

Provider Alert

To: Sharp Health Plan Medicare Advantage Providers and Office Staff

From: Sharp Health Plan Date: October 24, 2025

Subject: Medicare Advantage Provider Operations Manual update (effective January 1, 2026)

Dear Provider Partners,

Sharp Health Plan has updated its Provider Operations Manual (POM) for providers serving our Medicare Advantage members. Below please find a summary of changes from the previous manual. These changes will be effective January 1, 2026. You can view and download the Medicare Advantage POM online at sharphealthplan.com/pom.

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Sed	ction	Subsection	#	Summary of Changes
I	Introduction and Provider Experience	About Us	7	Updated vendor name by removing "Emergency." Now called Global Travel Assistance Services.
I	Introduction and Provider Experience	About Us	7	Updated Plan ratings.
I	Introduction and Provider Experience	Resource Guide	10	Updated behavioral health provider to include OptumHealth Behavioral Solutions of CA with updated claims address.
I	Introduction and Provider Experience	Resource Guide	11	Added Medicare Compliance contact information.
I	Introduction and Provider Experience	Resource Guide	12	Updated "Find a behavioral health provider" to include OptumHealth Behavioral Solutions of CA's provider directory search and contact information for prior authorization.

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Section		Subsection	Page #	Summary of Changes
I	Introduction and Provider Experience	Resource Guide	12	Updated contact information to request corrections to provider directories.
II	Member Services, Enrollment and Eligibility	Customer Care	15	Replaced Magellan Health with OptumHealth Behavioral Solutions of California to include customer support contact information for providers and members.
П	Member Services, Enrollment and Eligibility	Customer Care — Member Rights	17	Updated to include most recent regulated language.
П	Member Services, Enrollment and Eligibility	Member ID Cards	22	Updated 2026 member ID card images.
III	Provisions of Professional Services	Role of the Primary Care Physician	30	Updated behavioral health provider to include OptumHealth Behavioral Solutions of California.
III	Provisions of Professional Services	Telehealth Services	33	Added American Sign Language and reference to review SHP Medicare Advantage Clinical Policy HS-CP-MA-T2 Telehealth Policy.
III	Provisions of Professional Services	Claims Addresses	41	Added OptumHealth Behavioral Solutions of California claims address.
IV	CMS Regulations	Disclosure to CMS and Beneficiary	44	Updated disclosure requirements per 42 CFR 422.64 for benefits, access, emergency coverage, supplemental benefits, prior auth and review rules, grievance and appeal procedure, QI program, catastrophic caps and single deductibles, rule changes, rights, contract termination, safe disposal of certain drugs, and claims.
IV	CMS Regulations	Contract Provisions	46	Added financial information to contracting disclosure requirements.

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Section		Subsection	#	Summary of Changes
IV	CMS Regulations	Interpreter and Translation Services	47	Updated no-cost services to include translation services, interpreter services available outside of scheduled appointments, and the availability of auxiliary aids and other accessible formats per 45 CFR 92.11.
IV	CMS Regulations	Online Provider/ Pharmacy Directory Requirements	48	Added the availability of cultural and linguistic capabilities, including American Sign Language, on the provider directories.
IV	CMS Regulations	The CMS Preclusion List	48	Clarified the term "behavior" to be specific to "detrimental conduct."
IV	CMS Regulations	The CMS Preclusion List	49	Clarified that notification of impacted enrollees must be in written form.
IV	CMS Regulations	Discrimination Against Beneficiaries Prohibited	54	Removed "Disclosure Requirements" from the section. The language was already stated under Compliance Program.
IV	CMS Regulations	Compliance Program	65	Clarified that compliance training is required within 90 days of hire.
IV	CMS Regulations	Compliance Program	65	Added that compliance review includes pre-delegation audits.
IV	CMS Regulations	Medicare Part D Transition Policy	70	Added procedures for negative formulary changes.
IV	CMS Regulations	Medication Therapy Management Program	72	Changed the MTMP cost threshold from \$1,623 to \$1,276.

In addition to the above, please note other information available in the Medicare Advantage POM and associated page numbers. There are no material content changes to these sections.

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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.

Best regards,

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