



Caring for You and Yours

Individual and Family Member Guide

UTAH 2026



Coverage for life's little moments.



WELCOME TO YOUR

Select Health Individual and Family ACA Plans Member Guide

This guide will give you the information you need to know to choose one of our plans.

If you have questions about your plans and benefits, call your agent, our Member Services team at **800-538-5038**, or visit **selecthealth.org/individual**.

Member Services hours:

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

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Meet Select Health

For over 40 years, Select Health has been committed to helping our members and communities live the healthiest lives possible. We're a Utah-based nonprofit company with offices in Utah, Idaho, Nevada, and Colorado. When you call us, you're talking to a real person, who is familiar with your community.

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Member Benefits and Resources

Virtual Care

Virtual visits with an in-network primary care provider, mental health provider, and Intermountain Health virtual urgent care providers are covered at no additional cost to you on most plans. Visit selecthealth.org/find-care/virtual-care to get started.

Select Health Mobile App

- Use your Select Health account online or with the mobile app to help you manage your plan details
- Download your ID cards
- See real time spending and medical and pharmacy claims in one location
- Search providers and facilities and assign primary care doctors
- Review tasks and take actions to manage your health
- Estimate costs for specific medical services or procedures
- Search for covered medications and pharmacies, compare drug prices, and enroll in cost saving programs
- Set preferences and get health and wellness reminders and notifications
- Chat with our Member Services team or send them a secure message with questions about your benefits

Get started at selecthealth.org/resources/online-tools.

Intermountain Health App

MyChart makes managing your healthcare journey simple with convenient tools like care reminders, visit summaries, and appointment scheduling. The app also includes new features like built-in telehealth visits, eCheck-in, and spot saving at select urgent care locations. Download the app in the App Store or Google Play.

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 Select Health account to get started.

Wellness Resources

Help manage your well-being with resources like:

- Preventive Care—typically at no cost
- Way to Wellness—one-year diabetes prevention program for adults who want to work with a registered dietitian to lose weight
- Quit for Life—tobacco cessation program
- Healthy Beginnings—prenatal support for a safe and healthy pregnancy
- Care Management—care coordination and support for chronic conditions

Visit selecthealth.org/wellness to learn more.

Member Discounts

Get discounts on things like LASIK surgery, gym memberships, hearing aids, cosmetic dermatology, eyewear, and more. Start browsing and saving at selecthealth.org/discounts.

Wellness Rewards*

Earn up to \$240 per person or \$580 per family with gym membership and physical activity rewards. Visit selecthealth.org/getfit for details.

*Rewards received may be considered income and subject to tax.

Member Advocates

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 **800-515-2220** weekdays from 7:00 a.m. to 8:00 p.m. and Saturdays from 9:00 a.m. to 2:00 p.m.

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.

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 Select Health account to get started. See page 14 for more information.

Medical Networks and Facilities

Picking the Right Plan for You

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.



Learn more at selecthealth.org/individual-family/utah-aca-plans.



Find a facility or provider in your area. Visit selecthealth.org/find-care-ut.

S

Select Health Signature

- Available to residents of Weber, Davis, Salt Lake, and Utah counties.
- Highly aligned network providing access to more than 450 high-quality facilities and over 8,900 providers along the Wasatch Front.

BEST FOR:

Those looking for a high-performing network that includes access to a limited number of providers and facilities along the Wasatch Front.



V

Select Health Value

- Available for residents of Box Elder, Weber, Davis, Morgan, Salt Lake, Summit, Wasatch, Utah, and Tooele counties.
- A proven popular network.
- Provides access to more than 600 facilities and over 13,500 providers.
- Includes access to Select Health Value providers and facilities in Utah, Nevada, and Colorado.

BEST FOR:

Those who want a lower cost midsized network.

M

Select Health Med

- Largest and most comprehensive network with access to care in Idaho and the Select Health Med network in Nevada.
- Provides access to more than 600 facilities and over 14,000 providers.

BEST FOR:

Those looking for comprehensive coverage throughout Utah, as well as access to some providers and facilities in Idaho and Nevada.



Individual Plans and Benefits

Plan Name ►	Expanded Bronze Standardized Plan ^{6,7}	Benchmark ¹ Expanded Bronze Select Copay Plan ⁷	Expanded Bronze 6900 Medical Deductible ⁷	Benchmark ¹ Silver Standardized Plan ⁶	Silver 3000 Medical Deductible	Benchmark ¹ Silver 5900 Medical Deductible
Participating Networks	M	V M	V	S V M	V	S V
Deductible (Single / Family)	\$7,500 / \$15,000	\$0	\$6,900 / \$13,800	\$6,000 / \$12,000	\$3,000 / \$6,000	\$5,900 / \$11,800
Maximum Out-of-Pocket (Single / Family)	\$10,000 / \$20,000	\$10,500 / \$21,000	\$10,000 / \$20,000	\$8,900 / \$17,800	\$9,500 / \$19,000	\$9,500 / \$19,000
Virtual Visits ³	\$0	\$0	\$0	\$0	\$0	\$0
PCP / Behavioral Health Office Visits	\$50	\$45	\$45	\$40	\$35	\$20
SCP Office Visits	\$100	\$90	\$95	\$80	\$60	\$40
Urgent Care	\$75	\$70	\$95	\$60	\$60	\$50
Inpatient Hospitalization (Facility)	50% after Deductible	50%	50% after Deductible	40% after Deductible	40% after Deductible	50% after Deductible
Outpatient Hospital Services (Facility)	50% after Deductible	\$1,500	50% after Deductible	40% after Deductible	40% after Deductible	50% after Deductible
Minor Diagnostic ⁴ (Lab and X-ray)	50% after Deductible	\$75 / \$100	Covered 100% after Deductible	40% after Deductible	\$20 / \$50	\$30 / \$50
Major Diagnostic	50% after Deductible	\$750	50% after Deductible	40% after Deductible	40% after Deductible	\$350
Emergency Room	50% after Deductible	\$1,500	\$600 after Deductible	40% after Deductible	\$600 after Deductible	\$600 after Deductible
Outpatient Rehab	\$50	\$25	\$25 after Deductible	\$40	\$25	\$25
Routine Dental Services (Adult / Pediatric)	Not Covered	Not Covered	\$95	Not Covered	\$60	Not Covered
Rx Deductible (Single / Family)	Combined with Medical	\$4,000 / \$8,000	\$1,500 / \$4,500	Combined with Medical	\$750 / \$2,250	\$750 / \$2,250
Tier 1 Drugs	\$25	\$15	\$15	\$20	\$5	\$5
Tier 2 Drugs	\$25	\$30	\$30	\$20	\$25	\$25
Tier 3 Drugs	\$50 after Deductible	\$125 after Rx Deductible	30% after Rx Deductible	\$40	25% after Rx Deductible	25% after Rx Deductible
Tier 4 Drugs	\$100 after Deductible	50% after Rx Deductible	50% after Rx Deductible	\$80 after Deductible	50% after Rx Deductible	50% after Rx Deductible
Tier 5 Drugs	\$500 after Deductible	50% after Rx Deductible	50% after Rx Deductible	\$350 after Deductible	50% after Rx Deductible	50% after Rx Deductible

1. Benchmark plans only cover Essential Health Benefits (EHBs) as defined by the state of Utah. Some non-EHBs are covered under these plans. For more information, call Individual Sales at **855-442-0220** or visit selecthealth.org/individual-family/resources/utah-ehb.

2. When two or more are enrolled, the family deductible applies and no single person in the family will pay more than the single embedded out-of-pocket maximum.

3. Virtual visits with an in-network primary care provider, mental health provider, and Intermountain Health virtual urgent care providers are covered at no additional cost to you on most plans.

4. Some minor diagnostic services will be covered as part of the office visit cost share.

5. These plans are designed by CMS. Benefits will be the same or similar to other standardized plans from other carriers.

6. Off marketplace only plans.

7. Members on an on-exchange Bronze plan or High Deductible Health Plan (HDHP) are eligible to open and contribute to a Health Savings Account (HSA). Excludes off-exchange only plans.

Preauthorization is required for certain services, and visit limits may apply. This chart is not a complete list of benefits.

If you have questions, visit selecthealth.org or call Member Services at **800-538-5038**.

Savings
and Perks



Ready to Shop?

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

Benchmark ¹ Silver 6000 Medical Deductible w/ Vision	Silver 5500 Medical Deductible ⁶	Benchmark ¹ Silver 3750 Deductible - HSA Qualified ^{2,6}	Benchmark ¹ Gold Standardized Plan ⁵	Benchmark ¹ Gold	Gold 1500 Medical Deductible	Benchmark ¹ Platinum Standardized Plan ⁵	Benchmark ¹ Platinum
M	S V M	S V M	S V M	S	V M	V M	V M
\$6,000 / \$12,000	\$5,500 / \$11,000	\$3,750 / \$7,500	\$2,000 / \$4,000	\$0	\$1,500 / \$3,000	\$0	\$0
\$9,500 / \$19,000	\$9,200 / \$18,400	\$7,500 / \$15,000	\$8,200 / \$16,400	\$8,950 / \$17,900	\$8,000 / \$16,000	\$5,200 / \$10,400	\$8,950 / \$17,900
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$20	\$20	Covered 100% after Deductible	\$30	\$0	\$0	\$10	\$0
\$40	\$40	Covered 100% after Deductible	\$60	\$50	\$45	\$20	\$0
\$50	\$60	Covered 100% after Deductible	\$45	\$50	\$45	\$15	\$25
50% after Deductible	50% after Deductible	20% after Deductible	25% after Deductible	30%	20% after Deductible	\$350 per stay	10%
50% after Deductible	50% after Deductible	20% after Deductible	25% after Deductible	30%	20% after Deductible	\$150	10%
\$30 / \$50	\$20 / \$50	Covered 100% after Deductible	25% after Deductible	Covered 100%	Covered 100%	\$30	Covered 100%
\$350	\$350	20% after Deductible	25% after Deductible	30%	20% after Deductible	\$100	\$150
\$600 after Deductible	\$600 after Deductible	20% after Deductible	25% after Deductible	30%	\$350 after Deductible	\$100	\$250
\$25	\$25	Covered 100% after Deductible	\$30	\$25	\$25	\$35	\$25
Not Covered	\$25	Not Covered	Not Covered	Not Covered	\$45	Not Covered	Not Covered
\$825 / \$2,475	\$1,500 / \$4,500	Combined with Medical	Combined with Medical	\$250 / \$750	\$250 / \$750	Combined with Medical	\$0
\$5	\$5	Covered 100% after Deductible	\$15	\$5	\$5	\$5	\$0
\$25	\$15	Covered 100% after Deductible	\$15	\$20	\$25	\$5	\$10
25% after Rx Deductible	45% after Rx Deductible	20% after Deductible	\$30	25% after Rx Deductible	25% after Rx Deductible	\$10	\$45
50% after Rx Deductible	50% after Rx Deductible	50% after Deductible	\$60	50% after Rx Deductible	50% after Rx Deductible	\$50	50%
50% after Rx Deductible	50% after Rx Deductible	50% after Deductible	\$250	50% after Rx Deductible	50% after Rx Deductible	\$150	50%

S Signature Network

V Value Network

M Med Network

Your contract is the final authority on your plan's benefits and coverage. If there are differences between the contract, the Summary of Benefits and Coverage (SBC), or other materials, the contract will apply.

Your Care Options

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 you need them.

SECONDARY CARE PROVIDER

We've partnered with specialty providers to ensure you have access to high-quality care when you need it.

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 INSTACARE®

These are a great option when you need urgent care outside of regular business hours.

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

Our integration with Intermountain Health means you get high-quality hospital care at the lowest possible cost. Need care at non-Intermountain Health hospitals? We've partnered with local facilities and providers, too.



Not everyone wants to receive care the same way. You choose how to manage your health at **selecthealth.org/find-care**.



Visit **selecthealth.org/find-care-ut** to find in-network providers and facilities near you.



Virtual Care



VIRTUAL CARE

Use Intermountain Health virtual care services for face-to-face video visits for urgent care, primary care, behavioral health, and specialties like physical therapy and lactation support. Visit selecthealth.org/find-care/virtual-care for more information.

NURSE LINE

Not sure where to start? Try our free, 24/7 Nurse Line to get advice on how and where to get care. Call **844-501-6600**.

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, NEVADA, OR COLORADO

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 use the UnitedHealthcare Options PPO network.

To find a UnitedHealthcare Options PPO network provider or facility, call Member Services at **800-538-5038** or visit selecthealth.org/find-care#uhc.

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 are traveling outside the U.S. 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 with a Claim Reimbursement Form, which can be found on selecthealth.org/forms.

Dental Plan Benefits and Network Options

Dental Networks

Dental plans must be paired with a Select Health medical plan. No matter where your dentist is located, they'll likely be covered in one of our three dental networks.

Select Health Fundamental

This is our smallest, most affordable network, providing access to over 700 providers along the Wasatch Front.

Select Health Prime

This midsize option provides affordable access to 850 participating dental providers along the Wasatch Front.

Select Health Classic

This is our largest, most popular network. This network is statewide with coverage in rural areas where Prime and Fundamental are unavailable. It includes over 1,600 participating providers throughout Utah.



Learn more at selecthealth.org/individual-family/dental-plans.



Find an in-network provider in your area. Visit selecthealth.org/find-care-ut.

Mix and Match

A dental plan may be added to your medical plan at anytime during the year. You can mix and match any dental plan with any of our three dental networks based on where you live and the amount of coverage you're looking for.



Ready to Shop?

To add dental coverage to your medical plan, contact your agent or call us at **855-442-0220**.

Select Health Dental provides comprehensive coverage to keep your teeth healthy. With hundreds of providers to choose from, top-ranked customer service, and online support, there's plenty to smile about.

Benefits ►	Dental 750 (100/80/50) ³		Dental 1000 (100/80/50) ³	
	In-network	Out-of-network ¹	In-network	Out-of-network ¹
Deductible (Individual / Family)	\$50 / \$150		\$50 / \$150	
Annual Max ² (Individual)	\$750		\$1,000	
Preventive and Diagnostic (No waiting period) oral exams, cleanings, X-rays	No charge	20%	No charge	20%
Basic (Six-month waiting period without prior coverage) fillings and oral surgery	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible
Major (12-month waiting period without prior coverage) crowns, bridges, dentures, endodontics, and periodontics	50% after Deductible	60% after Deductible	50% after Deductible	60% after Deductible

Benefits ►	Dental 1500 (100/70/50) ³		Dental 1500 (90/70/50) ³	
	In-network	Out-of-network ¹	In-network	Out-of-network ¹
Deductible (Individual / Family)	\$50 / \$150		\$50 / \$150	
Annual Max ² (Individual)	\$1,500		\$1,500	
Preventive and Diagnostic (No waiting period) oral exams, cleanings, X-rays	No charge	30%	10%	30%
Basic (Six-month waiting period without prior coverage) fillings and oral surgery	30% after Deductible	50% after Deductible	30% after Deductible	50% after Deductible
Major (12-month waiting period without prior coverage) crowns, bridges, dentures, endodontics, and periodontics	50% after Deductible	60% after Deductible	50% after Deductible	60% after Deductible

1. Out-of-network benefits are optional and must be elected at the time of enrollment.
2. Individual plan payment maximum.
3. Coinsurance amounts the plan pays for preventive, basic, and major dental services.

Select Health Pharmacy Benefits

Prescription Drugs

RxCore is a closed five-tier formulary (covered drug list), providing appropriate pharmacy coverage of generic and select brand name drugs. 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. See the table below.

TIER 1	Lowest cost (preferred generic and some brand-name drugs)
TIER 2	Low cost (non-preferred generic and some brand-name drugs)
TIER 3	Medium cost (preferred brand and some generic drugs)
TIER 4	High cost (non-preferred brand and some generic drugs)
TIER 5	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

Intermountain Home Delivery Pharmacy is a great option for people with long-term prescription 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/resources/home-delivery-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®

You can access more than 55,000 pharmacies, including most major national chains, with an average annual savings of \$455. Visit rxsavingsolutions.com to learn more.

Mark Cuban Cost Plus Drugs

You have access to more than 2,000 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



We've got your prescriptions covered with Home Delivery, specialty pharmacy, and more. Visit selecthealth.org/pharmacy to get started.



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 Utah 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/disclaimers/member-rights-responsibilities.

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/disclaimers/member-rights-responsibilities.

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/disclaimers/notice-of-privacy.

Contract and Summary of Benefits and Coverage (SBC)

Your contract is legally binding and the controlling document for your health plan's benefits, coverage, and limitations. Your SBC provides a brief overview of your benefits and coverage examples. In the event of any inconsistency or conflict between these documents or between the contract and other plan-related materials, the terms of the contract shall supersede and govern.



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

To see the full fair treatment notice, visit selecthealth.org/disclaimers/non-discrimination.



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Contact Us

Shop

selecthealth.org/shop

General Questions

MEMBER SERVICES

800-538-5038



Help Finding a Doctor

MEMBER ADVOCATES

800-515-2220

selecthealth.org/find-care-ut

More Plan Information

INDIVIDUAL SALES

855-442-0220

selecthealth.org/individual

Information Quick Guide

Find Care	 FIND CARE selecthealth.org/find-care	 VIRTUAL CARE selecthealth.org/find-care/virtual-care
	 PROVIDER SEARCH selecthealth.org/find-care-ut	 OUT-OF-AREA CARE selecthealth.org/find-care#uhc
Member Resources	 CARE MANAGEMENT selecthealth.org/wellness/care-management	 MEMBER ADVOCATES AND SUPPORT selecthealth.org/member-support
	 MEMBER DISCOUNTS selecthealth.org/discounts	 PREVENTIVE CARE selecthealth.org/wellness/preventive-care
	 PHARMACY RESOURCES selecthealth.org/pharmacy	 WELLNESS REWARDS selecthealth.org/getfit
	 WELLNESS RESOURCES selecthealth.org/wellness	
Digital Tools	 INTERMOUNTAIN HEALTH APP intermountainhealthcare.org/patient-portal	 MEMBER ACCOUNT selecthealth.org/resources/online-tools
	 MEDICAL COST ESTIMATOR fssconsumer.intermountainhealthcare.org/shmyhealthweb/dashboard	 SELECT HEALTH APP selecthealth.org/resources/online-tools

