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Welcome to Select Health

We're a non-profit health plan dedicated to simplifying insurance for our members.

This guide can help you access and navigate your health benefits, find quality care, and keep costs down.

An Integrated Health System

We are integrated with Intermountain Health, which ensures you have:

- The lowest cost of care at their facilities.
- Resources that help you live the healthiest life possible.
- Lowest cost, highest value care to help manage your spend.
- Cost transparency so you can budget appropriately for healthcare expenses.
- Digital tools that are personalized to help you understand and utilize your benefits.

Visit selecthealth.org/fehb to learn more.

Digital Tools



Select Health Member Account and Mobile App



A member account is the most convenient way to access benefit information and important cost saving resources.

Scan the QR code or visit selecthealth. org/resources/online-tools to register your account and log in.



Cost Estimator Tool



Estimate the cost of specific services and procedures so you can plan for expenses prior to receiving care.

- 1. Scan the QR code or visit selecthealth. org/resources/online-tools to log into your member account.
- 2. Click "Go to Cost Estimator" from the Dashboard tab.

Intermountain Health Account and Mobile App



Convenient access to all your health information and care options.

Scan the QR code or visit intermountainhealthcare.org/patientportal to register your account and log in.

Support

If you can't find what you're looking for, reach out to Member Services. They have extended hours, including weekends, and offer online chat through your member account or mobile app.

Member Services

- Answer benefit questions.
- Help you understand your insurance plan.
- Chat online through your member account or mobile app.

7 a.m. to 8 p.m. MST, weekdays 9 a.m. to 2 p.m. MST, Saturdays

844-345-FEHB

Member Advocates

- Find the right doctors and facilities.
- Schedule appointments.
- Provide support to maximize benefits.

7 a.m. to 8 p.m. MST, weekdays 9 a.m. to 2 p.m. MST, Saturdays

800-515-2220



Learn More

Scan the QR code or visit selecthealth.org/member-support.



Health Insurance **Definitions**

These are some common health insurance terms that will help you understand and navigate your health plan benefits.

ALLOWED AMOUNT

The maximum amount Select Health will pay for a covered service.

BALANCE BILLING

The amount you must pay a provider that isn't covered by your health plan (the difference between the billed amount and the allowed amount).

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 \$15 for an office visit with your primary care doctor.

DEDUCTIBLE

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

HSA PREMIUM PASSTHROUGH

If you have an HDHP, your health insurance plan will contribute a portion of your monthly premium to your HSA or to a health reimbursement arrangement.

NETWORK

A network is the combination of doctors and facilities contracted with us to provide care for the best price.

OUT-OF-POCKET (OOP) MAXIMUM

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.

PREMIUM

This is the monthly bill you pay for insurance coverage (to be a member of Select Health). It does not apply toward the cost-sharing amounts on your plan such as deductibles or out-of-pocket maximums.

Select Health Med[®] Network

Standard Option Plan and High Deductible Health Plan (HDHP)

On both the Standard Option Plan* and HDHP, you have access to the Select Health Med network. A network is a set of doctors and facilities Select Health has contracted to provide medical care at the lowest possible cost. Your network is listed on the front of your ID card.

*Standard Option Plan members – refer to the UnitedHealthcare (UHC)
Options PPO Network page of this member guide for additional
plan-specific coverage information.

In-Network Doctors and Facilities



Scan the QR code or visit **selecthealth. org/find-care** to see which doctors and facilities participate on the Med network.

Remember, it is important to utilize in-network doctors and facilities to keep costs low.

Out-of-Area Dependent Coverage

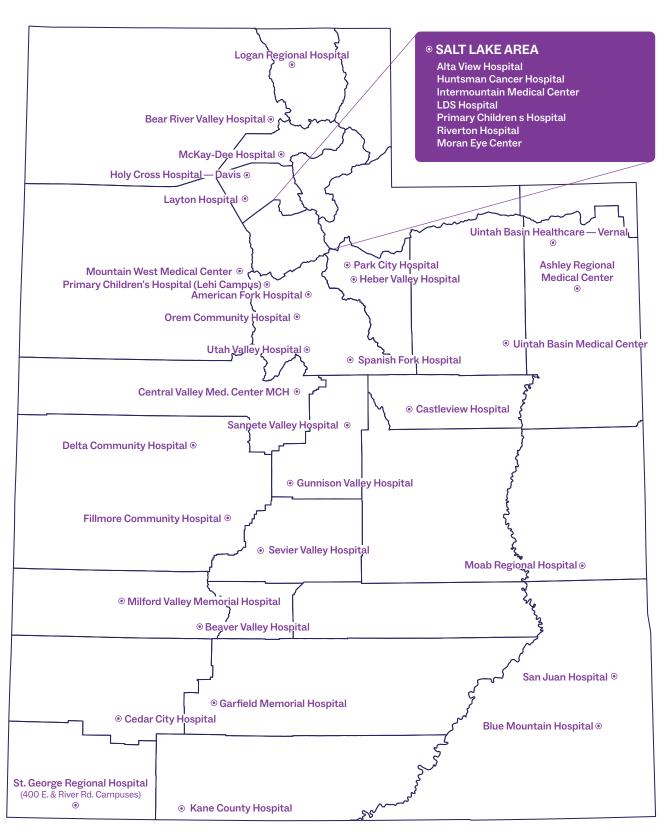
Dependent children who are enrolled on the HDHP Option and live outside of the FEHB service area (state of Utah) can receive in-network benefits for covered services, no matter where they live in the United States. Submit an FEHB Dependent Address Change Form at selecthealth.org/forms.



In-Network Hospitals



Scan the QR code or visit selecthealth.org/find-care to find additional in-network facilities on the Select Health Med® network.*



^{*} This map is an example only and does not guarantee network coverage. Facility availability is subject to change at any time.

UnitedHealthcare (UHC) Options PPO Network

Travel Within the United States (Outside of Colorado, Idaho, Nevada, and Utah)

URGENT CARE

Standard Option members can reduce their medical out-of-pocket expenses by receiving care from doctors and facilities on the UHC Options PPO network.

EMERGENCY CARE

In-network benefits apply for care at any emergency room location in any state.

Outside the United States

EMERGENCY CARE

In-network benefits apply for services at any emergency room location. You may need to pay for the treatment at the time of service. If you do pay out of pocket, keep your receipt and submit a Claim Reimbursement Form at selecthealth.org/forms.

Travel in Colorado, Idaho, Nevada, and Utah

URGENT CARE

Standard Option members have access to in-network doctors and facilities but must use the appropriate local network listed on the back of their ID card.

EMERGENCY CARE

In-network benefits apply for care at any emergency room location in any state.

Remember, out-of-network benefits have a higher member cost-share and members may be subject to balance billing or preauthorization for services.



Find a Doctor or Facility

- 1. Scan the QR code or visit selecthealth.org/find-care.
- 2. Click "Find a Facility"

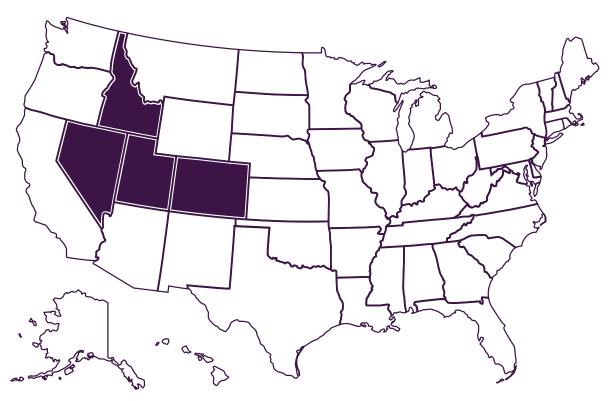
OR

"Find a Doctor"

3. Click "UnitedHealthcare Options **PPO Providers**"

OR

"UnitedHealthcare Behavioral Health Providers"



Choosing the Right Care

24/7 Nurse Line

Talk to a registered nurse for FREE about any condition to get advice on how and where to get care.

UTAH 844-501-6600 | COLORADO 800-624-3394 IDAHO 800-222-3344 | NEVADA 800-308-1907

Mental and Behavioral Health

Resources and guidance for mental and behavioral health. Visit intermountainhealthcare.org/ behavioralhealth.

ADULTS 833-442-2211 | TEENS 801-313-7711

NOVUMHEALTH

NovumHealth provides immediate access to local resources and doctors for mental health and substance abuse support. Visit selecthealth.org/find-care/ novumhealth or call 801-669-8176.

CREDIBLEMIND

You also have access to CredibleMind, a free platform with online tools such as podcasts, books, videos, apps, and articles to support your mental health. Topics include better sleep, stress relief, how to eat heathier, how to grow stronger relationships, and more. Visit intermountainhealth.crediblemind.com to get started.

Preventive Care

Preventive care can help detect and prevent medical problems before they become serious. Your plan covers many preventive procedures, services, and screenings at no out-of-pocket cost to you. Some limitations may apply. Visit selecthealth.org/wellness/preventive-care for a complete list of covered services.

Primary Care

A Primary Care Provider (PCP) is your go-to for routine care and coordination of specialty care when needed.

Urgent Care

Urgent care facilities are walk-in clinics that can be used for illnesses and injuries that aren't lifethreatening, but need attention sooner than you are able to schedule an appointment with your PCP.

Specialty Care

When care is outside your PCP scope, you can access a network of specialists, therapists, and surgeons with advanced training and expertise in certain areas of medicine.

Emergency Care

For emergencies, call 911 or go to the nearest emergency room and you will be covered whether you're in the U.S. or abroad.

Virtual Care

Many virtual services may cost you less than appointments at an in-person clinic.

No Appointment Needed

- Urgent Care
- Physical Therapy
- Message with a Provider (E-visit) If you do not want to be on camera, Intermountain offers an E-visit option where you can receive care for certain conditions via secure online chat.

Scheduled Services

- Behavioral Health
- Lactation Consults
- Pain Management
- Primary Care
- Nutrition Counseling

Visit selecthealth.org/find-care/virtual-care to view services available through Intermountain.

YOUR DOCTOR'S OFFICE

For virtual care outside of Connect Care, your innetwork doctor's office may use various apps or websites for virtual visits. No matter what video platform you and your doctor use, you have covered benefits for virtual care.

SYMPTOM CHECKER

This AI symptom assessment is available 24/7 and guides you to the most appropriate next steps for care.

ON-DEMAND PHARMACY AND LABORATORY SERVICES

You don't need an in-person appointment with a provider to have certain prescriptions and self administered lab tests delivered to your door through on-demand services.

Tellica Imaging and Ambulatory Surgical Centers (ASCs)

These centers are another way to access high-quality care without the high costs. Tellica offers transparent, flat-rate prices, same-day appointments, and results within 24 hours. ASCs also offer cost-effective same-day procedures performed by the same qualified physicians who perform surgery at Intermountain hospitals. Visit tellicaimaging.com and selecthealth. org/find-care to find a location near you.

Learn More

Scan the QR code or visit selecthealth.org/find-care.





Standard Option Benefits

Benefit ¹	In-Network	Out-of-Network ²	
Deductible	\$250 per person, per calendar year	\$500 per person, per calendar year	
	\$500 Self Plus One or Self & Family, per calendar year	\$1,000 Self Plus One or Self & Family, per calendar year	
Out-of-Pocket Maximum	\$7,500 per person, per calendar year	\$10,000 per person, per calendar year	
(protection against catastrophic costs)	\$15,000 per Self Plus One or Self & Family, per calendar year	\$20,000 per Self Plus One or Self & Family, per calendar year	
Hospital Services			
Inpatient	15% after deductible	30% after deductible	
Outpatient	15% after deductible	30% after deductible	
Surgical & Imaging Centers			
Ambulatory Surgical Center	\$200 after deductible	30% after deductible	
Free-Standing Imaging Center	\$0 (minor diagnostic tests)	30% after deductible	
	\$0 after deductible (major diagnostic tests)		
Lab, X-Ray and Other Diagnostic Tes	ts		
Minor	\$0	30% after deductible	
Major	15% after deductible	30% after deductible	
Doctor's Office Visits			
Preventive	\$0	Not covered	
Primary Care Physician	\$15	30% after deductible	
Specialist	\$35	30% after deductible	
Chiropractic (up to 20 visits per calendar year)	\$35	30% after deductible	
Intermountain KidsCare®	\$15	Not available	
Urgent Care & Intermountain InstaCare®	\$35	30% after deductible	
Virtual Consultations			
TeleHealth Urgent Care & Non-Urgent Care	\$0	30% after deductible	
TeleHealth Primary Care & Specialty Care	\$0	30% after deductible	
Maternity			
Physician	\$15 first visit, subsequent visits \$0	30% after deductible	
Hospital	\$500 per admission	30% after deductible	
Emergency Benefits			
In-Area/Out-of-Area	\$250 after deductible	See In-Network benefit	
Emergency Room			
Mental Health & Chemical Depender	·		
Mental Health & Substance Abuse Treatment	\$15 per office visit	30% per office visit, after deductible	
	15% for outpatient services, after deductible	30% for outpatient services, after deductible 30% for inpatient services, after deductible	
Employee Assistance Program (up	15% per inpatient admit, after deductible \$0	Not available	
to eight in-person or virtual visits per incident, per family)	φ0	NOT available	
Prescription Drugs			
Pharmacy Deductible	\$150 per person or	\$300 per family	
Retail Pharmacy	Tier 1: \$5		
(30-day supply)	Tier 2: \$100 after pharmacy deductible Tier 3: 50% up to \$500, after deductible		
	Tier 4: 30% after pharmacy deductible		
Mail Order (90-day supply)	Tier 1: \$5		
	Tier 2: \$200 after pharmacy deductible		
Indicate In Day 200 111	Tier 3: 50% after deductible 30% after pharmacy deductible		
Injectable Drugs & Specialty Medications (in provider's office)	30% after pharma	cy deductible	

High Deductible Health Plan (HDHP) Option Benefits

D (2)1	HDHP
Benefit ¹	
Deductible	\$2,000 per person, per calendar year \$4,000 Self Plus One or Self & Family, per calendar year
Out-of-Pocket Maximum (protection against catastrophic costs)	\$7,500 per person, per calendar year \$15,000 per Self Plus One or Self & Family, per calendar year
HSA Premium Passthrough	
Contribution Amount (per month that you are eligible)	\$100 Self Only, \$200 Self Plus One or Self & Family
Hospital Services	
Inpatient	3% after deductible, per admission
Professional Fees	\$0 after deductible
Outpatient	3% after deductible
Professional Fees	\$0 after deductible
Surgical and Imaging Centers	
Ambulatory Surgical Center	\$0 after deductible
Free-Standing Imaging Center	\$0 after deductible
Lab, X-Ray and Other Diagnostic Tests	
Minor	\$0 after deductible
Major	3% after deductible
Doctor's Office Visits	
Preventive	\$0
Primary Care Physician	\$10 after deductible
Specialist	\$30 after deductible
Chiropractic (up to 20 visits per calendar year)	\$30 after deductible
Intermountain KidsCare®	\$10 after deductible
Urgent Care & Intermountain InstaCare®	\$30 after deductible
Virtual Consultations	
Telehealth Urgent Care/Intermountain Connect Care	\$0 after deductible
Telehealth Non-Urgent Care	\$0 after deductible
Maternity	
Physician	\$10 first visit, subsequent visits \$0 after deductible
Hospital	\$250 per admission, after deductible
Emergency Benefits	
In-Area/Out-of-Area Emergency Room	\$200 after deductible
Mental Health & Chemical Dependency	
Mental Health & Substance Abuse Treatment	\$10 per office visit, after deductible
Abuse freatment	5% after deductible per day for outpatient services
For the second of the second o	5% after deductible per day, per admission
Employee Assistance Program (up to eight in-person or virtual visits per incident, per family)	\$0
Prescription Drugs	
Retail Pharmacy (30-day supply)	Tier 1: \$7 after deductible
	Tier 2: 30% up to \$350, after deductible
	Tier 3: 50% up to \$350, after deductible
	Tier 4: 30% after deductible
Mail Order (90-day supply)	Tier 1: \$7 after deductible
	Tier 2: 30% up to \$700, after deductible
Injectable Drugs & Specialty Medications (in provider's office)	Tier 3: 50% up to \$700, after deductible 30% after deductible
injectable brugs a specialty inedications (in provider 5 office)	50 70 arter deductible

¹These Benefits are neither offered nor guaranteed under contract with the FEHB Program, but are made available to all Enrollees and family members who become Select Health members.

²Member cost-share includes the difference between the billed and allowed amount.



Pharmacy

Nationwide Pharmacy Coverage

You have in-network access to more than 56,000 pharmacies including most major retail chains as well as local drugstores. In addition to wide retail access, your network contains low-cost home delivery options including:

INTERMOUNTAIN PHARMACY SERVICES

- Intermountain Home Delivery Pharmacy (855-779-3960) offers 90-day supplies of many medications delivered to your home.
- Intermountain Specialty Pharmacy (877-284-1114) provides delivery of specialty medications. Visit intermountainhealthcare.org/services/ pharmacy to learn more about these services.

MARK CUBAN COST PLUS DRUG COMPANY

- 1. To find a medication, visit costplusdrugs.com and search the Medications list.
- 2. Create an account and enter your basic health information.
- 3. Ask your provider to send prescriptions to Mark Cuban Cost Plus Drug Company, and include your account email on the prescription.

AMAZON PHARMACY

Use prescriptions benefits at Amazon Pharmacy with exclusive benefits for Prime members.

- Visit pharmacy.amazon.com.
- 2. Log in with your Amazon username and password.
- 3. Enter your insurance information to get started.

Drug Lookup and Cost Comparison

Find detailed information on savings options for prescription medications through your Select Health member account.

- Drugs are listed by tier: lower-tiered drugs usually cost less, and your plan typically pays a higher percentage of that cost.
- When you identify savings, talk to your prescribing provider to see if a lower-cost option is right for you.

Rx Savings Solutions

This service connects with your Select Health member account to help identify drug savings. Sign up through your member account and turn on notifications to include:

- Therapeutic alternatives: drugs which treat your condition the same way using a medication with different active ingredients.
- Generics and biosimilars: drugs use the same ingredients as your current medication without the cost of name brands.
- 90-day supplies: you may pay less when your doctor prescribes a 90-day fill for eligible medications.
- Discount cards and coupons: which show your lowest price, with or without insurance.

Pharmacy Compass

This tool allows you to compare medication prices, explore lower-cost alternatives, and make more informed decisions before heading to the pharmacy. To get started, log in to your Select Health member account.

Health Savings Account (HSA)

An HSA is a healthcare savings account that allows you to use pre-tax dollars to pay for qualified medical-related expenses. Unlike a Flexible Spending Account (FSA), whatever you do not spend rolls over from year-to-year.

If you are eligible for HSA contributions, Select Health will deposit \$100 of your monthly premium for Self Only, or \$200 for Self Plus One or Self and Family, per month in your HSA.

Remember, if your eligibility date is after the first day of the month you enrolled, your HSA will be established and funded the following month.

Enroll in the HSA-qualified Select Health HDHP Option Health Plan

Upon enrollment with Select Health, HealthEquity will automatically set up your HSA account and send you a HealthEquity VISA® Health Account Card1 to pay for qualified medical expenses, including dental, vision, and pharmacy.2

Learn More

Scan the QR code or visit healthequity.com/me.



Enrollment Codes

HDHP Option Self Only:WX1 HDHP Option Self Plus One: WX3 HDHP Option Self and Family: WX2

Add Money to Your HSA

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

To make tax free contributions³ 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, or VA health benefits (except for veterans with a service-connected disability, and/or Indian Health Services (IHS) benefits, in the last three months).
- You are not enrolled in Medicare Part A or Part B.
- 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 2026 contributions are: Self-\$4,400; Family-\$8,750. HSA-eligible members who are 55 or older can contribute an additional \$1,000, considered a catch-up allowance.

Wellness Programs and Rewards

Earn up to \$250 per qualified enrollee, or up to \$500 per family, per year for participating in qualifying wellness activities. This reward will go directly into your Health Savings Account (HSA), Health Reimbursement Account (HRA), or Health Incentive Account (HIA).

Eligibility

To be eligible for this program, you must meet the following conditions:

- Be enrolled on a Select Health FEHB plan option
- Be at least 18 years of age

Current Enrollees

Remember to check and see if you already have rewards in your account. If you have participated in a wellness activity since enrollment, you may already have funds available to use for qualified medical expenses. Open the Select Health app or visit selecthealth.org/fehb and log in to your member account. From the Dashboard, go to your Member Checklist and choose "Progress Tracking & Rewards."

Qualifying Wellness Activities

- Completion of a Health Check assessment \$50
- Completion of annual biometric screening \$50
- Gym membership \$50
- Enrollment in an approved weight loss program - \$50
- Enrollment in a tobacco cessation program such as Ouit for Life® - \$50
- Enrollment in an Intermountain Health education course - \$50
- Getting recommended cancer screenings \$50
- Enrollment in and completion of the Select Health Healthy Beginnings® program - \$50
- Completion of 150 minutes of physical activity in a weekly challenge in Sworkit® - \$50
- Other approved healthy lifestyle choices \$50



Learn More

Scan the QR code below or visit selecthealth.org/fehb/resources/ healthy-living to watch a short video that will walk you through the wellness program process.



Additional Benefits

Intermountain Employee Assistance Program (EAP)

The EAP is available at no additional cost to Select Health FEHB enrollees, their enrolled spouses, and enrolled dependent children ages 6-26. Receive shortterm counseling to help manage personal and workrelated stressors such as:

- Marital conflict
- Parenting issues
- Experience with depression and/or anxiety
- Increased stress levels at home or at work
- Grief and loss
- General wellness strategies
- Legal and financial issues

To schedule an appointment, call 800-832-7733. For non urgent questions, send an email to eap@imail.org.



Scan the QR code or visit intermountainhealthcare.org/eap to learn more.

Care Management Services

Care Managers are nurses and social workers who take a proactive, holistic approach to help you meet your health goals at no additional cost. If you qualify, they can help you:

- Create a wellness plan that supports your physical and mental well-being.
- Coordinate care for chronic illness with your doctor or specialist.
- Get preventive care.
- And more!



Scan the QR code or visit selecthealth. org/wellness/care-management to submit a referral form or call 800-442-5305.

Member Discounts

Free, easy-to-use programs to save money on health-related expenses.

SELECT HEALTH MEMBER DISCOUNTS

Save money on services like:

- LASIK
- Hearing aids
- Eyewear
- Massage therapy
- Gym memberships



Scan the QR code or visit selecthealth.org/discounts to learn more.

CHOOSEHEALTHY™ AND ACTIVE&FIT DIRECT™

We partner with ChooseHealthy and Active&Fit Direct™ to offer even more discount options. View these savings opportunities by logging in to your Select Health member account at selecthealth.org/fehb.

Healthy Beginnings Program

Healthy Beginnings is designed to encourage the healthiest pregnancies possible and is available at no additional cost. Benefits include:

- Support during and after pregnancy
- Online and in-person classes
- Rewards (depending on plan type) for prenatal and postnatal care



Scan the QR code, visit selecthealth.org/ wellness/wellness-resources or call 866-442-5052 to enroll.

Cessation Programs: Tobacco and Nicotine

Research-based solutions and coaching to create an individualized Quit Plan - all at no extra cost. Quit for Life® helps you:

- Beat cravings and connect with the community.
- Manager triggers and discover coping tools.



Scan the QR code, visit myquitforlife.com/selecthealth, or call 1-866-QUIT-4-LIFE (TTY 711) to learn more.

Dependents Aging Off

When your dependents turn 26 and age off your federal plan, there is no need for them to stop seeing a doctor they know and trust. With Select Health, your over-age dependents can enroll in a Select Health Individual plan, providing access to the same quality of care, with the doctor they know. Visit selecthealth.org/individualfamily to learn more.

Aging into Medicare Cost-Share Waiver

FEHB annuitants enrolled in the Original Medicare Parts A and B as their primary insurance, as well as the Select Health Standard Option, will have their costshare waived (e.g., deductible, coinsurance, and medical copays) for covered services.

Regular member cost-share will apply for services not covered by the Original Medicare (e.g., prescriptions and oral surgery). The Pharmacy benefit on the Standard Option will pay as primary and regular member cost-share will apply for members who are not enrolled in Medicare Part D.

2026 Rate Information

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.

		Biweekly	Monthly
Type of Enrollment	Enrollment Code	Your Share	Your Share
Standard Option Self Only	SF4	\$106.47	\$230.69
Standard Option Self Plus One	SF6	\$234.24	\$507.52
Standard Option Self and Family	SF5	\$286.71	\$621.21
HDHP Option Self Only	WX1	\$98.03	\$212.41
HDHP Option Self Plus One	WX3	\$215.68	\$467.30
HDHP Option Self and Family	WX2	\$245.09	\$531.03

Notes

Fair Treatment Notice

Select Health 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, and/or veteran status.

We provide free:

- Aid to those with disabilities to help them talk with us. This may be sign language interpreters or info in other formats (large print, audio, electronic).
- Help for those whose first language is not English, such as interpreters or member materials in other languages.

Need help? Call Select Health Member Services at 844-345-3342.

If you feel you've been treated unfairly, call Select Health 504/Civil Rights Coordinator at 1-844-208-9012 (TTY Users: 711) or the Compliance Hotline at 1-800-442-4845 (TTY Users: 711). You may also call the Office for Civil Rights at 1-800-368-1019 (TTY Users: 1-800-537-7697).

Language Access Services

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame a Select Health.

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 Select Health

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số Select Health.

통지: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. Select Health. 번호로 전화해 주십시오.

ध्यान दिनुहोस्: तपाईंले नेपाली बोल्ननुहुन्छ भने तपाईंको निम्ति भाषा सहायता सेवाहरू नःिशुल्क रूपमा उपलब्ध छ। Select Health मा फोन गर्ननुहोस्।

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa Select Health.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: Select Health.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги переводчика. Позвоните Select Health.

ATTENTION: si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.
Contactez Select Health.

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。Select Health.まで、お電話にてご連絡ください。

ПАЖЊА: Ако говорите Српски, бесплатне услуге пмоћи за језик, биће вам доступне.

Контактирајте Select Health.

تامدخ كل رفوتتسف ،ىبرع ثدحتت تنك اذا : ، يبنت Select Health. عب لصتا . أناجم قيوغللا قدعاسملا

ت ام دخ ، دی نکیم تب حصی نک دراو ار نابز هب رگا : هجوت اب .تس امش رای تخارد ناگی ار تروص بینابز کم ک .دیری گب س امت Select Health .دیری گب س

หมายเหตุ: หากคุณพูด ใส่ภาษา, การบริการภาษา โดยไม่มี ค่าใช้จ่าย มีพร้อมบริการให้กับคุณ ติดต่อ Select Health

Select Health: 1-844-345-3342

