

Select Health Medicare Member Guide

Your Healthy Year Starts Here

Select Health Medicare Essential (HMO) 012 | 2026



Welcome to your Select Health Medicare plan.

This guide will help you understand your benefits and provide tools and resources to stay healthy.

This guide is for members on Select Health Medicare Essential (HMO) 012 in Clark and Nye Counties in Nevada.

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Contact List

We're here to help. Call us toll-free at **855-442-9900 (TTY: 711)** or visit selecthealth.org/medicare.

Hours of operation:

October 1 to March 31 – Monday through Sunday, 8:00 a.m. to 8:00 p.m.

April 1 to September 30 – Weekdays, 8:00 a.m. to 8:00 p.m., closed weekends.

Outside of these hours of operation, please leave a message and your call will be returned within one business day.

To get the answers you need, reference this list of our partner organizations and resources.

Select Health Member Services
855-442-9900 (TTY: 711)
This is our main number—use it for any health insurance questions.

Member Advocates
800-515-2220
Call our Advocates if you need help finding a doctor or scheduling an appointment.

NationsBenefits
833-878-0232
selecthealth.nationsbenefits.com
NationsBenefits Advisors are available 8:00 a.m. to 8:00 p.m. to answer questions about your Select Health Medicare Flex Card and associated benefits.

Intermountain Home Delivery Pharmacy
855-779-3960 | intermountainrx.org
Get your prescriptions delivered right to your door with no additional cost to you.

HRI Dental
833-203-1176 | insuringsmiles.com
For questions about dental providers in your area or your dental coverage.

EyeMed Vision Care
844-872-8868 | eyemed.com
For questions about EyeMed vision providers in your area or your vision hardware coverage.

TruHearing
866-201-9695 | truhearing.com
For questions about hearing aid providers in your area or your hearing aid coverage.

Silver&Fit
877-427-4788 (TTY: 711) | silverandfit.com
For questions about your Silver&Fit benefit.

Papa
888-452-4553 | papa.com
Get connected with Papa for your companionship benefit.

LifeTrans
702-982-1000 | lifetrans.org
For questions about non-emergent medical transportation.



Select Health Account

To get started and create your personal Select Health account, visit selecthealth.org/member-account. You can also download the Select Health app to access your health plan information anywhere.

What can you do with your online Select Health account?

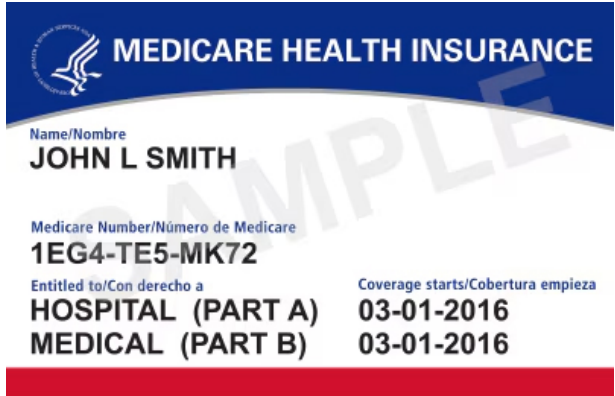
- Go paperless and opt in to email and text messages.
- View benefit details, estimate costs, and review claims.
- Find in-network doctors and facilities
- See ways to save on prescription costs.

ID Cards

As a Select Health Medicare member, you may receive several ID cards to access different benefits of your health plan. Knowing the differences between these cards can help you know when and how to use each one to receive the right care.

Original Medicare Card

Your Original Medicare card is issued to you by the Federal government. It is red, white, and blue in color and has a unique Medicare Number assigned to you. Your Medicare Number is different from your Social Security number. This helps protect your identity.



Your Medicare card shows that you have coverage for Medicare Part A (hospital insurance), Part B (medical insurance), or both. Once you're signed up for Medicare, your card will be mailed directly to you. If you don't receive it in the mail, contact Medicare directly at **1-800-MEDICARE (1-800-633-4227, TTY 1-877-486-2048)**.

IMPORTANT: Since you are on a Select Health Medicare plan, you do not need to present your Medicare card to get healthcare services. Leave your card at home in a safe place, and do not share your Medicare Number or other personal information with anyone by phone, email, or in person, unless you contacted them first or gave them permission to contact you.



Select Health Medicare ID Card

Your Select Health Medicare ID card is sent to you after confirmation of enrollment. It's specific to your plan and includes:

- **Your unique Select Health Member ID number.** Use this number when calling us about your plan, or when asked for it by a provider's office.
- **Your full plan name and type,** including some in-network benefits and pharmacy benefits. Use these for a quick reference of costs. For more detailed information, reference your Evidence of Coverage or contact Member Services.
- **Contact information.** If you have questions about your plan or how to find a doctor, the phone numbers are located on the front of your card.

Use your Select Health Medicare ID Card when accessing healthcare services such as doctor office visits, hospital stays, and other medical services covered under your plan.



MEDICARE NETWORK

Member Name
ID: 800000000

Member Services: 800-538-5038
Find a Doctor: 800-515-2220
selecthealth.org

P.O. Box 30196
Salt Lake City, UT 84130-0196

MedicareRx
Prescription Drug Coverage

Plan Year: 2026
(Plan Type) Contract # _Plan#

In-Network Medical Benefits	Pharmacy Benefits
Medical Deductible: \$xx	Rx Deductible: \$xx
Preventive Care: \$xx	Tier 1: \$xx
Primary Care: \$xx	Tier 2: \$xx
Specialty Care: \$xx	Tier 3: \$xx
Urgent Care Clinic: \$xx	Tier 4: \$xx
Emergency Room: \$xx	Tier 5: \$xx
	RX BIN: 012345
	RX PCN: 0123
	RX GRP ID: U10000xx

Dental Benefit

Your plan includes \$2,500 of preventive, basic, and major dental services at no additional cost.

BENEFIT	COST
Maximum plan payment benefit (includes preventive services)	\$2,500
Preventive dental services: two exams, two cleanings, two bitewings x-rays every year, two fluoride treatments, plus one panoramic x-ray every 36 months	\$0
Basic dental services	0-20% coinsurance
Major dental services (excluding implants)	0-20% coinsurance

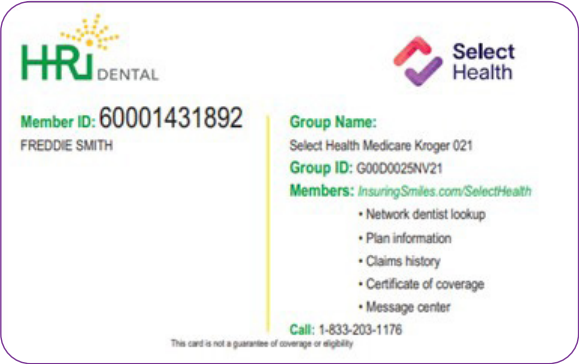
Don't forget to use in-network dentists to receive your care.

If you need help finding a dentist, call HRI Dental at **833-203-1176 (TTY: 711)**.

Dental ID Cards

You have dental coverage through HRI Dental.

HRI Dental will send you an ID card separately from your other cards. Use this Card when accessing dental care through your Select Health Medicare plan.



Hearing Benefit

You have a hearing aid benefit through TruHearing®.

This benefit makes addressing hearing loss more affordable with six benefit tiers. We also cover diagnostic hearing and balance evaluations, as long as you visit an in-network provider, and the evaluation is done in an outpatient setting.

NOTE: Copays are per hearing aid. Hearing aid copays do not go towards the Member Out-of-Pocket Maximum. Call TruHearing at **866-201-9670 (TTY: 711)** to get started.

BENEFIT	COST
Routine hearing exam (one per year)	\$0 copay
Tier 1 Advanced	\$399 copay
Tier 2 Premium	\$699 copay

Vision and Eyewear Benefits

Good vision is an important part of your overall health.

BENEFIT	COST
Routine eye exam	\$0 at in-network providers
Eyewear	Up to \$200 annual allowance

This benefit is administered by the EyeMed Vision Care network.

You can choose from the right mix of independent, national retail and regional providers, including:

- LensCrafters®
- Target OpticalSM
- Pearle VisionSM

Plus, EyeMed Vision Care offers online in-network options through:

- LensCrafters.com
- Ray-Ban.com
- Glasses.com
- ContactsDirect.com

Vision ID Cards

You have vision coverage through EyeMed Vision Care. They will send you an ID card separately from your other cards. Use this card when accessing vision care through your Select Health Medicare plan.

eyemed.com/mpsers
Member/Patient Services: (866) 248-2028
Access Network
MI PUBLIC SCHOOL EMPL RET SYST
SUSAN SAMPLE
Member ID: 123456789
Group #: 1013772
Effective: 09/01/2018

Michigan Public School
Employees' Retirement System

EyeMed Vision Care

If you see an out-of-network provider, you need to complete and submit an Out-of-Network Claim Form to receive reimbursement as outline by your plan. If you have questions about your vision hardware coverage, please call EyeMed Vision Care at **844-872-8868 (TTY: 711)**.



Flex Card

Select Health Medicare members receive all their additional benefits in one easy-to-use Flex Card. You can use this card to pay for eligible items and services. Plus, we will add funds to your card when you complete certain Healthy Living activities.

Your card has different purses for different benefits, including:

- Over-the-Counter allowance
- Healthy Living rewards

How to use your Flex Card

To use your Flex Card at an approved retail location, simply swipe it when paying for approved items or services. Select “credit” when prompted. Selecting “debit” will decline the transaction since there is no PIN. Your card uses funds from the appropriate purse to pay for the item or services.

Visit selecthealth.org/medicare/wellness/flexible-benefits-card to learn more.

Manage your Flex Card

Visit selecthealth.nationsbenefits.com or download the **Benefits Pro App** (on the Apple App Store or Google Play) to access your account.

Once logged in, you can easily:

- Activate or manage your Flex Card.
- Review your purse balances and expiration dates.
- Browse, order, and track eligible OTC products.
- Search for approved retail locations.
- Review transaction history.
- Request a reimbursement for out-of-pocket purchases for covered services or items.



Need help with your Flex Card?

Call NationsBenefits at **833-878-0232 (TTY: 711)**. NationsBenefits Member Experience Advisors are available 8:00 a.m. to 8:00 p.m. local time.

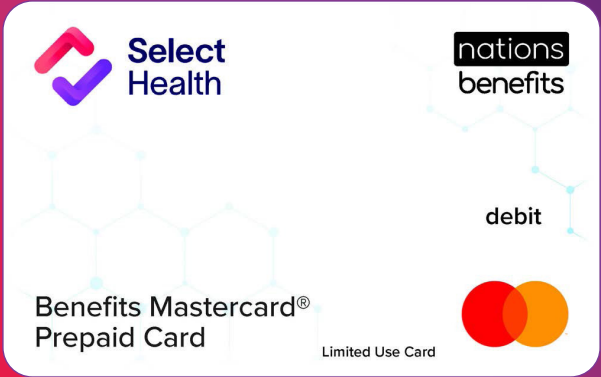


Flex Card

Your Benefits Mastercard® Prepaid Card (Flex Card) is mailed to you from NationsBenefits after enrollment on your Select Health Medicare plan. Once received, you need to activate it like a normal bank card and set up your online account at selecthealth.nationsbenefits.com.

Your Flex Card is used to access additional benefits, such as:

- Over the-Counter allowance
- Healthy Living rewards



IMPORTANT: Your Flex Card is only mailed to you once, even if you are on a Select Health Medicare plan for multiple years in a row. Your Flex Card will remain active until the expiration date printed on the card. A replacement card will be mailed in advance of your card’s expiration date.

Additional Benefits

Silver&Fit Membership

You have access to the Silver&Fit Healthy Aging and Exercise program, which helps empower you to get fit. With fitness options, digital tools, and healthy aging resources, it's designed to meet your unique needs.

Fitness Center Networks

Standard Network of participating fitness centers and select YMCAs.

Premium Network is available with associated monthly fees for each facility.

Home Kits

Members may choose 1 out of 5 Home Kit options per benefit year at silverandfit.com. Once you choose a kit, you will get an online promo code. Follow the instructions on how to redeem the code. Your kit will be mailed to you.

- Strength Kit with resistance band
- Toning kit with Pilates ball
- Yoga Kit with yoga mat
- Self-Care Kit with a foam roller
- Walking Kit with a pedometer

Workout Plans

60+ plans, including an exercise plan, home fitness kit integration, and on-demand videos.

Digital Workout Library

15,000+ workout videos on the Silver&Fit website. Includes 12,000 ASH-produced videos with emphasis on the specific needs of older adults and other 3rd party-produced videos.

Well-being Club

The feature of the Silver&Fit website that focuses on community with a personalized approach to fitness, well-being, and community connection. The Well-Being Club offers members the opportunity to access customized healthy habit resources and attend live-streamed classes and events.

Live 1:1 Coaching

Addition of Well-Being Support Coaching for GLP-1/AOM (Anti-Obesity Medication) to Well-Being Coaching.

Fitness Coach

Virtual personal training is available at a per-session cost to members.



Over-the-Counter

Your plan includes a **\$50 quarterly allowance** to purchase OTC items such as:

- Pain relievers
- Vitamins and minerals (e.g., fish oil, calcium, multivitamins)
- Bandages and antibiotic ointment
- Toothbrushes, toothpaste, and dental floss
- Cough drops
- Cotton swabs
- Antacids
- Lotion
- Eye drops
- First aid supplies
- ...and more

Use your Flex Card when checking out at an approved retail location. Make sure to select "credit" if prompted.



Order online by visiting selecthealth.nationsbenefits.com or by using the Benefits Pro App.

Order by phone by contacting NationsBenefits at **833-878-0232 (TTY: 711)**.

Order by mail by mailing a completed order form to:

NationsBenefits
1700 N. University Drive
Plantation, FL 33322

Mailed forms must be received by December 20th to ensure that the order total is applied to the current benefit period.

NOTE: Funds do not roll over. See the Flex Card section of this member guide for more details on your accessing your online account and managing your card.

Additional Benefits

Companionship Services

Your plan includes 30 hours of Papa companionship services per year. Their Pals are here to help with a variety of everyday tasks to make your life easier.

- Companionship, conversation, playing board games, or going for a walk.
- Transportation to and from doctor's visits, errands, grocery shopping, and medication pickup.
- Home tasks, including meal prep, light surface cleaning, laundry, gardening, or pet help.
- Help setting up a computer or social media to connect with friends or family.
- Plus, you can have a preferred Pal who can visit you more than once.

Schedule Your Visit

Call Papa at **888-452-4553 (TTY: 711)**: Weekdays 7:00 a.m. to 8:00 p.m. Saturday and Sunday 8:00 a.m. to 8:00 p.m. EST. You can also visit **papa.com** to learn more.

LifeTrans Transportation Services

Your plan includes 60 one way non-emergent rides every plan year, including transportation to and from:

- Medical appointments
- Medical clinics and facilities
- Pharmacies



For more information or to schedule an appointment, contact LifeTrans at **833-793-0885 (TTY: 711)** or visit **lifetrans.org**. They are available Monday through Friday from 8:00 a.m. to 5:00 p.m.

We recommend calling to schedule your transportation 48 hours, or two business days, in advance.

Care Management 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.

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 can also help you find resources to manage your health better such as finding transportations to appointments or connecting you with community resources.

If you want to learn more about Care Management, call **800-442-5305 (TTY: 711)**.

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.

Meals After Hospital Stay

Your plan covers up to 2 meals per day for up to 14 days after you are discharged from an inpatient hospital or skilled nursing facility stay, based on need, at no cost to you. Prior authorization and coordination of delivery is required through a Care Manager.

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. Select Health 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 Intermountain Health at **800-442-4845 (TTY: 711)**.

UCHealth patients can learn more by visiting **uchealth.org/services/palliative-care/advance-directives** or by logging into your My Health Connection account.





Healthy Living

You can earn rewards by completing a variety of wellness activities.

When you complete wellness activities, like getting your annual preventive visit/routine physical, money is added to your Healthy Living Rewards allowance on your Flex Card. You can spend this money on fitness equipment, wellness services, home essentials, dining out, and more.

It’s recommended that you complete your reward activities by **October 1, 2026**, so you can spend your reward dollars before the end of the year. Rewards earned through December 31 will be available on your Flex Card until **March 31** of the next year.

Log in to your **NationsBenefits** portal to review your Healthy Living Rewards balance.

Note: Alcohol, ammunition, firearms, gift cards, prescriptions, and tobacco are not eligible. If you disenroll from your Select Health Medicare plan, your Healthy Living Rewards purse will remain active for 90 days after plan termination.

2026 Healthy Living Wellness Activities

ANNUAL ACTIVITIES		REWARD
Annual routine physical	The annual routine physical is a service designed to help you and your Primary Care Provider (PCP) maintain your health, identify care you may need, and manage any chronic conditions you may have.	\$100
Flu shot	It’s recommended that you receive a flu shot every year.	\$20
RECOMMENDED BREAST CANCER SCREENINGS		
Only members in the recommended age bracket can receive rewards for completing these screenings.		
Mammogram	If you are a female between the ages of 52 and 74, it’s recommended that you receive a mammogram every one to two years.	\$40
RECOMMENDED COLORECTAL CANCER SCREENINGS		
Only members in the recommended age bracket can receive rewards for completing these screenings.		
HIGH REWARD		
This test is more successful at detecting early signs of colorectal cancer.		
Colonoscopy	If you are between the ages of 45 and 75, it’s recommended you receive a colonoscopy at least once every 10 years (every 2 years for high-risk individuals). Colonoscopy screenings can identify and remove precancerous colon polyps.	\$100
LOW REWARD		
These tests, while helpful, are not as effective as a colonoscopy in detecting early signs of colorectal cancer.		
Fecal Immunochemical Test (FIT), Fecal Occult Blood Test (FOBT), or CT Colonography	If you are between the ages of 45 and 75 and have not received a colonoscopy, it’s recommended you complete a FIT, FOBT, or CT Colonography once a year to test for early signs of cancer.	\$20
CONDITION-SPECIFIC ACTIVITIES		
Only eligible members with diabetes can receive rewards for completing these activities.		
Diabetic eye exam	Regular eye exams are an important screening for individuals diagnosed with diabetes.	\$20
Diabetic Kidney Testing	These tests help monitor how well your kidneys are functioning. If you have been diagnosed with diabetes, it’s recommended to receive these tests every year. You must receive the blood and urine tests to be eligible for the reward.	\$20

Note: If you complete a reward activity, but are not within the recommended age limit, you will not be eligible for the reward.

Rewards are applied to your Flex Card Healthy Rewards purse balance after Select Health receives confirmation reporting, which can take 4–6 weeks after activity completion.

Help With Prescription Drug Costs

If you're not filling your medications because of the cost, we encourage you to talk to your doctor, pharmacist, or Select Health. There may be cheaper alternatives and Extra Help available.

Intermountain Home Delivery Pharmacy

Home delivery is a convenient way to get the maintenance medications you take every day for a lower copay. It saves you time, money, and trips to the pharmacy by providing 90-day medication supplies with no-cost shipping. Visit intermountainrx.org to enroll online or for more information.

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 automatically alert you if you are paying too much for your medication and identify other ways to get the same treatment for less money.

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

My Advocate

Select Health 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**.

Cost Plus Drug Company

Cost Plus Drug Company offers hundreds of common drugs at the lowest possible prices and ships them right to your door. They negotiate directly with manufacturers and pass all savings directly to you.

See if your generic drugs are on their Medication List at costplusdrugs.com/medications.



Medicare Extra Help

Medicare may be able to help you pay for your medications. If your yearly income and resources are below certain financial limits, you may qualify for Extra Help.

To see if you qualify, call:

- **800-MEDICARE (800-633-2048)**, 24 hours a day, 7 days a week. TTY users, please call **877-486-2048**.
- You can also visit medicare.gov or “Programs for People with Limited Income and Resources” in your Medicare and You handbook.
- Your local Social Security office
- Your local state Medicaid office
- Select Health has additional resources to help you with prescription drug costs.
- For help, call us at **855-442-9900 option 2 (TTY: 711)**.

Your Rx Highlights

- ✓ \$0 copay on Tier 1 and 2 medications
- ✓ No pharmacy deductible
- ✓ 100-day supplies available, retail and mail-order
- ✓ Over-the-Counter allowance for everyday items



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, sexual orientation, gender identity or expression, and/or veteran status.

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

The Benefits Mastercard® Prepaid Card is issued by The Bancorp Bank N.A., Member FDIC, pursuant to license by Mastercard International Incorporated and card can be used for eligible expenses wherever Mastercard is accepted. Mastercard and the circles design is a trademark of Mastercard International Incorporated. Valid only in the U.S. No cash access.



P.O. Box 30196
Salt Lake City, UT 84130

IMPORTANT SELECT HEALTH
MEDICARE INFORMATION

Nonprofit
Organization
US Postage
PAID
Salt Lake City, UT
Permit No. 4547

Share Your Feedback

Your feedback is important to us! Medicare members are sometimes asked to share their experience about their health plan. If you receive a survey, phone call, or other outreach about your Select Health Medicare plan, please take a moment to share your insight so we can improve.

You can also contact us at **talktous@selecthealth.org**.