

2025



Select Health Medicare Member Guide

Select Health Medicare Essential
(HMO) 001



Select
Health

Welcome to Select Health Medicare.

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

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We are here to help.

You've got questions, we've got answers. 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.



Contact list.

To get the answers you need, here is a 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 question.

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 Wellness Your Way + Over-the-Counter (OTC) benefits.

Intermountain Home Delivery Pharmacy

855-779-3960

intermountainrx.org

Get your prescriptions delivered right to your front door, with no additional cost to you.

EyeMed

844-872-8868

If you have questions about EyeMed vision providers in your area or any other questions about your vision hardware coverage, please call EyeMed Vision Care Customer Service.

Intermountain Health Audiology

Call Select Health Member Advocates **800-515-2220**.

Your dental benefits.

Your plan includes **\$1,500** of preventive, basic, and major dental services at no additional cost.



BENEFIT	COST
Maximum plan payment benefit (includes preventive services)	\$1,500
Preventive dental services: Two exams, two cleanings, two bitewing x-rays every year, plus one panoramic x-ray every 36 months	\$0 copay
Basic dental services	\$0 copay
Major dental services (excluding implants)	\$0 copay



Don't forget to use in-network dentists to receive your care. If you need help finding a dentist, call our Member Advocates team at **800-515-2220 (TTY: 711)** or scan the QR code. Get started! Scan here to find a dentist.

Your vision care and eyewear hardware benefits.

Good vision is an important part of overall health. As a Select Health Medicare member, you get a **\$200 allowance** to use on frames or contact lenses every year.

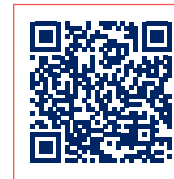
SELECT HEALTH MEDICARE VISION PLAN COVERAGE

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

This benefit is administered by the EyeMed Vision Care network. You can choose from the right mix of independent, national retail and regional retail providers, including LensCrafters®, Target OpticalSM, and Pearle VisionSM.

Plus, we offer online in-network options through **LensCrafters.com, Ray-Ban.com, Glasses.com, and ContactsDirect.com.**

If you do see an out-of-network eye doctor, all you need to do is complete and submit our Out-of-Network Claim Form to receive reimbursement as outlined by your plan.



If you have questions about EyeMed Vision Care vision providers in your area or any other questions about your vision hardware coverage, please call EyeMed Vision Care at **844-872-8868 (TTY: 711)** or scan the QR code.

Your hearing benefits.

You have a hearing aid benefit through Intermountain Health Audiology. This benefit makes addressing hearing loss more affordable with five 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.



BENEFIT	COST
Routine hearing exam (one per year)	\$0 copay
Tier 1 Economy	\$299 per aid
Tier 2 Essential	\$639 per aid
Tier 3 Standard	\$949 per aid
Tier 4 Advanced	\$1,299 per aid
Tier 5 Premium	\$1,799 per aid

Note: Costs are per hearing aid. Hearing aid copays do not go towards the Member Out-of-Pocket Maximum. For help finding an in-network provider, visit selecthealth.org/medicare/find-care or call Member Advocates at **800-515-2220 (TTY: 711)**.



Your Select Health Medicare Flex Card.

Select Health Medicare members receive all their wellness benefits in one easy-to-use *Benefits Mastercard® Prepaid Card* (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:

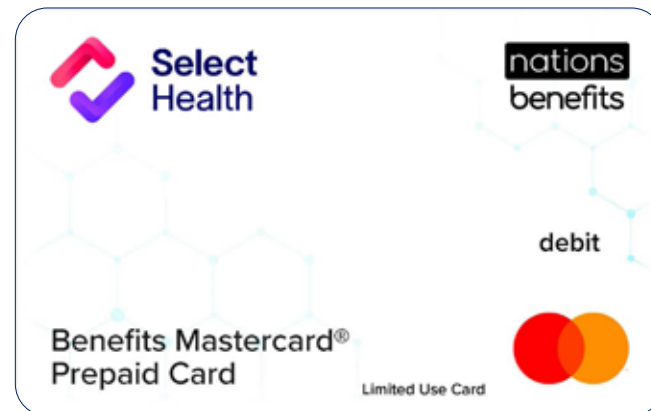
- **Wellness Your Way and Over-the-Counter (OTC)** allowance to spend on approved wellness activities like gym memberships, health education classes, golf green fees, ski lift passes, and over-the-counter items.
- **Healthy Living Rewards** for keeping up with wellness activities like annual routine physicals and preventive screenings.

How to use your card.

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

To order OTC items online, visit selecthealth.nationsbenefits.com or use the Benefits Pro app.

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** 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.



Scan the QR code to visit our website to learn more.

BENEFITS PRO PORTAL AND BENEFITS PRO APP.



Benefits Pro Portal.

To place an order, scan the QR code using your smartphone camera or visit: SelectHealth.NationsBenefits.com



Benefits Pro App.

To place an order, scan the QR code using your smartphone camera or search “**Benefits Pro**” in the App Store or Google Play.



Wellness Your Way + Over-the-Counter (OTC) benefit.

You get \$420 a year to pay for wellness activities and services and OTC products.

As a Select Health Medicare member, you can use your Flex Card to pay for wellness activities and services, as well as over-the-counter products. These benefits are a combined purse in your Flex Card account, with a yearly allowance that you choose how to spend. Dollar amounts do not roll over into the next plan year, so make sure you use your yearly allowance by **December 31**.

Wellness Your Way.

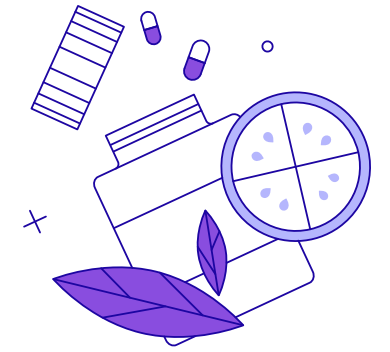
Find a wellness activity or service to help you live a healthier life.

Use your Flex Card to pay for approved activities or services.

What kind of wellness activities can you choose?

- Approved weight management programs: Jenny Craig, Weight Watchers, Noom, etc.
- Fitness center memberships: Silver&Fit Flex*, city or county gym and recreations centers, sports and athletic clubs, yoga and pilates studios, etc.
*Members must register for this program through Silver&Fit.
- Golf green fees and bucket of balls at the driving range.

- League fees: Bowling, Tennis, Pickleball, Hockey, etc.
- Health education classes: Managing chronic conditions, cooking classes, and nutritional virtual counseling services like Season Health.
- Home safety devices or assessments
- Fitness classes: Pilates, yoga, martial arts, cycling, water aerobics, weight training, etc.
- Memory fitness subscriptions: BrainHQ, Headspace, Lumosity, Happify, etc.
- Ski lift passes
- Sport equipment rentals: Bicycle (non-electric), paddleboard, kayak, golf clubs. Unique requests outside of this list will not be approved.
- Virtual fitness subscriptions: Peloton, iFit, NordicTrack, Zwift, Vivo, etc.



Not sure if an activity is covered? Give Select Health a call.

Our team can clarify whether an activity is approved and walk you through the reimbursement process, if needed.

Some activities, services, and items are not covered, such as:

- Fitness equipment, apparel, or accessories purchased for personal or home-use
- Purchase of meals or supplements
- Club membership fees
- Alternative or holistic education services
- National or State Park passes
- Hunting or fishing licenses
- Camp site fees

Over-the-Counter (OTC) benefit.

Use your Flex Card when checking out at an approved retail location. Simply swipe your card for payment and select “credit” when prompted. Selecting “debit” will decline the transaction since there is no PIN.

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

What kind of OTC items can you buy?

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

Order by phone or mail by contacting NationsBenefits at **833-878-0232 (TTY: 711)**. Order forms and catalogs should be mailed back no later than the 20th of December to ensure that the order total is applied to the current benefit period.

Mail completed forms to:

NationsBenefits
1700 N. University Drive
Plantation, FL 33322



Visit selecthealth.org/medicare/wellness or scan the QR code to learn more about these benefits.

Healthy Living Rewards.

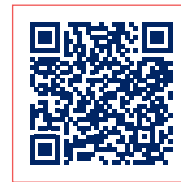
Living a healthy lifestyle has never been more rewarding. When you complete wellness activities, like getting your annual physical, money is automatically added to your Healthy Rewards purse that you can spend on fitness equipment, wellness services, home essentials, dining experiences, and more.

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

Remember, rewards do not carry over to the next year. It's recommended that you complete your reward activities by **October 1, 2025**, so you can spend your rewards dollars by **December 31, 2025**.

Note: Alcohol, ammunition, firearms, gift cards, prescriptions, and tobacco are not eligible.

Scan the QR code or visit selecthealth.org/medicare/wellness/healthy-living to learn more.



2025 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
RECOMMENDED BREAST CANCER SCREENINGS		
<i>Only members in the recommended age bracket can receive rewards for completing these screenings.</i>		
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		
<i>Only members in the recommended age bracket can receive rewards for completing these screenings.</i>		
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

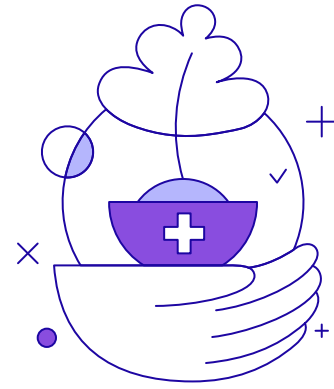
Note: If you complete a reward activity, but are not within the recommended age limit, you will not be eligible for the reward.

Excess rewards do not roll over to a new plan year. Rewards are applied to your Flex Card Healthy Rewards balance after Select Health receives confirmation reporting, which can take 4–6 weeks after activity completion.



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 also can help find resources that you may need to manage your health better such as help finding transportation to appointments or connecting you with resources in your community.

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 a 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.

If you have a hospital or inpatient facility stay and want to learn more about Care Management, call **800-442-5305 (TTY:711)**.

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)**.

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**.

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)**.



Intermountain Home Health Visits.

Home visits to help you live your healthiest life possible.

Complete your introductory health assessment with Intermountain Health House Calls for Select Health Medicare members.

This service is free and convenient for Select Health Medicare members and is done from your home. It helps your care team get to know you and understand your needs. Plus, you'll earn rewards for completing the visit.

How visits work.

- Intermountain Health House Calls will contact you to schedule an appointment.
- A nurse practitioner or physician assistant will visit with you in your home or virtually.
- Topics covered during your visit:
 - An overview of your medical history and prescription medications.
 - Completion of a health risk assessment.
 - Conversations about your overall well-being.
 - Information about local resources and support.
- The Intermountain Health House Calls team will share all medical notes from the visit with your elected doctor.

NOTE: The Intermountain Health House Calls visit will not replace your PCP or your annual wellness visit.

Questions?

Contact Intermountain Health House Calls at **385-622-0669 (TTY: 711)** on weekdays from 8:00 a.m. to 4:30 p.m. MST.



Disclaimers.

Select Health is an HMO, PPO, SNP plan sponsor with a Medicare contract. Enrollment in Select Health Medicare depends on contract renewal.

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

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.

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.



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

Select Health Medicare Additional Benefits Member Guide

Select Health Medicare Essential (HMO) 001

Discover how you can maximize your benefits.

Learn about your Select Health Medicare Flex Card, dental coverage, hearing aid coverage, and other benefits available to you as a Select Health Medicare member.

