Welcome to SelectHealth.

A good health plan should be just that—a plan for living healthier and getting the care you need, where and when you need it. Use this guide to help you choose the right plan and explore popular benefits like wellness rewards and virtual doctor visits.

WE’RE IN THIS TOGETHER.
You are at the heart of everything we do. We listen to you and we adapt. Our goal is to provide plans and benefits that work for you and your needs. But it’s not just about providing health plans, we want to help you live a healthy life—the healthiest life possible. It’s our mission and it drives everything from our customer service to our business decisions. In addition to providing the highest quality of care, our focus is centered on providing you the best overall experience. We are your trusted partner. This is about YOU.

FEEL THE DIFFERENCE.
We strive to support you, help you stay healthy, and get the right benefits for your needs. Plus, who has time for hassles? Insurance doesn’t have to be a pain. We want to save you time and money, all while getting you the care you need, the way you want it. Get a feel for the SelectHealth difference with perks and benefits like:

VIRTUAL VIDEO VISITS
> Get quality care whenever and wherever you need it with Intermountain Connect Care®—all for $0 out-of-pocket costs per visit.

WELLNESS REWARDS
> Receive up to a combined total of either $75 per person or $200 per family for completion of qualified wellness events. Contact Member Services at 844-345-FEHB or visit selecthealth.org/fehb for more information.

MEDICAL CARE AND INSURANCE IN SYNC
> Intermountain Healthcare® and SelectHealth® form one integrated system to ensure you get quality care at the best price.

844-345-FEHB (toll-free)
selecthealth.org/fehb

Call us weekdays, from 7:00 a.m. to 8:00 p.m. and Saturday, from 9:00 a.m. to 2:00 p.m.
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 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 primary care doctor.

**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.

**Health Savings Account (HSA)**
Think of an HSA as a savings account for healthcare expenses. If you enroll on a high deductible health plan, you can pair it with an HSA. You can use money in an HSA to pay for medical services—these are called qualified medical expenses and are defined by the IRS. Some examples of qualified medical expenses include doctor’s visits, copays, dental care, and prescriptions. The tax-free funds in an HSA can be saved from year to year, but only the amount that has been contributed so far will be available.

**HSA Premium Passthrough**
If you have a high deductible health plan, your health insurance plan will contribute a portion of your monthly premium to your HSA or credit a specific amount to your Health Reimbursement (HRA) account.

**SELECTHEALTH MED**
SelectHealth Med covers all of Utah’s Intermountain Healthcare hospitals, facilities, and physicians, in addition to thousands of contracted doctors. This network also covers specialty care facilities like Primary Children’s Hospital and Huntsman Cancer Hospital for cancer treatment.

**Out-of-Area Dependent Coverage**
Dependent children who live outside the service area will receive in-network benefits for covered services when they use SelectHealth Med providers in Utah and preferred network providers outside of Utah. Members must fill out a Dependent Address Change form if a dependent lives outside the service area.

**National and Worldwide Coverage for Emergency and Urgent Care**
Going out of town? No worries! If you get sick or injured while out of state or country, you are covered!

**Employee Assistance Program (EAP)**
EAP services are available to all SelectHealth FEHB plan enrollees. The EAP program provides free counseling for issues such as interpersonal conflicts, depression, anxiety, and other life stressors. The program also includes:

- **Elder Care Support** – Information, resources, and coaching for employees who provide care to a spouse or relative who is ill, disabled, or needs help with basic activities of daily living. The service provides support for the emotional issues of caregiving and can help identify medical, legal, and financial resources that may be available.
- **Crisis Response Services** – 24/7 crisis services with a licensed mental health professional is available by calling 800-832-7733.
- **Website** – Visit intermountainhealthcare.org/eap to sign up for bi-monthly e-tips on living well; find resources on problem solving, parenting skills, and more; and find office locations and staff biographies.

To schedule an appointment, call 800-832-7733 from 8:00 a.m. to 5:00 p.m. (MST). For non-urgent questions, send an email to eap@imail.org.

**Telehealth**
Virtual visits are no additional cost to members for these covered services:

- Non-urgent care with participating primary care physicians and specialists
- Urgent care visits using Intermountain Connect Care

Note: Deductible does not apply to telehealth services in 2021.

**Pre-deductible Coverage**
The deductible is waived for the following services:

- Retinopathy screening and Hemoglobin A1c testing for diabetes
- Peak flow meter for asthma
- International Normalized Ration (INR) testing for liver disease and/or bleeding disorders
- Low-density Lipoprotein (LDL) testing for heart disease
- Certain prescription drugs
In-Network Hospitals

Salt Lake Area
- Alta View Hospital
- Huntsman Cancer Hospital
- Intermountain Medical Center
- LDS Hospital
- Primary Children’s Hospital
- Riverton Hospital
- TOSH—The Orthopedic Specialty Hospital

Utah Valley Hospital
- Logan Regional Hospital
- Bear River Valley Hospital
- McKay-Dee Hospital
- Davis Hospital & Med. Center
- Layton Hospital
- Mountain West Med. Center
- American Fork Hospital
- Orem Community Hospital
- Uintah Basin Med. Center
- Central Valley Med. Center
- Sanpete Valley Hospital
- Delta Community Hospital
- Fillmore Community Hospital
- American Fork Hospital
- Orem Community Hospital
- Uintah Basin Med. Center
- Central Valley Med. Center
- Sanpete Valley Hospital
- Canyon View Hospital
- Gunnison Valley Hospital
- Sevier County Hospital
- Sevier Valley Hospital
- Milford Memorial Hospital
- Beaver Valley Hospital
- Garfield Memorial Hospital
- Cedar City Hospital
- Dixie Regional Med. Center
- Kane County Hospital

In-Network Clinics

YOU’VE GOT ACCESS!
As a SelectHealth FEHB member, it’s important to stay in your network. That means, you can go to any provider that is part of our integrated clinic partner, Intermountain Healthcare, as well as emergency and urgent care services across the world. Our affiliation with a vast number of providers and clinics across our service areas aims to ensure you are getting the best possible care without having to go far.

Going the distance for you, so you don’t have to means we also contract with many additional key providers, such as:

Our members’ most-used services are available through Intermountain Healthcare and our contracted affiliate providers.

Remember: It’s always a good idea to check the participating status of a healthcare provider before getting care.

To verify whether a provider is participating on your plan, visit selecthealth.org/findadoctor or call our Member Advocates line at 800-515-2220 (TTY: 711).
WHEN YOU NEED HELP NOW

There are other options for care when you have questions or you’re feeling under the weather at times when your PCP isn’t available. Choosing the right care can save you time and money.

INTERMOUNTAIN HEALTH ANSWERS®
Our nurse line is available 24/7 for any medical questions or concerns you have. Call 844-501-6600 to get help and talk to a registered nurse for free.

INTERMOUNTAIN CONNECT CARE®
Visit a provider 24/7 via live online video using your smartphone, tablet, or computer. There’s no copay for Connect Care, which means you get high-quality care whenever, wherever for no additional cost. Download the app or visit intermountainconnectcare.org to get started.

INTERMOUNTAIN INSTACARE®
What’s open late and costs less than the ER? Our InstaCare clinics. If you need urgent care, this is a great option.

EMERGENCY AND URGENT CARE
If you need urgent or emergency care, we’ve got you covered. If you are outside of Utah, all emergency and urgent care is paid as an in-network benefit—nationwide and worldwide. If you need urgent care while in Utah, you will need to go to an in-network facility. For an emergency, call 911 or go to the nearest hospital.

YOUR REGULAR SCHEDULED CARE
Scheduled care keeps you in tip-top shape and can help detect and correct and issues that come up. Here are a few resources for regular care.

PRIMARY CARE PROVIDERS
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/find-a-doctor.

Note: Designating a PCP is not required on an FEHB plan.

SPECIALISTS
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
Intermountain Healthcare community clinics and contracted clinics are in your area, so you never have to drive far to get the care you need. Plus, some clinics have extended hours!

WHEN YOU NEED EXTRA SPECIAL CARE
For times when you need more than just your regular doctor or more timely care, we have a broad network of facilities for any kind of treatment you seek.

HOSPITALS
Intermountain Healthcare hospitals span the state of Utah, offering a variety of care and services. Think heart care, cancer treatment, transplant services, women and newborns, and much more—you name it, they can treat it. And because we are integrated with Intermountain, you get high-quality care at a low cost. Outside of Intermountain hospitals, we partner with top-quality facilities and providers to get you the care you need most.
### Standard Option Benefits

<table>
<thead>
<tr>
<th>BENEFIT</th>
<th>Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Deductible</strong></td>
<td>$250 per person, per calendar year $500 Self Plus One or Self &amp; Family, per calendar year</td>
</tr>
<tr>
<td><strong>Out-of-Pocket Maximum</strong> (Protection against catastrophic costs)</td>
<td>$5,500 per person, per calendar year $11,000 per Self Plus One or Self and Family enrollment, per calendar year</td>
</tr>
<tr>
<td><strong>Hospital Services</strong></td>
<td></td>
</tr>
<tr>
<td>Inpatient</td>
<td>15% per admission (facility charges) after deductible 15% (professional fees) after deductible</td>
</tr>
<tr>
<td>Outpatient</td>
<td>15% after deductible</td>
</tr>
<tr>
<td><strong>Doctor’s Office Visits</strong></td>
<td></td>
</tr>
<tr>
<td>Preventive</td>
<td>$0</td>
</tr>
<tr>
<td>Primary care provider</td>
<td>$15 copay</td>
</tr>
<tr>
<td>Specialist</td>
<td>$35 copay</td>
</tr>
<tr>
<td>Intermountain KidsCare</td>
<td>$15 copay</td>
</tr>
<tr>
<td>Urgent Care and Intermountain InstaCare</td>
<td>$35 copay</td>
</tr>
<tr>
<td><strong>Virtual Consultations</strong></td>
<td></td>
</tr>
<tr>
<td>Telehealth Urgent Care /Intermountain Connect Care</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Telehealth Non-urgent Care</td>
<td>$0 copay</td>
</tr>
<tr>
<td><strong>Maternity</strong></td>
<td></td>
</tr>
<tr>
<td>Physician</td>
<td>$15 first visit, subsequent visits $0</td>
</tr>
<tr>
<td>Hospital</td>
<td>$200 per admission copay</td>
</tr>
<tr>
<td><strong>Emergency Benefits</strong></td>
<td></td>
</tr>
<tr>
<td>In-area/out-of-area emergency room</td>
<td>$200 copay after deductible</td>
</tr>
<tr>
<td><strong>Mental Health and Chemical Dependency</strong></td>
<td></td>
</tr>
<tr>
<td>Mental Health and substance abuse treatment</td>
<td>$15 per office visit 15% for outpatient services, after deductible 15% per inpatient admin, after deductible</td>
</tr>
<tr>
<td>Employee Assistance Program</td>
<td>Unlimited visits; $0 copay, also available via virtual visits*</td>
</tr>
<tr>
<td><strong>Prescription Drugs</strong></td>
<td></td>
</tr>
<tr>
<td>Retail pharmacy (30-day supply)</td>
<td>Tier 1 $5 Tier 2 $40 after deductible Tier 3 50% up to $250 after deductible Tier 4 30% after deductible</td>
</tr>
<tr>
<td>Mail order (90-day supply)</td>
<td>Tier 1 $5 Tier 2 $80 after deductible Tier 3 50% after deductible</td>
</tr>
<tr>
<td>Injectable drugs and specialty medications (in provider’s office)</td>
<td>30% after deductible</td>
</tr>
</tbody>
</table>

*Covered medical and pharmacy expenses are included in the out-of-pocket maximum.

**These Benefits are neither offered nor guaranteed under contract with the FEHB Program, but are made available to all Enrollees and family members who become Members of the SelectHealth Plan.**

### High Deductible Health Plan (HDHP) Option Benefits

<table>
<thead>
<tr>
<th>BENEFIT</th>
<th>HDHP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Deductible</strong></td>
<td>$1,500 per person, per calendar year $3,000 Self Plus One or Self &amp; Family, per calendar year</td>
</tr>
<tr>
<td><strong>Out-of-Pocket Maximum</strong> (Protection against catastrophic costs)</td>
<td>$5,000 per person, per calendar year $10,000 per Self Plus One or Self &amp; Family enrollment, per calendar year</td>
</tr>
<tr>
<td><strong>Hospital Services</strong></td>
<td></td>
</tr>
<tr>
<td>Inpatient</td>
<td>$150 per day up to $750 per admission, after deductible $0 after deductible (professional fees)</td>
</tr>
<tr>
<td>Outpatient</td>
<td>$150 per day after deductible</td>
</tr>
<tr>
<td><strong>Doctor’s Office Visits</strong></td>
<td></td>
</tr>
<tr>
<td>Preventive</td>
<td>$0</td>
</tr>
<tr>
<td>Primary care provider</td>
<td>$10 copay after deductible</td>
</tr>
<tr>
<td>Specialist</td>
<td>$30 copay after deductible</td>
</tr>
<tr>
<td>Intermountain KidsCare</td>
<td>$10 copay after deductible</td>
</tr>
<tr>
<td>Urgent Care and Intermountain InstaCare</td>
<td>$30 copay after deductible</td>
</tr>
<tr>
<td><strong>Virtual Consultations</strong></td>
<td></td>
</tr>
<tr>
<td>Telehealth Urgent Care /Intermountain Connect Care</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Telehealth Non-urgent Care</td>
<td>$0 copay</td>
</tr>
<tr>
<td><strong>Maternity</strong></td>
<td></td>
</tr>
<tr>
<td>Physician</td>
<td>$20 first visit, subsequent visits $0</td>
</tr>
<tr>
<td>Hospital</td>
<td>$100 per admission copay, after deductible</td>
</tr>
<tr>
<td><strong>Emergency Benefits</strong></td>
<td></td>
</tr>
<tr>
<td>In-area/out-of-area emergency room</td>
<td>$200 copay after deductible</td>
</tr>
<tr>
<td><strong>Mental Health and Chemical Dependency</strong></td>
<td></td>
</tr>
<tr>
<td>Mental Health and substance abuse treatment</td>
<td>$10 per office visit, after deductible $150 per day for outpatient services, after deductible $150 per day up to $750 per admission, after deductible</td>
</tr>
<tr>
<td>Employee Assistance Program</td>
<td>Unlimited visits; $0 copay, also available via virtual visits*</td>
</tr>
<tr>
<td><strong>Prescription Drugs</strong></td>
<td></td>
</tr>
<tr>
<td>Retail pharmacy (30-day supply)</td>
<td>Tier 1 $7 after deductible Tier 2 $25 after deductible Tier 3 $50 after deductible Tier 4 30% after deductible</td>
</tr>
<tr>
<td>Mail order (90-day supply)</td>
<td>Tier 1 $7 after deductible Tier 2 $50 after deductible Tier 3 $150 after deductible</td>
</tr>
<tr>
<td>Injectable drugs and specialty medications (in provider’s office)</td>
<td>30% after deductible</td>
</tr>
</tbody>
</table>

*Covered medical and pharmacy expenses are included in the out-of-pocket maximum.

**These Benefits are neither offered nor guaranteed under contract with the FEHB Program, but are made available to all Enrollees and family members who become Members of the SelectHealth Plan.**
The High Deductible Difference

Take a look at the scenario below. This shows the differences between a standard and a high deductible health plan, including the out-of-pocket amounts Bill and Tammy would have to pay on each plan.

**Scenario:**

<table>
<thead>
<tr>
<th></th>
<th>Bill</th>
<th>Tammy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>58</td>
<td>57</td>
</tr>
<tr>
<td>Health</td>
<td>High Cholesterol</td>
<td>No Health Issues</td>
</tr>
<tr>
<td>Medications</td>
<td>Lipitor, 20 mg daily</td>
<td>Antibiotic for Strep</td>
</tr>
<tr>
<td>Healthcare Utilization</td>
<td>One Urgent Care visit for cut hand Preventive visits</td>
<td>One Dr Visit for Strep Throat Preventive visits</td>
</tr>
</tbody>
</table>

**Comparison:**

<table>
<thead>
<tr>
<th></th>
<th>Standard Plan</th>
<th>HDHP/HSA Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MONEY IN</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self + One Premium Passthrough</td>
<td>None</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$150 per month</td>
</tr>
<tr>
<td><strong>MONEY OUT</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Premiums</td>
<td>$159.57 per paycheck</td>
<td>$4,148.88 per year</td>
</tr>
<tr>
<td>Total Provider Visits</td>
<td>Urgent Care Visit Dr Visit for Strep Throat</td>
<td>$35 Copay</td>
</tr>
<tr>
<td>Total Prescriptions</td>
<td>Lipitor: $5 Copay x 12 Amoxicillin: $5 Copay</td>
<td>$65</td>
</tr>
<tr>
<td>Money Out Subtotal</td>
<td>$4,263.88</td>
<td>$3,934.80</td>
</tr>
<tr>
<td>Less the HSA</td>
<td>$0</td>
<td>-$1,800</td>
</tr>
<tr>
<td>Contributions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Money Out</td>
<td>$4,263.88</td>
<td>$2,134.80</td>
</tr>
</tbody>
</table>

**Difference Between Standard and HDHP Money Out**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$2,129.80 Savings</td>
</tr>
</tbody>
</table>

2021 HSA Pass-through Amounts.

For each month you’re eligible, SelectHealth will deposit $75 for Self Only, or $150 for Self Plus One or Self and Family per month in your HSA.

Saving for Today and Tomorrow

**Health Savings Account (HSA) from HealthEquity**

An HSA is a type of savings account that allows you to set money aside on a pre-tax basis for qualified medical expenses. There are a few requirements, but it is a great way to build savings for today and for your future. Why? Because unlike a Flexible Spending Account (FSA), whatever you do not spend rolls over from year-to-year. To get started:

**STEP 1** SELECT AN HSA-QUALIFIED HEALTH PLAN

Once you enroll on an HDHP plan, you can start saving right away. Our HSA provider, HealthEquity, will work with your employer and SelectHealth to automatically set up your account and send you a HealthEquity VISA® Health Account Card to conveniently pay for qualified medical expenses, including dental, vision, and pharmacy expenses.¹ To see how you can personally benefit from an HSA, visit HealthEquity.com/Me.

**STEP 2** ADD MONEY TO YOUR HSA

Fund your HSA through pre-tax payroll deductions or transfer money into your account through the HealthEquity member portal. We’ll also make contributions using the HSA Premium Passthrough.

To make tax-free contributions² to an HSA, the IRS requires that:

- You are covered by an HSA-qualified health plan.
- You have no other health coverage (such as another health plan, Medicare, other military health benefits, or medical FSA).
- You are not Medicare-eligible.
- You cannot be claimed as a dependent on another person’s tax return.

¹ This card is issued by The Bancorp Bank, pursuant to a license from U.S.A., Inc. and can be used for qualified expenses. See Cardholder Agreement for complete usage instructions.
² irs.gov/publications/p502
³ HSAs are not taxed at the federal income tax level when used appropriately for qualified medical expenses. Also, most states recognize HSA funds as tax-free with very few exceptions. Please consult a tax advisor if you have questions. The limits for 2021 contributions are: Self - $3,600; Family - $7,200. HSA-eligible members who are 55 or older can contribute an additional $1,000, considered a catch-up allowance.
A misconception about SelectHealth being an HMO is that you only have access to healthcare here in Utah. As a member of SelectHealth, you have access to a very large, nationally recognized healthcare system locally. Typically, people get their maintenance care and procedures done while at home. And when you travel outside of Utah and get sick or injured, go to the urgent care or hospital where you are. We will process your claims as in-network. This is true nationally as well as worldwide!

OUTSIDE OF YOUR SERVICE AREA
In-network benefits apply when you receive services for urgent or emergency conditions, no matter where you are.

OUTSIDE OF THE COUNTRY
If you are traveling outside of the country and need urgent or emergency care, visit the nearest doctor or hospital. You may need to pay for the treatment at the time of service. If you do, keep your receipt and submit it along with a Claim Reimbursement Form, which can be found on selecthealth.org/forms.

COMPARE DRUG PRICES
Log in to your SelectHealth member portal to search for 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 844-345-FEHB.

SAVE MONEY WITH LOWER-TIER DRUGS
Your prescription drug list is RxSelect®. This drug list will be shown on your ID card and is available on our website.

Your pharmacy benefit has four tiers of coverage. Each drug is covered under a specific tier that corresponds to a copay or coinsurance amount—this is the amount you pay at the pharmacy. Look for generics and lower-tier alternatives to pay less for equally effective medications. SelectHealth will credit any deductible, copays, and coinsurance paid for covered prescription drugs toward your out-of-pocket maximum.

TIER 1
Lowest Cost (mostly generic drugs)

TIER 2
Low Cost (generic and brand-name drugs)

TIER 3
Higher Cost (mostly brand-name drugs)

TIER 4
Highest Cost (injectable drugs and specialty medications)

A PRESCRIPTION FOR SAVINGS
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 portal at selecthealth.org/rxsavings to enroll and start saving!

Convenient Pharmacy Access

Intermountain Home Delivery Pharmacy – Get your prescriptions delivered for FREE. Register online at intermountainrx.org or call 855-779-3960

Retail 90 – Get a 90-day supply of your maintenance medications at a participating Retail 90 pharmacy—and pay less in most cases.

Intermountain Specialty Pharmacy – If you take specialty drugs or self-injectables, the Specialty Pharmacy offers the convenience of FREE home delivery. Intermountain Specialty Pharmacy is required for tier 4 drugs.

Your Local Pharmacy – From major national chains to the corner drug store, you can get your prescriptions filled pretty much anywhere. Search for participating pharmacies at selecthealth.org.
Wellness? Well, Yes!

WHAT’S A WELLNESS ACTIVITY?

- Joining a gym
- Approved weight loss programs such as The Weigh to Health, Weight Watchers, and Jenny Craig
- Nutritional services like dietitian and nutritional counseling services
- Health education classes such as aquatics therapy or type 2 diabetes classes

You’re free to manage your health—your way. Go to any gym or fitness center that is convenient for you. Choose from a wide range of wellness activities. What’s important is that you feel healthy. And a little motivation never hurt anyone, right?

ATTENTION TO PREVENTION

Preventive care can help you stay healthy in the long run. It is covered 100% on our Standard and HDHP plans when you use in-network providers. For services to be covered as preventive, your doctor must submit claims with preventive codes. If a preventive service identifies a condition that needs further testing or treatment, regular copays, coinsurance, or deductibles may apply. These services are generally covered once every 12 months.

For more information about your preventive care benefits, see the SelectHealth Plan FEHB brochure, call Member Services at 844-345-FEHB, or visit selecthealth.org/fehb.

Resources

From discounts to disease management, 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 – Our registered nurse care managers offer one-time or ongoing one-on-one support and help coordinate care with your doctor(s). They provide educational materials, newsletters, and follow-up phone calls. For more information, call Care Management at 800-442-5305.
- Member Discounts – We know that embracing a healthy lifestyle is easier when it costs less. As a SelectHealth member, you have access to discounts on everyday products and services that aren’t generally covered by your plan, including:
  - Acupuncture
  - Health clubs
  - Massage therapy
  - Hearing aids
  - LASIK vision surgery

The process is simple—no enrollment forms, fees, or payroll deductions—just great savings when you mention that you are a SelectHealth member and show your ID card. To learn more, visit selecthealth.org/discounts.

- Tobacco Cessation – One of the most significant things a person can do to improve overall health is to quit smoking. We offer a free program called, Quit for Life® that allows participants to progress at their own pace from home. For more information, call 866-784-8454.

- The Weigh to Health – Finding a balance of fitness and nutrition that works for your body is important for a lasting weight management program. The Weigh to Health is for overweight individuals who want to lose weight, improve their health, and feel better every day. Contact Member Services for a program near you.

SelectHealth Healthy Beginnings®

Our prenatal care program provides emotional support and coaching for expectant mothers from a team of nurse care managers. In addition to pregnancy and prenatal education materials and other over-the-phone screenings, the program includes high-risk care management when needed. For more information, call Healthy Beginnings® at 866-442-5052.
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.

Medical Cost Estimator – Get an estimate for common healthcare services. For example, find out ahead of time how much to plan for when having a baby, including charges for the facility, provider, and anesthesiologist, if applicable. Bundling these numbers together, we’ll estimate how much your plan will cover and what you will pay.

Healthcare Information – Get lab results, faster—many providers upload them directly to your SelectHealth account. Keep track of appointments, view records, message Intermountain Healthcare doctors, and much more.

Chat with Us – No time for a phone call? Use our secure chat feature to talk with Member Services online. Whether you need to know if your medication will be covered or how much a doctor’s bill was, chat can help.

Message Your Doctor – With a few clicks, you can send a message to your Intermountain doctor about your last visit, see recent lab results, or ask questions about your new prescription.

We Can Help

Health insurance doesn’t have to be complicated. We can help you with everything from understanding your benefits to finding the right doctor. Our customer service teams are dedicated to providing exceptional service.

**MEMBER SERVICES**

You’ve got questions and we’ve got answers. Give us a call! And we know life doesn’t always happen between nine and five, so we’re here late.

Weekdays, from 7:00 a.m. to 8:00 p.m., and Saturday, from 9:00 a.m. to 2:00 p.m.

844-345-FEHB

**MEMBER ADVOCATES**

We can help you find the right doctor for your needs. We’ll find the closest facility or doctor with the nearest available appointment, schedule appointments for you, and help you understand and maximize your benefits.

800-515-2220
# 2021 Rate Information for the SelectHealth Standard and High Deductible Health Plan Options

These rates do not apply to all enrollees. If you are in a special enrollment category, please refer to the FEHB Program website or contact the agency or Tribal Employer that maintains your health benefits enrollment.

<table>
<thead>
<tr>
<th>TYPE OF ENROLLMENT</th>
<th>Non-Postal Premium</th>
<th>Postal Premium</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Biweekly</td>
<td>Monthly</td>
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<td></td>
<td>Your Share</td>
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<td>Standard Option Self Only</td>
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<td>Standard Option Self Plus One</td>
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<td>Standard Option Self and Family</td>
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<td>HDHP Option Self and Family</td>
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</table>

This is a summary of the features of the SelectHealth Plan. Before making a final decision, please read the Plan’s Federal brochure (73-865). All Benefits are subject to the definitions, limitations, and exclusions set forth in the Federal brochure.

These Benefits are neither offered nor guaranteed under contract with the FEHB Program, but are made available to all Enrollees and family members who become Members of SelectHealth.

SelectHealth obeys Federal civil rights laws. We do not treat you differently because of your race, color, ethnic background or where you come from, age, disability, sex, religion, creed, language, social class, sexual orientation, gender identity or expression, and/or veteran status.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame a SelectHealth: 1-800-538-5038 (TTY: 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 SelectHealth: 1-800-538-5038 (TTY: 711).