

Provider Alert

To: Sharp Health Plan Providers **Attn:** Providers, Provider Office Staff

From: Sharp Health Plan Date: October 24, 2023

Subject: Provider Operations Manual for Commercial - Effective January 1, 2024

Our Provider Operations Manual (POM) for commercial plans has been updated. Below is a summary of changes, effective January 1, 2024. You can find the POM online at sharphealthplan.com/pom.

2024 Commercial POM Sections	Subsections	Page #	Summary of Changes
Global change			 Change primary care provider to primary care physician to be consistent with SHP materials
Section I: Introduction and Overview	About Us	9	 Updated Nurse Advice and accolades
Section I: Introduction and Overview	Resource Guide	10 - 12	 Resource guide updated with contact information and removed PPO for now
Section I: Introduction and Overview	Sharp Health Plan Responsibilities	13	Minor edit, updated portal link
Section II: Sharp Health Plan Benefits	Benefit Coverage Options	19	Removed PPO for now
Section II: Sharp Health Plan Benefits	Partnership and Value- Added Services: Wellness Services	21	Revised section with updated information about Wellness Services.
Section II: Sharp Health Plan Benefits	Partnership and Value- Added Services: Best Health	21	Added educational resources and removed interactive health library
Section II: Sharp Health Plan Benefits	Partnership and Value- Added Services: Wellness Services	21	Minor edits and removed interactive health library

2024 Commercial POM Sections	Subsections	Page #	Summary of Changes
Section II: Sharp Health Plan Benefits	Partnership and Value- Added Services: Behavioral Health Services	22	 Updated groups per 2023 network. Magellan not added due to contract being still under negotiation.
Section II: Sharp Health Plan Benefits	Partnership and Value- Added Service: The ChooseHealthy Program	23	New content
Section II: Sharp Health Plan Benefits	Partnership and Value- Added Service: MinuteClinic at CVS	24	Updated number of locations.
Section II: Sharp Health Plan Benefits	Specialty Pharmacy Services Covered under the Pharmacy Benefit	25	Minor grammatical edit
Section II: Sharp Health Plan Benefits	Enhanced Provider Services	26	Minor edits
Section III: Member Enrollment and Eligibility	Member Enrollment Overview	29	Removed PPO for now plus minor edits.
Section III: Member Enrollment and Eligibility	Eligibility Verification	29	Removed PPO for now plus minor edits.
Section III: Member Enrollment and Eligibility	Member ID Cards	32-36	ID Cards updated with the current version: Sample HMO Identification Card with Pediatric Dental Sample HMO Identification Card without Pediatric Dental Sample CalPERS HMO Identification Card Sample Covered California Identification Card Sample City of San Diego/SDPEBA Identification Card Sample Point of Service (POS) Identification Card 1 2-Tier Discontinued

2024 Commercial POM Sections	Subsections	Page #	Summary of Changes
			 Sample Preferred Provider Organization (PPO) card Sample of Teamsters Identification Card
Section IV: Member Services	Customer Care	38	Format update
Section IV: Member Services	Primary Care Physician (PCP) Assignment and Selection	40	 Format update with additional details about PCP assignment process.
Section IV: Member Services	Independent Medical Review (IMR)	47	 Added delegated group responsibility.
Section IV: Member Services	Additional Resources for Members: DMHC Help Center	49	Clarified help center as DMHC
Section V: Provision of Professional Services	Role of the Primary Care Physician (PCP)	53	 Revised section with clarification on HMO and POS plans. Not including PPO for now.
Section V: Provision of Professional Services	Sensitive Services Information	59	Minor edit
Section V: Provision of Professional Services	Plan Provider Updates	60	Minor edit
Section V: Provision of Professional Services	Credentialing Program	62	 Removed NCQA accreditation for Sharp CVO (still pending)
Section V: Provision of Professional Services	Delegated Credentialing/ Recredentialing	65	 Updated to reflect 2023; now showing Magellan until contract is fully negotiated.
Section V: Provision of Professional Services	Accessibility and Timeliness Standards to Care	68	Revised heading to reflect content
Section V: Provision of Professional Services	Timely Access to Care: Appointment Wait Times	69	 Revised sections to include information about follow up appointments.
Section V: Provision of Professional Services	Timely Access to Care: Advanced Scheduling	70	 Revised sections to include information about SUD.

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Section VI: Utilization Management	Utilization Management Program	80	 Revised section with updated SCMG contact information. Per SCMG all inquiries will go to the general line. Removed all other regions
Section VI: Utilization Management	Referral and Authorization Process: Medical and Behavioral Health Services	82	Minor edit
Section VI: Utilization Management	Referral and Authorization Process: Prior Authorization Required	82	Updated link to forms.
Section VI: Utilization Management	Utilization Review	83	Added new guidelines
Section VI: Utilization Management	Prior Authorization Review Timelines	84	 Revised to also reference pharmacy TAT.
Section VI: Utilization Management	Provider Notification of UM Decision	85	Minor edit
Section VI: Utilization Management	Maternal Mental Health	90	Revised definition
Section VI: Utilization Management	Out-of-Network Services	91	 Revised to clarify the LOB – HMO – plus minor edit
Section VI: Utilization Management	Delegated Utilization Management	92	Minor edit
Section VII: Pharmacy Benefit Services	Formulary	94	Minor edit
Section VII: Pharmacy Benefit Services	Tiered Copay Programs	95	 Removed PPO for now. Added cost share and Real Time Benefit Check information plus minor edits
Section VII: Pharmacy Benefit Services	Prior Authorization	96	Minor edit - updated portal link
Section VII: Pharmacy Benefit Services	Step therapy	97	Removed "appeal of a denial"
Section VII: Pharmacy Benefit Services	Dispense as Written (DAW) Prescriptions	98	Added cost share

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Section VII: Pharmacy Benefit Services	Non-Covered Services and Medications	101	 Revised with additional language to detail exclusions and limitations.
Section VII: Pharmacy Benefit Services	Prior Authorization and Exception Process	103	Minor edits - updated portal link
Section VII: Pharmacy Benefit Services	Coverage Determination Notification Process	104	Added clarification on denials
Section VII: Pharmacy Benefit Services	Pharmacy Policies and Procedures (Pharmacy Management Procedures)	104	Minor edit - updated portal link
Section VII: Pharmacy Benefit Services	Outpatient Injectable Medications	105	 Removed PPO for now and clarification of provider responsibilities for HMO, POS.
Section VIII: Quality Improvement	Quality Management Committee	110	 Removed Service and Operational Quality Council
Section VII: Quality Improvement	Quality Measurement: HEDIS	111	Updated HEDIS measures
Section IX: Claims and Encounters	Claims Address	123	Minor edit, updated portal link
Section IX: Claims and Encounters	Claims submission Requirements	123	Revised non-contracted provider W9 requirement.Updated claims submission link
Section IX: Claims and Encounters	Electronic Claims Submissions	124	Minor grammatical edit
Section IX: Claims and Encounters	Claims Payment Editing System	125	 Removed clinical or operative reports
Section IX: Claims and Encounters	Member Costs and Out- of-Pocket Maximum	129	Minor edit, updated portal link

Questions? Please contact Sharp Health Plan Provider Account Management by email at provider.relations@sharp.com or by phone at 1-858-499-8330. Thank you for your partnership.