Select Health Transition plans. Idaho



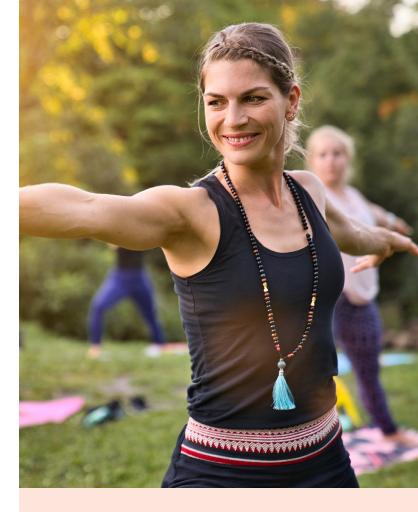
An ideal solution.

Transition plans are specifically tailored to help cover accidents and illnesses for a short period of time. Here's what you need to know before choosing a transition plan:

- The minimum plan term is 30 days, and the maximum plan term is 90 days.
- After 90 days with Select Health, you will need to switch to another carrier. You will not be able to reinsure with a Select Health Transition plan for 12 months from the effective day of the initial policy. However, you may have the opportunity to explore other coverage options, such as an Individual plan if you qualify for a Special Enrollment Period or during the standard Open Enrollment period.
- You can see any participating provider for covered services and receive the same benefits. If you use in-network providers for covered services, they shouldn't bill you for additional charges beyond payment amounts allowed by the plan. Learn more about your network on page 4.
- Transition plans do not cover prescription drugs, preventive care, mental health, maternity, or pre-existing conditions, Call Member Services at 800-538-5038 for a full list of plan exclusions.

Our Transition plans include the exceptional service, innovative online tools, and member discounts that come with all Select Health plans. Benefits include:

- Access to personalized plan information, claim details, and Explanation of Benefits (EOB) all through one convenient member portal.
- Be Well resources like healthy recipes, trainings on how to recognize stress and use our online symptom checker, information about sports training programs, and more!
- Member discounts on services not covered by your plan, such as LASIK, eyewear, hearing aids, nutritional supplements, alternative medicine, certain medical supplies, and more.



These plans may be an ideal solution for those:

- Employees in a waiting period for group coverage.
- Individuals who missed the open enrollment window.
- People who have been laid off or who are in between jobs.
- Recent graduates.
- New business owners.
- Children who are no longer eligible under a parent's plan.
- Seasonal or contract employees.

Note: Some of these events may qualify you for a Special Enrollment Period (SEP) in the Individual market. However, loss of Transition coverage does not qualify you for an SEP.

Questions? Call 855-442-0220.

Customize your plan.

Choose the Transition plan that's right for you.

MEDICAL DEDUCTIBLE OPTIONS (INDIVIDUAL / F AMILY)	COINSURANCE / MAXIMUM COINSURANCE OPTIONS
\$1,000 / \$2,500 \$2,500 / \$5,000	20% coinsurance, \$1,000 maximum coinsurance per person OR 50% coinsurance, \$2,500 maximum coinsurance per person

Choose your deductible and coinsurance amounts.

Choose deductible and coinsurance amounts from the options shown above.

Remember, you are responsible for paying all of your medical expenses until you reach your deductible for the plan term.

After your deductible is met, Select Health will pay for a percentage of covered services according to your coinsurance selection. The maximum coinsurance limit applies to each family member separately and does not include the deductible.

Estimate your premium.

Visit selecthealth.org/applyonline to calculate your premium. Once you've entered the requested information, you'll be able to view the estimated premiums for each Transition plan.



Select a payment method.

Single payment — You can make a single payment with an electronic check or a credit or debit card. You will be asked to provide card or account information on the application, and we will charge or draft the full premium for the selected term of coverage.

Monthly payment — Your payment must be made with a preauthorized checking withdrawal. You will be asked to provide checking account information on your application. Your premium will then be drafted monthly until the end of your selected term (90 days maximum).

Complete and submit your application.

Visit selecthealth.org/applyonline to complete and submit your application. The oldest family member must complete and sign the application as the primary applicant. Your spouse or domestic partner's signature is required if they are also applying for coverage. When completing your application, please answer each question or section incomplete applications will delay the review process.

Coverage can begin as soon as the next day. We will not consider an application for enrollment completed more than two months prior to the date you want your coverage to begin.

Note: Completing an application does not guarantee coverage.

Which providers can you see?

Select Health members in Idaho can access the St. Luke's Health Partners (SLHP) and BrightPath networks.

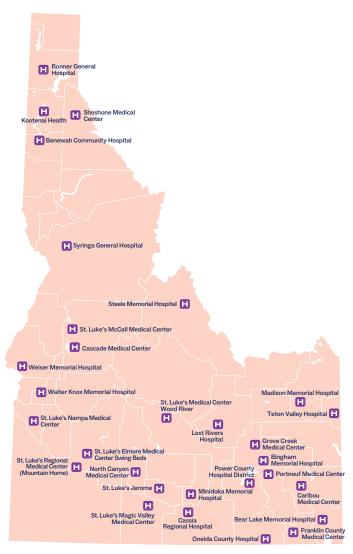
For covered services, providers and facilities accept the allowed charges (including payments for which you are responsible) negotiated by Select Health as payment in full and should not bill you for the difference. If you use innetwork providers for covered services, they shouldn't bill you for additional charges beyond payment amounts allowed by the plan. That's why we strongly encourage you to use innetwork providers. Visit selecthealth.org/find-care-ID to view a complete list of in-network providers and facilities or call Member Advocates at 800-515-2220.

Looking for more comprehensive coverage?

If you're looking for more long-term, comprehensive coverage, consider a Select Health Individual plan. We can help you find the right one and show you how to use it. You may even qualify for a reduced premium (also known as a subsidy or tax credit). Enroll during the annual Open Enrollment Period or call Select Health at **855-442-0220** for information about Individual health plans.

Note: This map is not all inclusive. For a complete list of participating facilities, visit selecthealth.org/find-care-ID.





Note: Please confirm participating facilities at selecthealth.org/find-care-ID.

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

QUESTIONS?

Call **855-442-0220**.

You may also contact your Select Healthappointed insurance agent. Need help finding an agent? Give us a call!

