

Individual and Family ACA plans. Nevada 2025



Select
Health



Insurance is complicated. We make it simple.

At Select Health, we're all about simple. With easy-to-understand plan designs and benefits tailored to meet your unique needs, we do health insurance differently. For you.

Clark and Nye County coverage.

We offer two high-quality, comprehensive provider networks with the care options you need where you need them.

Best-in-class service.

Our local team of insurance experts is available to help you with everything from understanding your benefits to finding the right doctor.

Virtual visits.

Virtual Visits with an in-network primary care provider, mental health provider, and Intermountain Connect Care (urgent care only) providers are covered at no additional cost to you. Urgent care must be at Connect Care to be covered at \$0 (certain restrictions apply).

Copay plan option.

Enjoy a plan with no deductible and predictable fixed costs for most services and low-cost prescription drug coverage.

Health insurance definitions.

Before shopping for a plan, get familiar with these terms.

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. 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.

VIRTUAL VISITS—For primary care, mental health, or urgent medical issues, talk to a provider online using your smart phone, tablet, or computer.

PRIMARY CARE PROVIDER (PCP)—A PCP is the provider you see most regularly for general medical and preventive care. We consider a PCP to be any of the following: family and general practitioners, internal medicine doctors, Obstetricians and Gynecologists (OB/GYNs), pediatricians, Certified Nurse Midwives (CNMs), and geriatricians.

SECONDARY CARE PROVIDER (SCP)—These doctors are typically specialists such as cardiologists, neurologists, dermatologists, ophthalmologists, and more.

MEMBER PAYMENT SUMMARY (MPS)—This is a list of services covered by your plan. It shows how much you are responsible for paying for each type of service.

SUBSIDY—Depending on your income and other criteria, you may qualify for an Advance Premium Tax Credit or Cost-Share Reduction. To verify your eligibility, visit nevadahealthlink.com, contact your agent, or call us at **855-442-0220**.





Plans and benefits built for you.

Types of plans.

HEALTH SAVINGS ACCOUNT QUALIFIED (HSA-QUALIFIED)—These plans are designed to be used with a Health Savings Account (HSA). Using an HSA means you have more control over your healthcare dollars, with tax advantages.



OFF-EXCHANGE—These plans are only available for purchase directly from Select Health by visiting selecthealth.org/shop.

COPAY PLAN—This is a plan option with predictable costs and easy-to-understand benefit designs. If you like simple, this is the plan for you.



SILVER PLANS—These may be good options if you're eligible for a Cost-Share Reduction (CSR) through nevadahealthlink.com. These offer all the benefits of a CSR (based on eligibility) at the lowest possible cost.

Member benefits and resources.

All Select Health Individual & Family plans include the following at no additional cost.



TELEHEALTH AND VIRTUAL VISITS—

Expert care when and where you need it. Choose the option that is best for you and get the benefits of care from an Intermountain Health provider without leaving your home. Visit intermountainhealth.org/services/virtual-care. See page 13 for more information.

INTERMOUNTAIN CONNECT CARE APP—Accessing Connect Care is made simple with the Intermountain Health app. Download the app in the App Store or Google Play or access the web version of the Intermountain Health app.

SELECT HEALTH APP—The Select Health Mobile App is a great resource for on-demand information about your health plan. Available in the App Store or Google Play, the app includes ID cards, health plan usage, medical cost estimator, claims, premium payments, and plan details. Visit selecthealth.org/resources/digital-tools.

MEDICAL COST ESTIMATOR—Our most-requested member tool, the medical cost estimator provides personalized estimates based on your benefits for a doctor, hospital, or service. Log in to your online Select Health account to begin.

WELLNESS RESOURCES—Learn about nutrition, attend a class, or see what wellness benefits we offer—all to live your healthiest life possible. Visit selecthealth.org/wellness/wellness-resources.



HEALTH AND WELLNESS DISCOUNTS—

Staying healthy is more than a good health insurance plan. Our member discounts can help you save money. Visit discounts.selecthealth.org.



LOYALTY & WELLNESS PROGRAM—Stay healthy, get rewarded! We want to reward you for participating in our approved wellness activities. With the Select Health Loyalty Program, members can be rewarded up to a maximum of \$580/580 points per calendar year. Rewards received may be considered income and subject to tax. Visit selecthealth.org/loyalty.

MEMBER ADVOCATES—Our Member Advocates can help you find the right doctor, make an appointment, or learn more about a provider such as training and languages spoken. Call us **800-515-2220** from 7:00 a.m. to 8:00 p.m. on weekdays, 9:00 a.m. to 2:00 p.m. on Saturdays.

CARE MANAGEMENT—Care managers are specially trained registered nurses who can help members manage long-term chronic diseases and provide support for recovery from surgeries and short-term illnesses. Visit selecthealth.org/wellness/care-management/support-and-services.



PREVENTIVE CARE—Preventive care is covered 100% on most Select Health plans, meaning you'll pay \$0 out of pocket. See our lists of covered preventive care services at selecthealth.org/wellness/preventive-care.

PHARMACY RESOURCES—Pharmacy resources include drug lookup, Home Delivery and Specialty Pharmacy, Mark Cuban Cost Plus Drug Company, Amazon Pharmacy, and Rx Savings Solutions®. Visit selecthealth.org/pharmacy or log in to your online Select Health account to begin. See page 15 for more information.

Individual plans and benefits | 2025 Nevada plans.

Plan Name ►	Bronze 6900	Bronze 9200	Bronze 8300 HSA-Qualified ¹
Participating Networks	V, M	V, M	V, M
Deductible			
Single / Family	\$6,900 / \$13,800	\$9,200 / \$18,400	\$8,300 / \$16,600
Out-of-Pocket Max			
Single / Family	\$9,100 / \$18,200	\$9,200 / \$18,400	\$8,300 / \$16,600
Virtual Visits⁴	\$0	\$0	\$0 after Deductible
PCP / Behavioral Health Office Visits²	\$35	\$30	No Charge after Deductible
SCP Office Visits	\$70 after Deductible	\$95	No Charge after Deductible
Urgent Care	\$65	\$45	No Charge after Deductible
Inpatient Hospitalization (Facility)	40% after Deductible	No Charge after Deductible	No Charge after Deductible
Outpatient Hospital Services (Facility)	40% after Deductible	No Charge after Deductible	No Charge after Deductible
Minor Diagnostic³ (Lab and X-ray)	\$50	\$125	No Charge after Deductible
Emergency Room	\$600 after Deductible	No Charge after Deductible	No Charge after Deductible
Rx Deductible			
Single / Family	\$2,500 / \$5,000	Medical and Rx Combined	Medical and Rx Combined
Tier 1 Drugs	Covered 100%	Covered 100%	Covered 100%
Tier 2 Drugs	\$15	\$15	No Charge after Deductible
Tier 3 Drugs	\$40	\$40	No Charge after Deductible
Tier 4 Drugs	\$55 after Deductible	No Charge after Deductible	No Charge after Deductible
Tier 5 Drugs	\$70 after Deductible	No Charge after Deductible	No Charge after Deductible
Tier 6 Drugs	50% after Deductible	No Charge after Deductible	No Charge after Deductible

1. When two or more are enrolled, no single person in a family will pay more than the single deductible or single out of pocket maximum.
2. A primary care provider (PCP) referral may be required to see a secondary care provider (SCP).
3. Some minor diagnostic services may be covered as part of the office visit cost share.
4. Virtual visits with an in-network primary care provider, mental health provider, and Intermountain Connect Care providers are covered at no additional cost to you (except HSA-Qualified plans).



Ready to Shop?

Contact your agent, visit
selecthealth.org/shop, or call **855-442-0220**.

Value Added Benefits



Silver Copay Plan	Silver 6500	Gold 1000
V, M	V, M	V, M
\$0 / \$0	\$6,500 / \$13,000	\$1,000 / \$2,000
\$9,200 / \$18,400	\$8,000 / \$16,000	\$8,500 / \$17,000
\$0	\$0	\$0
\$25	\$20	\$15
\$50	\$40	\$40
\$50	\$35	\$35
\$2,000 per Day (up to 4-day copay max)	50% after Deductible	20% after Deductible
\$500	50% after Deductible	20% after Deductible
\$50	\$20	\$0
\$1,200	\$600 after Deductible	\$350 after Deductible
\$1,000 / \$3,000	Medical and Rx Combined	\$250 / \$750
Covered 100%	Covered 100%	Covered 100%
\$5	\$5	\$5
\$25	\$25	\$25
\$100 after Deductible	\$100 after Deductible	25% after Deductible
50% after Deductible	50% after Deductible	50% after Deductible
50% after Deductible	50% after Deductible	50% after Deductible

Preauthorization is required for certain services. Visit limits apply to certain services. This chart is not a complete list of benefits. If you have questions, visit selecthealth.org or call Member Services at **800-538-5038**.

V = Value Network

M = Med Network



Tips for choosing a plan.

Think through your potential usage and ask yourself a few questions:

- How often do you usually visit a provider?
- Do you have any existing prescription drugs?
- Do you anticipate any healthcare needs in the near future?



Verify your subsidy eligibility.

To verify your eligibility, visit nevadahealthlink.com, contact your agent, or call us at **855-442-0220**.



Check if your current providers are in-network.

Visit selecthealth.org/find-care-NV to browse in-network providers.

Consider your prescription needs.

Not all plans offer the same prescription benefit coverage. Review plans on page 6 and learn more about prescription benefits on page 14.

How to enroll.

Now that you've decided to enroll in a Select Health plan, here's how:

YOUR AGENT

For questions or help enrolling on a Select Health plan, contact your Select Health-appointed agent.



ONLINE

Shop with us at selecthealth.org/shop.

CALL US

Individual Sales **855-442-0220**

Your shopping checklist.

- ✓ Review network to ensure your providers are participating before you enroll.
- ✓ Review your total out-of-pocket costs, including premium and your anticipated portion of the cost.
- ✓ Check specific Rx coverage.
- ✓ Review if you are subsidy-eligible.

Our networks and facilities.

Choosing in-network providers and facilities is the best way to maximize your benefits and save money. Review our network options to determine which plan is right for you.

Select Health Value.

- Available to residents of Clark and Nye counties.
- PCP selection required on this network.
- Referrals required for Specialty Care.*
- Includes all Select Health Value providers and facilities in Utah and Nevada.

BEST FOR:

Those who have had the same primary care provider for an extended period of time.

*Certain exceptions apply.

Select Health Med.

- Available to residents of Clark and Nye counties.
- Does not require a PCP selection.
- Includes all Select Health Med providers and facilities in Utah and Nevada.

BEST FOR:

Those looking for a network that offers comprehensive coverage at a competitive price.



Scan to find a facility or provider in your area.
Visit selecthealth.org/find-care-NV



Your care options.

Not everyone wants to receive care the same way. You choose how to manage your care.

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 specialists when needed. To find an in-network doctor, visit selecthealth.org/find-care-NV.

Secondary care provider



We've partnered with specialty providers to ensure you have access to high-quality care when you need it. Visit selecthealth.org/find-care-NV to find an in-network specialist near you.

Local clinics



All plans include access to Intermountain Health community clinics and contracted partner clinics, so you never have to go far to get care.

Immediate care

Intermountain Connect Care



Use the Intermountain Connect Care app to schedule virtual visits for urgent care.

Urgent care



For urgent care within your service area, go to an in-network facility. For emergencies, call 911 or go to the nearest hospital.

Hospitals



We've partnered with local facilities and providers. Go to selecthealth.org/find-care-NV to find in-network facilities near you.



Find a Provider

selecthealth.org/find-care-NV



Telehealth and virtual visits:

We offer convenient virtual care options for \$0 out of pocket when you see in-network primary care provider, mental health provider and Intermountain Connect Care urgent care providers (certain exceptions apply).



Virtual care services.

Choose the care option that is best for you and get the benefits of care from an Intermountain Health provider without coming to the clinic. Services include lactation, nutrition, behavioral health, primary care, urgent care, and high-risk cancer prevention. Visit intermountainhealthcare.org/services/virtual-care to learn more.

Intermountain Connect Care.

Use the Intermountain Connect Care app to schedule virtual visits for urgent care.

The nurse line.

Call the nurse line to speak to a registered nurse who will listen to your concerns, answer any medical questions you may have, and help you decide what course of action to take. Call **800-308-1907**.

Your provider.

You can also schedule a virtual visit directly with your in-network provider. Contact your provider to learn about virtual visit options and to schedule a visit using their preferred platform.

Urgent and emergency out-of-area care: Outside Utah, Idaho, or Nevada.

In-network benefits apply when you receive services for urgent or emergency conditions, no matter where you are. If you need urgent or emergency care visit the nearest doctor or hospital, or you can use the UnitedHealthcare Options PPO network.

To find UnitedHealthcare Options PPO network providers for facilities, call Member Services at **800-538-5038** or visit selecthealth.org/find-care-NV and select “UnitedHealthcare Options PPO” from the network drop-down.

Present your ID card when you visit a UnitedHealthcare Options PPO network provider or facility. The logos on the back of the card give you network access.

Outside of the country.

If you 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 with a Claim Reimbursement Form, which can be found on selecthealth.org/forms.

Select Health prescription benefits.

Prescription drugs.

RxCore® is a closed six-tier formulary that provides appropriate pharmacy coverage of generic drugs and brand name drugs only when a generic or over-the-counter option is not available. Preferred generic drugs and a limited number of preferred brand-name drugs are covered at the lowest copay/coinsurance available for generics and brands respectively. Some drugs will be covered at higher tiers based on their cost regardless of whether they are brand or generic. There are six copay/coinsurance levels as described in the table below.

Tier 1	Preventive
Tier 2	Lowest cost (preferred generic and some brand-name drugs)
Tier 3	Low cost (non-preferred generic and some brand-name drugs)
Tier 4	Medium cost (preferred brand and some generic drugs)
Tier 5	High cost (non-preferred brand and some generic drugs)
Tier 6	Highest cost (specialty brand name and generic drugs)



Prescription drug list (PDL).

To find your medication, its tier, cost, and any special requirements, use the search function at selecthealth.org/pharmacy.

Special requirements.

Some drugs require step therapy or preauthorization before they will be covered by your plan.

STEP THERAPY—If a drug requires step therapy, your doctor must first prescribe an alternative drug. These are generally more cost-effective and do not compromise clinical quality. Step therapy may be waived for medical necessity.

PREAUTHORIZATION—This means that your doctor must contact us for approval before your drug will be covered.



Home delivery.

Getting your medications is easier than ever with free Intermountain Home Delivery.

Home delivery is also a great option for people with long-term Rx needs and those who order 90-day prescriptions. This program may also help you save on copays and other prescription fees (certain restrictions apply). Call **855-779-3960** for assistance or visit selecthealth.org/pharmacy/home-delivery-and-specialty-pharmacy.



Intermountain Specialty Pharmacy.

If you take specialty medications, use the Intermountain Specialty Pharmacy for quality service at a lower cost. Learn more by calling **877-284-1114**.

Your neighborhood pharmacy.

Your plan includes a large network of local and national pharmacies. To see a full list, visit selecthealth.org/pharmacy.

Rx Savings Solutions.

- Spend less money on your prescriptions.
- Receive alerts to notify you of lower cost options.
- Find less expensive alternatives for your prescriptions based on your health plan.



Visit selecthealth.org/rxsavings to enroll.

Mark Cuban Cost Plus Drugs.

Select Health members have access to more than 1,000 prescription products at potentially lower prices than traditional pharmacy locations.

Visit costplusdrugs.com to learn more.

Amazon Pharmacy

You have in-network benefits for covered medications at the Amazon Pharmacy. They deliver your medication right to your door, with status updates along the way. Visit pharmacy.amazon.com to get started.

Pharmacy tools.

Log in to selecthealth.org to access pharmacy tools like:

- Drug coverage information
- Rx claims (online Select Health account)
- Comparable drug prices
- A list of in-network pharmacies
- Information on drug interactions





General information.

Our plans.

Our plans are designed to provide coverage for hospital, medical, preventive care, and surgical expenses incurred as a result of a covered accident or illness. Coverage is provided through in-network providers for daily hospital room and board, miscellaneous hospital services, anesthesia services, in-hospital medical services, and outpatient care. Coverage is subject to any deductible, copay provisions, or other limitations that may be set forth in your contract.

Eligibility.

You and your dependents may apply for coverage if you are a resident of Nevada and not eligible for Medicare. Eligible dependents include the subscriber's

legal spouse, children younger than age 26, eligible disabled children older than age 26, and children who are under court-ordered legal guardianship until legal guardianship ends. See contract for more details.

Termination.

Based on your contract, health coverage may be terminated for the following reasons:

- Nonpayment of premiums
- Fraud or intentional misrepresentation of material fact
- Residing or working outside of our service area

Excluded services.

For a list of excluded services, see your member materials or visit selecthealth.org/resources/member-resources.



Excess charges.

There are charges from providers and facilities that exceed the Select Health allowed amount for covered services. Unless protections against balance billing apply under state or federal law, when you use an out-of-network provider or facility for urgent care, you may be responsible for any incurred excess charges. These charges do not apply to your out-of-pocket maximum.

Appeals/utilization management (UM).

For information about what requires preauthorization, our Care Management programs, or filing an appeal, see your member materials or visit our Member Resources page at selecthealth.org/resources.

Protecting your privacy.

To learn more about our privacy policies and security measures, or to view our complete Notice of Privacy Practices, visit selecthealth.org/policy.

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.

This information is available for free in other languages and alternate formats by contacting Select Health Medicare: **855-442-9900 (TTY: 711)** / Select Health: **800-538-5038**.

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

Notes:

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Notes:

[illegible]

Shop

selecthealth.org/shop

General questions

Member Services

800-538-5038

Help finding a doctor

Member Advocates

800-515-2220

selecthealth.org/find-care-NV

More plan information

Individual Sales

855-442-0220

selecthealth.org/individual



**Select
Health**