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The basics of Medicare

Have questions? We have answers! It's understandable to be confused about Medicare and how you 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

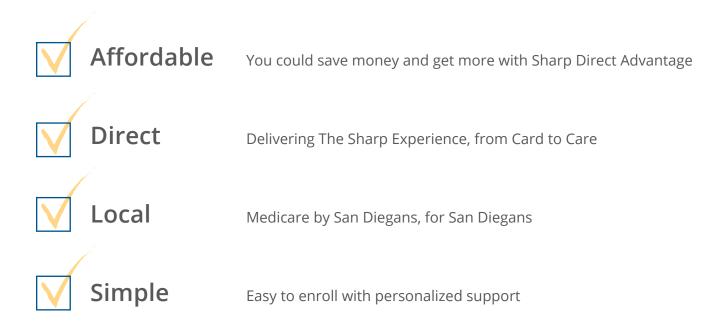
Medicare Advantage plans, also known as Part C plans, are offered through private insurers and combine Part A, Part B and often Part D into one plan with more benefits than Original Medicare. Sharp Health Plan offers a Medicare Advantage / Part C plan.

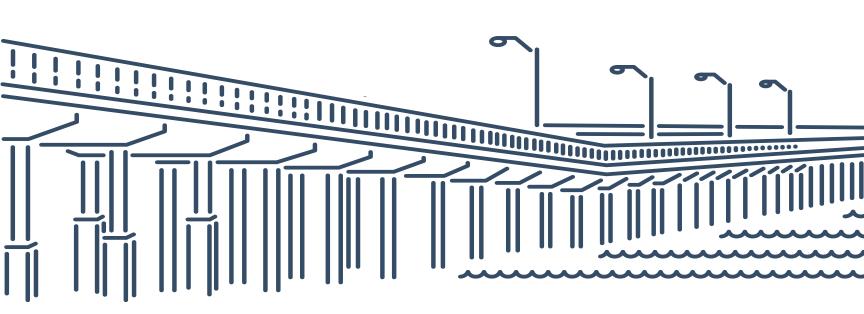




The Sharp Direct Advantage difference

As part of the Sharp HealthCare family, we provide direct access to The Sharp Experience, from health insurance to health 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 plan is designed specifically to do just that.





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, emergency care coverage worldwide, urgent care and so much more.

\$ Select Care medications

- \$ Low monthly premium*
- \$ Fitness resources through Silver&Fit®
- \$10 copays for primary care physician visits
- \$ Comprehensive wellness program with **free** health coaching
- Vision care and hearing aid coverage

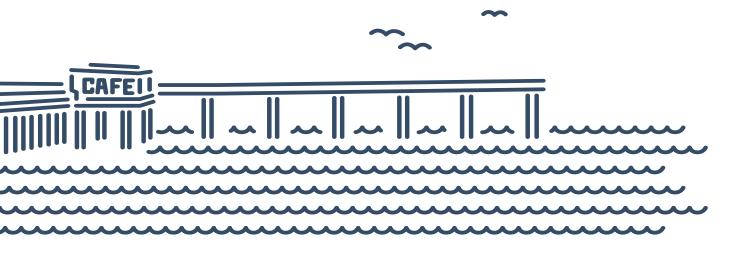
\$ After-Hours Nurse Advice

Get to know us

\$ Diagnostic radiology

Visit **sharpmedicareadvantage.com/CalPERS** for more information about our Sharp Direct Advantage plans, or call 1-833-346-4322 (TTY/TDD: 711).

\$ Ambulance services



^{*} You must continue to pay your Medicare Part B premium.

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

Your care team

Your care team includes your network, plan medical group (PMG) and primary care physician (PCP), who is your personal doctor. Every Sharp-affiliated doctor associates with one of our medical groups. This means that your PMG is set based on who you choose as your PCP. In most cases, your benefit coverage depends on whether your doctor or the place you get care is associated with your PMG or not — we only cover care you receive from doctors and facilities in your PMG, except in emergencies. Knowing who's part of your team is an important first step to understanding how your health plan works.



Your network

CalPERS members are part of the Sharp Direct Advantage Network. A network is a group of doctors, hospitals and other medical service providers associated with your unique plan.



Your plan medical group

A PMG is a designated group of doctors 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 and prior authorizations do not transfer between PMGs. You have access to only one PMG at a time.



Your primary care physician

Your PCP is who you will see if you need a checkup or routine care, want advice about a health problem, or get sick or hurt. Your PCP provides care as soon as you need it, listens carefully and explains things in a way that is easy to understand. Your PCP will also coordinate the care you receive from other providers, including specialists. When you choose your PCP, you are choosing to receive care exclusively from hospitals, specialists, urgent care centers and other providers or locations that are associated with your PCP's PMG.

Looking for a doctor?



Find a doctor online

Visit **sharpmedicareadvantage.com/find-a-doctor-or-pharmacy** to use our online search tool. Ensure you are viewing the Sharp Direct Advantage network.



Download the provider directory

Visit **sharpmedicareadvantage.com/find-a-doctor-or-pharmacy** and click "Download the directory."

Elite-rated medical groups

With the Sharp Direct Advantage Network, you'll find a family of providers close to where you live and spend time. In addition to our regional partner, Greater Tri Cities IPA, we offer affordable access to Sharp's award-winning medical groups, Sharp Rees-Stealy Medical Group and Sharp Community Medical Group, both awarded "Elite" status, the highest possible rating for Standards of Excellence. 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.



1,200+ **Doctors**



7 Hospitals



6 Medical groups



25+ Urgent Care Centers



400+ Pharmacies



400+ Vision Providers



MinuteClinic® locations nationwide

¹ Recipients of "Elite" status in the 2020 national Standards of Excellence™ survey by America's Physician Groups.



Your network

Plan Medical Groups¹

As a member, you'll join a family of award-winning medical groups, physicians and hospitals dedicated to meeting your health care needs.

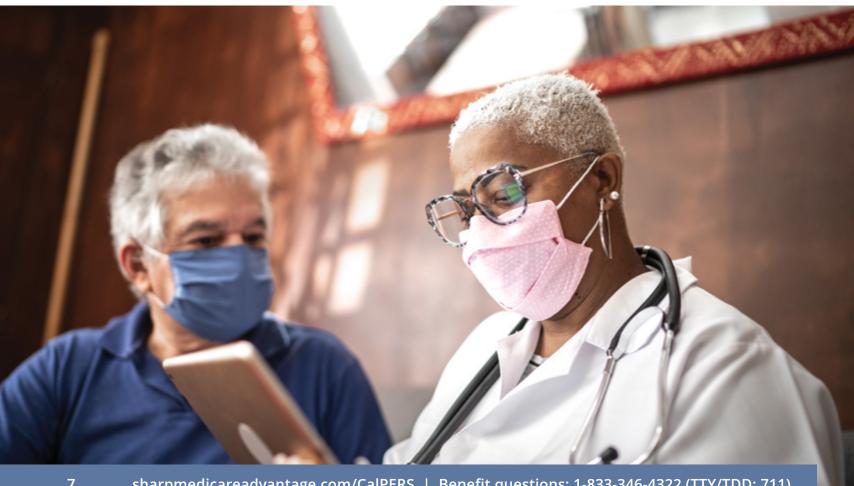
The Sharp Direct Advantage Network offers added flexibility through a vast network of physicians and hospitals, with access to more than 1,200 physicians, including primary care physicians and specialists.

Sharp Rees-Stealy Medical Group

This plan medical group offers a network of more than 400 PCPs and specialists. Admitting hospitals include Sharp HealthCare facilities listed on page 9. Sharp Rees-Stealy Medical Group physicians serve:

- Carmel Valley
- Chula Vista
- Del Mar
- Downtown San Diego
- Frost Street / Frost Street North
- Genesee
- Mira Mesa
- Mount Helix
- Murphy Canyon
- Otay Ranch
- Point Loma

- · Rancho Bernardo
- San Diego
- Santee
- Scripps Ranch
- Sorrento Mesa



Sharp Community Medical Group (SCMG)

These plan medical groups offer more than 1,000 primary care physicians and specialists. Members can select Sharp Community Medical Group (SCMG), SCMG Arch Health Medical Group, SCMG Graybill Medical Group or SCMG Inland North Medical group as their plan medical group. SCMG admitting hospitals are listed on page 9 under Sharp Hospitals.

- Alpine
- Campo
- · Chula Vista
- Clairemont
- College Area
- Coronado
- Del Cerro
- Downtown San Diego
- · East San Diego

- El Cajon
- Hillcrest
- Imperial Beach
- Kearny Mesa
- La Jolla
- La Mesa
- Lakeside
- Linda Vista
- Mira Mesa

- Mission Valley
- National City
- Point Loma
- San Diego
- Santee
- Spring Valley
- University City

SCMG Arch Health Medical Group

Admitting hospitals include Palomar Medical Center Escondido and Palomar Medical Center Poway.

Escondido

Ramona

Poway

Valley Center

SCMG Graybill Medical Group

Admitting hospitals include Palomar Medical Center Escondido and Palomar Medical Center Poway.

Escondido

Ramona

Vista

Fallbrook

Rancho Bernardo

Oceanside

San Marcos

SCMG Inland North Medical Group

Admitting hospitals include Palomar Medical Center Escondido and Palomar Medical Center Poway.

Escondido

Poway

Greater Tri Cities IPA

This plan medical group offers more than 300 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. Greater Tri Cities IPA physicians serve:

Carlsbad

San Marcos

Escondido

Vista

Oceanside

¹ For up to date information use the provider search tool or call Sharp Health Plan at 1-833-346-4322.

Your network, continued



Sharp Direct Advantage offers 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 Hospitals

- Palomar Medical Center Escondido
- Palomar Medical Center Poway



Sharp Health Plan members have access to urgent care centers across San Diego. Please visit **sharpmedicareadvantage.com/urgentcare** to search the urgent care centers affiliated with Sharp Direct Advantage and with your plan medical group.



¹ For up to date information use the provider search tool or call Sharp Health Plan at 1-833-346-4322.



Sharp Health Plan members have access to Sharp Rees-Stealy pharmacies, independently contracted neighborhood pharmacies and almost all major national pharmacies, including the locations below. Please visit **sharpmedicareadvantage.com/pharmacysearch** to find a pharmacy near you.



















Your benefits

Our Sharp Direct Advantage plan includes all of these benefits, and much more!*

- All of your Original Medicare benefits (Part A and Part B).
- Medicare Part D prescription drug coverage to help cover the cost of the medications that your doctor prescribes. Covered outpatient drugs must be obtained from Sharp Health Plan-contracted pharmacies. You also have the option of using mail-order pharmacy services for maintenance medications.



Benefits at a glance¹

To see the Summary of Benefits, flip to pages 27 through 34.

	Sharp Direct Advantage (HMO)
Monthly Plan Premium	\$244.39 ²
Deductible	\$0
Annual Out-of-Pocket Maximum (medical)	\$1,500
Inpatient Hospital Care	\$0 per day
Outpatient Hospital Care	\$0
Primary Care Physician Visit	\$10
Telehealth Physician Visit³	\$10
Specialist Physician Visit	\$10
Preventive Care	\$0
Emergency Room	\$50 (waived if admitted to the hospital)
Urgently Needed Services	\$25
Diagnostic Radiology Services (such as MRIs, CT scans)	\$0
Lab Services / X-rays	\$0
Hearing Aids	\$1,000 maximum allowance every 3 years
Routine Eye Exam (every 12 months)	\$10
Skilled Nursing Facility	\$0 per day for days 1 – 100
Ambulance	\$0
Durable Medical Equipment	\$0
Acupuncture and Chiropractic Care	\$10 (up to 30 acupuncture and/or chiropractic visits per year)
Over-the-Counter (OTC) Allowance	Up to \$100 per quarter
Retail Prescriptions (up to 30 days) ⁴ Preferred Generic / Generic Preferred Brand / Non-preferred Specialty / Select Care	\$5 / \$5 \$20 / \$50 \$20 / \$0
Mail-Order Prescriptions (up to 90 days) ⁴ Preferred Generic / Generic Preferred Brand / Non-preferred Specialty / Select Care	\$10 / \$10 \$40 / \$100 Not offered / \$0

¹ This information is not a complete description of benefits. Call 1-833-346-4322 (TTY/TDD: 711) for more information. ² Price is for each individual patient. ³ Available for primary care services only.

⁴ Drug Tiers: Preferred Generic / Generic / Preferred Brand / Non-preferred / Specialty / Select Care

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.

Manage your prescription drug benefits online

As a member, you will be able to log in to our member portal, Sharp Connect, to view your full pharmacy benefits, locate pharmacies, view costs, refill or request prescriptions, track orders, view prescription history and more.

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.

CVS Caremark, our mail-order service provider, can mail a 90-day supply of your medication to any address you specify in the United States. Standard shipping is free for prescribed medication orders. Visit **sharpmedicareadvantage.com/mailorder** or call 1-855-222-3183 for more information on eligible medications and to get an application for mail-order services.

Prescription and pharmacy help is just a call away

Our dedicated pharmacy helpline is staffed by experts who are available to answer your pharmacy and prescription questions 24/7.

Delta Dental option for public agency retirees

We are proud to offer an optional comprehensive dental **HMO plan** to our CalPERS 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:



Your choice of dentist

From the DeltaCare® USA **HMO network**



Comprehensive coverage

Including fillings, crowns and dentures



No waiting period

With dental benefits that kick in with your Medicare Advantage benefits



Unlimited smiles

With dental coverage you can count on

The monthly premium is only \$12 for our CalPERS¹ members. To see a full list of benefits, as well as find a network dentist in your area, visit **sharpmedicareadvantage.com/dental** anytime. Members will be auto-assigned a network dentist in their area. If a member would like to change to another network provider, they can do so by contacting Delta Dental.

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
Crowns	\$125 – \$425
Complete Denture	\$395 – \$495
Partial Denture	\$300 - \$475
Root Canal	\$180 - \$375

¹ Dental benefit is optional for CalPERS Public Agency retirees. Please note, members can only add the dental benefit during the annual election and open enrollment periods.

Best He lth 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 get started.

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.

Wellness & Health Promotion Accreditation

Best Health is one of a select group of health plan wellness programs nationally to receive NCQA accreditation.



Best Health Coaching



- Get free personalized, one-on-one coaching in a six-week, phone-based program designed to support you in becoming and staying your healthiest.
- Define your personal wellness goals and co-create a health action plan to eat healthier, increase physical activity, manage stress, quit tobacco use and achieve a healthy weight.
- Make positive changes during weekly 30-minute sessions with our Nationally Board Certified Health Coaches.

Mobile app



- Access all the Best Health online tools from your mobile device.
- Complete your Wellness Assessment and receive customized recommendations from the Wellness Advisor.
- Build your Wellness To-Do List to promote action and self-accountability
- Connect a variety of compatible physical activity trackers, like Apple Health, Fitbit, Garmin and more.

Online learning modules

- Learn about stress management, healthy eating, sleep, emotional health, exercise and more on the Best Health website or app.
- Engage in a variety of interactive activities to increase your health IQ.



Get the care you need, as soon as you need it

We make it easy for you to access care, whether it's after hours, with a specialist, outside of San Diego or beyond. To access the latest information regarding getting the care you need while staying safe, we invite you to visit **sharpmedicareadvantage.com/covid19**, our dedicated COVID-19 resource center.



Video and phone visits

Get the care you need from wherever you are with a video or phone visit, also known as telehealth. Call your PCP's office for the latest telehealth service information.¹

sharpmedicareadvantage.com/videoandphonevisits



Specialist care

In most cases, when you need specialty care, your PCP will refer you to a specialist in your PMG. You can access OB-GYN care within your PMG without a referral from your PCP.

sharpmedicareadvantage.com/find-a-doctor-or-pharmacy



Urgent care

If you need medical attention right away and your life is not in danger, you can most likely be treated at an urgent care center within your PMG.²

sharpmedicareadvantage.com/urgentcare



Emergency room

If your life is in danger or you are at risk of being permanently disabled, it is an emergency. Call 911 or go to the nearest emergency room right away.

sharpmedicareadvantage.com/hospitals

¹ Select doctors offer this service. Please note, telehealth is available for primary care services only.

² You may need prior authorization from your primary care physician. You must use an urgent care facility within your plan medical group unless you are traveling outside San Diego County.



MinuteClinic®

MinuteClinic is the medical clinic located inside select CVS Pharmacy® stores. MinuteClinic provides convenient access to basic care, to help you stay healthy on your schedule.³

sharpmedicareadvantage.com/minuteclinic



After-Hours Nurse Advice

Registered nurses are available through Sharp Nurse Connection® after hours and on weekends. 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.

5 p.m. – 8 a.m., Monday to Friday and 24 hours on weekends 1-833-346-4322 (TTY/TDD: 711), select the option to speak with a nurse



Behavioral health support

We cover treatment of severe mental illness for all members. Coverage of non-severe behavioral health issues may vary based on your benefit plan.

sharpmedicareadvantage.com/behavioralhealth



Emergency Travel Services

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

sharpmedicareadvantage.com/travel

³ MinuteClinic does not treat all medical conditions, but does provide basic care for minor illnesses and injuries. Your share of the cost for a MinuteClinic visit is equal to what you pay for a PCP visit. There is no copayment for flu vaccinations.

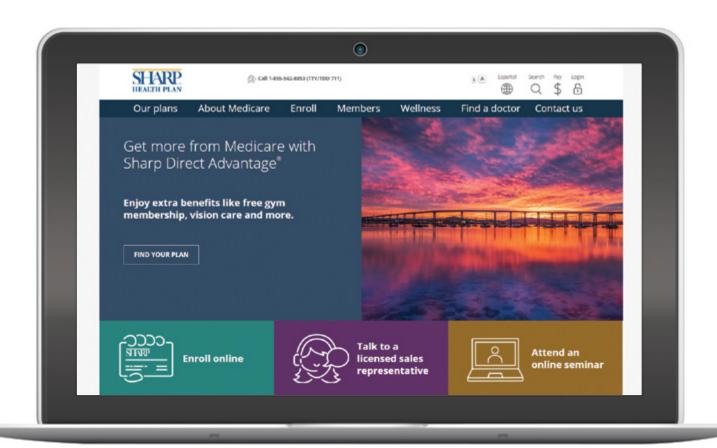
We're just a click away

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. **sharpmedicareadvantage.com/CalPERS**, at your service!

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/CalPERS**, 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
- Find a primary care physician (PCP) 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



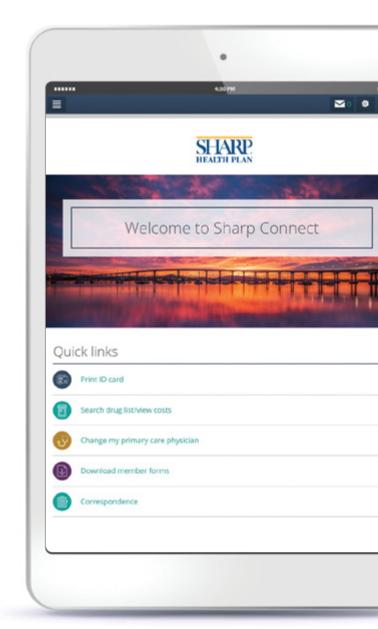
Sharp Connect, your member portal

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
- 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

Need community resources?

2-1-1 San Diego is a free, 24-hour, confidential phone and online service that connects you to more than 6,000 resources across San Diego, from COVID-19 support and legal assistance to financial and senior services. Learn more at **211sandiego.org**, or simply dial 211.





Understanding enrollment

Understand when you can enroll

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



Open Enrollment

Open enrollment for CalPERS retirees is from Sept. 21 to Oct. 16, 2020. All eligible retirees and their Medicare-eligible spouses and dependents can enroll during this period. Coverage will begin on Jan. 1, 2021.

You may request a change in health plans at the following times:

- During CalPERS Open Enrollment period
- Within 60 days of the following events:
 - Your retirement
 - Enrollment in Medicare by you or your dependents
 - Change in your residential address or a move to a new health plan service area.

CalPERS Open Enrollment is held annually during the fall. If you wish to enroll in a health plan, change health plans, or add/delete eligible dependents during Open Enrollment, visit the CalPERS website at www.calpers.ca.gov or use my | CalPERS at my.calpers.ca.gov to make any changes.

Plan changes you make during Open Enrollment become effective Jan. 1 of the following year.



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 65 or older
- 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

Medicare-eligible for the first time?

Initial Enrollment Period (IEP)

IEP is the period when you first sign up for Medicare. There are two ways to become eligible through IEP.

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.

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.



3 months before your 65th birthday

The month of your 65th birthday

3 months after your 65th birthday

Enroll today!

Visit my | CalPERS at my.calpers.ca.gov or call CalPERS toll free at 888 CalPERS (or 888-225-7377) 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 CalPERS representative at 888 CalPERS (or 1-888-225-7377).

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	Review the full list of benefits found in the Evidence of Coverage (EOC), especially for those services for which you routinely see a doctor. Visit sharpmedicareadvantage.com/CalPERS or call 1-833-346-4322 (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.
Understandin	g 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.
	Changes to benefits, premiums and/or copayments / coinsurance will typically occur only upon the renewal effective date of January 1. However, benefits are subject to change at other times.
	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



To join Sharp Health Plan's Medicare plans, you must:

- Be a CalPERS retiree or that person's Medicare-eligible spouse or dependents and reside in San Diego County
- Be eligible for Medicare Part A and Part B
- CalPERS requires "combination enrollment" to be aligned with the same carrier (Basic and Medicare plans).*



Enroll in Medicare Part B

If you have not already enrolled in Medicare Part B, visit **cms.gov** to download the Request for Employer Information Form (CMS-L564) and Application for Enrollment in Medicare Part B (CMS-40B).

Fill out the Application for Part B (CMS-40B) and have your employer complete the Employer Information Form (CMS-L564). Then either fax the completed forms to 1-833-914-2016, or visit ssa.gov to find the address of your local office and send via mail.



Join today!

If you are ready to enroll in Medicare and Sharp Health Plan, visit the CalPERS website at calpers.ca.gov or use my | CalPERS at my.calpers.ca.gov to enroll.

If you have questions about Sharp Health Plan and our benefits, visit our website at **sharpmedicareadvantage.com/CalPERS** or call us toll-free at 1-833-346-4322 (TTY/TDD: 711).

Hours of operation: 7:00 a.m. to 8:00 p.m., seven (7) days per week.

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

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/find-adoctor-or-pharmacy to find a doctor.

^{*} Combination Enrollments -- A combination enrollment means at least one family member is enrolled in a CalPERS Medicare health plan and at least one family member is enrolled in a CalPERS Basic health plan. CalPERS requires that all covered family members are enrolled with the same health carrier. Note: If a Medicare eligible member enrolls in a CalPERS Medicare health plan, it may require a change in the health carrier, which may impact family members enrolled in a Basic health plan.

2021 Summary of Benefits

January 1, 2021 - December 31, 2021

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

Things to know about Sharp Health Plan (HMO)



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



Customer Care phone number 1-833-346-4322 (TTY/TDD: 711)



Hours of operation

Calls to this number are free. Hours are 7 a.m. to 8 p.m., 7 days per week.

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



Who can join?

To join the Sharp Health Plan (HMO) plan, you must be enrolled in Medicare Part A and 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_2021 CALPERS SUMMARY OF BENEFITS



Which doctors, hospitals and pharmacies can I use?

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

 You can see the complete plan provider and pharmacy directory on our website at sharpmedicareadvantage.com/find-a-doctor-or-pharmacy, 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 Direct Advantage formulary to determine the tier your drug is in 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.

 You can see the complete plan formulary (list of Part D prescription drugs) and the Evidence of Coverage on our website at sharpmedicareadvantage.com, 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 **medicare.gov** or get a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

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

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

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

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

2021 Summary of Benefits

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

Benefit	Sharp Direct Advantage (HMO)
How much is the monthly premium?	\$244.39 per month ¹ . You must continue to pay your Medicare Part B premium.
How much is the deductible?	This plan does not have a deductible.
	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.
Is there any limit on how much I will pay for my covered services?	If you reach the limit on out-of-pocket costs, you will keep getting covered hospital and medical services. We will pay the full cost for the rest of the year.
	Please note that you will still need to pay your monthly premiums and cost sharing for your Part D prescription drugs.
	\$1,500 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.
	\$0 per day
Inpatient Hospital Care ^{2, 3}	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 an SNF) for 60 days in a row. If you go into a hospital or an SNF after one benefit period has ended, a new benefit period begins. There's no limit to the number of benefit periods. Our plan covers an unlimited number of days for an inpatient hospital stay.
Doctor's Office Visits	Primary care physician visit: \$10 copay Specialist visit: \$10 copay
Outpatient Hospital Coverage ^{1,2}	\$0 copay
Ambulatory Surgery Center ^{1,2}	\$0 copay

¹Individual subscriber premium only

² Services may require prior authorization.

³ Services may require a referral from your doctor.

Benefit	Sharp Direct Advantage (HMC	0)	
	\$0 copay		
	Our plan covers many preventive services, including:		
	Abdominal aortic aneurysm screening	Obesity screening and therapy to promote	
	Annual wellness visit	sustained weight loss	
	Bone mass measurement	 Prostate cancer screening exams 	
	Breast cancer screening (mammograms)	 Screening and counseling to reduce alcohol misuse 	
	 Cardiovascular disease risk reduction visit (therapy for cardiovascular disease) 	 Screening for lung cancer with low-dose computed tomography (LDCT) 	
Preventive Care*	 Cardiovascular disease testing 	 Screening for sexually transmitted infections 	
	Cervical and vaginal cancer screening	(STIs) and counseling to prevent STIs	
	Colorectal cancer screening	Smoking and tobacco use	
	Depression screening	cessation (counseling to stop smoking or tobacco use)	
	Diabetes screening	Vision care	
	HIV screening	• "Welcome to Medicare"	
	• Immunizations	Preventive Visit	
	Medical nutrition therapy		
	Medicare Diabetes Prevention Program (MDPP)		
	\$50 copay		
Emergency Care	If you are admitted to the hospital within 24 hours, you do not have to pay your share of the cost for emergency care. See the "Inpatient Hospital Care" section of this booklet for other costs.		
Urgently Needed Services	\$25 copay		

^{*} Some of these exams, vaccines and screenings may require a copayment.

2021 Summary of Benefits, continued

Benefit	Sharp Direct Advantage (HMO)
	Diagnostic radiology services (such as MRIs, CT scans): \$0 copay
Diagnostic Tests, Lab and	Diagnostic tests and procedures: \$0 copay
Radiology Services, and X-rays	Lab services: \$0 copay
(costs for these services may vary based on place of service) ^{1,2}	Outpatient X-rays: \$0 copay
sused on place of service,	Therapeutic radiology services (such as radiation treatment for cancer): \$0 copay
	Exam to diagnose and treat hearing and balance issues: \$10 copay
Hearing Services ¹	Hearing aid fitting / evaluations: \$10 copay (up to 2 visits every year)
	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):
	\$30 copay
	\$12 monthly premium
	\$5 office visits
Optional Delta Dental	\$15 cleanings
Services Coverage ^{3,4}	\$0 complete oral exams (This includes preventive and diagnostic services, basic and major dental services at fixed copays.)
	Exam to diagnose and treat diseases and conditions of the eye (including yearly glaucoma screening): \$10 copay
	Routine eye exam (up to 1 every year): \$10 copay
Vision Services ¹	Prescription glasses / lenses (every two years): \$20 copay for single vision, lined bifocal and lined trifocal lenses
	Our Plan pays up to \$200 every two years for eyeglass frames or contact lenses.
	Eyeglasses or contact lenses after cataract surgery: 0% of the cost

¹ Services may require prior authorization.

² Services may require a referral from your doctor.

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

⁴ This service is only available for public agency retirees.

Benefit	Sharp Direct Advantage (HMO)
Inpatient Mental Health Care ^{1, 2}	Our plan covers an unlimited number of days for an inpatient hospital stay. \$0 copay per day
Outpatient Mental Health Care	Outpatient group therapy visit: \$10 copay Outpatient individual therapy visit: \$10 copay
Skilled Nursing Facility (SNF) ¹	Our plan covers up to 100 days in a SNF. \$0 per day for days 1 through 100
Rehabilitation Services (including Physical Therapy) ^{1,2}	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	\$0 copay
Transportation	Not covered
Part B Drugs (including chemotherapy drugs) ¹	0% of the cost
Foot Care (podiatry services) ²	Foot exams and treatment if you have diabetes-related nerve damage and/or meet certain conditions: \$10 copay
Medical Equipment / Supplies (wheelchairs, oxygen, etc.) ¹	\$0 copay
Wellness Programs	\$0 wellness programs include: Silver&Fit gym membership Choose from many different facilities throughout San Diego County. Enjoy the flexibility to change facilities monthly with no hassle. If going to a gym isn't for you, don't worry — at-home fitness options are also available. See silverandfit.com to find participating clubs in your area. Participating gyms may change during the year. 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.

2021 Summary of Benefits, continued

Benefit	Sharp Direct Advantage (HMO)
	Medicare-covered
	Up to 12 sessions in 90 days with an additional 8 sessions for those patients with chronic low back pain who demonstrate improvement. Chronic low back pain is defined as:
	Lasting 12 weeks or longer
	Nonspecific, in that it has no identifiable systemic cause
Acupuncture services	Not associated with surgery or pregnancy
	\$10 copay
	Supplemental ^{1,2}
	Supplemental acupuncture through American Specialty Health: \$10 copay, maximum 30 combined visits with chiropractic per plan year.
	Medicare-covered
	Manipulation of the spine to correct a subluxation (when 1 or more of the bones of your spine move out of position): \$10 copay
Chiropractic care	Supplemental ^{1,2}
	Supplemental chiropractic through American Specialty Health: \$10 copay, maximum 30 combined visits with acupuncture per plan year.
	Diabetes monitoring supplies: \$0 copay
Diabetes Supplies and Services ^{1, 2}	Diabetes self-management training: \$0 copay
	Therapeutic shoes or inserts: \$0 copay
Telehealth visits	\$10 copay⁴
Home Health Care ¹	\$0 copay
Prosthetic Devices (braces,	Prosthetic devices: \$0 copay
artificial limbs, etc.) ¹	Related medical supplies: \$0 copay
Renal Dialysis¹	\$0 copay
Over-the-counter (OTC) items ³	Quarterly allowance for eligible over-the-counter (OTC) health products through our OTC catalog.
	Up to \$100 per calendar quarter

Medicare Part D Drugs¹

You pay the Initial Coverage amounts until your total yearly drug costs reach \$6,350. Total yearly drug costs are the total drug costs paid by both you and our Part D plan. You may get your drugs at network retail pharmacies and mail-order pharmacies. These plans do not have a deductible.

	Initial Coverage		
	Standard Retail Cost Share		Standard Mail Order Cost Share
	Retail 1-month supply	Retail 3-month supply	Mail Order 3-month supply
Tier 1 (Preferred Generic)	\$5 copay	\$15 copay	\$10 copay
Tier 2 (Non-preferred Generic)	\$5 copay	\$15 copay	\$10 copay
Tier 3 (Preferred Brand)	\$20 copay	\$60 copay	\$40 copay
Tier 4 (Non-preferred Brand)	\$50 copay	\$150 copay	\$100 copay
Tier 5 (Specialty)	\$20 copay	Not offered	Not offered
Tier 6 (Select Care Drugs)	\$0 copay	\$0 copay	\$0 copay

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 \$6,350.

After you enter the coverage gap, you pay 25% of the plan's cost for covered brand name drugs and 25% of the plan's cost for covered generic drugs until your costs total \$6,550, which is the end of the coverage gap. Not everyone will enter the coverage gap.

Catastrophic Coverage

After your yearly out-of-pocket drug costs (including drugs purchased through your retail pharmacy and through mail order) reach \$6,550, you pay the greater of:

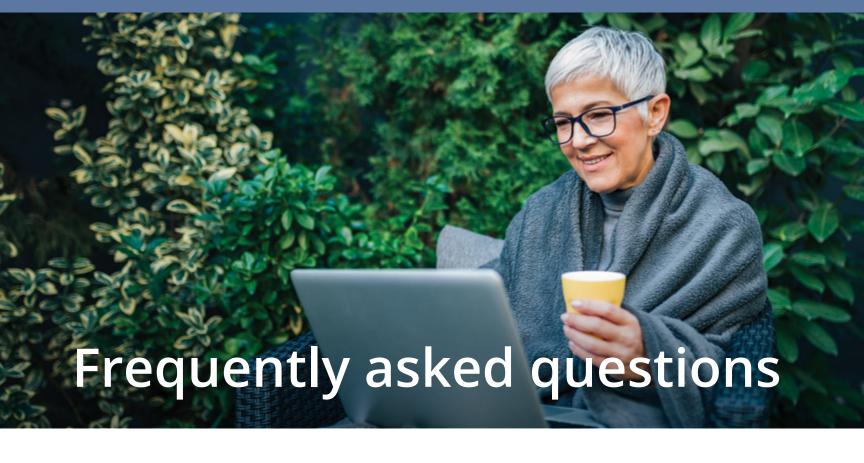
- 5% of the cost, or
- \$3.70 copay for generic (including brand drugs treated as generic) and a \$9.20 copay for all other Part D drugs

¹ Services may require prior authorization.

² Services may require a referral from your doctor.

³ Purchases are limited to the available benefit dollars. At the beginning of each quarter, any unused allowance will reset to the quarterly benefit limit.

⁴ Telehealth visits are available for primary care services only.



Which doctors or hospitals accept Sharp Health Plan?

Sharp Health Plan is an HMO (health maintenance organization) that gives you access to a broad network of local doctors and hospitals. Your primary care physician (PCP) oversees your care and in general, you will need prior authorization to see a specialist.

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/find-a-doctor-or-pharmacy, scroll to "Find a doctor, hospital or urgent care," click "Search," and 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 or general practice. 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), SCMG Arch Health Medical Group, SCMG Graybill Medical Group, SCMG Inland North Medical Group 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/find-a-doctor-orpharmacy or call Customer Care at 1-833-346-4322 (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, please refer to page 12 of this Enrollment Guide.

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, CVS Caremark (sharpmedicareadvantage.com/mailorder) for maintenance medications.

At sharpmedicareadvantage.com/find-a-doctor-or-pharmacy, 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 "Drug List," then click "Search/View the Drug List" 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 if 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.

Language assistance services

English:

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 1-833-346-4322 (TTY/TDD: 711).

Español (Spanish):

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-833-346-4322 (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 1-833-346-4322 (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 1-833-346-4322 (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 1-833-346-4322 (TTY/TDD: 711).

한국어 (Korean):

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

1-833-346-4322 (TTY/TDD: 711) 번으로 전화해 주십시오.

Հայերեն (Armenian):

ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, ապա ձեզ անվձար կարող են տրամադրվել լեզվական աջակցության ծառայություններ։ Զանգահարեք 1-833-346-4322 (TTY (հեռատիպ)՝ 711).

:(Farsi) فارسى

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم (TTY/TDD: 711) 833-346-832-1 تماس بگیرید می باشد. با

Русский (Russian):

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-833-346-4322 (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。1-833-346-4322 (TTY/TDD: 711)まで、お電話にてご連絡ください。

ان (Arabic): هيبرعلا

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-885-562-855 (رقم هاتف الصم والبكم: 711).

ਪੰਜਾਬੀ (Punjabi):

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1-833-346-4322 (TTY/TDD: 711) 'ਤੇ ਕਾਲ ਕਰੋ।

ខ្មព័ (Mon Khmer, Cambodian):

បុរយ័ត្ន៖ បីសិនជាអ្នកនិយាយ ភាសាខ្មរែ, សវោ ជំនួយផុនកែភាសា ដាយមិនគិតឈ្នូល គឺអាចមាន សំរាប់បំរីអ្នក។ ចូរ ទូរស័ព្ទ 1-833-346-4322 (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 1-833-346-4322 (TTY/TDD: 711).

हिंदी (Hindi):

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-833-346-4322 (TTY/TDD: 711) पर कॉल करें।

ภาษาไทย (Thai):

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ ฟรี โทร 1-833-346-4322 (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 1-833-346-4322.

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: 1-833-346-4322 (TTY/TDD: 711); Fax: (858) 636-2256

You can file a grievance in person, by mail or by fax, or you can complete the online Grievance/Appeal form on the Plan's website: **sharphealthplan.com**. Please call our Customer Care team at 1-833-346-4322 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 file 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.



View of Solana Beach Photo Credit: Evgeny Yorobe, San Diego



Consider us your personal health care assistant®

sharpdirectadvantage.com/CalPERS 1-833-346-4322 (TTY/TDD: 711)

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 1-833-346-4322 (TTY/TDD: 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame 1-833-346-4322 (TTY/TDD: 711).

H5386_2021 CALPERS Enroll Kit

