Individual and Family ACA plans. Idaho 2024





Life loves surprises. We love predictable.

With easy-to-understand plan designs and benefits tailored to meet your unique needs, we do health insurance differently. For you.

Statewide coverage

We offer four 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.

New network option

The Select Health Med network extends to Southeast Idaho in 2024, with access to high-quality facilities and providers in nine counties. The Med Network extends access to providers across Eastern Idaho and adds three facilities: Eastern Idaho Regional Medical Center – EIRMC, Mountain View Hospital, and Idaho Falls Community Hospital.

Health insurance definitions.

Before you start to even think about shopping for a plan, there are a few pretty confusing terms used in insurance. Get to know these concepts so you feel confident and empowered when it's time to shop.

DEDUCTIBLE—Amount you 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. Things like 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 urgent medical, mental health, or primary care 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. Select Health considers 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 to pay for each type of service.

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





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.**



TRADITIONAL—Traditional health insurance plans may require you to meet your deductible, then cost sharing with copays or coinsurance may be applicable.

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

\$0 PCP PLAN—This plan offers unlimited PCP and mental health visits, both virtual and in-person, as well as preventive services with no copay. A great, lower cost alternative that protects you after your deductible for major events, but still offers care options our members love.

SILVER PLANS—If you're eligible for a Cost-Share Reduction (CSR) through the Marketplace, this may be a good option for you. It offers all the benefits of a CSR (based on eligibility) at the lowest possible cost.

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

- Bilingual Resources
- Care Management
- Cost Estimator
- Health and Wellness Discounts
- Intermountain Health Patient Portal App
- Intermountain Connect Care App
- Member Advocates support to help you find doctors, make appointments, and answer questions
- Select Health Mobile App
- Preventive Care

- Rx Savings Solutions
- Telehealth and Virtual Visits
- Wellness Rewards Program has options such as gym, acupuncture, Tai Chi, and yoga membership rewards and physical activity rewards

Find more details about member benefits and resources at selecthealth.org/resources and selecthealth.org/wellness.



Individual plans and benefits | 2024 Idaho plans





Plan Type	Traditional	Traditional / No-Deductible Office Visits	HSA-Qualified ¹	Traditional / No-Deductible PCP/Office Visits	Traditional	Traditional / No Deductible Office Visits	Traditional / \$0 PCP Office Visits	Traditional / Lowest- Cost Silver	Copay Plan	Traditional / No Deductible Office Visits	Traditional / No Deductible Office Visits
Plan Name	Bronze 8000	Expanded Bronze 9400	Expanded Bronze 8000	Expanded Bronze 6000	Expanded Bronze 4500	Silver 4500	Silver 4000	Silver 3000	Silver 0	Gold 1500	Gold 1000
Participating Networks		<u>\$</u>	S B M	S B A M	SBM	S B A M	SBAM	SBAM	SBAM	S	BAM
Deductible											
Single	\$8,000	\$9,400	\$8,000	\$6,000	\$4,500	\$4,500	\$4,000	\$3,000	\$0	\$1,500	\$1,000
Family	\$16,000	\$18,800	\$16,000	\$12,000	\$9,000	\$9,000	\$8,000	\$6,000	\$0	\$3,000	\$2,000
Out-of-Pocket Max											
Single	\$9,100	\$9,400	\$8,000	\$9,100	\$9,450	\$9,000	\$8,900	\$8,700	\$9,100	\$8,000	\$9,000
Family	\$18,200	\$18,800	\$16,000	\$18,200	\$18,900	\$18,000	\$17,800	\$17,400	\$18,200	\$16,000	\$18,000
Primary Care Provider (PCP)	\$30 after Deductible	\$45	Covered 100% after Deductible	\$40	\$45	\$30	\$0	\$20	\$20	\$10	\$15
Secondary Care Provider (SCP)	\$70 after Deductible	\$100	Covered 100% after Deductible	\$90 after Deductible	\$70 after Deductible	\$50	\$50	\$60 after Deductible	\$60	\$40	\$40
Urgent Care Services	\$70 after Deductible	\$90	Covered 100% after Deductible	\$70	\$60 after Deductible	\$50	\$50	\$60 after Deductible	\$30	\$40	\$40
Virtual Visits ²	Covered 100%	Covered 100%	Covered 100% after Deductible	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%
Preventive Care and Immunizations	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%
Minor Diagnostic Tests ³	\$75 after Deductible	\$75	Covered 100% after Deductible	\$75	Covered 100% after deductible	\$0	\$60	\$30	\$15	Covered 100%	Covered 100%
Inpatient Hospital Services	50% after Deductible	Covered 100% after Deductible	Covered 100% after Deductible	50% after Deductible	50% after Deductible	\$650 per day after Deductible	40% after Deductible	50% after Deductible	\$1,500 per day	20% after Deductible	20% after Deductible
Outpatient Services	50% after Deductible	Covered 100% after Deductible	Covered 100% after Deductible	50% after Deductible	50% after Deductible	30% after Deductible	40% after Deductible	50% after Deductible	\$600	20% after Deductible	20% after Deductible
Emergency Room	\$600 after Deductible	Covered 100% after Deductible	Covered 100% after Deductible	\$600 after Deductible	\$600 after Deductible	\$600 after Deductible	\$400 after Deductible	\$500 after Deductible	\$1,200	\$400 after Deductible	\$400 after Deductible
Rx Deductible Per Person	\$1,700	Medical and Rx Combined	Medical and Rx Combined	\$2,000	\$1,700	\$2,500	\$1,500	\$1,500	\$3,500	\$400	\$500
Tier 1 Drugs	\$15	\$15	Covered 100% after Deductible	\$15	\$15	\$5	\$5	\$5	\$5	\$5	\$5
Tier 2 Drugs	\$35	\$35	Covered 100% after Deductible	\$35	\$35	\$25	\$25	\$25	\$25	\$25	\$25
Tier 3 Drugs	30% after pharmacy Deductible	Covered 100% after Deductible	Covered 100% after Deductible	25% after pharmacy Deductible	25% after pharmacy Deductible	\$45 after pharmacy Deductible	25% after pharmacy Deductible	25% after pharmacy Deductible	\$100 after pharmacy Deductible	25% after pharmacy Deductible	25% after pharmacy Deductible
Tier 4 Drugs	50% after pharmacy Deductible	Covered 100% after Deductible	Covered 100% after Deductible	50% after pharmacy Deductible	50% after pharmacy Deductible	\$55 after pharmacy Deductible	50% after pharmacy Deductible	50% after pharmacy Deductible	50% after pharmacy Deductible	50% after pharmacy Deductible	50% after pharmacy Deductible
Tier 5 Drugs	50% after pharmacy Deductible	Covered 100% after Deductible	Covered 100% after Deductible	50% after pharmacy Deductible	50% after pharmacy Deductible	50% after pharmacy Deductible	50% after pharmacy Deductible	50% after pharmacy Deductible	Covered 100%	50% after pharmacy Deductible	50% after pharmacy Deductible

¹ When two or more are enrolled on a HSA-Qualified plan, only the family deductible applies and no single person in a family will pay more than the single out-of-pocket maximum.

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**.

S Select Health SLHP—Select Health St. Luke's Health Partner Network

BrightPath Network

⚠ SAHA—Saint Alphonsus Health Alliance Network

M Select Health Med

² 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.

³ Some minor diagnostic services will be covered as part of the office visit cost share. Please note: The coverage and benefit details presented here do not include out-of-network cost-share details.



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 **yourhealthidaho.org**, call us at **855-442-0220**, or contact your agent.



Check if your current providers are in-network

Visit **selecthealth.org/findadoctor** to browse in-network providers or call Member Services at **800-538-5038** to request a provider directory.



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

You've done your homework and you're ready! If 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.

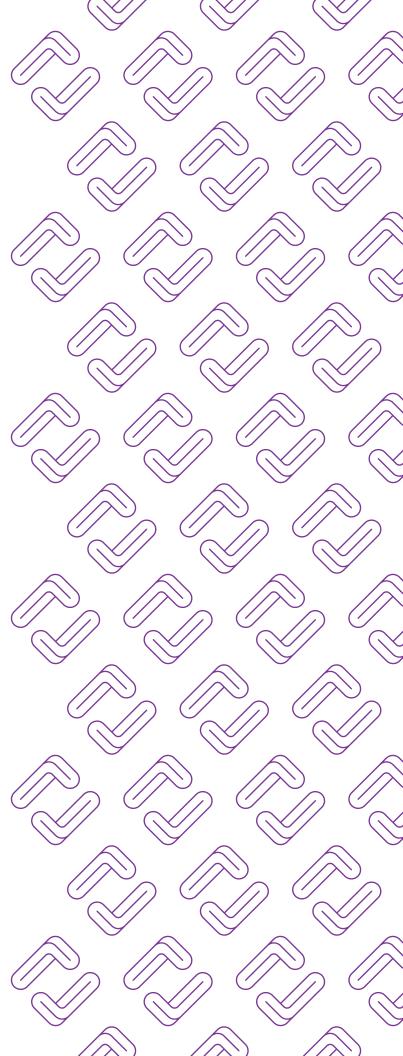


CALL US

Individual Sales 855-442-0220

Your shopping checklist

- ✓ Review network options and check for in-network providers
- ✓ Consider your total out-of-pocket costs, including premium and your anticipated portion for the cost of care.
- ✓ Determine dental needs
- √ Verify your subsidy eligibility



Our networks.

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 SLHP Network

- Available to residents of Ada, Adams, Blaine, Boise, Camas, Canyon, Cassia, Custer, Elmore, Gem, Gooding, Jerome, Lemhi, Lincoln, Minidoka, Owyhee, Payette, Twin Falls, Valley, and Washington counties.
- Provides access to St. Luke's Health Partners (SLHP) providers and facilities.
- Provides access to more than 80 facilities and over 5,000 providers.

BEST FOR:

Those living in Southwest Idaho who would like access to St. Luke's providers and facilities.

BrightPath Network

- Available to residents of Bear Lake, Bingham, Bonneville, Franklin, Fremont, Jefferson, Kootenai, Madison, Oneida, and Teton counties.
- Provides access to BrightPath providers and facilities.
- Provides access to more than 115 facilities and over 4,400 providers.

BEST FOR:

Those living in Eastern or Northern Idaho who would like access to BrightPath providers and facilities.

SAHA Network

- Available for residents of Ada, Canyon, Boise, Gem, Payette, and Washington counties.
- Provides access to Saint Alphonsus Health Alliance (SAHA) providers and facilities.
- Provides access to more than 50 facilities and over 3,200 providers.

BEST FOR:

Those looking for a network of SAHA providers and facilities who live in select counties in Southwest Idaho.

Select Health Med

- Available for residents of Bear Lake, Bingham, Bonneville, Franklin, Fremont, Jefferson, Madison, Oneida, and Teton counties.
- Includes access to care in Southeast Idaho, Utah, and the Select Health Med Network in Nevada.
- Provides access to more than 150 facilities and over 3,500 providers.

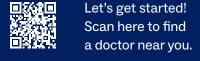
BEST FOR:

Those looking for comprehensive coverage.

IDAHO	SLHP	ВР	MED	SAHA
Bear Lake Memorial Hospital		•	•	
Benewah Community Hospital		•		
Bingham Memorial Hospital		•	•	
Bonner General Hospital		•		
Caribou Memorial Hospital		•	•	
Cascade Medical Center Hospital District	•		•	•
Cassia Regional Hospital	•		•	
Eastern Idaho Regional Medical Center— EIRMC		•	•	
Franklin County Medical Center		•	•	
Grove Creek Medical Center		•	•	
Idaho Falls Community Hospital			•	
Lost Rivers Medical Center		•	•	
Madison Memorial Hospital		•	•	
Memorial Hospital (Weiser Valley Hospital District)	•		•	•
Minidoka Memorial Hospital	•		•	
Mountain View Hospital			•	
Nell J Redfield Memorial Hospital		•	•	
North Canyon Medical Center	•		•	
Portneuf Medical Center		•	•	
Power County Hospital District		•	•	
Saint Alphonsus Medical Center Baker City				•
Saint Alphonsus Medical Center Nampa				•
Saint Alphonsus Medical Center Ontario				•
Saint Alphonsus Regional Medical Center				•
Saint Alphonsus Regional Rehab Hosp (Encompass Health)				٠
Shoshone Medical Center (West Shoshone Hosp District)		•	•	
St. Luke's Elmore Medical Center	•			
St. Luke's Jerome Medical Center	•			
St. Luke's Magic Valley Regional Medical Center	•			
St. Luke's McCall LTD	•			
St. Luke's Nampa Medical Center	•			
St. Luke's Regional Medical Center LTD	•			
St. Luke's Wood River	•			
Steele Memorial Medical Center	•			
Syringa General Hospital		•		
Teton Valley Health Care		•	•	
Treasure Valley Hospital			•	
Valor Health—Walter Knox Memorial Hospital	•		٠	٠
West Valley Medical Center	•		•	•
Note: This list is subject to change				



Note: This list is subject to change.





Your care options.

Not everyone wants to receive care the same way. That's why you choose how you want to manage your health.

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. To find an in-network doctor, visit selecthealth.org/findadoctor.

Specialty care provider

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



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.

Intermountain Connect Care

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

Hospitals

Our hospital network spans the state of Idaho, offering a variety of care and services. We've partnered with local facilities and providers, too. Go to **selecthealth.org/findadoctor** to find in-network facilities near you.

Telehealth and virtual visits:

We offer convenient virtual care options for \$0 out-of-pocket when you see in-network urgent care, primary care, and mental health providers.

The Intermountain® Health Patient Portal

Use the Intermountain Health Patient Portal app to schedule visits for urgent care, primary care, mental health, and nutritional support. The app even has an E-Visit option where you can get care via online chat. Services available through Intermountain Health Patient Portal may vary by state. Visit intermountain. com/myhealthplus for more information.

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

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, you can use the UnitedHealthcare Options PPO network.

Always 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.

If you need urgent or emergency care and need to find UnitedHealthcare Options PPO network providers or facilities, call Member Services at **800-538-5038** or visit **selecthealth.org/findadoctor** and select "UnitedHealthcare Options PPO" from the network drop down.

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, five-tier formulary which provides appropriate pharmacy coverage of generic drugs and brand name drugs only when a generic or over-thecounter 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 five copay/coinsurance levels as described in the table below.

Tier1—	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.

90-day maintenance drug benefit

This benefit allows members who have been taking a medication for at least one month to access a 90-day supply of select generic and brand-name medications. This reduces fill-frequency, saving time and money.

Hassle-free mail order

Get your medication delivered right to your door for no extra charge with Intermountain Home Delivery. To learn more, call **855-779-3960** or visit selecthealth.org.

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

Need to visit the pharmacy? Don't worry! 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.



Pharmacy tools

Log in to selecthealth.org to access pharmacy

- Drug coverage information
- Rx claims (member portal login)
- 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, mental health 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 Idaho 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:	Notes:

Shop selecthealth.org/shop

General questions Member Services 800-538-5038

Help finding a doctor Member Advocates 800-515-2220

More plan information Individual Sales 855-442-0220

selecthealth.org/individual



