Welcome to SelectHealth Advantage!

We are so glad you chose us! Whether you were with us last year or are new to our plan, we want to welcome you to your 2022 plan. We really want you to get to know your plan so you can get the most out of it. From medical and pharmacy benefits to wellness perks, there’s a lot to unpack. Our goal is to help you understand your benefits and give you the tools and resources to stay healthy.

So, let’s get to it. Take a look at some major themes we’ll cover:

> Health Insurance Definitions
> We Are Here to Help! When in Doubt, Give us a Shout.
> Your Network
> Your Medical and Pharmacy Benefits
> Know Before You Fill
> Healthy You: Benefits, Incentives and Resources to Help You Stay Healthy
> What’s Next?
Health Insurance Definitions

We understand health insurance terms can be confusing. We’ll define some commonly used terms that help explain how your health coverage works.

DEDUCTIBLE—Amount you must pay to doctors and facilities before your plan pays for certain covered services.

OUT-OF-POCKET MAXIMUM (OOP)—The total amount you may pay for services covered by your plan each year. Things like deductibles, coinsurance, and copays may apply to your out-of-pocket maximum.

COINSURANCE—A percentage of the cost of a covered service that you pay after you’ve met your deductible. For example, you pay 20%, the plan pays 80%.

COPAY—A fixed amount you pay the doctor, pharmacy, or facility for covered services. For example, you might pay $20 for an office visit with your specialty care doctor.

FORMULARY—A formulary is a list of Part D medications covered by your SelectHealth Advantage plan. You can use the formulary to find a medication, its tier, cost, and any special requirements.

NETWORK—A network is the combination of doctors and facilities contracted with us to give you care for the best price. When you see a doctor or go to a facility that is out-of-network, the price for care will likely be higher and you are responsible to pay the bill.

VIRTUAL DOCTOR VISIT—Virtual visits allow you to have face-to-face consultations with your provider from home on your smart phone, tablet, or computer.

We are Here to Help

You’ve got questions. We’ve got answers. Depending on your question or what you need help with, we have a team that can help.

MEMBER SERVICES
855-442-9900 (TTY users, please call 711)
This is our main number—use it for any health insurance question. If we can’t answer your question, we will get you in touch with the right person.

MEMBER ADVOCATES
800-515-2220
Call our advocates if you need help finding a doctor or scheduling an appointment.

EVERYTHING AT YOUR FINGERTIPS
Your health plan (and medical information) is digital! Once enrolled on a plan, go to selecthealth.org, log in, and enjoy being in the know.

YOUR MEMBER ACCOUNT—This is your online health dashboard. Create or log in to your account on selecthealth.org/medicare to track your health insurance costs like out-of-pocket costs, choose paperless notification options, and access your Healthy Living™ program.

YOUR SELECTHEALTH ID CARD—Sent to members upon enrollment. It shows your specific plan benefits, your provider network, contact information, and more. Also available virtually on the mobile app and in your account.

SELECTHEALTH MOBILE APP—Quickly view benefits and claims or search for doctors and hospitals. Plus, make premiums payments, estimate medical costs for services and procedures; and view, email, or fax images of your ID card to your doctor. Available on the Google Play™ and the Apple® App Store™.
Your Care Options

Not everyone wants to receive care the same way. That’s why we’ve expanded our care options to give you a choice in managing your health.

Your Regular Scheduled Care.

Primary Care Provider
A Primary Care Provider (PCP) sees patients for common medical problems, performs routine exams, and helps prevent or treat illness. You can trust a PCP to know your health history, be your partner in preventive care, and help you find other doctors when you need them. To find an in-network doctor, visit selecthealth.org/findadoctor.

Specialty Care Provider
When you need more than your PCP, our network of specialists and surgeons can help—and there are thousands to choose from. Our affiliations with specialty facilities mean you can count on access to top-notch care.

Local Clinics
There are loads of community clinics and contracted, partner clinics in your area, so you never have to drive far to get the care you need. Plus, some clinics have extended hours!

Pharmacies
Prescriptions are often top of mind when considering your benefits. We are contracted with many pharmacies nationwide. Plus, with Intermountain Home Delivery, not only will you save money, your prescriptions will be mailed directly to you. Remember to use our Drug Look Up tool or call us to find out which prescriptions are covered.

When You Need Care Now!

If you have a health question, feel under the weather, or have a real emergency, you’ve got options. Choosing the right type of care can save you time and money.

Intermountain Connect Care®
Visit a provider for urgent care needs 24/7 via live online video using your smartphone, tablet, or computer. There’s no copay to use Connect Care. Download the app or visit intermountainconnectcare.org to get started.

Urgent Care
Urgent care clinics in your service area are open late and cost less than the ER. These are a great option for urgent care.

Worldwide Urgent and Emergency Care
If you need urgent or emergency care while traveling, we’ve got you covered. If you are outside your service area, all emergency and urgent care is paid as an in-network benefit—nationwide and worldwide. For an emergency, call 911 or go to the nearest hospital.
Your Benefits

Let's take a peek at your medical and pharmacy benefits. Remember, this is just a brief summary. If you want a more comprehensive look at your benefits, review Chapter 4 of your Evidence of Coverage.

<table>
<thead>
<tr>
<th>BENEFIT</th>
<th>COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum Out-of-Pocket</td>
<td>$6,700</td>
</tr>
<tr>
<td>Medical Deductible</td>
<td>$0</td>
</tr>
<tr>
<td>Provider Office Visit</td>
<td>Primary: $5 copay Specialty: $50 copay</td>
</tr>
<tr>
<td>Intermountain Connect Care (urgent care)</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Lab Services</td>
<td>$10 copay</td>
</tr>
<tr>
<td>Outpatient X-rays</td>
<td>$20 copay</td>
</tr>
<tr>
<td>Worldwide Emergency Care</td>
<td>$90 copay</td>
</tr>
<tr>
<td>Worldwide Urgent Care</td>
<td>$50 copay</td>
</tr>
<tr>
<td>Inpatient Hospital Care*</td>
<td>Days 1-6: $295 copay per day</td>
</tr>
<tr>
<td>Outpatient Surgery*</td>
<td>$320 copay</td>
</tr>
<tr>
<td>Ambulance</td>
<td>$250 copay</td>
</tr>
<tr>
<td>Advanced Imaging*</td>
<td>$300 copay</td>
</tr>
<tr>
<td>Skilled Nursing Facility*</td>
<td>Days 1-20: $0 copay per day</td>
</tr>
<tr>
<td></td>
<td>Days 21-75: $160 copay per day</td>
</tr>
<tr>
<td></td>
<td>Days 76-100: $0 copay per day</td>
</tr>
<tr>
<td>Durable Medical Equipment*</td>
<td>20% coinsurance</td>
</tr>
<tr>
<td>Wellness Your Way Reimbursement</td>
<td>$240 per year</td>
</tr>
<tr>
<td>Preventive Services</td>
<td>$0 copay</td>
</tr>
<tr>
<td>St. Luke's Lifestyle Medicine Program</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Acupuncture*</td>
<td>$20 copay</td>
</tr>
<tr>
<td>Chiropractic Services*</td>
<td>$20 copay</td>
</tr>
<tr>
<td>Hearing Aid Benefit†</td>
<td>$699-$2,399 per aid</td>
</tr>
</tbody>
</table>

**Prescription Drugs**

<table>
<thead>
<tr>
<th></th>
<th>Retail 30-day supply²</th>
<th>Mail-Order 100-day supply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Pharmacy Deductible</td>
<td>$200²</td>
<td></td>
</tr>
<tr>
<td>Tier 1</td>
<td>$3 copay</td>
<td>$6 copay</td>
</tr>
<tr>
<td>Tier 2</td>
<td>$15 copay</td>
<td>$30 copay</td>
</tr>
<tr>
<td>Tier 3</td>
<td>$45 copay after deductible</td>
<td>$135 copay after deductible</td>
</tr>
<tr>
<td>Tier 4</td>
<td>$95 copay after deductible</td>
<td>$285 copay after deductible</td>
</tr>
<tr>
<td>Tier 5</td>
<td>29% coinsurance after deductible</td>
<td>N/A</td>
</tr>
</tbody>
</table>

*Prior authorization required
1 Copay does not apply to annual out-of-pocket maximum
2 100-day supply also available
3 Deductible applies to tiers 3, 4, and 5

**DIABETES-SPECIFIC BENEFITS**

If you have a confirmed diabetes diagnosis, some benefits have different copays and coinsurances. See the below table for details.

<table>
<thead>
<tr>
<th>Diabetes-Specific Benefits</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary care provider</td>
<td>In-person or through telehealth.</td>
</tr>
<tr>
<td>Routine or preventive eye exam</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Diabetes monitoring supplies</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Coverage for Freestyle and Precision brand glucose monitors and test strips by Abbott Labs</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Diabetes self-management training</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Therapeutic shoe inserts</td>
<td>20% coinsurance</td>
</tr>
<tr>
<td>Select labs</td>
<td>Covered through the gap</td>
</tr>
<tr>
<td>Select diabetes drugs in Tier 1 and Tier 2 (non-insulin)</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Continuous Glucose Monitors (CGM)*</td>
<td>20% coinsurance</td>
</tr>
<tr>
<td>Part B insulin pumps and supplies</td>
<td>20% coinsurance</td>
</tr>
</tbody>
</table>

**INSULIN**

<table>
<thead>
<tr>
<th>Tier 1 insulin</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>30-day supply in all Part D stages.</td>
<td>$3 copay</td>
</tr>
<tr>
<td>Coverage Gap and deductible do not apply to select insulins.</td>
<td>$35 copay</td>
</tr>
<tr>
<td>Tier 3 insulin</td>
<td>20% coinsurance</td>
</tr>
<tr>
<td>30-day supply in all Part D stages.</td>
<td>20% coinsurance</td>
</tr>
<tr>
<td>Coverage Gap and deductible do not apply to select insulins.</td>
<td>20% coinsurance</td>
</tr>
<tr>
<td>Part B pump insulin</td>
<td>For use in a pump.</td>
</tr>
</tbody>
</table>
Your Formulary

SelectHealth Advantage

Essential Formulary

COMPARE DRUG PRICES
Log in to your SelectHealth member account to search for participating pharmacies, covered medications, compare drug prices, and see other information about your prescriptions and benefits. You can also find information about any special requirements, like step therapy or preauthorization, which you and/or your doctor may need to complete before you can fill a prescription.

If you ever have questions about drugs with special requirements, call Member Services at 855-442-9900 (TTY: 711).

HELP WITH PRESCRIPTION COSTS

RX SAVINGS SOLUTIONS
Rx Savings Solutions is an easy to use, comprehensive online prescription tool that shows you ways to spend less money on your prescriptions. It will also automatically alert you if you are paying too much for your medication and identifies other ways to get the same treatment for less money. Now you can easily find less expensive alternatives for your personal prescription needs according to your health plan.

Log in to your SelectHealth member account at selecthealth.org/rxsavings to enroll and start saving!

My Advocate
SelectHealth has partnered with My Advocate, a service that can help you apply for Medicare Savings Programs. They help people save on their Part B Premiums and prescription drug costs.

To learn more about how My Advocate can help you, call 844-794-2296.

Healthy You

Our mission is to help you live the healthiest life possible. That's why we give you the tools and incentives to help you get healthy and stay healthy.

PREVENTIVE CARE

Your Annual Routine Physical is 100% covered by the plan, so you won't pay a dime out-of-pocket. It helps you get on the right track with your doctor and create a care plan for the year that works for you. If you need help finding a doctor, call our Member Advocates team at 800-515-2220.

WELLNESS YOUR WAY

We’ll reimburse you up to $240 per year for things like gym memberships, approved weight loss programs, nutritional services, and health education classes.

To use this benefit, choose and pay for your wellness activity, and complete the Wellness Reimbursement form. Or visit selecthealth.org/medicare, click “Wellness Resources,” then “Wellness Reimbursement.”

If you need help, call us at 855-442-9900 (TTY: 711).
OPTIMAL DENTAL AND VISION HARDWARE COVERAGE

You can choose to add comprehensive dental and vision hardware benefits to your plan for an additional monthly premium.

To learn more about the optional supplemental benefits available to you, call our Member Services team at 855-442-9900.

ST. LUKE’S LIFESTYLE MEDICINE PROGRAMS

The Intensive Lifestyle Medicine Program hosted by St. Luke's providers empowers you with the knowledge and skills you need to help achieve better overall health and great quality of life.

The St. Luke’s team will work with you to create an individual care plan tailored to your needs. Through a combination of online classes, group or individual visits, and in-person options, you may receive:

> Health coaching
> Nutrition and cooking classes
> Medically supervised group exercise
> Stress resilience and emotional wellness classes

For more information, visit stlukesonline.org/health-services/specialties/lifestyle-medicine

MEALS AFTER HOSPITAL STAY

This plan covers up to 14 days of meals (2 per day) after you are discharged from an inpatient hospital or skilled nursing facility stay, based on need, at no cost to you. Prior authorization by a Care Manager is required.

If you experience a change in the level of your care, call our Care Management team at 800-442-5305.

HEARING AIDS

Hearing aids purchased through approved in-network Idaho Elk’s Hearing and Balance Clinics or St. Luke’s Ear, Nose, Throat, and Facial Plastic Surgery clinics are covered under one of five benefit tiers.

If you need help finding an approved audiologist near you, call us at 855-442-9900 (TTY:711)

Note: Hearing aid costs do not apply to your Out-of-Pocket Maximum.

<table>
<thead>
<tr>
<th>TIER OPTIONS</th>
<th>COST PER AID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1 - Budget</td>
<td>$699</td>
</tr>
<tr>
<td>Tier 2 - Essential</td>
<td>$999</td>
</tr>
<tr>
<td>Tier 3 - Standard</td>
<td>$1,399</td>
</tr>
<tr>
<td>Tier 4 - Advanced</td>
<td>$1,899</td>
</tr>
<tr>
<td>Tier 5 - Premium</td>
<td>$2,399</td>
</tr>
</tbody>
</table>

Resources

We have several programs designed to meet your unique needs. Your health and wellness are our priority, that’s why we want you to have resources to help you maintain and enjoy a healthy lifestyle.

CARE MANAGEMENT TEAM

Help Managing Your Care

Our care team works together to help you manage your health conditions. We can help you manage specific conditions such as diabetes, cancer or mental health concerns. We also can help find resources that you may need to manage your health better such as help finding transportation to appointments or connecting you with resources in your community.

Transitional Care

If you have a hospitalization or other inpatient facility stay, our care team can help coordinate the care you may need at home. We can help:

> Answer any questions you may have about your care plan
> Coordinate any durable medical equipment (DME) needs, like oxygen tanks or a wheelchair
> Review your medications to make sure they are working for you
> Fill out advance care planning documents
> Coordinate 14 days of meals (2 per day) after you are discharged from an inpatient hospital or skilled nursing facility stay

If you have a hospital or inpatient facility stay and to learn more about Care Management, call 800-442-5305.

PAPA PALS

Papa Pals connects you with a great Pal who can provide friendship and help with everyday tasks, including:

> Technology lessons
> House tasks like laundry, light cleaning, organizing, and meal preparations
> Virtual and in-person companionship
> Help running errands

To get started, call 888-452-4553.

ADVANCE DIRECTIVES

Advance directives are documents that allow you to make your wishes about end-of-life care known ahead of time, including who you want to make healthcare decisions for you, should you ever become unable to speak for yourself. It is important to understand the options available to you for advance directives and your rights under state law. SelectHealth and our network of hospitals and providers are required to comply with state law and cannot refuse care or otherwise discriminate against you based on whether or not you have a properly executed advance directive. If you don’t have advance directives on file, this information will be provided to you upon request.

For more information about advance directives, please call St. Luke’s Health System at 208-381-2616.
What’s Next?

Now that we have looked at some of your plan details, here are a few things to help you get started:

> Schedule your Annual Routine Physical with your doctor, if you haven’t already. Don’t forget to ask about any recommended preventive screenings.
> Create your SelectHealth member account at selecthealth.org/medicare. Click on “Member Login” to get started.
> Complete the online Health Risk Assessment (HRA) to earn a $20 gift card.
> Start earning rewards for completing your Healthy Living activities.
> Start getting reimbursed for your wellness activities using the Wellness Your Way benefit.
> Fill out an Authorization to Release Health Information for family that may be asking us questions about your plan.

Don’t forget, our Member Services team is here to answer your questions and resolve your concerns.

Call us toll-free at 855-442-9900 during the following dates and times:

**OCTOBER 1 TO MARCH 31:**
Weekdays 7:00 a.m. to 8:00 p.m.,
Saturday and Sunday 8:00 a.m. to 8:00 p.m.

**APRIL 1 TO SEPTEMBER 30:**
Weekdays 7:00 a.m. to 8:00 p.m.,
Saturday 9:00 a.m. to 2:00 p.m., closed Sunday.

Outside of these hours of operation, please leave a message. Your call will be returned within one business day. TTY users, please call 711.