



Provider Alert

To: Sharp Health Plan Medicare Advantage Providers and Office Staff
From: Sharp Health Plan
Date: March 13, 2026
Subject: Commercial Provider Operations Manual March update (effective May 18, 2026)

Dear Provider Partners,

Sharp Health Plan has updated its Provider Operations Manual (POM) for providers serving our commercial members. Below is a summary of changes included in the March update to the previous manual. These changes will take effect on May 18, 2026. You can view and download Commercial POM online at sharphealthplan.com/pom.

Section	Subsection	Page #	Summary of Changes	
V	Provision of Professional Services	Legally Protected Health Care Activity	67	New Section added. Language added for SB 497
V	Provision of Professional Services	Sexual and Reproductive Health Care	68	New Section added. Language added for AB 260

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

Section	Subsection	Page #
I	Introduction and Overview	9
	About Us	10
	Resource Guide	11
	Sharp Health Plan Responsibilities	15
	Service Area	15
	Compliance Program	16
	HIPAA Privacy Rule	17

NOTICE: The information contained in this facsimile message may be privileged and confidential and is only for whom it was intended. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver the message to the intended recipient, the reader is hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If this communication has been received in error, please notify Sharp Health Plan at the telephone number listed below immediately and destroy all information received.

SHARP Health Plan

Section	Subsection	Page #	
	California Mental Health Parity Law	19	
II	Sharp Health Plan Benefits	Sharp Health Plan Benefits	21
		Product Overview	21
		Benefit Coverage Options	21
		Ancillary Benefits	25
		Value-Added Services	26
		Enhanced Provider Services	29
III	Member Eligibility and Enrollment	Member Enrollment and Eligibility	31
		Member Enrollment Overview	32
		Eligibility Verification	32
		Eligibility List	35
		Member ID Cards	35
IV	Member Services	Member Services	43
		Customer Care	44
		Interpreter Services	45
		Member Rights and Responsibilities	45
		Primary Care Provider (PCP) Assignment and Selection	48
		Member Grievances and Appeals	49
		Independent Medical Review (IMR)	55
		Additional Resources for Members	57
V	Provision of Professional Services	Provision of Professional Services	58
		Plan Provider Responsibilities	59
		Role Of the Primary Care Physician (PCP)	61
		On-Call Providers Coverage	62
		Role of the Specialty and Ancillary Provider	62
		Contract Terminations	62
		Contract Suspensions	63
		Disabled Member Services	63
		Emergency Services	63
		Telehealth Services	64
		Confidentiality and Disclosure of Medical Information	64
		Medical Record Standards	64
		Amendment to Member Medical Record	66
		Confidentiality and Availability of Medical Records	66
		Retention of Medical Records	69
		Plan Provider Updates	69
		Provider Directory Verification and Attestation	70
Credentialing Program	71		
Notifications to Authorities and Provider Appeal Rights	76		

NOTICE: The information contained in this facsimile message may be privileged and confidential and is only for whom it was intended. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver the message to the intended recipient, the reader is hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If this communication has been received in error, please notify Sharp Health Plan at the telephone number listed below immediately and destroy all information received.

SHARP Health Plan

Section		Subsection	Page #
		Accessibility And Appointment Availability	76
		Timely Access to Care	78
		Provider-Initiated Member Dismissal	82
		Culturally and Linguistically Appropriate Services	86
		Provider Responsibilities for Cultural and Linguistic Services	87
VI	Utilization Management	Utilization Management	89
		Utilization Management Program	90
		Referral and Authorization Process	91
		Utilization Review	93
		Contact Information	94
		Prior Authorization Review Timelines	95
		Provider Notification of UM Decision	95
		Concurrent Hospitalization Review	95
		Discharge Planning	96
		Retrospective Authorization Review	96
		Emergency Services	96
		Denial of Services	96
		Communication to Providers	97
		Second Medical Opinions	97
		Case Management Program	99
		Maternal Mental Health	101
		Doula Benefit	101
		Autism Services	102
		Disease Management Program	103
		Out-of-Network Services	103
		Delegated Utilization Management	103
VII	Pharmacy Benefit Services	Pharmacy Benefit Services	104
		Formulary	105
		Pharmacy and Therapeutics (P&T) Committee	106
		Tiered Copay Programs	106
		Prior Authorization	108
		Step Therapy	109
		Dispense as Written (DAW) Prescriptions	110
		Emergency Supply	110
		Dispensing Limitations	111
		Preventive Health Medications	111
		Prescription Mail Order	112
		Specialty Medications	113

NOTICE: The information contained in this facsimile message may be privileged and confidential and is only for whom it was intended. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver the message to the intended recipient, the reader is hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If this communication has been received in error, please notify Sharp Health Plan at the telephone number listed below immediately and destroy all information received.

SHARP Health Plan

Section	Subsection	Page #
	Non-Covered Services and Medications	113
	Prior Authorization and Exception Process	115
	Coverage Determination Notification Process	116
	Additional Appeal Rights for FEHB Members	117
	Pharmacy Policies and Procedures	118
	FDA Recalls	118
	Outpatient Injectable Medications	118
	Pharmacy Benefits Manager (PBM)	119
	Medication Restriction	120
	Opioid Management Strategies	120
VIII	Quality Improvement	
	Quality Improvement	121
	Quality Improvement Program	122
	Quality Management Committee	123
	Participation in the QI Program	124
	Quality Measurement	124
	BMI Assessment Codes	126
	Counseling for Nutrition and Physical Activity	126
	Blood Pressure	127
	Diabetic Eye Exam	127
	HEDIS Medical Record Review	128
	Clinical Practices and Preventive Health Guidelines	128
	Summary of Preventive Care Services	129
IX	Claims and Encounters	
	Claims and Encounters	136
	Claims	137
	Claims Addresses	137
	Claims Submission Requirements	137
	Electronic Claims Submissions	138
	Claims Receipt Verification and Claim Status Inquiries	138
	Claims Payment Editing System	139
	Claims Policy Administration Module	139
	Encounter Data	140
	Fee Schedules	140
	Adjustment Requests	140
	Coordination of Benefits	141
	Third-Party Liability	142
	Member Costs and Out-of-Pocket Maximum	143
	Balance Billing	144
	Bills for Prenatal Genetic Testing	145
	Immediate Postpartum Contraception	145

NOTICE: The information contained in this facsimile message may be privileged and confidential and is only for whom it was intended. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver the message to the intended recipient, the reader is hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If this communication has been received in error, please notify Sharp Health Plan at the telephone number listed below immediately and destroy all information received.

SHARP Health Plan

Section	Subsection	Page #
	Dispute Resolution	145
	Claims Acknowledgement Sample	147
	Remittance Advice Summary Sample	148
	Remittance Advice Terms	150
	Glossary	151

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,

Sharp Health Plan
Provider Account Management Team
provider.relations@sharp.com
Tel: 1-858-499-8330 | Fax: 1-858-303-9049

NOTICE: The information contained in this facsimile message may be privileged and confidential and is only for whom it was intended. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver the message to the intended recipient, the reader is hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If this communication has been received in error, please notify Sharp Health Plan at the telephone number listed below immediately and destroy all information received.