



Nothing in the Employee Summary will constitute a contract or agreement between the City and the Employee. The summary is offered only for information purposes.

Additional specific information can be obtained in the benefit booklets and online.

CITY/EMPLOYEE PAID BENEFITS

Employee Premium Portion:	(Includes Health, De	ental, and Vision total premium)	
Coverage:	Employee Only	+1 dependent	Family 2 or more
Cost per pay period:	\$120.24	\$122.21	\$124.73

Health/Hospitalization – Self-Funded program through Select Health

-Costs to employees may be higher at non-participating providers.

-Annual Deductible \$250 per person/\$500 per family (in-network)

-Out-of-Pocket maximum \$2,000 per person / \$4,000 family (in-network)

-In-patient hospital 95% paid / Out-patient surgery 95% paid / Preventative Services 100% paid

-Most eligible claims are payable at 80% insurance paid, 20% employee paid

Prescription Drugs – Annual Deductible \$200 per person/\$400 per family for Tier 2 and Tier 3 prescription drugs. Tier 1 & Tier 2 prescription drugs are covered at 80%, employee pays 20% at pharmacy. Tier 3 and Tier 4 prescription drugs are covered at 50%, employee pays 50% at pharmacy. Tier 1, 2 & 3 out-of-pocket maximum is \$2,500 per person or \$5,000 per family. Tier 4 prescription drugs have a separate deductible of \$500 per person and an out-of-pocket maximum of \$16,000 per person.

RX Help Center – This is a service to help with the higher out-of-pocket copays, deductibles, or coinsurances typically associated with the expensive brand maintenance, single source generics, or specialty medications. There is no cost to you for this service.

Dental – Self-Funded program through Select Health

-Annual deductible \$50 per person/\$150 per family

-\$1,000 maximum per person per year

-Preventive diagnostic services 100% of eligible expenses, 2 times per year

-Basic services 80%/20% of eligible expenses

-Prosthodontic services 50%/50% of eligible expenses

-Orthodontic services 50% up to \$1,000 per person

Vision - Vision Service Plan (VSP) Employees may elect vision coverage only

Coverage:	Employee Only	+1 dependent	Family 2 or more
Cost per pay period:	\$0	\$1.97	\$4.49
-Exam co-pay \$20			

-Eyeglasses: Frame replaced every twenty-four (24) months, \$130 allowance; lenses replaced every twelve (12) months; co-pay \$20

-Contacts: Plan pays a maximum of up to \$130 per year for contacts

Wellable Wellness Program -

Required – annual physical and personal wellness assessment

Tier I – refund of \$260 per year by completing 4,000 Wellable points annually

Tier II – \$260 plus 1 additional vacation day by acquiring 72,000 points through activities and challenges

Tier III - \$260 plus 2 additional vacation days by acquiring 180,000 points through activities and challenges

Flex Accounts – The employee's insurance premiums are deducted from their gross wages

before taxes. In addition, employees may elect to have additional money deducted pre-tax and deposited into their Flexible Spending Account. This money reimburses qualified out-of-pocket expenses. These include: -Medical Expenses – Deductibles, Co-Insurance, Prescriptions, plus other qualified expenses

-Dependent Care – Cost of caring for children or other dependents while employee is at work

CITY PROVIDED

Life Insurance – Group coverage and optional elective coverage provided through The Standard. -Individual Life – City provides a \$30,000 life insurance policy for each employee -Dependent Life – City provides life insurance coverage of \$2,000 for each dependent



-Additional elective supplemental insurance is available at the employee's expense (group rates & portable).

Rates based on employee age in five (5) year increments.



Employee Assistance Program (EAP) – (801) 392-6833 Provided by Blomquist Hale Consulting

- -Counseling service for the employee and family members living in the same home
 - -Counseling services include emotional/stress management, family and parenting issues, depression, substance
 - abuse, financial planning, legal assistance, and other various topics.
 - Crisis Intervention Hotline
 - **Teledoc** Provides you and your eligible dependents with 24/7 access to U.S. board-certified doctors and pediatricians by phone or online video.

Long Term Disability Program – Provided through The Standard

-Eligible for benefits following ninety (90) days of disability; Continuation Pay equal to 66.7% of salary (or 100% if disabled in Line-of-Duty), for up to 2 years, and may be extended until retirement or age 65 if qualified.

Short Term Disability Program - Provided through Colonial Life (optional)

- Provide income replacement for up to 90 days if unable to work.
- Rates are determined by age & elimination period selected.

Retirement - Tier 2 Utah Retirement System (25 year plan) - Hired after July 1, 2011

-Hybrid Plan – Employer contributes an amount equal to 14% of salary plus the additional 4.73% employee pick-up contribution for a total of 18.73%. After four (4) years service 100% vested in the Public Safety Hybrid Plan. -Defined Contribution Plan – Employer contributes an amount equal to 14% of salary to 401(k).

-Employees may also elect to contribute their own money to a tax deferred 401K, 457 or after tax 457 retirement plan available from the Utah Retirement System and/or MissionSquare Retirement.
- Employees may also elect to contribute their money to a Roth IRA plan available from the Utah Retirement System and/or MissionSquare Retirement.

Leave Accrual

Annual Leave – Accrual of 3.6924 hours/pay period (8 hrs/month) during first five (5) years
 Receive 40 hours upon date-of-hire, will accrue at a reduced rate (2.154) during 1st year of service
 Accrual rates increase after five (5), ten (10) and fifteen (15) years of service
 May accrue up to a maximum of two-hundred and forty (240) hours (by the end of the 1st pay period in January) each year

Sick Leave - Accrual of 3.6924 hours/pay period (8 hrs/month)

-May accrue up to maximum of 1000 hours

-After five (5) years service, one third (1/3) of accrual balance is paid upon termination

-May be used for illness and medical related issues for self and immediate family members

-Annually (each October) employees may convert up to one-third (1/3) of the current year unused sick leave accrual into 'cash', 457 or 401k plan or to be transferred to annual leave. Employees with more than 480 hours accrued may convert two-thirds (2/3) to cash, 457, 401k or annual leave.

COMPENSATION

- Pay days Employees are paid every other Friday
- -There are twenty-six (26) pay days per year
- -There is one week lag in payment for time worked -4/10 work schedule
- -\$900 annual uniform allowance -Free gym membership -Take home car

Paid Holidays – Holiday Compensation Accrual – accrual of 4 hours/pay period. This

accrual covers the worked Holidays by providing equal hours to be taken at a later time. This is given the <u>first pay period in January (52 hours</u>). The Holiday Comp hours **must be used or will be paid out** prior to the next semi-annual accrual. Equivalent to **Thirteen (13) paid holidays per year:** New Year's Day, Martin Luther King Day, President's Birthday, Memorial Day, Juneteenth, Independence Day, Pioneer Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, Day after Thanksgiving, Christmas Day.

 Payroll Deductions – Auto-Deposit of the net paycheck, plus additional Auto-Deposits for Layton

 City Water Bill, Deferred Compensation-457 Retirement Plans, IRA Plans, Sub-4-Santa, United Way, Exercise Facility, EOS/VASA gym membership, Surf-N-Swim family pass and Department Association dues.
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