SHARP Health Plan

Non-Medicare Retiree

Monthly plan premiums

Effective January 1, 2025 through December 31, 2025

Covered Family Members	Non-Medicare Retiree Classic Plan Monthly Premium	Non-Medicare Retiree Select Plan Monthly Premium
Subscriber Only	\$1,716.44	\$1,412.18
Subscriber + One Dependent With Medicare	\$1,924.44	\$1,620.18
Subscriber + One Dependent Without Medicare	\$3,432.86	\$2,824.34
Subscriber + One Dependent With Medicare + One Dependent Without Medicare	\$3,640.86	\$3,032.34
Subscriber + Two or More Dependents Without Medicare	\$5,149.30	\$4,236.52



Find a doctor

Visit **sharphealthplan.com/findadoctor** to select a primary care physician within the Value Network for the Non-Medicare Retiree Classic Plan or the Performance Network for the Non-Medicare Retiree Select Plan.



Mail-order prescriptions

To set up a mail-order prescription, visit **sharphealthplan.com/mailorder** to get started.

For more information

This plan is sponsored by SDPEBA and available to all City of San Diego retirees. Contact SDPEBA Benefits at 1-888-315-8027 or info@sdpeba.org with any questions regarding this plan. If you need additional information or clarification, please visit **sharphealthplan.com/SDPEBA** or call Customer Care at 1-888-840-4747.

Non-Medicare Retiree 2025 Benefits at a glance

Exclusively for City of San Diego Non-Medicare-eligible retirees and dependents, sponsored by San Diego Public Employee Benefit Association (SDPEBA).

	Non-Medicare Retiree Classic Plan	
	Value Network	Performance Network
Plan Medical Groups	Sharp Rees-Stealy Medical Group, Sharp Community Medical Group, SCMG Palomar Health Medical Group, SCMG Graybill North Coastal, SCMG Palomar Health Medical Group Temecula, SCMG Inland North Medical Group, Rady Children's Health Network / Children's Physicians Medical Group (CPMG), Greater Tri-Cities IPA, Optum Care Network - North County	Sharp Rees-Stealy Medical Group, Sharp Community Medical Group, SCMG Palomar Health Medical Group, SCMG Graybill North Coastal, SCMG Palomar Health Medical Group Temecula, SCMG Inland North Medical Group, Rady Children's Health Network / Children's Physicians Medical Group (CPMG)
Calendar Year Medical Deductible	None	None
Calendar Year Out-of-Pocket Maximum	\$1,500 ¹ per individual / \$3,000 ¹ per family	\$3,000 ¹ per individual / \$6,000 ¹ per family
Preventive Care Visit	\$0	\$0
Primary Care Physician Visit	\$20	\$20
Specialist Physician Visit	\$20	\$30
Urgent Care Services	\$20	\$30
Emergency Room Services	\$75 (waived if admitted)	\$100 (waived if admitted)
Outpatient Surgery	\$0 per procedure	15% coinsurance ²
Inpatient Hospital Services	\$100 per admission	\$500 per admission
Retail Prescriptions [*] (up to a 30-day supply)	\$15 / \$30 / \$50	\$16 / \$35** / \$70** **Includes \$150 brand deductible
Mail-Order Prescriptions* (up to a 90-day supply) ³	\$30 / \$60 / \$100	\$32 / \$70** / \$140** **Includes \$150 brand deductible
Acupuncture and Chiropractic Care	\$15, 40 combined visits	\$15, 20 combined visits
Hearing Aids (every 36 months)	\$1,000 allowance	N/A
Routine Eye Exam (every 12 months)	\$0	N/A

Please refer to your plan documents for complete benefit information.

^{*} Drug Tiers: Preferred Generic / Preferred Brand / Non-preferred. ¹ Copayments for supplemental benefits (assisted reproductive technologies, chiropractic services, acupuncture, and vision and hearing aids) do not apply to the annual out-of-pocket maximum. ²Of contracted rates. ³ Save money on maintenance medications. Please call 1-888-315-8027 or visit **sharphealthplan.com/mailorder** for more information.