

8520 Tech Way, Suite 200 San Diego, CA 92123 1-858-499-8300



Provider Alert

To: Sharp Health Plan Providers and Provider Office Staff

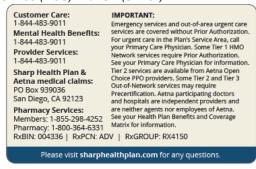
From: Sharp Health Plan
Date: May 16, 2022

Subject: Point-of-Service Plan Claims Submission Process

As a friendly reminder, please follow the claims submission process outlined below for Sharp Health Plan members on Point-of-Service (POS) plans. Below is a sample member ID card carried by these members.

Sample Member ID card: Point of Service (POS) Plans - (3 Tier)





Claims Submission Process

Please alert your claims team to submit all POS claims directly to Sharp Health Plan at:

PO Box 939036 San Diego, CA 92123

This POS claims mailing address is also located on the back of the POS member ID card.

For questions about claims, you can call our dedicated provider line at 1-858-499-8200 or email us at SHP.ClaimsResearch@sharp.com.

Sincerely,

Sharp Health Plan
Provider Account Management

provider.relations@sharp.com

Tel: 1-858-499-8330 | Fax: 1-858-303-9049