoy:

- 
Low copays
 Such as \$5 office visits
- 
Low cost prevention services
 Such as \$15 cleanings
- 
Your choice of dentist
 From the DeltaCare® USA HMO network
- 
No waiting period
 With dental benefits that kick in with your Medicare Advantage benefits
- 
Comprehensive coverage
 Including fillings, crowns and dentures
- 
Unlimited smiles
 With dental coverage you can count on

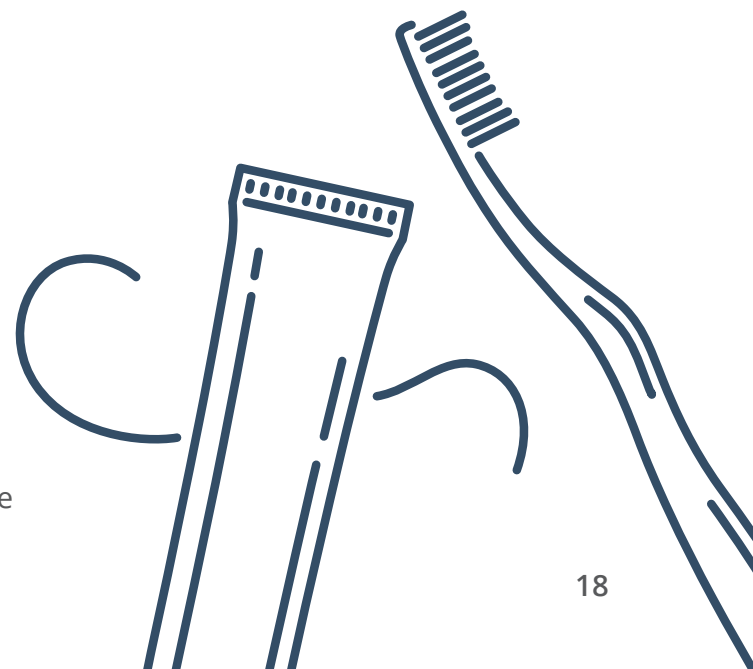
The monthly premium is only \$11 for our Sharp Direct Advantage Basic and Premium² members. To see a full list of benefits and to find a network dentist in your area, visit sharpmedicareadvantage.com/our-plans/dental-care.

Some of the benefits covered under Dental Advantage by Delta Dental include:	Member Copay
Office Visit	\$5
X-rays, complete series, 1 every 24 months	\$0
Cleaning, 1 every 6 months	\$15
Filling, 1 surface	\$55

The dental benefit can only be added at initial enrollment period in Sharp Direct Advantage or during the annual election period.

¹ Delta Dental refers to Delta Dental of California.

² Dental benefit is optional for Sharp Direct Advantage Basic and Premium members.



Best Health[®] wellness program

Best Health is a comprehensive wellness program available to all Sharp Health Plan members at no extra cost. Offering robust online wellness tools, interactive workshops, one-on-one health coaching and more, Best Health provides resources you can use to reach your health goals. Visit yourbesthealth.com to register.

Wellness Assessment

The first step to getting healthy and staying healthy is to complete your Wellness Assessment online. Your Wellness Assessment will help you identify opportunities for improving your health, get a baseline for measuring your progress and access resources that are customized to your individual needs. You can also share your results with your doctor.

Personalized coaching

Sharp Health Plan members have direct access to personal health and lifestyle coaches. Coaching is completely customized to your unique needs at no additional cost to you. Your coach will:

- Personally welcome you to the plan
- Help you understand and fully take advantage of your benefits
- Serve as your point of contact for questions you might have throughout the year
- Help you reach personal health goals, such as:
 - Losing weight
 - Developing an exercise routine
 - Creating a meal plan
 - Quitting smoking

Wellness & Health Promotion Accreditation

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



Interactive online tools and resources



Mobile app

- Access your favorite trackers and tools from your smart phone.
- Manage risk factors like blood pressure and cholesterol.
- View and celebrate your progress.



Healthy eating plans

- Create healthier, personalized meal plans.
- Track calories using your personal food log.
- Choose from hundreds of healthy recipes and grocery lists.



Exercise tools

- Get the benefits of a personal trainer without the cost. Choose from a variety of multi-week fitness plans or create your own.
- Connect your wearable fitness device or app to Best Health to conveniently track your exercise progress.
- Use the Cardio Log to track all your activities, from gardening to dancing to yoga.



Wellness workshops

- Choose from a variety of topics like nutrition or exercise routines.
- Complete interactive activities to help increase your health IQ.

sharpmedicareadvantage.com, at your service

Health care concerns can arise at any time. We have resources in place to connect you to the information you need, when you need it. Remember, we're just a click away!



Your personal health care assistant

We're dedicated to providing updates and important information in a way that is most convenient for you. From sharpmedicareadvantage.com you can:

- Learn more about Medicare
- Register for a free Sharp Direct Advantage Seminar
- Request a one-on-one appointment with a licensed sales representative
- Enroll in a Sharp Direct Advantage plan
- Find a primary care physician who is right for you
- Find an urgent care center, pharmacy or hospital near you
- Visit our preventive and wellness center to access health resources, news and articles
- See if your prescription is on our drug list
- Register for Sharp Connect

Sharp Connect, your member portal

Easily manage your plan through our member portal, Sharp Connect. By creating an account, you can securely access your complete plan information, including information about your PCP, prescription details and estimated costs, and so much more.

- Securely access details of your coverage
- Check benefits, eligibility and costs
- Choose or change your PCP
- Update your contact information
- View, print or request your member ID card
- Download member forms and view correspondence
- View drug list / costs



Understand when you can enroll

You can enroll in Sharp Direct Advantage during the following periods:

Annual Election Period (AEP), Oct. 15 – Dec. 7

During this time, you may make changes to your current Medicare plan and those changes will take effect on Jan. 1.

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.

Open Enrollment Period (OEP)

You can join from Jan. 1 – March 31. If you are enrolled in a Medicare Advantage plan, you'll have a one-time opportunity to:

- Switch to a different Medicare Advantage plan
- Drop your Medicare Advantage plan and return to Original Medicare, Part A and Part B
- Sign up for a stand-alone Medicare Part D Prescription Drug Plan (if you return to Original Medicare)
- Drop your stand-alone Medicare Part D Prescription Drug Plan

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
- Receiving Extra Help paying for your Medicare prescription drug coverage

Enrollment at a glance

📅 2018

📅 2019

Annual Election
Oct. 15 – Dec. 7

Open Enrollment
Jan. 1 – March 31

Initial Enrollment
Year-Round

Special Enrollment
Year-Round

Enroll today!

Visit sharpmedicareadvantage.com/sharpretirees
or call Customer Care at 1-855-562-8853
(TTY/TDD 711) to join.



Pre-enrollment Checklist

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call and speak to a Customer Care representative at 1-855-562-8853, (TTY/TDD 711).

Understanding the Benefits

- Review the full list of benefits found in the Evidence of Coverage (EOC), especially for those services that you routinely see a doctor. Visit sharpmedicareadvantage.com or call 1-855-562-8853, TTY/TDD: 711 to view a copy of the EOC.
- Review the Provider and Pharmacy Directory (or ask your doctor) to make sure the doctors you see now are in the network. If they are not listed, it means you will likely have to select a new doctor.
- Review the Provider and Pharmacy Directory to make sure the pharmacy you use for any prescription medicines is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.

Understanding Important Rules

- In addition to your monthly plan premium, you must continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month.
- Benefits, premiums and / or copayments / coinsurance may change on Jan. 1, 2020.
- Except in emergency or urgent situations, we do not cover services by out-of-network providers (doctors who are not listed in the Provider and Pharmacy Directory).



Enrolling is as easy as 1-2-3

- 1 To join Sharp Health Plan's Medicare plans you must:
 - Reside in San Diego County
 - Be eligible for Medicare Part A and Part B
 - Be a former employee of Sharp HealthCare or their Medicare-eligible dependent
 - No longer be employed by Sharp HealthCare. Per Diem employees are eligible for Sharp Direct Advantage Individual plan.

- 2 Enroll in Medicare Part B
If you have not already enrolled in Medicare Part B, download the Request for Employer Information Form (CMS-L564) and Application for Enrollment in Medicare Part B (CMS-40B) from [cms.gov](https://www.cms.gov).

Have your employer complete the Employer Information Form (CMS-L564) then drop off your forms at your local Social Security office. Be sure to ask for a receipt of your enrollment. To find your local Social Security office, call 1-800-772-1213 (TTY users call 1-800-325-0778).

- 3 Join Sharp Health Plan today!
If you are eligible for Medicare and Sharp Health Plan, call us toll-free at 1-855-562-8853 (TTY/TDD 711) for personal assistance or visit our website at sharpmedicareadvantage.com.

Hours of operation:

8 a.m. – 6 p.m. Pacific time, Monday through Friday

Calling after-hours will direct you to our voicemail system and a Customer Care representative will return your call the next business day.

Everything you need to enroll now

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

- The Medicare number and Part A and Part B 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. Visit sharpmedicareadvantage.com/findadoctor to find a doctor.

2019 Summary of Benefits

Jan. 1 – Dec. 31, 2019

Things to know about Sharp Health Plan (HMO)



Sharp Health Plan's
Medicare website
sharpmedicareadvantage.com/sharpretirees



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



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



Who can join?

To join the Sharp Health Plan (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 our service area, which is San Diego County.



H5386_2019 SHC Summary of Benefits

Which doctors, hospitals and pharmacies can I use?

Sharp Health Plan (HMO) has a network of doctors, hospitals, pharmacies and other providers. If you use the providers that are not in our network, the plan may not pay for these services. **Some services may require prior authorization and may require a referral from your PCP.** 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, or call us for more information.

How will I determine my drug costs?

Our plan groups each medication into one of six “tiers.” You will use the Sharp Health Plan 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 or Catastrophic Coverage. These are explained later in this document beginning on page 36.

- 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, 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 Health Plan is an HMO plan with a Medicare contract. Enrollment in Sharp Health Plan depends on contract renewal.

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



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 us and ask for the "Evidence of Coverage."

Benefit	Sharp Direct Advantage Basic (HMO)	Sharp Direct Advantage Premium (HMO)
How much is the monthly premium? You must continue to pay your Medicare Part B premium.	\$0 per month	\$59 per month
How much is the deductible?	These plans do not have deductibles.	
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 keep getting covered hospital and medical services and 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>	
	\$3,400 yearly limit for services you receive from in-network providers.	
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 Coverage ^{1,2}	<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>	
	<p>\$125 per day for days 1 through 5 \$0 per day for days 6 and beyond</p>	<p>\$50 per day for days 1 through 6 \$0 per day for days 7 and beyond</p>

Benefit	Sharp Direct Advantage Basic (HMO)	Sharp Direct Advantage Premium (HMO)
Outpatient Hospital Coverage ¹	Ambulatory surgical center: \$150 copay Outpatient hospital: \$150 copay	Ambulatory surgical center: \$50 copay Outpatient hospital: \$50 copay
Doctor Visits	Primary Care Physician visit: \$5 copay Specialist visit: \$20 copay	Primary Care Physician visit: \$5 copay Specialist visit: \$10 copay
Preventive Care	<p>\$0</p> <p>Our plans cover many preventive services, including:</p> <ul style="list-style-type: none"> • Abdominal aortic aneurysm screening • Alcohol misuse screenings & counseling • Bone mass measurements (bone density) • Cardiovascular disease screenings • Cardiovascular disease (behavioral therapy) • Cervical & vaginal cancer screening • Colorectal cancer screenings (colonoscopy, fecal occult blood test, flexible sigmoidoscopy) • Depression screenings • Diabetes screenings • HIV screening • Lung cancer screening • Mammograms (screening) • Nutrition therapy services • Obesity screenings & counseling • Prostate cancer screenings (PSA) • Sexually transmitted infections screening & counseling • Tobacco use cessation counseling • Vaccines, including flu shots, hepatitis B shots, pneumococcal shots • “Welcome to Medicare” preventive visit (one-time) • Yearly “Wellness” visit 	
Emergency Care	<p>\$50 copay</p> <p>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.</p>	
Urgently Needed Services	\$25 copay	\$10 copay

Note: Services with a ¹ may require prior authorization.
Services with a ² may require a referral from your doctor.

2019 Summary of Benefits, continued

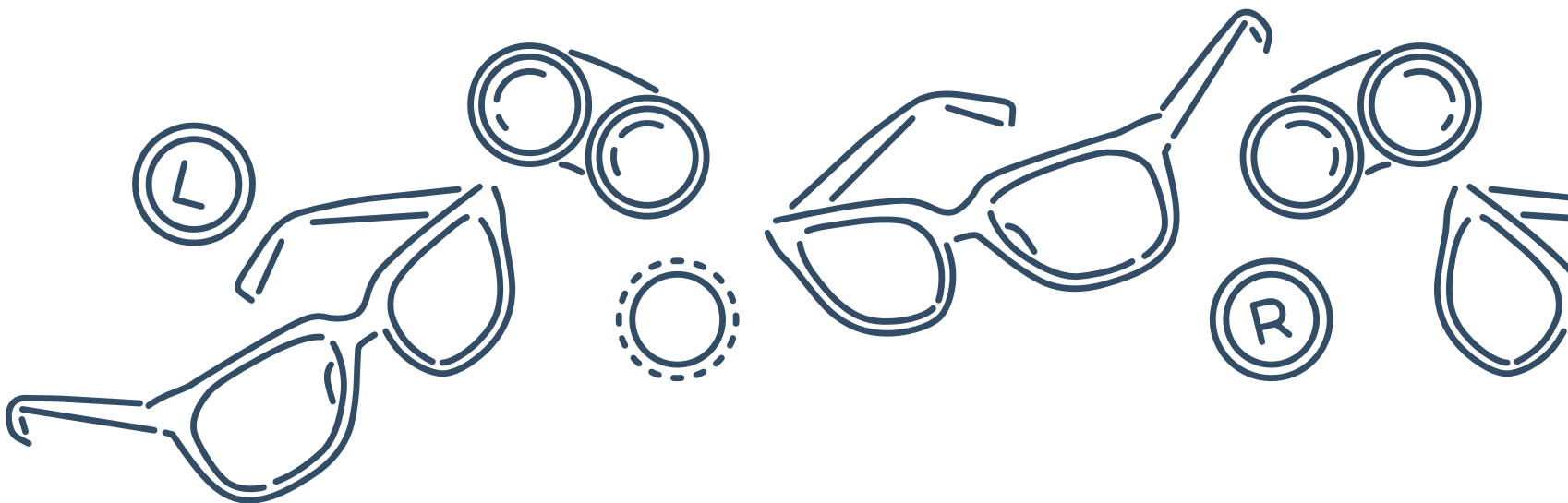
Benefit	Sharp Direct Advantage Basic (HMO)	Sharp Direct Advantage Premium (HMO)
Diagnostic Tests, Lab and Radiology Services, and X-rays (costs for these services may vary based on place of service) ^{1,2}	Diagnostic radiology services (such as MRIs, CT scans): 10% of the cost Diagnostic tests and procedures: \$5 Lab services: \$5 copay Outpatient X-rays: \$5 copay Therapeutic radiology services (such as radiation treatment for cancer): 10% of the cost	Diagnostic radiology services (such as MRIs, CT scans): 5% of the cost Diagnostic tests and procedures: \$0 Lab services: \$0 copay Outpatient X-rays: \$0 copay Therapeutic radiology services (such as radiation treatment for cancer): 5% of the cost
Hearing Services ¹	Exam to diagnose and treat hearing and balance issues: \$20 copay Hearing aid fitting / evaluations: \$20 copay Hearing aid: Our plan pays up to \$1,000 every three years.	Exam to diagnose and treat hearing and balance issues: \$10 copay Hearing aid fitting / evaluations: \$10 copay Hearing aid: Our plan pays up to \$1,000 every three years.
Dental Services ¹	Limited dental services (this does not include services in connection with care, treatment, filling, removal or replacement of teeth): \$20 copay	Limited dental services (this does not include services in connection with care, treatment, filling, removal or replacement of teeth): \$10 copay
Delta Dental Services ³	\$11 monthly premium \$5 office visits \$15 cleanings \$0 complete oral exams (This includes preventive and diagnostic services, basic and major dental services at fixed copays.)	

Note: Services with a ¹ may require prior authorization.

Services with a ² may require a referral from your doctor.

³Delta Dental refers to Delta Dental of California. Dental benefits are provided through the DeltaCare® USA program offered by Delta Dental of California.

Benefit	Sharp Direct Advantage Basic (HMO)	Sharp Direct Advantage Premium (HMO)
Vision Services ¹	<p>Exam to diagnose and treat diseases and conditions of the eye (including yearly glaucoma screening): \$20 copay</p> <p>Our plan pays up to \$105 every two years for contact lenses in lieu of eyeglasses with a \$20 copay.</p> <p>Our plan pays up to \$95 every two years for eyeglass frames.</p> <p>Routine eye exam (for up to 1 every year): \$20 copay</p>	<p>Exam to diagnose and treat diseases and conditions of the eye (including yearly glaucoma screening): \$10 copay</p> <p>Our plan pays up to \$105 every two years for contact lenses in lieu of eyeglasses with a \$20 copay.</p> <p>Our plan pays up to \$95 every two years for eyeglass frames.</p> <p>Routine eye exam (for up to 1 every year): \$20 copay</p>
Inpatient Mental Health Care	<p>The copay for hospital benefit is based on a benefit period. A benefit period begins the day you're admitted as an inpatient and ends when you haven't received any inpatient care for 60 days in a row. If you go into a hospital after one benefit period has ended, a new benefit period begins. You must pay the inpatient hospital copayment for each benefit period. There's no limit to the number of benefit periods.</p> <p>\$125 per day for days 1 through 5 \$0 per day for days 6 and beyond</p>	<p>The copay for hospital benefit is based on a benefit period. A benefit period begins the day you're admitted as an inpatient and ends when you haven't received any inpatient care for 60 days in a row. If you go into a hospital after one benefit period has ended, a new benefit period begins. You must pay the inpatient hospital copayment for each benefit period. There's no limit to the number of benefit periods.</p> <p>\$50 per day for days 1 through 6 \$0 per day for days 7 and beyond</p>



2019 Summary of Benefits, continued

Benefit	Sharp Direct Advantage Basic (HMO)	Sharp Direct Advantage Premium (HMO)
Outpatient Mental Health Care	Outpatient group therapy visit: \$5 copay Outpatient individual therapy visit: \$5 copay	
Skilled Nursing Facility (SNF) ¹	Our plan covers up to 100 days in a SNF. \$0 per day for days 1 through 20	
	\$150 per day for days 21 through 57 \$0 per day for days 58 through 100	\$75 per day for days 21 through 48 \$0 per day for days 49 through 100
Rehabilitation Services ¹	Cardiac (heart) rehab services (for a maximum of 2 one-hour sessions per day for up to 36 sessions up to 36 weeks): \$20 copay Occupational therapy visit: \$20 copay Physical therapy and speech and language therapy visit: \$20 copay	Cardiac (heart) rehab services (for a maximum of 2 one-hour sessions per day for up to 36 sessions up to 36 weeks): \$10 copay Occupational therapy visit: \$10 copay Physical therapy and speech and language therapy visit: \$10 copay
Ambulance ¹	\$200 copay	
Transportation	Not covered	
Part B Drugs (including chemotherapy drugs) ¹	20% of the cost	15% of the cost
Foot Care (podiatry services) ²	Foot exams and treatment (if you have diabetes-related nerve damage and/or meet certain conditions): \$20 copay	Foot exams and treatment (if you have diabetes-related nerve damage and/or meet certain conditions): \$10 copay

Note: Services with a ¹ may require prior authorization.
 Services with a ² may require a referral from your doctor.

Benefit	Sharp Direct Advantage Basic (HMO)	Sharp Direct Advantage Premium (HMO)
Medical Equipment / Supplies (wheelchairs, oxygen, etc.) ¹	20% of the cost	15% of the cost
Wellness Programs	<p>\$0</p> <p>Wellness programs include:</p> <p>Silver&Fit Gym Membership 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 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 ²	<p>Manipulation of the spine to correct a subluxation (when 1 or more of the bones of your spine move out of position): \$20 copay</p> <p>Supplemental chiropractic through American Specialty Health: \$10 copay, maximum 30 office visits per year</p>	<p>Manipulation of the spine to correct a subluxation (when 1 or more of the bones of your spine move out of position): \$10 copay</p> <p>Supplemental chiropractic through American Specialty Health: \$10 copay, maximum 30 office visits per year</p>
Diabetes Supplies and Services ^{1,2}	<p>Diabetes monitoring supplies: 20%</p> <p>Diabetes self-management training: \$0</p> <p>Therapeutic shoes or inserts: 20% of the cost</p>	<p>Diabetes monitoring supplies: 15%</p> <p>Diabetes self-management training: \$0</p> <p>Therapeutic shoes or inserts: 15% of the cost</p>
Home Health Care ¹	\$0	
Prosthetic Devices (braces, artificial limbs, etc.) ¹	<p>Prosthetic devices: 20% of cost</p> <p>Related medical supplies: 20% of the cost</p>	<p>Prosthetic devices: 15% of cost</p> <p>Related medical supplies: 15% of the cost</p>
Renal Dialysis ¹	\$0	

Part D Drugs¹

You pay the Initial Coverage amounts until your total yearly prescription drug costs reach \$3,820. 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 (Cost shares apply to both Basic and Premium.)		
	Standard Retail Cost Share		Standard Mail-Order Cost Share
	Retail 1 1-month supply	Retail 3-month supply	Mail-Order 3-month supply
Tier 1 (Preferred Generic)	\$2 copay	\$6 copay	\$4 copay
Tier 2 (Generic)	\$6 copay	\$18 copay	\$12 copay
Tier 3 (Preferred Brand)	\$40 copay	\$120 copay	\$80 copay
Tier 4 (Non-preferred Drug)	\$90 copay	\$270 copay	\$180 copay
Tier 5 (Specialty)	33% of the cost	Not offered	Not offered
Tier 6 (Select Care)	\$0 copay	\$0 copay	\$0 copay

Note: Services with a ¹ may require prior authorization.
Services with a ² may require a referral from your doctor.

Coverage Gap

Most Medicare drug plans have a coverage gap (also called the donut hole). This means that there is a temporary change in what you will pay for your prescription drugs. The coverage gap begins after the total yearly drug cost (including what our plan has paid and what you have paid) reaches \$3,820.

After you enter the coverage gap, you pay 25% of the plan's cost for covered brand name drugs and 37% of the plan's cost for covered generic drugs until your costs total \$5,100, which is the end of the coverage gap. Not everyone will enter the coverage gap.

Catastrophic Coverage

After your yearly out-of-pocket prescription drug costs (including drugs purchased through your retail pharmacy and through mail order) reach \$5,100, you pay the greater of:

- 5% of the cost, or
- \$3.40 copay for generic (including brand drugs treated as generic) and an \$8.50 copay for all other Part D drugs

Learn more about
Part D coverage

Visit sharpmedicareadvantage.com
to access the Evidence of Coverage
or call Customer Care.



Frequently asked questions

Which doctors or hospitals accept Sharp Health Plan?

Sharp Health Plan plans are HMOs (health maintenance organizations) that give 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.

What is a network?

A network is a group of doctors, hospitals, pharmacies, and other medical service providers associated with your unique health plan.

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

To find a PCP or to see if your PCP is in one of our networks, visit sharpmedicareadvantage.com/findadoctor. Select the Sharp Direct Advantage Network, then 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.

Your PCP will be your main doctor and point of contact who is most familiar with your health history and coordinates your health care. PCPs usually specialize in family practice, internal medicine, general practice or pediatrics. We have several physician groups from which you can choose your doctor. This group will be your plan medical group (PMG). You receive specialty care and access to hospitals and urgent care centers from the providers affiliated with your PMG.

What is a 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. It is important to keep in mind that referrals or authorizations do not transfer between PMGs, and you only have access to one PMG at a time.

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, Sharp Community Medical Group (SCMG) and our regional partner, Greater Tri Cities IPA. To find out which doctors are affiliated with your PMG, refer to the Sharp Direct Advantage Network Provider and Pharmacy Directory at sharpmedicareadvantage.com/findadoctor or call Customer Care at 1-855-562-8853 (TTY/TDD 711).

Are emergency or urgently needed services covered?

Yes. We offer worldwide coverage for urgent and emergency health services.

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 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 prescriptions 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.

Are prescriptions covered? Do you offer mail-order service for prescriptions?

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

You also have the option of using our mail-order pharmacy, Postal Prescription Services (sharpmedicareadvantage.com/mailorder) for maintenance medications.

At sharpmedicareadvantage.com/members/get-care/sharp-advantage-providers, you can use our Pharmacy Directory to find a pharmacy near you, learn more about specialty medications that may be available, and find out if a specific drug is on our drug list.

How can I learn if my prescription is covered?

Visit sharpmedicareadvantage.com/druglist, click on "Formulary," then select "2019 Individual Comprehensive Plan Formulary" to view our list of covered drugs.

Can I use Sharp Health 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 and must continue to pay your Medicare Part B premium, if you have one, and it is not paid by Medi-Cal or another 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.



Multi-Language Interpreter Services

English

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 1-855-562-8853 (TTY/TDD 711).

Español (Spanish)

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-562-8853 (TTY/TDD 711).

繁體中文 (Chinese)

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-855-562-8853 (TTY/TDD 711)。

Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-855-562-8853 (TTY/TDD 711).

Tagalog (Tagalog – Filipino):

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-855-562-8853 (TTY/TDD 711).

한국어 (Korean):

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-855-562-8853 (TTY: 711) 번으로 전화해 주십시오.

Հայերեն (Armenian):

ՈՒՇԱԴՐՈՒԹՅՈՒՆՆԵՐ ԵՐԵ խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Ձանգահարեք 1-855-562-8853 (TTY (հեռատիպ) 711).

فارسی (Farsi):

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-855-562-8853 (TTY/TDD 711) تماس بگیرید.

Русский (Russian):

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-855-562-8853 (телетайп: 711).

日本語 (Japanese):

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-855-562-8853 (TTY/TDD 711) まで、お電話にてご連絡ください。

آريبرعلا (Arabic):

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-855-562-8853 (رقم هاتف الصم والبكم : 711).

ਪੰਜਾਬੀ (Punjabi):

ਧਿਆਨ ਦਇ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ।
1-855-562-8853 (TTY/TDD 711) 'ਤੇ ਕਾਲ ਕਰੋ।

ខ្មែរ (Mon Khmer, Cambodian):

ប្រយ័ត្ន: ប៊ីសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សំរាប់ជំនួយជូនកែភាសា ជាមិនគិតឈ្នួល គឺអាចមានសំរាប់ប៊ីអ្នក។ ចូរ ទូរស័ព្ទ 1-855-562-8853 (TTY/TDD 711)។

Hmoob (Hmong):

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau
1-855-562-8853 (TTY/TDD 711).

हिंदी (Hindi):

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं।
1-855-562-8853 (TTY/TDD 711) पर कॉल करें।

ภาษาไทย (Thai):

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-855-562-8853 (TTY/TDD 711).

Nondiscrimination 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 (such as large print, audio, accessible electronic formats, or 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 Customer Care at 1-855-562-8853.

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 our Civil Rights Coordinator at:

- Address: Sharp Health Plan Appeal/Grievance Department
8520 Tech Way, Suite 201
San Diego, CA 92123-1450
- Telephone: 1-855-562-8853 (TTY/TDD 711) Fax: (858) 636-2256

You can file a grievance in person or by mail, fax, or you can also complete the online Grievance/Appeal form on the Plan's website sharphealthplan.com. Please call our Customer Care team at 1-855-562-8853 if you need help filing a grievance. 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>.



Join today!

If you are eligible for Medicare and Sharp Health Plan, call us toll-free at **1-855-562-8853** (TTY/TDD 711) for personal assistance or visit our website at **sharpmedicareadvantage.com**.

Hours of operation:

8 a.m. – 6 p.m. Pacific time, Monday through Friday

Calling after-hours will direct you to our voicemail system and a Customer Care representative will return your call the next business day.



Consider us your personal
health care assistantSM

sharpmedicareadvantage.com/sharpretirees

Sharp Health Plan is an HMO with a Medicare contract. Enrollment with Sharp Health Plan depends on contract renewal.

Sharp Health Plan (HMO) es un plan de salud HMO que tiene un contrato con Medicare. La inscripción en Sharp Health Plan depende de la renovación del contrato.

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 1-855-562-8853 for additional information (TTY/TDD users should call 711). Hours are 8 a.m. to 6 p.m., Monday through Friday.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Si desea más información, llame 1-855-562-8853 (los usuarios de TTY/TDD deben llamar al 711). El horario es de 8 de la mañana a 6 de la tarde de lunes a viernes.

