At SelectHealth, we know you have many options when choosing a health plan. Here are just some of the reasons why we may be an exceptional choice for you.

- **EXCEPTIONAL SERVICE**
  Health insurance doesn’t have to be complicated. We can help you with everything from finding the right doctor to understanding your benefits. We want our members to live well so we provide a number of wellness resources to supplement our health plan benefits.

- **MEMBER SERVICES**
  Life doesn’t stop at 5 p.m. SelectHealth Member Services offers extended hours to answer your questions and help to resolve your concerns. Member Services is available weekdays from 7:00 a.m. to 8:00 p.m. and Saturdays from 9:00 a.m. to 2:00 p.m. by calling 801-442-5038 or 800-538-5038.

- **MEMBER ADVOCATES**
  Member Advocates help you find the right doctor for your needs - even on short notice! Member Advocates can assist in appointment scheduling, finding the closest doctor or facility with the nearest available appointment.

- **MY HEALTH ONLINE TOOLS**
  Log on! You have 24-hour access to view your claims, review explanation of benefits, view amounts paid year-to-date, utilize decision support tools and personalized health and wellness information on our secure member website. Get connected at www.selecthealth.org/myhealth.

- **PHARMACY BENEFITS MADE SIMPLE**
  Managing your prescriptions is made simple. While you can’t control the cost of prescription medication, using generic drugs can lower your out-of-pocket expenses. Through the “Generic Sample” program, SelectHealth offers members their first 30-day fill of select generic prescriptions free! Additionally, at a participating “Retail-90” pharmacy, members are able to receive up to a three-month supply of medication at a more affordable copayment.

- **DISCOUNTS, DISCOUNTS AND MORE DISCOUNTS**
  Members are more likely to embrace a healthy lifestyle when it costs less. Member discounts and wellness resources add more value to your health plan. SelectHealth gives you many discounts simply by presenting your SelectHealth ID card. Discount/wellness resources include health club and fitness center memberships, spas, LASIK eye surgery, nutritional supplements, eyewear, hearing aids, alternative medicine, and drug education. For more information about these discounts, visit www.selecthealth.org/discounts.

- **HEALTHY BEGINNINGS**
  Pregnancy is a special time and our free prenatal program provides support and resources for expectant mothers. In addition to pregnancy education materials, the program includes a risk assessment screening and provides high-risk case management when needed, for employees and their spouses.

- **CARE/DISEASE MANAGEMENT**
  SelectHealth encourages healthy lifestyles. Helping our members to achieve and maintain healthy lives is a top priority. Trained registered nurse care managers are available to assist our members with various health concerns and can help coordinate services between providers and patients. Our disease management program provides members with educational materials, newsletters, follow-up phone calls and additional support for conditions such as allergies and rhinitis, asthma, cholesterol, congestive heart failure, depression, diabetes, high-risk pregnancy, hypertension, migraines and oncology.

- **NATIONAL ACCREDITATION**
  SelectHealth was the first National Committee for Quality Assurance (NCQA) accredited commercial health plan in Utah and has held that accreditation since 1993. In rating a health plan, NCQA examines how well a plan helps its members stay healthy, get better, manage chronic illness, access qualified providers and receive care when services are needed. Our excellent accreditation status illustrates our commitment to helping members stay healthy and to provide the highest quality of care when they are sick.
As a SelectHealth member you will have access to Intermountain Healthcare’s nationally recognized facilities as well as contracted hospitals and clinics that meet SelectHealth’s high quality standards. So you can rest assured that you will receive the best healthcare available. The following hospitals and clinics are closest to you:

HOSPITALS

- Intermountain Medical Center
- LDS Hospital
- Alta View Hospital
- Riverton Hospital
- TOSH (Orthopedic Specialty Hospital)
- Primary Children’s Hospital
- McKay-Dee Hospital Center
- Davis Hospital Center
- Park City Medical Center

INTERMOUNTAIN INSTACARE & KIDSCARE CLINICS

- Taylorsville InstaCare & KidsCare
- West Jordan InstaCare & KidsCare
- Sandy InstaCare
- Sandy KidsCare
- Saratoga Springs InstaCare
- Riverton InstaCare & KidsCare
- Murray KidsCare
- Bountiful Kidscare & InstaCare
- Layton InstaCare
- North and South Ogden InstaCare
- North Orem InstaCare
- Holiday InstaCare
- Ogden KidsCare
- Sugar House InstaCare & KidsCare
- Syracuse InstaCare
- Highland InstaCare

For a complete list of SelectHealth facilities and participating physicians, visit www.selecthealth.org.

NOTE: Primary Care providers are family medicine, geriatrics, and internal medicine.
We are 3 million members strong, being here for our families, coworkers and neighbors, helping each other be and stay healthy and provide support in time of need. And Regence BlueCross BlueShield has been here for members for more than 90 years.

- **WE ARE PROUD TO BE BLUE**
The strength of the BlueCross and BlueShield brand is unsurpassed, and our reach is global. Our members can access healthcare across the country and around the world. Our vision of a new kind of healthcare system doesn't stop with our own members. We want to transform the system for everyone, because together we can do better.

- **TOGETHER, WE CAN DO BETTER**
Regence defines success by how well we advocate for - and make a difference in - the health of our members. You have invested trust and resources in Regence, and we repay you by investing in products and services that deliver value every day, especially when you need care.

- **AN ONLINE SUPER TOOL - myREGENCE.com**
Making healthy choices can be a difficult task in our complex world. Regence members value a trusted advisor to help you navigate the healthcare system and help you live a healthier life. MyRegence.com is a member-only website designed to advise Regence members on healthcare and lifestyle options, navigate through the healthcare system and reward healthy choices. Using myRegence.com you are able to view your claims and personal account information, compare hospitals, find information regarding a procedure's cost and quality based on your personal needs, use the interactive health and medical encyclopedia and even engage in conversations through open forums that allow members to interact with healthcare experts and with each other.

- **REGENCE Rx**
For more than 20 years, Regence Rx has successfully managed pharmacy benefits for more than 2.2 million members of The Regence Group. Regence Rx offers a pharmacy network of more than 50,000 pharmacies nationwide including two mail-order options, education tools and information, preferred medication/formulary support, call center support and prescription claims processing - online, electronic and real-time.

- **REGENCE ADVANTAGES**
Regence offers value-added programs (not insurance benefits) that offer great savings to members from leading health-related companies and are offered by Regence in addition to your medical plan. Regence Advantages include weight management discount programs (Jenny Craig), fitness center memberships, LASIK/PRK eye surgery, cosmetic dermatology, cosmetic dentistry, acupuncture, child safety and health products, eyewear, hearing aids, and bicycle and skating helmets.

- **THE BLUECARD PROGRAM**
Across the country and around the world... we’ve got you covered. When you are a BlueCross BlueShield plan member with a suitcase logo on your member ID card (applicable for the ValueCare and ValueCare Plus plans), the BlueCard program gives you access to doctors and hospitals almost everywhere, giving you the peace of mind that you’ll be able to find the healthcare provider you need.
ValueCare
- $25.00 office visit copayment (PRIMARY CARE)
- $35.00 Specialty copayment (SECONDARY CARE)
- In network coverage only
- $750.00 per person in-network annual deductible (up to 3 person annual deductible maximum)
- 80% covered for eligible major medical expenses after deductible
- Eligible dependents covered up to age 26

ValueCare Plus
- $30.00 office visit copayment (PRIMARY CARE)
- $40.00 Specialty copayment (SECONDARY CARE)
- In and out-of-network coverage available
- $750.00 per person in-network annual deductible (up to 3 person annual deductible maximum)
- Eligible major medical expenses after deductible:
  CATEGORY 1 = 80%
  CATEGORY 2 = 60%
- Eligible dependents covered up to age 26

The following Regence BlueCross BlueShield facilities are closest to you:

HOSPITALS
- St. Marks Hospital
- University of Utah Medical Center
- Jordan Valley Medical Center
- Pioneer Valley Hospital
- Primary Children's Hospital
- Ogden Regional Medical Center

URGENT CARE CLINICS
- After Hours Medical
- First Med Urgent Care
- IHC Insta/Kids Care
- Ogden Clinic
- Wee Care Pediatrics

NOTE: Primary Care providers are family medicine, internal medicine, pediatrics, obstetrics & gynecology.

REGENE BCBS
A health plan is a promise: To be here for each other.

For a complete list of Regence facilities and participating physicians, visit www.ut.regence.com or 866-240-9580
<table>
<thead>
<tr>
<th><strong>2014 MEDICAL COMPARISON CHART</strong></th>
<th><strong>SelectHealth</strong></th>
<th><strong>Regence BlueCross BlueShield of Utah</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Insurance Company</strong></td>
<td><strong>Plan Name Select: Med ValueCare</strong></td>
<td><strong>ValueCare Plus</strong></td>
</tr>
<tr>
<td><strong>Dependent Age Maximum</strong></td>
<td>26</td>
<td>26</td>
</tr>
<tr>
<td><strong>New Hire Waiting Period</strong></td>
<td>90 Days From Contract Hire Date</td>
<td>90 Days From Contract Hire Date</td>
</tr>
<tr>
<td><strong>Annual Deductible</strong></td>
<td>$750 per person</td>
<td>$750 per person</td>
</tr>
<tr>
<td><strong>Deductible Toward Out-of-Pocket Maximum</strong></td>
<td>3 Deductible Max. ($2250)</td>
<td>3 Deductible Max. ($2250)</td>
</tr>
<tr>
<td><strong>Out-of-Pocket Maximum</strong></td>
<td>Employee $1500</td>
<td>Employee $1500</td>
</tr>
<tr>
<td><strong>Office Visits</strong></td>
<td>$25 copay per visit</td>
<td>$30 copay per visit</td>
</tr>
<tr>
<td><strong>Preventative Services</strong></td>
<td>Routine Physical (1 per yr)</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Maternity Care</strong></td>
<td>Initial Prenatal Office Visit</td>
<td>$25 copay (1st visit only)</td>
</tr>
<tr>
<td><strong>Inpatient Services</strong></td>
<td>Medical-Surgical Admission</td>
<td>80% after deductible</td>
</tr>
<tr>
<td><strong>Outpatient Services</strong></td>
<td>Facility Charges</td>
<td>80% after deductible</td>
</tr>
<tr>
<td><strong>Emergency Services</strong></td>
<td>Urgent Care</td>
<td>$35 copay per visit</td>
</tr>
</tbody>
</table>

*All copays now apply to out of pocket maximum

** General Office Visit Includes: Family Medicine, Pediatrics, Internal Medicine, OBGYN (Geriatrics SelectHealth only)
# 2014 MEDICAL COMPARISON CHART

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<td>[ Select: Med Plus ]</td>
<td>[ ValueCare ]</td>
</tr>
<tr>
<td><strong>In-Network</strong></td>
<td><strong>Out-of-Network</strong></td>
<td><strong>In-Network</strong></td>
</tr>
</tbody>
</table>

**Durable Medical Equipment**
- Inpatient or Outpatient: 80% after deductible
- Out-of-Network: 60% after deductible

**Chiropractic Care**
- Office Visit: Not Covered
- Inpatient or Outpatient: Not Covered
- Outpatient: 60% after deductible
- $40 copay per visit

**Mental Health**
- Inpatient Visit: 80%
- Outpatient Visit: $35 copay then 100%

**Prescription Drugs**
- **Retail**
  - Up to a 30-Day Supply
    - Generic/Tier 1: $20.00 per prescription
    - Preferred/Tier 2: $40.00 per prescription
    - Non-Preferred/Tier 3: $70.00 per prescription
  - Up to a 90-Day Supply
    - Generic/Tier 1: $40.00 per prescription
    - Preferred/Tier 2: $80.00 per prescription
    - Non-Preferred/Tier 3: $140.00 per prescription

- **Mail Order**
  - Up to a 30-Day Supply
    - Generic/Tier 1: $20.00 per prescription
    - Preferred/Tier 2: $40.00 per prescription
    - Non-Preferred/Tier 3: $70.00 per prescription
  - Up to a 90-Day Supply
    - Generic/Tier 1: $40.00 per prescription
    - Preferred/Tier 2: $80.00 per prescription
    - Non-Preferred/Tier 3: $140.00 per prescription

**Injectable Drugs**
- Received at Pharmacy: Subject to pharmacy tiers
- Received via Home Health: 80% after deductible

**Formulary Drug List**
- www.selecthealth.org/pharmacy/plans
- www.regencerx.com

**HOW TO FIND A PARTICIPATING PHYSICIAN OR FACILITY**
- www.selecthealth.org
- www.ut.regence.com

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1. **No benefit for dependent children**
2. **Specified immunizations only. Refer to the Summary Plan Description(s).**
3. **Preauthorization is required on the following: inpatient services; maternity stays longer than two days for a normal delivery or longer than four days for a cesarean; DME items: insulin pumps, continuous glucose monitors, negative pressure wound therapy, electrical pump, prosthetics, motorized/customed wheelchairs, DME over $5,000; home health nursing services; certain injectable and prescription drugs; and pain management/pain clinic services. If you fail to precertify, benefits are reduced to 50 percent and will not be applied to your out-of-pocket max.**
4. **Allowable adoption amount as outlined by the state of Utah. Medical deductible and copay/coinsurance applies.**
5. **Limited number of visits per calendar year. Refer to the Summary Plan Description(s).**
6. **Mandatory generic substitution enforced when a generic drug is available or you must pay the preferred or nonpreferred copay plus the difference in cost between name brand and gene**
7. **There are differences in the prescription preferred drug formularies between SelectHealth and Regence. You are encouraged to study the formularies when selecting participation in a medi**

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**THE BENEFITS LISTED ARE IN SUMMARY FORM ONLY**

They are for illustrative purposes only and should not be construed to be complete in and of themselves. In case of conflict, the respective legal plan documents will apply. All deductible/copay/coinsurance amounts and plan payments are based on eligible charges only and not the provider’s billed or other charges. You are responsible to pay for extra charges in excess of eligible charges for covered services obtained from non-participating providers and facilities. Such excess charges are not applied to the medical out-of-pocket maximum. Payment percentages listed will be paid according to the respective carrier’s fee schedule.