



Select
Health



Select Health
FEHB Member Guide
2025

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Welcome.

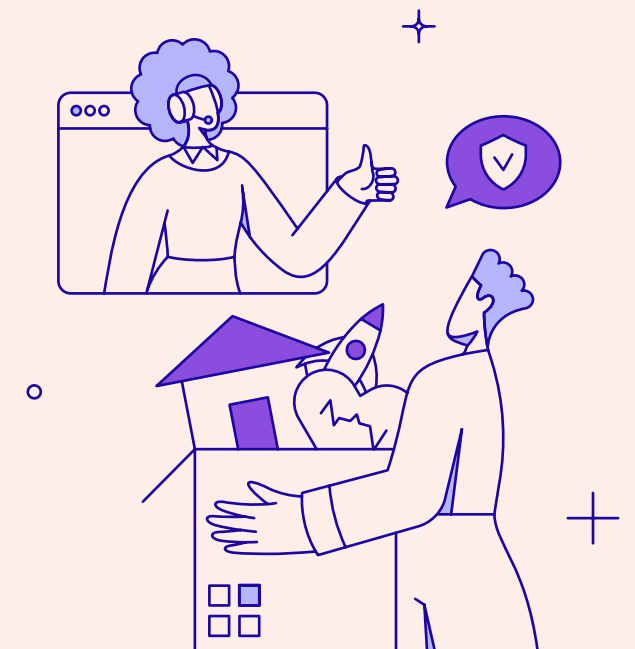
Healthcare is complicated, so we make it simple.

This guide will help you access your benefits, find quality care, and keep costs as low as possible.

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.
- Single sign-on (SSO) access so you can log in to your healthcare applications seamlessly.



Digital tools.

Utilize SSO access and log in to your healthcare applications with one username and password. We provide SSO between your Select Health member account, the Intermountain Health patient portal, and more.



Select Health member account and mobile app

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



1. Scan the QR code or visit selecthealth.org/resources/digital-tools to register for an account.
2. Download the app on the App Store™ or Google Play™.

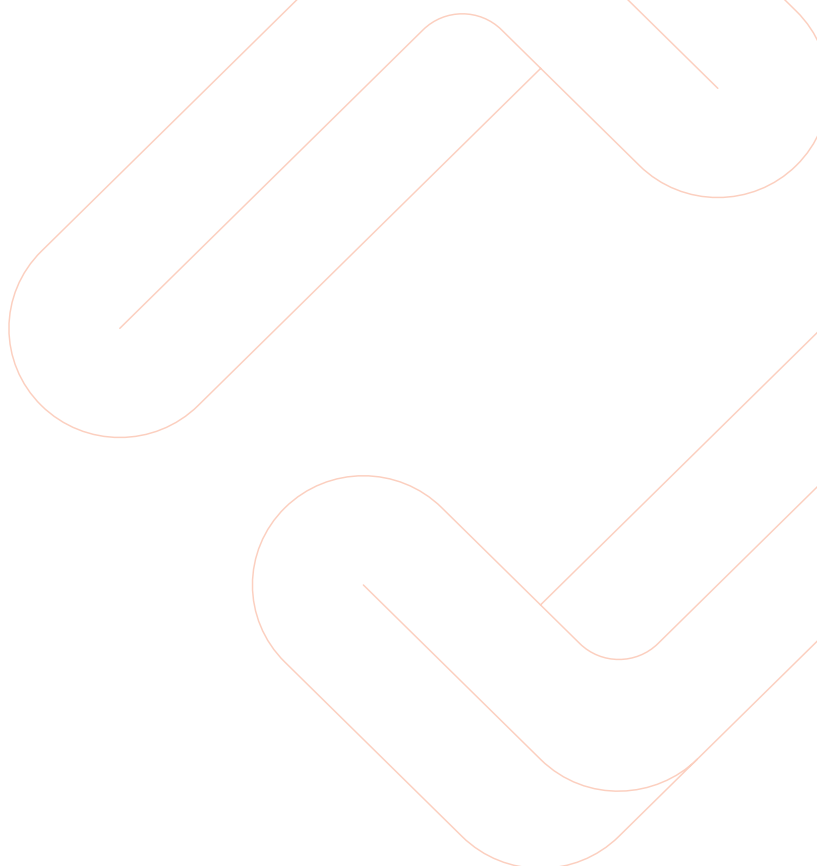


Cost estimator tool

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/digital-tools to log into your member account.
2. Click “Go to cost estimator” from the Dashboard tab.



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



Intermountain Health patient portal and mobile app

Convenient access to all your health information and care options.



- Scan the QR code or visit intermountainhealthcare.org/patient-portal to log in and download the app.



Intermountain Health Connect Care® virtual clinic and mobile app

Connect Care virtual visits may cost less money than appointments at an in-person clinic.



- Scan the QR code or visit intermountainhealthcare.org/connectcare to log in and download the app.



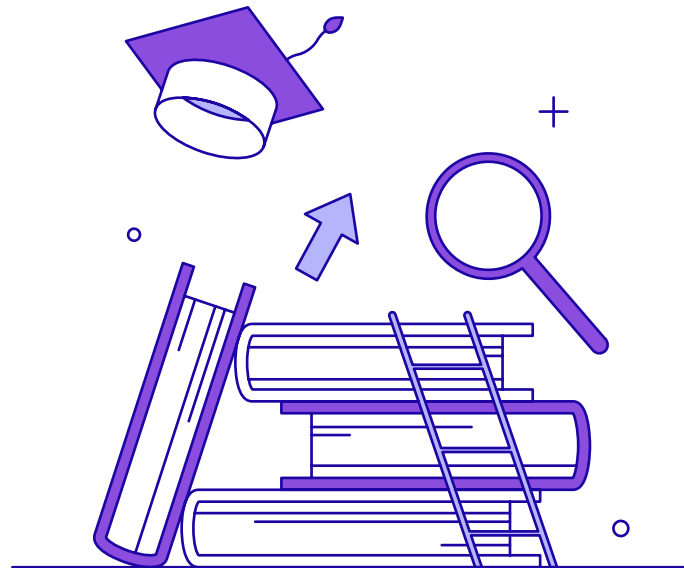
Learn more

Scan the QR code or visit selecthealth.org/resources/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.

Coverage while traveling

If you get sick or injured while outside of your service area or even out of the country, you're covered for urgent and emergency care.

Urgent care

For in-network benefits, check the back of your ID card to see which network you should use in each state.

Emergency care

In-network benefits apply for care at any emergency room location in any state. If you are traveling outside the United States, 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 with a Claim Reimbursement Form at selecthealth.org/forms for reimbursement.

Out-of-area dependent coverage

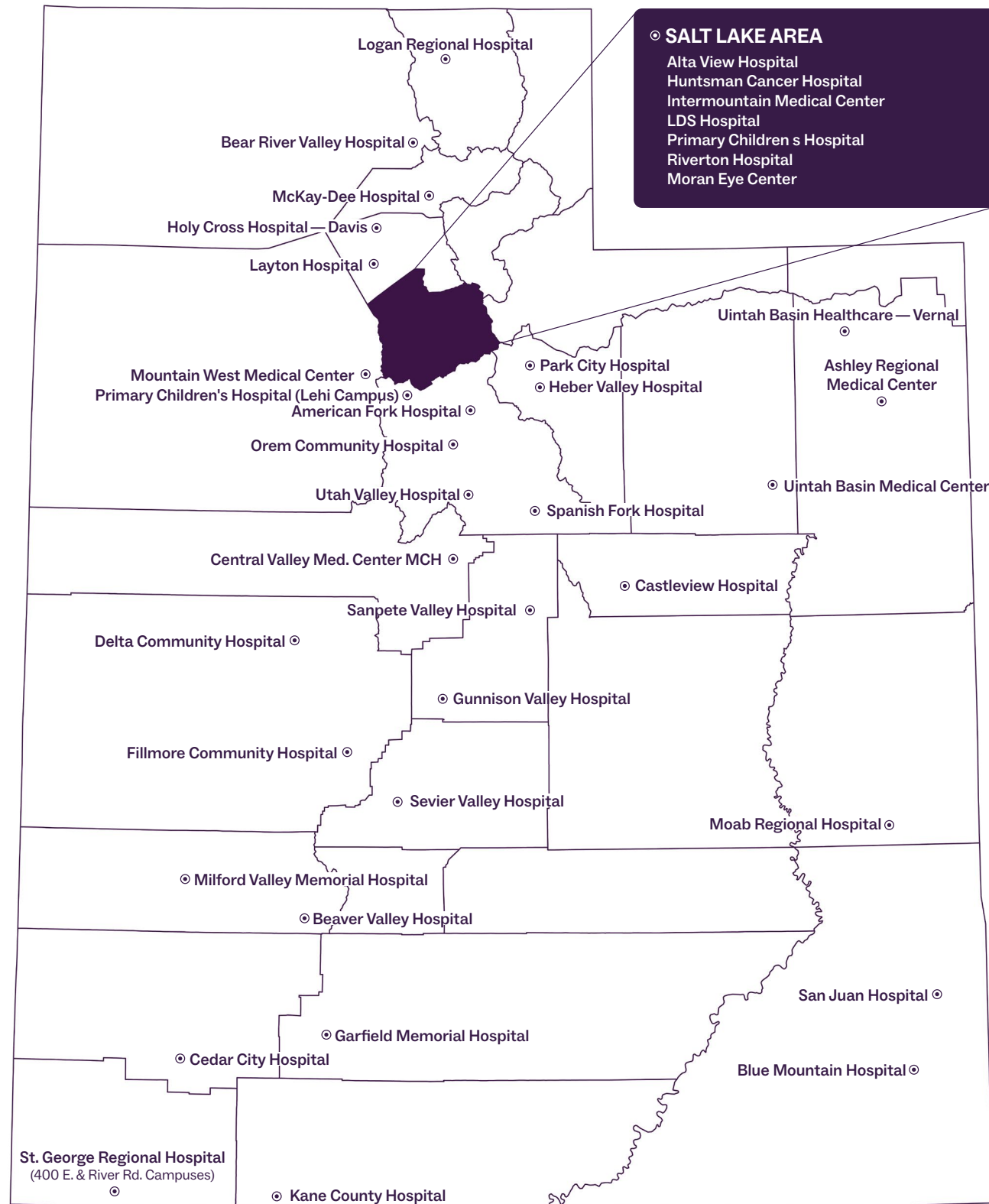
Dependent children who are enrolled on the HDHP Option and live outside of the Med service area can receive in-network benefits for covered services, no matter where they live in the United States. Submit an FEHB Dependent Address Change Form at selecthealth.org/forms.



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.



UnitedHealthcare (UHC) Options PPO Network.

Traveling in the U.S. outside of Utah, Idaho, or Nevada

Standard Option members can reduce their medical out-of-pocket expenses by receiving care from doctors and facilities on the UHC Options PPO network while traveling in the U.S. outside of Utah, Idaho, or Nevada.

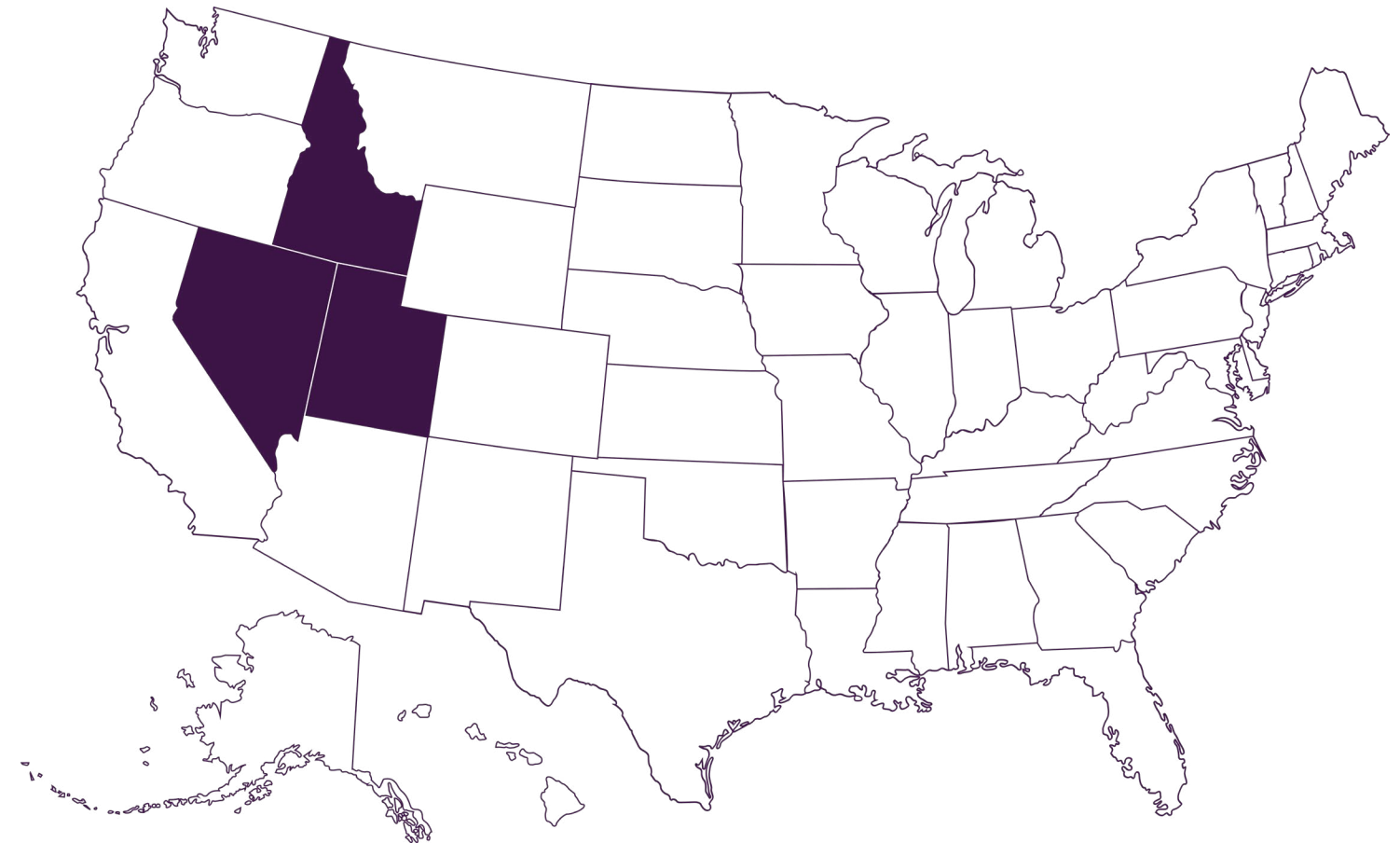


Scan the QR code or visit selecthealth.org/find-care to find participating doctors and facilities on the UHC Options PPO network.

Traveling in Utah, Idaho, or Nevada

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

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





Choosing the right care.

Save money and time by choosing the right place to receive care.

24/7 nurse line 844-501-6600

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

Mental and behavioral health navigation line 833-442-2211

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

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 life-threatening, 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. Visit intermountainhealthcare.org/services/virtual-care to view services available through Intermountain.

Connect Care® video visits

- Urgent care
- Primary care
- Mental health
- Nutritional support
- Lactation support
- Physical therapy

E-Visits

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.

Other virtual care options

For virtual care outside of Connect Care, your in-network 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.

Tellica Imaging and Ambulatory Surgical Centers (ASCs)

These centers are another way to access high-quality care without the high costs. They offer services that cost up to 2.5 times less than the national average and offer up to 58% savings on outpatient surgery compared to traditional hospital settings. Visit tellicaimaging.com and intermountainhealthcare.org/surgerycenters for more information.

Find more care options

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



Standard Option benefits.

BENEFIT ¹	In-Network	Out-of-Network ²
Deductible	\$250 per person, per calendar year \$500 Self Plus One or Self & Family, per calendar year	\$500 per person, per calendar year \$1,000 Self Plus One or Self & Family, per calendar year
Out-of-Pocket Maximum (protection against catastrophic costs)	\$6,500 per person, per calendar year \$13,000 per Self Plus One or Self & Family, per calendar year	\$8,500 per person, per calendar year \$17,000 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) \$0 after deductible (major diagnostic tests)	30% after deductible
Lab, X-Ray and Other Diagnostic Tests		
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	\$200 per admission	30% after deductible
Emergency Benefits		
In-Area/Out-of-Area Emergency Room	\$200 after deductible	See In-Network benefit
Mental Health & Chemical Dependency		
Mental Health & Substance Abuse Treatment	\$15 per office visit 15% for outpatient services, after deductible 15% per inpatient admit, after deductible	30% per office visit, after deductible 30% for outpatient services, after deductible 30% for inpatient services, after deductible
Employee Assistance Program (up to eight in-person or virtual visits per incident, per family)	\$0	Not available
Prescription Drugs		
Retail Pharmacy (30-day supply)	Tier 1: \$5 Tier 2: \$40 after deductible Tier 3: 50% up to \$250, after deductible Tier 4: 30% after deductible	
Mail Order (90-day supply)	Tier 1: \$5 Tier 2: \$80 after deductible Tier 3: 50% after deductible	
Injectable Drugs & Specialty Medications (in provider's office)	30% after deductible	30% after deductible

High Deductible Health Plan (HDHP) Option benefits.

BENEFIT ¹	HDHP
Deductible	\$1,650 per person, per calendar year \$3,300 Self Plus One or Self & Family, per calendar year
Out-of-Pocket Maximum (protection against catastrophic costs)	\$6,000 per person, per calendar year \$12,000 per Self Plus One or Self & Family, per calendar year
HSA Premium Passthrough	
Contribution Amount (per month that you are eligible)	\$75 Self Only, \$150 Self Plus One or Self & Family
Hospital Services	
Inpatient	\$150 per day up to \$750 per admission, after deductible
Professional Fees	\$0 after deductible
Outpatient	\$150 per day 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	\$150, 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	\$100 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 \$150 per day for outpatient services, after deductible \$150 per day up to \$750 per admission, after deductible
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: \$25 after deductible Tier 3: \$50 after deductible Tier 4: 30% after deductible
Mail Order (90-day supply)	Tier 1: \$7 after deductible Tier 2: \$50 after deductible Tier 3: \$150 after deductible
Injectable Drugs & Specialty Medications (in provider's office)	30% after deductible

1

These Benefits are neither offered nor guaranteed under contract with the FEHB Program, but are made available to all Enrollees and family members who become SelectHealth members. Member cost-share includes the difference between the billed and allowed amount.

2

Pharmacy.

Save money through in-network pharmacies, drug discounts, and coupons.

Log in to your Select Health member account to see the tools needed to maximize savings on drug costs.



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.
- **Generic clones and substitutions:** drugs which 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 every time, with or without insurance.

RxWallet

RxWallet helps you compare drug prices and identify less expensive options. It connects to your smartphone digital wallet so you can forward your prescription to the lowest cost in-network pharmacy.

Download the app or access RxWallet through your Select Health member account.

Learn more



Scan the QR code or visit selecthealth.org/pharmacy to view the tools needed to maximize savings on drug costs.

Network

In-network access to more than 56,000 pharmacies nationwide, including:

Intermountain Pharmacy Services

Use the Intermountain Home Delivery Pharmacy to get 90-day supplies of many medications delivered to your home. Call **855-779-3960** to register.

For specialty medications, the Intermountain Specialty Pharmacy can also deliver. Have your doctor prescribe to the Intermountain Specialty Pharmacy or call **877-284-1114**.

Mark Cuban Cost Plus Drugs

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 Drugs Co., and include your account email on the prescription.

Amazon Pharmacy

Use prescription benefits at Amazon Pharmacy to save up to 80% with exclusive benefits for Prime members.

1. 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 these substitutions are right for you.

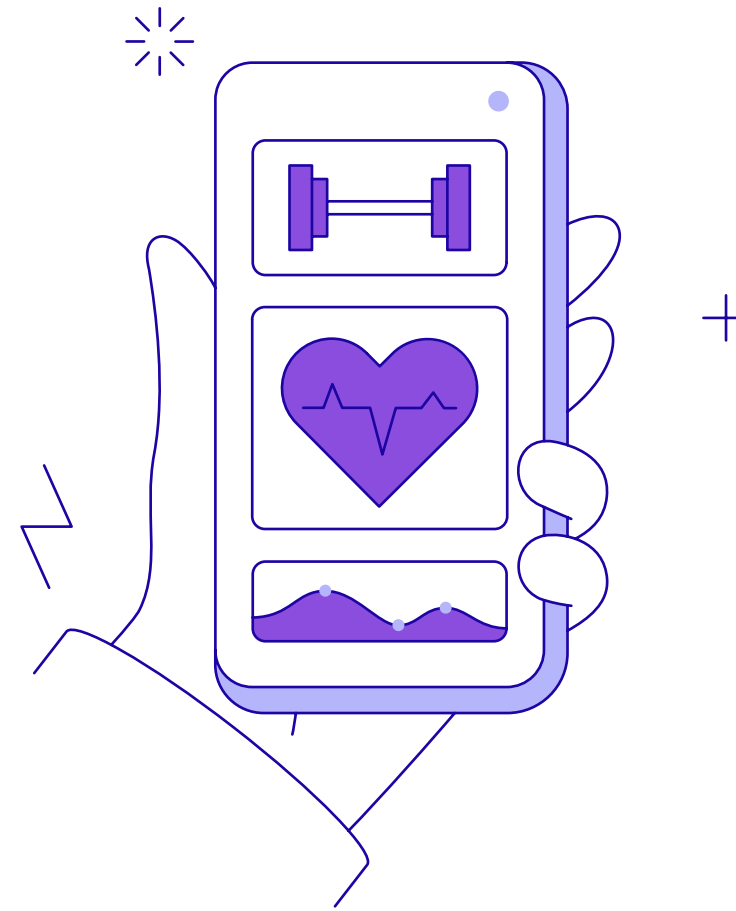


Health Savings Account (HSA).

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 \$75 of your monthly premium for Self Only, or \$150 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.



Get paid to stay healthy

- Join a gym - \$50
- Enroll in an approved weight loss program (Intermountain Way to Wellness, Weight Watchers®, Jenny Craig, and programs administered by an in-network hospital or clinic) - \$50
- Enroll in an Intermountain Health education course (obesity, diabetes, asthma, nutritional counseling, etc.) - \$50
- Choose from a wide range of additional wellness activities that fit your personal lifestyle (as stated on selecthealth.org/plans/fehb/healthy-living) - \$50

Learn more



Scan the QR code below or visit selecthealth.org/plans/fehb/healthy-living.

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 to learn more.



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.

Wellness programs and rewards.

Earn up to **\$250 per eligible enrollee, or up to \$500 per family, per year** for participating in qualifying wellness activities.

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 SelectHealth app or visit selecthealth.org and log in to your member account. From the Dashboard, go to your Member Checklist and choose **Progress Tracking & Rewards**.

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 2025 contributions are: Self-\$4,300; Family-\$8,550. HSA-eligible members who are 55 or older can contribute an additional \$1,000, considered a catch-up allowance.

Additional benefits.

Intermountain employee assistance program (EAP)

The EAP is available at no additional cost to all Select Health FEHB enrollees, spouses, and their dependent children ages 6-26. Receive short-term counseling to help manage personal and work-related 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 nonurgent 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 care plan that supports your physical and mental well-being.
- Coordinate care for chronic illness.
- Get preventive care.



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

Preventive care

Preventive services are covered 100% when utilizing in-network providers. Preventive care can help identify potential health problems and reduce your risk for serious illness. Common services include:

- Immunizations
- Diabetes screening
- Pap test
- Prostate cancer screening
- Contraceptives



Scan the QR code or visit selecthealth.org/wellness/preventive-care to view a full list of covered services.

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

ChooseHealthy™

We partner with ChooseHealthy to offer even more discount options. View these savings opportunities through your Select Health member account.



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

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.
- Cash 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 to work toward quitting smoking for good - all at no extra cost. Quit for Life® helps you:

- Beat cravings and connect with the community.
- Eliminate cigarette breaks, and focus on mental and emotional triggers without the debilitating physical withdrawal symptoms.



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.

Aging into Medicare Cost-share waiver.

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

Regular member cost-share will apply for services not covered by 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.



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, sexual orientation, gender identity or expression, 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 **800-538-5038**.

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 दनिहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको नमिर्ता भाषा सहायता सेवाहरू नःशुल्क रूपमा उपलब्ध छ। Select Health मा फोन गर्नुहोस्।

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。

ማሳሰቢያ: ከማርኛ የሚናገሩ ስዞሮች፣ የቋንቋ ድጋፍ አገልግሎቶችን ያስከፍሩ ለአርስዎ ይገኛሉ። Select Health ን ያናግሩ።

ПАЖЊА: Ако говорите Српски, бесплатне услуге помоћи за језик, биће вам доступне. Контактирајте Select Health.

تامدخ لك رفوتتس ف، یبرع ثدحتت تنك اذا: هیبنت Select Health. ب لصتا. اناجم قیوغلل ادعاسملا

تامدخ، دی نکی م تببحص ینی ک دراو ار نابز هب رگا: هجوت اب. تسامش رای تخ ا رد ناگی ار تروصب، ینی نابز کم ک دی ری گب سامت Select Health

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

Select Health: 1-800-538-5038



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