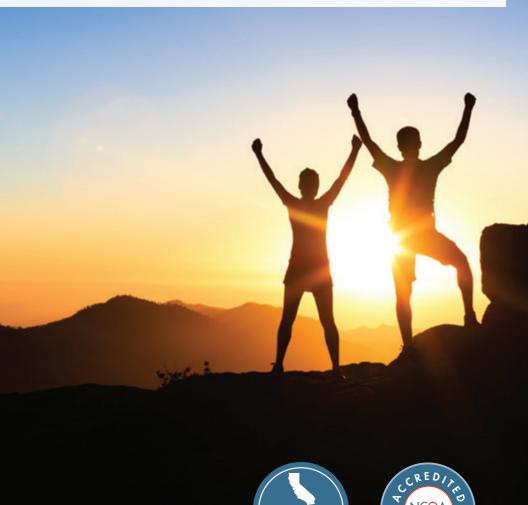


2017 Member Resource Guide

make life better."



HEALTH PLAN



As a local not-for-profit commercial health plan based in San Diego, we believe in providing health insurance designed to make life better. In addition to our excellent coverage, we offer a variety of tools and resources to help you live your best and healthiest life.

Please use this guide to help you get the most out of your coverage from Sharp Health Plan. We're here if you have any questions.

Welcome to the Sharp Health Plan family.

Consider us your personal health care assistant

Visit sharphealthplan.com to learn more.

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Manage your plan

We're here to make using your health plan a breeze! From helping you understand where to get the care you need, to finding the right doctor, filling prescriptions and everything in between, we're here for you.



We're more than just great health coverage



Highest member-rated health plan

We're the highest member-rated health plan in California for rating of Health Plan, Health Care, Personal Doctor and Specialist among reporting California Health Plans. As a Sharp Health Plan member, you'll receive award-winning care from our nationally recognized doctors, medical groups and hospitals.



Quick and easy access to care

Through Sharp Nurse Connection®, our after-hours nurse advice line; MinuteClinic®, the walk-in medical clinic inside CVS/pharmacy®; and Assist America® for global emergency services; our members have access to a variety of care options in San Diego, across the country and around the world.



Health care, simplified

We put the information you need, at your fingertips. Our website is optimized for your smartphone, tablet and desktop. This enhanced experience gives you access to the information you need, when you need it.



Local and not-for-profit

We've been connecting San Diegans to health insurance since 1992. We're a local commercial health plan and we're not-for-profit, but for people just like you.

Can't find what you're looking for?

Go to sharphealthplan.com/faq to view other answers to frequently asked questions.

A quick start as easy as 1-2-3

(1)

Carry your Member ID card

Your Member ID card is your key to accessing our care. You will need it whenever you seek medical services, like visiting your doctor or filling a prescription. Your member ID card also contains important benefit information. Be sure to carry it with you wherever you go.

2

Activate your member account

Visit sharphealthplan.com/sharpconnect online to register for our all-access member portal. Here you can view your unique plan information, see what you can expect to pay for office visits and prescriptions, and more. Everything you need to manage your plan, and your health, is at your fingertips.

(3)

Enjoy the Sharp Health Plan difference

Get ready to experience a different kind of health insurance! Take advantage of all the perks now available to you at no additional cost. From after-hours nurse advice and one-on-one health coaching, to mail order prescription services and alternative care discounts, we're here to help you get the most out of your health insurance.



Access to award-winning doctors, hospitals and medical groups

¹ The source for this data is Quality Compass® 2016 and is used with the permission of the National Committee for Quality Assurance (NCQA). Quality Compass® 2016 includes certain CAHPS® data. Any data display, analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such display, analysis, interpretation, or conclusion. Quality Compass® is a registered trademark of NCQA. CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ). Sharp Health Plan achieved the following summary ratings: an 79.65 for Rating of the Health Plan compared to the state average of 69.82; an 82.26 for Rating of Health Care compared to a state average of 74.4; an 86.02 for Rating of Personal Doctor compared to a state average of 79.95; an 96.35 for How Well Doctors Communicate compared to the state average of 91.84; an 85.21 for Care Coordination compared to a state average of 78.95; and an 94.97 for Treated With Courtesy and Respect compared to a state average of 91.16.

sharphealthplan.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!

24 hours a day, 7 days a week desktop, tablet and mobile access



Your personal health care assistant

Designed with you in mind, our website is optimized for your smartphone, tablet and desktop. We're dedicated to providing updates and important information in a way that is most convenient for you. That's why this enhanced experience gives you access to the information you need, when you need it. From sharphealthplan.com you can:

- Find a Primary Care Physician (PCP) who is right for you
- Sign up for mail order pharmacy
- Find an urgent care center, pharmacy or hospital near you
- Visit our prevention and wellness center
- · Utilize health and wellness resources

- · Access healthy news and articles
- See if your prescription is on our drug list
- Visit our member center for the latest updates
- · 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
- View drug list/costs
- Find a network health care provider
- · Find a doctor, hospital or urgent care
- Access health and wellness information

24 hours a day, 7 days a week sharphealthplan.com/sharpconnect



Can't find what you're looking for online?

Email Customer Care at customer.service@sharp.com.
Prefer to call? We're available at (858) 499-8300 or 1-800-359-2002 from 8 a.m. – 6 p.m., Monday to Friday.



Stay up to date with the latest plan information and news by liking us at facebook.com/sharphealthplan.

Your Primary Care Physician (PCP)

Your PCP is your personal doctor and your main point of contact for medical care. Your PCP is most familiar with your health history and coordinates all of your care, including prescriptions and referrals to other plan providers when needed. Your PCP is part of a Plan Medical Group (PMG), which is part of a Plan Network of providers including specialists, urgent care centers and hospitals.

Highest member-rated personal doctors

among reporting California health plans1



Partner with your PCP

Your PCP is your partner in health. Here are a few things to know:

- Call your PCP first for all of your health care needs. If you are a new patient, be sure to forward a copy of your medical records to your PCP.
- Make sure to tell your PCP about your health history, current treatments, medical conditions, medications you are taking and about other doctors treating you.
- If you have never been seen by your PCP, you should make an appointment for an initial visit.
- You can contact your PCP's office 24 hours a day. If your PCP is not available or if
 it is after regular office hours, leave a message and you will get a return call in 30
 minutes or less.
- If you need immediate advice or guidance after hours, you can call Sharp Nurse Connection® at 1-800-767-4277 to talk to a trained registered nurse.

¹ The source for this data is Quality Compass® 2016 and is used with the permission of the National Committee for Quality Assurance (NCQA). Quality Compass® 2016 includes certain CAHPS® data. Any data display, analysis, interpretation or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such display, analysis, interpretation or conclusion. Quality Compass® is a registered trademark of NCQA. CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ). Sharp Health Plan achieved a summary rating of 86.02 for Rating of Personal Doctor compared to the state average of 79.95.

5 things to bring to your first appointment

- 1. Your Member ID card.
- 2. Any medical and immunization records you have.
- 3. A list of medications you are taking (including over-the-counter medications and supplements) and the names of the doctors prescribing them.
- 4. The results from your completed Personal Health Assessment (PHA). See page 23 if you haven't taken your PHA.
- 5. A list of questions you'd like to ask your doctor—don't be shy!

Did you know?

It is a good idea to stay with a PCP. They can get to know your health needs and history. However, with Sharp Health Plan, you may change to a different PCP in your plan network whenever you like. In most cases, your new PCP will be effective the first day of the following month.



Choose or change your PCP in 3 easy steps

(1) Click

Finding a new PCP is only a click away. Simply visit sharphealthplan.com and click on "Find a Doctor" for a full listing of doctors in your PMG.

2 Search

You can search by plan network, specialty, language preference, gender, location or name. PCPs specialize in family medicine, general practice, internal medicine or pediatrics. Be sure to search for PCPs in your Plan Network, as listed on your ID card.

3 Choose

Once you select a PCP, log in to Sharp Connect at sharphealthplan.com, email or call Customer Care to make the change. In most cases, the change will be effective the first day of the following month. Then you'll receive an updated Member ID card with your new PCP and PMG listed.



Seeing a specialist

A specialist is a doctor who focuses on specific areas of medicine. They can help you get specialized care when medical issues go beyond the scope of your PCP. Except for OB/GYN services, seeing a specialist will require a referral from your PCP. In most cases, work with your PCP to find the best fit for you.

Out-of-area care

Whether traveling for work, on vacation or away at college, you and your family have several options for receiving care when you're outside of San Diego. During regular business hours it is usually best to call your PCP, your main point of contact.

- After hours and on weekends, you can call Sharp Nurse Connection® to talk to a registered nurse.
- For minor illnesses and injuries, visit any MinuteClinic®, the walk-in clinic inside select CVS/pharmacy® stores nationwide.
- And if your situation is more serious, go directly to the nearest urgent care facility or emergency room —and afterwards connect with your PCP to coordinate any follow-up care needs.

Access our provider directory

The Provider Directory includes the complete list of Sharp Health Plan doctors. If you'd like to print a copy, visit sharphealthplan.com/accesscare.



Get the care you need, when you need it

We're here to help you get the right care at the right time. Here are a few different ways you can get the care you need in any situation.

Primary Care Physician (PCP)



Your PCP is your personal doctor and main point of contact for all of your health care needs. He or she will handle your care, coordinate any treatments, refer you to a specialist if you need one and more. You can contact your PCP's office 24 hours a day. If your PCP is not available, or it is before or after regular office hours, you will receive a return call within 30 minutes.

Listed on your Member ID card and in Sharp Connect



Specialist care

In most cases, when you need specialty care, your PCP will refer you to a specialist in your Plan Medical Group (PMG) to ensure that you receive proper medical attention.

sharphealthplan.com/findadoctor



Urgent care

If you require prompt medical attention for a situation that is not life threatening, you can most likely be treated at one of our many urgent care centers within your PMG.¹ If you have a life-threatening emergency, go to the nearest emergency room or call 911.

sharphealthplan.com/urgentcare



MinuteClinic®

MinuteClinic is the walk-in medical clinic located inside select CVS/pharmacy® stores. MinuteClinic provides convenient access to basic care without an appointment.²

cvs.com/minuteclinic



Assist America®

When faced with a medical emergency while traveling 100 miles or more away from home or in another country, Assist America connects you to doctors, hospitals, pharmacies and other services.³

1-800-872-1414 (inside the US) 609-986-1234 (outside the US) assistamerica.com



After hours and on weekends, Sharp Nurse Connection's trained registered nurses are available. They can talk with you about an illness or injury, help you decide where to seek care and provide advice on any of your health concerns.

1-800-359-2002

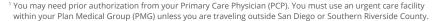
5 p.m. - 8 a.m., Monday to Friday

24 hours on weekends



A hospital emergency room provides fast life-or-limb-saving care, 24/7. If you are in life-threatening danger or at risk of being permanently disabled, it is an emergency and you should call 911 or go immediately to the nearest emergency room.

sharphealthplan.com/hospitals



² A \$40 copay will apply to most services except flu shots, which have a copay of \$10.

³ Reference number for Sharp Health Plan Members: 01-AA-SHP-09073

Prescription drug coverage

Prescription drug coverage is included in your plan to help cover the cost of the covered medications that your doctor prescribes. You can obtain these covered prescriptions from hundreds of local and national pharmacies, and in some cases you can have them delivered directly to your home.

Is my medication covered?

Use our online search tool at sharphealthplan.com/druglist to search medications and learn about restrictions. To view your specific drug list and costs, please log in to Sharp Connect at sharphealthplan.com/sharpconnect.

Which pharmacies can I go to?

As a Sharp Health Plan member, you can visit hundreds of local pharmacy locations and almost all major national pharmacies, including:

Costco

Ralphs

· Rite Aid

Vons

CVS

Sav-on

· Walgreens

Target

Walmart

Use our pharmacy search tool at sharphealthplan.com/pharmacy to browse all Sharp Health Plan pharmacies.

Filling prescriptions while traveling?

If you are planning on traveling, make sure you have enough of your medication to last through your trip. Visit sharphealthplan.com/pharmacy for full details.



Six tips for saving time and money on your prescription drugs

- 1. Ask for a generic drug. Like most health plans, we don't cover brand-name drugs when a generic version is available unless there is a medical reason why the generic cannot be used.
- 2. Get a larger supply of medicine. If you have a chronic long-term condition, you may qualify for a 3-month supply of your prescription at either a retail or mail order pharmacy. This can reduce trips to the pharmacy each month.
- 3. Shop around. Costs for medicines may vary from pharmacy to pharmacy, especially on plans with deductibles.
- 4. Call ahead. Ensure your prescription is ready for pick-up and save yourself a wasted trip.
- 5. Avoid busy times. Pharmacies have the most pick-ups from noon to 2 p.m. and in the evening from 5 p.m. to 7 p.m.
- 6. Know when to order refills. Pharmacies can often tell you how many days ahead of schedule you can order a refill. That way you can set a reminder on your calendar or smartphone.



New prescription from your doctor? Here's what to ask:

Do I need prior authorization?

Some medications require prior authorization before you can pick them up from the pharmacy. If your doctor prescribes you a new medication, be sure to ask if you need prior authorization.

Are there any special instructions for taking this medication?

Sometimes you'll need to take a certain medicine in the morning or at night, or with a meal or on an empty stomach. And some drugs shouldn't be taken with certain foods. Be sure to understand how to take your medicine before you leave the pharmacy.

Should I be aware of any drug interactions?

Some medications shouldn't be taken together or should only be used with other medicines with close monitoring by your doctor. Be aware of what doesn't mix with your prescription. If you're not sure, ask your doctor or pharmacist. Also, be sure to tell your doctor if you've had adverse reactions to medications in the past.

What should I do if I miss a dose?

Do your very best to take your medication as prescribed. Just in case you miss a dose, consult your pharmacist beforehand so you'll know exactly what to do.

Are there any storage requirements?

Ask your pharmacist if there is anything you should keep in mind. For example, some medications need to be refrigerated or kept in a cool place.

View your prescription drug benefits online

Log in to Sharp Connect at sharphealthplan.com/sharpconnect to view your full prescription benefit information, estimated costs and any restrictions or prior authorization requirements for your medications.

Pharmacy terms and definitions

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.
Maintenance Drug	A maintenance drug is prescribed to treat or stabilize chronic conditions such as diabetes or hypertension.
Formulary	The preferred list of medications we cover for illnesses and conditions.
Specialty Formulary	A list of approved specialty drugs used to treat complex or chronic conditions, such as hepatitis or cancer.



Health insurance terms and definitions

We know health insurance terms can be confusing. We've created this table with common terms and definitions to help you better understand your plan and how it works.

Term	Definition
Coinsurance	Your share of the cost for covered benefits, expressed as a percentage of the contracted rate. Using a 20% coinsurance example, if Sharp Health Plan's contract rate for an office visit is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20.
Copayment / Copay	A fixed amount you pay when you receive covered health care services. For example, you might have a \$40 copay to see your Primary Care Physician (PCP) and a \$20 copay for generic drugs.
Deductible	The amount you pay for certain health care services each year before Sharp Health Plan begins to help you pay for them. ¹

We're standing by, ready to help!

Visit sharphealthplan.com or call (858) 499-8300 or 1-800-359-2002.

¹ Not all plans carry a deductible.

² In a family plan, an individual is responsible only for the individual out-of-pocket maximum amount. Cost sharing payments (deductible, copayments and coinsurance, but not premiums) made by each individual in a family contribute to the family out-of-pocket maximum. Once the family out-of-pocket maximum is reached, the plan pays all costs for covered services for all family members. Cost-sharing payments for all covered benefits accumulate toward the out-of-pocket maximum.

Term	Definition
Out-of- Pocket Maximum	The most you pay during a calendar year before Sharp Health Plan pays 100% of the contract rate. ² This does not include premium payments.
Premium	The monthly amount you pay for your health coverage. For individual and family plans, you'll receive a bill each month. For employer-sponsored plans, this amount, minus your employer's contribution, is usually deducted from your paycheck.
Preventive Care	Health care services you receive when you are well, like check-ups, vaccinations and certain screening tests.



Manage your health

+

As a local not-for-profit commercial health plan based in San Diego, we not only serve the people of San Diego, we are the people of San Diego. And that makes all the difference in the world. We are uniquely dedicated to building a healthier community. At Sharp Health Plan, you have access to award-winning health care, resources and tools designed to help you live your best life.



Preventive care at no additional cost

Take advantage of the many preventive care services available to you at no additional charge, when scheduled with an in-network provider and separate from an appointment for other care or treatment. Preventive care services are services you receive when you are well and not having any symptoms.

Benefits for every member¹

The following are examples of preventive care benefits that are covered and have no copayment or deductible:²

Copay	Preventive care
\$0	Well baby and well child (up to age 18) physical exams, immunizations and related screenings
\$0	Well adult physical exams, immunizations and related screenings
\$0	Routine gynecological exams, immunizations and related screenings
\$0	Screening: Breast cancer Cholesterol Cervical cancer Colorectal cancer Depression Sexually transmitted infections Tobacco and alcohol use/ misuse

¹ Benefit plans in effect prior to March 23, 2010, also called "grandfathered plans", are exempt from some aspects of no-cost preventive care.

²The information in this guide includes recommendations adapted from the following sources as of June 2016 and is subject to change:

Preventive services with a rating of A or B from the US Preventive Services Task Force; immunization for children, adolescents and adults recommended by the Centers for Disease Control and Prevention; and preventive care screenings for infants, children, adolescents and women supported by the Health Resources and Services Administration.

4 steps to a healthier life

Living a healthy lifestyle starts with having the right tools. Here's your four-step guide to getting started:

(1) Review

Review our preventive care checklists for women, men, teens and kids online. sharphealthplan.com/preventivecarechecklists

2 Find

Find out which tests, treatments and medications are right for you based on your age, gender and health history. Visit your Primary Care Physician (PCP).

(3) Take

Take your Personal Health Assessment (PHA) to get your wellness score and a profile of your health strengths and risks. sharphealthplan.com/getyourwellnessscore

4 Get

Get personalized workout plans, meal plans and other wellness resources with Best Health. sharphealthplan.com/besthealth



Best He Ith wellness program

Best Health is a comprehensive wellness program available to you 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.

Wellness & Health Promotion (WHP) 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.

One-on-one health coaching

Sharp Health Plan members have direct access to personal health and lifestyle coaches. If you're ready to make a change, a Best Health coach can help! Coaching sessions are one-on-one and telephone based for your convenience. They are completely customized to your individual needs at no cost to you.

Best Health coaching programs are six weeks in length. You will spend 30 minutes on the phone each week with a personal health coach who can help you make positive changes.

Your Personal Health Assessment

The first step to getting healthy and staying healthy is to complete your Personal Health Assessment (PHA) online. Your PHA 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 online tools and resources



Healthy eating plans

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



Wellness workshops

- Choose from a variety of topics like nutrition or work/life balance
- Complete interactive activities to help increase your health IQ



Fitness trackers

- Track progress with your weight, body measurements and heart rate
- Manage risk factors like blood pressure and cholesterol
- Celebrate your progress with weekly, monthly or longer-term reports



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.
- View exercise videos to learn all the right moves for new routines
- Use the Cardio Log to track all your activities, from gardening to dancing to yoga



HealthyNow mobile app

- Your on-the-go wellness companion
- Available for iPhone and Android products
- Access your favorite Best Health trackers and tools from your device

Important plan information



At Sharp Health Plan, we take pride in our role as your trusted health care partner and advocate. We provide updates and important information regularly to our members. Review this section and if you have any questions about the information provided, please contact Customer Care or visit sharphealthplan.com.

Member Handbook

Your Member Handbook provides information on how to use your Sharp Health Plan benefits, including:

- · What services are included or excluded from coverage
- · How to find information about Sharp Health Plan providers
- · How to access primary, specialty, behavioral health and hospital services
- · What to do if you need care before or after regular office hours
- · How to access care when you are outside the service area
- · What to do if you need emergency services
- · Procedures for coverage of prescription drugs
- · How to voice a complaint or file an appeal
- · How to request language assistance

All of this information and more can be found online in the Member Handbook, at sharphealthplan.com/sharpconnect, a secure website. You will also find additional information about your specific benefit plan, including copayments and other financial responsibilities.

Get a copy of your Member Handbook

If you have any questions about this information or would like a paper copy of the Member Handbook, please email Customer Care at customer.service@sharp.com or call (858) 499-8300 or 1-800-359-2002. We are available to assist you Monday to Friday, 8 a.m. to 6 p.m.



Language translation and interpretation—available at no cost to you

If you need language help, please call us at (858) 499-8300 or 1-800-359-2002. Let us know your preferred language when you call. We can have someone help you read this guide. You may also be able to get materials written in your language and an interpreter to help you talk to your doctor or health plan. Free language help is available to all Sharp Health Plan members.

Cuando usted llame, dejenos saber qué idioma prefiere. Podemos asistirle con alguien que le ayude a leer este documento. Usted también puede obtener información por escrito, en su idioma y la ayuda de un intérprete para hablar con su médico o su plan de salud. La ayuda con el idioma es gratuita y está disponible para todos los miembros de Sharp Health Plan.

Si usted necesita ayuda en su idioma

Por favor llámenos al (858) 499-8300 o 1-800-359-2002.



Member rights and responsibilities

As a Sharp Health Plan member, you have certain rights and responsibilities to ensure that you have appropriate access to all covered benefits.

You have the right to:

- · Be treated with dignity and respect.
- · Have your privacy and confidentiality maintained.
- Review your medical treatment and record with your health care provider.
- Be provided with explanations about tests and medical procedures.
- · Have your questions answered about your care.
- Have a candid discussion with your health care provider about appropriate or medically necessary treatment options, regardless of cost or benefit coverage.
- Participate in planning and decision making about your health care with your health care provider.
- Agree to, or refuse, any care or treatment.
- File complaints or appeals about Sharp Health Plan or the services you receive as a Sharp Health Plan member.
- Receive information about Sharp Health Plan, our services and providers and member rights and responsibilities.
- · Make recommendations about member rights and responsibilities.



Questions about your rights?

If you have any questions, please contact Customer Care at (858) 499-8300 or 1-800-359-2002.

You have the responsibility to:

- Provide information (to the fullest extent possible) that Sharp Health Plan and your doctors and other providers need to offer you the best care.
- Understand your health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible.
- Ask questions if you do not understand explanations and instructions.
- Respect provider office policies and ask questions if you do not understand them.
- Follow advice and instructions agreed upon with your provider.
- · Report any changes in your health.
- Keep all appointments and arrive on time. If you are unable to keep an appointment, cancel 24 hours in advance, if possible.
- Notify Sharp Health Plan of any changes in your address or telephone number.
- Let your health care provider or Sharp Health Plan know if you have any suggestions, compliments or complaints.
- Notify Sharp Health Plan of any changes that affect your eligibility, such as if you are no longer working or living in the Plan's service area.

Protected health information

We understand the importance of keeping your personal information confidential and work to ensure that all privacy laws are followed. The Health Insurance Portability and Accountability Act (HIPAA) is a privacy law that governs the use and release of a member's personal health information, also known as protected health information (PHI). Under the HIPAA privacy law, members must be informed about how their PHI will be used and given the opportunity to object to or restrict the use or release of their information. You can find a copy of Sharp Health Plan's Notice of Privacy Practices in the Member Handbook. You can also find it online at sharphealthplan.com.



Quality Improvement Program

At Sharp Health Plan, your health is our top priority. As a not-for-profit health plan, we take pride in our role as your trusted health care partner and advocate. We want to make sure that you have everything you need to be your healthiest and feel your best.

From earning an "Commendable" Accreditation status from the National Committee for Quality Assurance (NCQA), to being one of a select group of health plans nationwide to achieve accreditation specific to Wellness and Health Promotions (NCQA-WHP), to serving among the top health plans in the nation¹ and the highest member-rated health plan in California², we are fully committed to serving the health benefit needs of our community.

NCQA awards a Commendable Accreditation to health plans that meet or exceed its rigorous requirements for consumer protection and quality improvement. These plans have high HEDIS®3 and CAHPS® scores. HEDIS (Healthcare Effectiveness Data and Information Set) is the measurement tool used by the nation's health plans to evaluate their clinical quality and customer service performance. CAHPS (Consumer Assessment of Healthcare Providers and Systems) standardized surveys measure consumer satisfaction with their experiences with health care.

In 2016, a random sample of more than 650 Sharp Health Plan members shared their feedback by participating in the CAHPS® survey process. Based on survey results, Sharp Health Plan is serving its members well.

Sharp Health Plan's performance as the highest-rated health plan in California, among reporting California health plans places us at the 90th percentile nationally. The following table provides the key member experience areas where Sharp Health Plan was rated highest among reporting California health plans:

% of members who rated 8, 9, 10	Sharp Health Plan summary rate	California average
Rating of Health Plan (a measure of member experience and satisfaction with the health plan)	79.65%	69.82%
Rating of Health Care (a measure of member experience and satisfaction with health care received)	82.26%	74.40%
Rating of Personal MD (a measure of member experience and satisfaction with Primary Care Physician [PCP])	86.02%	79.95%

¹ Based on Sharp Health Plan's overall 4.5 out of 5 rating in NCQA Private Health Insurance Plan Rankings 2016-2017.

Understanding your perspective is critical to reaching our quality improvement goals. This year members identified opportunities for improvement in the ease of getting care, tests, treatment and timely specialty appointments.

Sharp Health Plan is working closely with our medical groups to make improvements that make it easier for you to get the services you need, when you need them. Over the past few years, the Plan has added more doctors and specialists to our network of providers and expanded after-hours appointments at designated doctor offices. As an option for the treatment of minor illnesses or injuries without an appointment, we have contracted with MinuteClinic®, the walk-in medical clinic located inside select CVS/pharmacy® stores.

Member feedback is valued and always appreciated, so please continue to share your perspective.

Timely access standards

Making sure you have timely access to care is extremely important to us. Check out the chart below to plan ahead.

Appointment wait times

Appointment type	Must offer the appointment within*
Urgent care appointments with PCP that do not require prior authorization	48 hours of request
Urgent care appointments that require prior authorization	96 hours of request
Non-urgent appointments with a non- physician mental health care provider	10 business days of request
Non-urgent appointments with PCP (Does not include preventive care appointments)	10 business days of request
Non-urgent appointments with a specialist care physician (Does not include routine follow-up appointments)	15 business days of request
Non-urgent appointments for ancillary services such as X-rays, lab tests, etc., for diagnosis or treatment of injury, illness or other health conditions	15 business days of request

^{*} Unless your health care provider has determined that a longer waiting time will not be detrimental to your health.

¹ Based on Sharp Health Plan's overall 4.5 out of 5 rating in NCQA Private Health Insurance Plan Rankings 2016-2017.

² The source for data contained in this publication is Quality Compass® 2016 and is used with the permission of the National Committee for Quality Assurance (NCQA). Quality Compass 2016 includes certain CAHPS data. Any data display, analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such display, analysis, interpretation, or conclusion. Quality Compass® is a registered trademark of NCQA. CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

³ HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

Telephone wait times

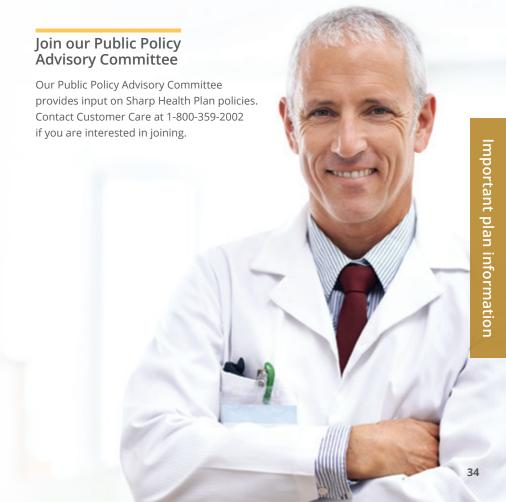
Service	Wait time
Triage or screening services	You can contact your PCP's office 24 hours a day, 7 days a week. If your PCP is not available or if it is before or after regular office hours, your call will be returned within 30 minutes by a qualified health care professional who can decide the urgency of your condition.
Sharp Health Plan Customer Care	Your wait time to speak to a Sharp Health Plan Customer Care representative will not be longer than 10 minutes on average, 8 a.m. to 6 p.m., Monday to Friday.

Utilization Management

At Sharp Health Plan, our licensed medical staff make utilization management decisions based only on appropriateness of care and service after confirming health coverage. Medical practitioners and individuals who conduct utilization reviews are not rewarded for denials of care or service.

- Sharp Health Plan staff are available 8 a.m. to 6 p.m., Monday to Friday, to answer
 questions regarding utilization management. Call 1-800-359-2002. Sharp Health Plan
 also accepts collect calls regarding utilization management. Members have the
 option of leaving a voicemail for a return call the next business day.
- After business hours and on weekends, members can speak with a nurse at Sharp Nurse Connection by calling 1-800-359-2002 and following the prompts.
- Sharp Health Plan assists members who are deaf, hard of hearing or speech impaired. TDD/ TTY services are available to all members by dialing "711" or dialing directly through California Relay Service 1-800-735-2929 TTY 1-800-855-3000 voz y TTY (teléfono de texto) en español.
- Language assistance is also available for members to discuss utilization management. Call Customer Care at (858) 499-8300 or 1-800-359-2002 to be connected.

Sharp Health Plan is committed to providing members with access to the most up-to-date treatment and state-of-the-art care that is both safe and effective. This commitment requires thoughtful evaluation of emerging technologies on an ongoing basis for inclusion in the Sharp Health Plan benefit package. Sharp Health Plan's Health Services Management staff monitors evidence-based medicine research sites regularly to assess new medical technologies. These sites include, but are not limited to, the Agency for Health Care Policy and Research, Centers for Medicare and Medicaid Services, American Medical Association, U.S. Preventive Task Force and other professional medical association entities.



Grievances and Appeals

A grievance is an expression of dissatisfaction with Sharp Health Plan or one of our providers. An appeal is filed when a member disagrees with a decision made by Sharp Health Plan or a Plan Medical Group. Grievances and appeals are categorized by Quality of Care, Access, Quality of Service, Billing and Financial Issues, Benefits, Quality of Practitioner Sites and Other. Sharp Health Plan completes a thorough investigation and follow-up on each case. We also review all cases monthly, quarterly and annually to identify any trends.

If you are having problems with a Plan Provider or Sharp Health Plan, we'd like to hear from you. Start by calling Customer Care at (858) 499-8300 or 1-800-359-2002. A representative will assist you.

If you wish to file a grievance or appeal, Sharp Health Plan's Grievance and Appeal Policy and Procedure can be obtained from your Plan Provider or by calling Customer Care.

If you prefer to send a written grievance or appeal, please send a detailed letter describing your grievance, or complete the Grievance Form available at **sharphealthplan.com** or from any Plan Provider or Customer Care. You may also call Customer Care and we will help you complete the form. Sharp Health Plan will acknowledge receipt of your grievance or appeal within five days, and will send you a decision letter within 30 days. If the grievance or appeal involves an imminent and serious threat to your health, including but not limited to severe pain, potential loss of life, limb or major bodily function, we will provide you with a decision within 72 hours.

The California Department of Managed Health Care is responsible for regulating health care service plans. If you have a grievance against your health plan, you should first telephone your health plan at (858) 499-8300 or 1-800-359-2002 and use your health plan's grievance process before contacting the department. Utilizing this grievance procedure does not

prohibit any potential legal rights or remedies that may be available to you. If you need help with a grievance involving an emergency, a grievance that has not been satisfactorily resolved by your health plan, or a grievance that has remained unresolved for more than 30 days, you may call the department for assistance. You may also be eligible for an Independent Medical Review (IMR). If you are eligible for an IMR, the IMR process will provide an impartial review of medical decisions made by a health plan related to the medical necessity of a proposed service or treatment, coverage decisions for treatments that are experimental or investigational in nature, and payment disputes for emergency or urgent medical services. The department also has a toll-free telephone number (1-888-HMO-2219) and a TDD line (1-877-688-9891) for the hearing and speech impaired. The department's internet website (http://www.hmohelp.ca.gov) has complaint forms, IMR application forms and instructions online.

Independent Medical Review

If care that is requested for you is denied, delayed or modified by Sharp Health Plan or a Plan Medical Group, you may be eligible for an Independent Medical Review (IMR). If you submit an eligible request for an IMR to the Department of Managed Health Care, your case will be reviewed by an independent medical specialist who will make a decision about your request. Independent Medical Reviews are available in the following situations:

- Denial of experimental or investigational treatment for life-threatening or seriously debilitating conditions.
- Denial of a health care service as not medically necessary.

The IMR process is available in addition to any other procedures or remedies that may be available to you. You pay no fees of any kind for an IMR. For non-urgent cases, the independent medical specialist will make a decision within 30 calendar days. For urgent cases involving an imminent and serious threat to your health, the independent medical specialist will usually make a decision within three business days.

Additional information about the IMR process can be found in the Sharp Health Plan Member Handbook, which is available when you visit sharphealthplan.com/sharpconnect and log in. For assistance or to request an IMR application form, please contact Customer Care at (858) 499-8300 or 1-800-359-2002. We are available to assist you 8 a.m. to 6 p.m., Monday to Friday.

Women's health— what you should know

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998. For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with you and your doctor, for:

- All stages of reconstruction of the breast on which the mastectomy was performed.
- Surgery and reconstruction of the other breast to produce a symmetrical appearance.
- · Prostheses.
- Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles, copayments and coinsurance applicable to other medical and surgical benefits provided under your plan.

Organ donation and end-of-life planning

Right now, more than 22,000 Californians wait for an organ transplant. That's 18% of the more than 120,000 people waiting across our country. Tragically, one third of them will die—waiting. There is something you can do to help. Your generosity can save up to eight lives through organ donation, and enhance another 75 lives through tissue donation.

Almost everyone, despite age, gender, ethnicity or geographical location, can register to become an organ donor. This includes newborn infants and senior citizens. In fact, the only people not eligible to donate are those who are HIV-positive or who suffer from active cancer or systemic infection. If you wish to become an organ and/or tissue donor, register online with Donate Life California Organ and Tissue Donor Registry at donatelifecalifornia.org. Be sure to share your decision with family members and encourage them to consider organ donation. Be sure to also consider discussing end-of-life planning with your PCP. Having a plan, called an advance health care directive, in place helps ensure you'll get the care you want if you are ever unable to speak for yourself.

Section 1557 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 Jamie Ryan, 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: Jamie Ryan, Director of Operations
8520 Tech Way, Suite 200
San Diego, CA 92123-1450
Toll-free: 1-800-359-2002
1-800-735-2929 TTY

Fax: (619) 740-8572

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. If you need help filing a grievance, Jamie Ryan, Director of Operations 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.

Multi-language Interpreter Services

English: If you, or someone who you are helping, has questions about Sharp Health Plan, you have the right to obtain help and information in your language without any cost to you. To speak with an interpreter, call (800) 359-2002.

Español (Spanish): Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de Sharp Health Plan, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 800-359-2002.

繁體中文 (Chinese): 务如果您,或是您正在協助的對象,有關Sharp Health Plan代碼及範圍方面有疑問,您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員,請撥電話 (800) 359-2002。

Tiếng Việt (Vietnamese): Nếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về Sharp Health Plan, quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, xin gọi (800) 359-2002.

Tagalog (Tagalog – Filipino): Kung ikaw, o ang iyong tinutulangan, ay may mga katanungan tungkol sa Sharp Health Plan, may karapatan ka na makakuha ng tulong at impormasyon sa iyong wika ng walang gastos. Upang makausap ang isang tagasalin, tumawag sa (800) 359-2002.

한국어 (Korean): 당사는 의료 보험 또는 약품 보험에 관한 질문에 답해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 (800) 359-2002 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Հայերեն (Armenian): Եթե Դուք կամ Ձեր կողմից օգնություն ստացող անձը հարցեր ունի Sharp Health Plan մասին, Դուք իրավունք ունեք անվճար օգնություն և տեղեկություններ ստանալու Ձեր նախընտրած լեզվով։ Թարգմանչի հետ խոսելու համար զանգահարե՛ք (800) 359-2002։

Persian: دروم رد لاوس ، دينکيم کمک وا هب امش هک عسک اي ،امش روم رد لاوس ، دينکيم کمک وا هب امش هک عسک اي ،اموس ، Sharp Health Plan ، الگيار روط هب از دوخ نابز هب تاعالطا وکمک هک ديراد از نيا قح ديشاب هتشاد ناگيار نوط هب از دوخ نابز هب تاعالطا وکمک هک ديراد از نيا قح ديپامن تفايرد نامي .

Русский (**Russian**): Если у вас или лица, которому вы помогаете, имеются вопросы по поводу Sharp Health Plan, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону (800) 359-2002.

日本語 (Japanese): ご本人 Γ 、またはお客 Γ の身の回りの方でも、Sharp Health Planについてご質問がございましたら、ご希望の言語でサポ Γ トを受けたり、情報を入手したりすることができます。料金はかかりません。通 Γ とお話される場合、(800) 359-2002までお電話ください。

كيدلف ، Sharp Health Plan صوصخب قلى ش دعاست صخش عدل وأكيدل ناك ن إ: (Arabic) تيبرعل ميدلف ، عيدلك ، المجرتم عل مجرتم عم شدح تلل .قفلكت قيا نود نم كت غلب تيرورض لااشامول عملاو قدع السملا على علوص حلا يف ق حلاا بالمستا (400) (ب لص تا

ਪੰਜਾਬੀ (**Punjabi):** ਜੇ ਤੁਹਾਨੂੰ , ਜਾਂ ਤੁਸੀ ਜਿਸ ਦੀ ਮਦਦ ਕਰ ਰਹੇ ਹੋ , Sharp Health Plan ਕੋਈ ਸਵਾਲ ਹੈ ਤਾਂ, ਤੁਹਾਨੂੰ ਬਨਿਾ ਕਿਸੇ ਕੀਮਤ 'ਤੇ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਮਦਦ ਅਤੇ ਜਾਣਕਾਰੀ ਪ੍ਰਚਾਪਤ ਕਰਨ ਦਾ ਅਧਿਕਾਰ ਹੈ . ਦੁਭਾਸ਼ੀਏ ਨਾਲ ਗੱਲ ਕਰਨ ਲਈ, (800) 359-2002 ਤੇ ਕਾਲ ਕਰੋ .

ខ្មម់ Mon-Khmer, Cambodian: ឬរសិនបរើអ្នក ឬនរណាម្មនត់ដលែអ្នកកំពុងដង្ហែយ មុននសំណូរអំពី Sharp Health Plan បរ, អ្នកមុននសិធើព្រល់នំនួយនិងពីមែនន បរៅកនុងភាសា ររស់អុនក បរោយមិនអស់ហ្គក់ ។ បរ៉ែមប៊ីនិយាយជាមួយអុនករកដប្ប សូម (800) 359-2002 ។

Hmoob (Hmong): Yog koj, los yog tej tus neeg uas koj pab ntawd, muaj lus nug txog Sharp Health Plan, koj muaj cai kom lawv muab cov ntshiab lus qhia uas tau muab sau ua koj hom lus pub dawb rau koj. Yog koj xav nrog ib tug neeg txhais lus tham, hu rau (800) 359-2002.

हिंदी (Hindi): यदि आपके, या आप द्वारा सहायता किए जा रहे किसी व्यक्ति के Sharp Health Plan के बारे में प्रश्न हैं, तो आपके पास अपनी भाषा में मुफ्त में सहायता और सूचना प्राप्त करने का अधिकार है। किसी दुभाषिए से बात करने के लिए, (800) 359-2002 पर कॉल करें।

ภาษาไทย (Thai): หากคุณ หรือคนที่คุณกาลังช่วยเหลือมีคาถามเกี่ยวกับ Sharp Health Plan คุณ มีสิทธิที่จะได้รับความช่วยเหลือและข้อมูลในภาษาของคุณได้โดยไม่มีค่าใช้จ่าย พูดคุยกับล่าม โทร (800) 359-2002



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What's inside

Understand and get the most out of your health plan, including:

- · Where to access information online and by phone in any language
- · How to get the care you need, when you need it
- · How to find a Primary Care Physician
- How to coordinate care with a specialist
- · Where to find pharmacy locations nationwide
- Where to find the estimated cost of your medications
- How to stay healthy and prevent illness with wellness resources



Consider us your personal health care assistant

sharphealthplan.com

(858) 499-8300 or 1-800-359-2002 8 a.m.– 6 p.m., Monday through Friday customer.service@sharp.com