



2025

Employee Benefits

Everything you need to know about your
employee benefits for the 2025 plan year.



Benefits at Salt Lake County

2025 Contacts

Medical

SelectHealth
(801) 442-5038
www.selecthealth.org

PEHP
(801) 366-7555
www.pehp.org

Health Savings Account

Fidelity
(800) 544-3716
www.netbenefits.com

Dental

Cigna
(800) 244-6224
www.cigna.com

Vision

VSP
(800) 877-7195
www.vsp.com

Flexible Spending Account

ASI Flex
(800) 659-3035
www.asiflex.com

Life and AD&D Disability

The Standard
(800) 628-8600
www.standard.com

Pension, Hybrid & 401(k)

URS
(801) 366-7700
www.urs.org

Employee Assistance Program (EAP)

Vest
(385) 205-6789
www.vestep.com

Onsite Clinic

HealthyMe Clinic
Government Center South Building 2-
500
(385) 468-0555

Wellness Program

Healthy Lifestyles
(385) 468-4061
myhealthylifestyles@slco.org

Voluntary Benefits

*Review summaries and enroll for the following at slcounty.corestream.com.
Contact customerservice@corestream.com or
call 888-935-9595 with questions*

Accident, Critical Illness, Hospital Indemnity

MetLife
(800) 438-6388
www.mybenefits.metlife.com

Auto & Home

Farmers Insurance
(800) 438-6381, Code A20
www.myautohome.farmers.com

Identity Theft Protection

Norton LifeLock
(800) 607-9174
www.my.Norton.com

Pet Insurance

Nationwide - My Pet Protection
(877) 738 -7874

Tuition Repayment Support

GradFin
(844) 472-3346

Human Resources - Benefits Team

(385) 468-0580
benefits@slco.org

Open Enrollment & Claims Support

Allison Miner, GBS Account Manager
(801) 819-7793
allison.miner@gbsbenefits.com

Raquel Goodbeau, GBS Account
Manager Support
(801) 819-7789
Raquel.Goodbeau@gbsbenefits.com

Mayors Finance - Payroll

Payroll Department
MF-Payroll@slco.org

COBRA Administration

GBS Benefits
Melissa Talbot
801-819-7772

Table of Contents

This guide is designed to highlight your benefit options so that you can make the best possible decisions for you and your family. Use this guide as your go-to-resource when you're enrolling for benefits and throughout the plan year. The choices you make will remain in effect during the plan year, unless you have a qualifying major life event.

We are committed to providing our employees with quality benefits programs that are comprehensive, flexible and affordable. Giving our employees the best in benefit plans is one way we can show you that as an employee, YOU are our most important asset.

4	Benefits Overview
5	Open Enrollment Overview
6	Medical - SelectHealth
9	Medical - PEHP
10	Prescription Savings
11	Patient Assistance Program
12	Volunteer Canadian Prescription Savings Program
13	Health Savings Account
15	Employee Clinic
16	Dental
17	Vision
18	Flexible Spending Account
19	Life and AD&D
20	Optional Life and AD&D
21	Short Term Disability
22	Long Term Disability
23	Employee Assistance Program
24	Pension, Hybrid & 401(k)
25	Student Loan Services
26	Healthy Lifestyles
27	Voluntary Benefits
28	ID Theft Protection
29	Pet Insurance
30	Cost of Coverage



Benefits Overview

Making wise decisions about your benefits requires planning. By selecting benefits that provide the best care and coverage, you can optimize their value and minimize the impact to your budget. The best thing you can do is “shop” for benefits carefully, using the same type of decision-making process you use for other major purchases.

- 1. Take advantage of the tools available to you.** That includes this guide, access to plan information, provider directories, and enrollment materials.
- 2. Be a smart shopper.** If you were buying a car or purchasing a home, you would do a lot of research beforehand. You should do the same for benefits because the wrong decision could be costly.
- 3. Don't miss the deadline and keep record of your enrollment!** Pay attention to the enrollment deadline and be sure to enter your benefit elections in PeopleSoft in a timely manner. It is important to review your paycheck to ensure the accuracy of payroll deductions. Notify Benefits immediately if there are any discrepancies.

Who Is Eligible?

Elected, Appointed, Time-Limited and Merit employees are eligible for benefits. If you are hired to regularly work 20 or more hours per week, coverage will begin on the first day you begin working at Salt Lake County. You may also enroll your eligible dependents in the same plans you choose for yourself.

Eligible dependents include your legal spouse, your adult designee and your natural, adopted

or step-child(ren). The dependent age limit for children on your medical plan is age 26, but may vary for other benefits offered. Disabled children over age 26 may be eligible for continued health coverage upon approval by the carrier.

How do I Designate an Adult Designee?

Salt Lake County offers coverage to a non-spouse or adult designee. An adult designee can be your significant other to whom you are not married or a family member with whom you share a relationship. To qualify, you and your designee must meet certain criteria which includes:

- Adult designee status for an eligible adult (a child must be over the age of 26 and not disabled) who is:
- Both unmarried and over age 18
- Proof of joint expenses

If you meet the criteria, you must complete an adult designee affidavit and supply the required financial documentation within 31 days. Affidavit found at: <https://slco.org/contentassets/809e38a30e434b13b034500a057afb3a/affidavit-of-adult-designee.pdf>

The IRS taxes an “imputed income” for this benefit, which will increase your taxable income for the year. The cost of including your adult designee will be added to your gross earnings and be subject to income tax.

When Do I Enroll?

You can enroll for coverage within 31 days of your date of hire, or during the annual open enrollment period. Outside of your open enrollment period, the only time you can change your coverage is within 31 days after you experience a qualifying event.



Benefits Overview

Making Changes During The Year

The IRS provides strict regulations about the changes to pre-tax elections during the plan year. Once you enroll in benefits, you will not be able to make any changes to your elections until the next annual open enrollment period, unless you experience a qualified life event.

Qualified life events include, but are not limited to:

- › Change in your legal marital status
- › Change in number of dependents
- › A dependent no longer meets the eligibility requirements
- › You and/or your dependent becomes eligible or loses eligibility for Medicare, Medicaid or the Children's Health Insurance Program (CHIP)
- › Employee or dependents change in employment status resulting in loss or gain of eligibility for employer sponsored benefits
- › A court or administrative order

It is your responsibility to notify the Benefits Department within 30 days after a qualified life event. Any benefit changes must be directly related to the qualified life event.

When Coverage Ends

For most benefits, coverage will end on the last day of the month in which:

- › Your regular work schedule is reduced to fewer than 30 hours per week
- › Your employment with Salt Lake County ends

Your dependent(s) coverage ends:

- › When your coverage ends, or
- › The last day of the month in which the dependent is no longer eligible

Health Care Reform and You

For the most up-to-date information regarding the ACA, please visit www.healthcare.gov.

In addition to the plan information in this Benefits Guide, you can also review a Summary of Benefits and Coverage for each medical plan. This requirement of the ACA standardizes health plan information so that you can better understand and compare plan features. We will automatically provide you a copy of the SBC and Uniform Glossary annually during open enrollment. Please contact Benefits should you need an additional copy.



Medical

SelectHealth

Value and Med Networks Traditional Plan Calendar Year Benefits

	Tier 1 Value	Tier 2 Med	Out-of-Network
Deductible	\$1,000 / Single \$2,000 / Family		\$1,500 / Single \$3,000 / Family
Out-of-Pocket Maximum	\$4,000 / Single \$8,000 / Family		\$5,500 / Single \$11,000 / Family
Preventive Care	100% Covered		Not Covered
Office Visits			
Primary Care	\$25 AD	\$25 AD	30% AD
Specialist	\$35 AD	\$35 AD	30% AD
Virtual Visits	100% Covered	100% Covered	Not Covered
Urgent Care	\$45 AD	\$45 AD	30% AD
Emergency Room		\$150 AD	
Hospital Services			
Minor Lab Testing and X-Ray	100% Covered AD	100% Covered AD	30% AD
Major Diagnostic and Imaging Services	20% AD	20% AD	30% AD
OP Mental Health/Substance Abuse	20% AD	20% AD	30% AD
Inpatient Hospital	20% AD	20% AD	30% AD
Outpatient Surgery	20% AD	20% AD	30% AD
Pharmacy - Retail			
Tier 1		\$10	
Tier 2		25% with a minimum of \$25 and maximum of \$75 AD	
Tier 3		50% with a minimum of \$50 and maximum of \$100 AD	
Mail Order		\$20 / 25% AD / 50% AD	

AD = After Deductible

[Download the Full Plan Summary](#) ↓

[Provider Search](#) ↗



Medical

SelectHealth

Value and Med Networks/HSA Qualified Calendar Year Benefits	Tier 1 Value	Tier 2 Med	Out-of-Network
Deductible	\$2,500 / Single \$5,000 / Family		\$2,500 / Single \$5,000 / Family
Out-of-Pocket Maximum	\$4,000 / Single \$8,000 / Family		\$8,500 / Single \$17,000 / Family
Preventive Care	100% Covered		Not Covered
Office Visits			
Primary Care	\$25 AD	\$25 AD	30% AD
Specialist	\$35 AD	\$35 AD	30% AD
Virtual Visits	100% Covered AD	100% Covered AD	Not Covered
Urgent Care	\$45 AD	\$45 AD	30% AD
Emergency Room		\$150 AD	
Hospital Services			
Minor Lab Testing and X-Ray	100% Covered AD	100% Covered AD	30% AD
Major Diagnostic and Imaging Services	10% AD	10% AD	30% AD
OP Mental Health/Substance Abuse	10% AD	10% AD	30% AD
Inpatient Hospital	10% AD	10% AD	30% AD
Outpatient Surgery	10% AD	10% AD	30% AD
Pharmacy - Retail			
Tier 1		\$10 AD	
Tier 2		25% with a minimum of \$25 and maximum of \$75 AD	
Tier 3		50% with a minimum of \$50 and maximum of \$100 AD	
Mail Order		\$20 AD / 25% AD / 50% AD	

AD = After Deductible

[Download the Full Plan Summary](#) ↓

[Provider Search](#) ↗



Medical

PEHP

Traditional - Summit Network Calendar Year Benefits

In-Network

Out-of-Network

	In-Network	Out-of-Network
Deductible	\$1,000/ Single \$2,000/ Family	\$1,500 / Single \$3,000 / Family
Out-of-Pocket Maximum	\$4,000 / Single \$8,000 / Family	\$5,500 / Person \$11,000 / Family
Preventive Care	100% Covered	Not Covered
Office Visits		
Primary Care	\$25 AD	30% AD
Specialist	\$35 AD	30% AD
Urgent Care	\$45 AD	30% AD
Emergency Room	\$150 AD	\$150 AD
Hospital Services		
Minor Lab Testing and X-Ray	100% Covered AD	30% AD
Major Diagnostic and Imaging Services	100% Covered AD	30% AD
OP Mental Health/Substance Abuse	\$35 AD	30% AD
Inpatient Hospital	20% AD	30% AD
Outpatient Surgery	20% AD	30% AD
Pharmacy - Retail		
Tier 1		\$10
Tier 2	25% AD, \$25 minimum/\$75 maximum	
Tier 3	50% AD, \$50 minimum/\$100 maximum	

AD = After Deductible

[Download the Full Plan Summary](#) ↓

[Provider Search](#) ↗



Medical

PEHP

HDHP - Summit Network Calendar Year Benefits

In-Network

Out-of-Network

	In-Network	Out-of-Network
Deductible	\$2,500/ Single \$5,000/ Family	\$2,500 / Single \$5,000 / Family
Out-of-Pocket Maximum	\$4,000 / Single \$8,000 / Family	\$8,500 / Person \$17,000 / Family
Preventive Care	100% Covered	Not Covered
Office Visits		
Primary Care	\$25 AD	30% AD
Specialist	\$35 AD	30% AD
Urgent Care	\$45 AD	30% AD
Emergency Room	\$150 AD	\$150 AD
Hospital Services		
Minor Lab Testing and X-Ray	100% Covered AD	30% AD
Major Diagnostic and Imaging Services	100% Covered AD	30% AD
OP Mental Health/Substance Abuse	\$35 AD	30% AD
Inpatient Hospital	10% AD	30% AD
Outpatient Surgery	10% AD	30% AD
Pharmacy - Retail		
Tier 1		\$10 AD
Tier 2	25% AD, \$25 minimum/\$75 maximum	
Tier 3	50% AD, \$50 minimum/\$100 maximum	

AD = After Deductible

[Download the Full Plan Summary](#) ↓

[Provider Search](#) ↗



Prescription Savings

Strategies to Save

The average American spends about \$1,200 each year on prescription drugs. And with drug prices on the rise, 1 in 4 Americans are paying more today than they were a year ago. Consider the following ways to help lower your bills for pills:

- › Go generic or ask your doctor or pharmacist if there's a similar drug with a generic version.
- › Compare prices by using an app, like GoodRx, to find the least expensive option. Call stores and pharmacies as well.
- › Order a 90-day supply and look into a mail-order program.
- › Sign up for a drugstore or chain store reward program to receive coupons and accumulate points.
- › Use a preferred pharmacy in your network.

If you have prescription drug questions, talk to your pharmacist for additional cost-cutting tips and guidance.

GoodRx

Stop paying too much for your prescriptions! With the GoodRx Comparison Tool, you can compare drug prices at over 70,000 pharmacies, and discover free coupons and savings tips.

Isn't health insurance all I need?

Your health insurance provides valuable prescription and other health benefits, but a smart consumer can save much more,

especially for drugs that are not covered by health insurance (weight-loss medications, some antihistamines, etc.), drugs that have limited quantities, drugs that can be found for less than your copay, or drugs with a lower priced generic.

How can I find these savings?

The GoodRx Comparison Tool provides you with instant access to current prices on more than 6,000 drugs at virtually every pharmacy in America.

1. On the web: <https://www.goodrx.com/>
Instantly look up current drug prices at CVS, Walgreens, Walmart, Costco, and other local pharmacies.
2. On your phone: Available in the App Store or Google Play. Or, simply visit m.goodrx.com from your phone.

Please Note:

- › Prescription drug pricing displayed on the GoodRx Comparison Tool may be more or less than your insurance drug card.
- › Please be sure to compare all discount pricing options before you purchase.
- › Check your insurance carrier's pharmacy benefit before purchasing a 90-day supply.



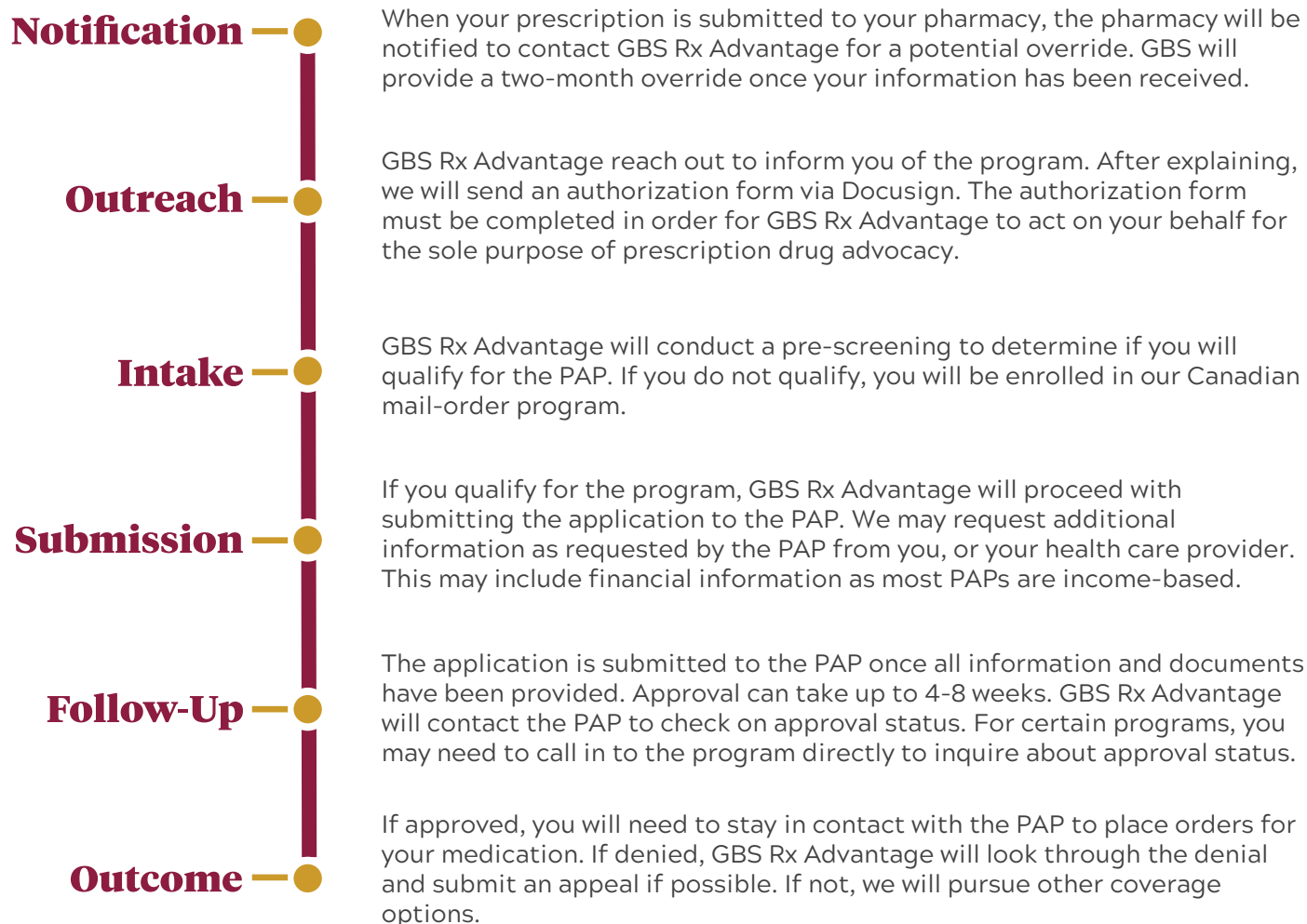
Patient Assistance Program

GBS Rx Advantage

Salt Lake County Pharmacy Savings Opportunities for Specialty Medications

GBS Rx Advantage has partnered with your employer to address the increasing costs of specialty medications. The GBS Rx Advantage team works directly with you or your loved ones to find alternative funding options to reduce or eliminate your out-of-pocket costs.

If you are taking medications that qualify for the GBS Rx Advantage Patient Assistance Program (PAP) you will receive communication from a dedicated GBS team member that will help you navigate the entire process, doing much of the heavy lifting. It is important that you engage with the GBS Rx Advantage team and provide them with the information they request.



For more information regarding this program, please call GBS Rx Advantage at
801-819-7745



Volunteer Canadian Prescription Savings Program

GBS Rx Advantage

Salt Lake County Pharmacy Savings Opportunities for Brand-Only Medications

What is Volunteer Prescription Savings Program?

The Volunteer Savings Program allows the employer and members to save between 30% to 50% off brand-name medications through mail-order shipping from Canadian pharmacy partners through GBS Rx Advantage. While this program is not mandatory, every effort is being made to help reduce prescription costs.

Is there a copay for prescriptions filled through your company?

There are **no copays** charged to participants. The high program savings allows the employer to offer the program at no charge to members.

How do I enroll in the Volunteer Prescription Savings Program?

You will receive an email from HR introducing the program which will include information from GBS Rx Advantage. You may also receive an email from GBS Rx Advantage with an intake form to be completed.

What medications are included in the program?

Brand-name oral medications as well as a few select brand-injectables, brand-antidiabetic meds and brand-inhalers. Controlled substances are not eligible for this program. If you are on one of the High Deductible Health Plans (HDHP), restrictions may apply.

Common Medications

This is not an all-inclusive list. Please inquire about other brand-name medications with GBS Rx Advantage by calling 801-819-7745 or emailing abbey.leeson@gbsbenefits.com.

- > Anoro Ellipta
- > Biktaryv
- > Bydureon
- > Eliquis
- > Entresto
- > Incruse Ellipta
- > Januvia
- > Jardiance 10mg
- > Latuda
- > Lialda
- > Serevent Diskus
- > Spiriva
- > Tradjenta
- > Trintellix
- > Triumeq
- > Trulicity
- > Victoza
- > Xarelto
- > Xigduo
- > Xiidra

Click [here](#) for additional information (refer to page 2).





Health Savings Account

Fidelity HSA

A Health Savings Account (HSA) paired with our qualified high deductible health plan helps you and your family plan, save and pay for qualified health care expenses. An HSA empowers you to build savings for health care expenses in a tax advantaged account.

Advantages of Health Savings Accounts

A Health Savings Account (HSA) is a tax advantaged savings account that you own and control. Here are some of the benefits:

- › Funds roll over from year-to-year and never expire
- › Portable when you move jobs or retire
- › Triple tax advantage: you won't pay taxes on contributions, distributions, or earnings
- › Able to invest your funds to grow your money tax-free
- › Contribution elections can be changed mid-year without a life event

Who Is Eligible?

You must be enrolled in our qualified high deductible health plan and meet the following requirements:

- › Have no other health insurance coverage except what's permitted by the IRS
- › Not be enrolled in Medicare
- › Not be claimed as a dependent on someone else's tax return

How Much Can I Contribute to an HSA?

Each year the IRS establishes the maximum contribution limit. The chart below represents the limits for 2025. These limits are for the total funds contributed, including company contributions, your contributions and any other contributions. Please keep in mind you can change your HSA allocation at any time during the plan year.

[Click Here for AE Guidebook](#) ↓

[Click here for Your guide to understanding a Health Savings Account](#) ↓

[Click Here for Tax Advantages of HSAs Infographics](#) ↓

[Click Here for Facts, plan comparison tool and more](#) ↓

[Click Here HSA Microsite for Young Employees](#) ↓

[Click Here for HSA Workshop](#) ↓

[Is an HSA right for me?](#) ↓



Health Savings Account

Fidelity HSA

What Is A Qualified Health Care Expense?

You can use money in your HSA to pay for any qualified health care expenses for you, your spouse and your tax dependents, even if they are not covered on your plan. Examples of qualified health care expenses include: your insurance plan deductibles, copayments, and coinsurance; doctor's office visits; prescriptions; dental treatments and x-rays; and eyeglasses and vision exams. You can use money in your HSA to pay for any qualified health care expenses you, your legal spouse and your tax dependents incur, even if they are not covered on your plan. Qualified health care expenses are designated by the IRS (Publication 502). They include medical, dental, vision and prescription expenses not covered by the insurance carrier.

Important

Any funds you withdraw for non-qualified expenses will be taxed at your income tax rate plus a 20% tax penalty if you're under age 65. After age 65, you pay taxes but no penalty.

Documentation is Key

An HSA can be used for a wide range of health care services within the limits established by law. Be sure you understand what expenses are HSA qualified, and be able to produce receipts for those items or services that you purchase with your HSA. You must keep records sufficient to show that:

- › The distributions were exclusively to pay or reimburse qualified medical expenses,
- › The qualified expenses had not been previously paid or reimbursed from another source, and
- › The qualified expense had not been taken as an itemized deduction in any year. Do not send these records with your tax return. Keep them with your tax records.

IRS HSA Limits

	2025
Single	\$4,300
Family	\$8,550

At age 55, an additional \$1,000 contribution is allowed annually



Employee Clinic

HealthyMe Clinic

You and your eligible dependents have access to exceptional, confidential, and low cost care at the HealthyMe Clinic.

Brenda Sheehan, D/O. provides a full range of care and in many cases, Same day or next day appointments. What’s the difference between an MD and a D.O.? An MD, or medical doctor, treats specific symptoms which an osteopathic physician, or D.O. like Dr. Sheehan approaches medicine as an integrated whole. In addition to several hundred hours of certification for a D.O., Dr. Sheehan has been trained to ask questions and approach your health with a comprehensive understanding to treat the whole you. The clinic staff is specifically set up to manage chronic illnesses such as diabetes and high blood pressure.

Dr. Sheehan is an excellent option for primary care, and her practice is specifically county employees and their dependents. The

HealthyMe Clinic offers personal care and Dr. Sheehan spends more time with you than a typical provider. If more specific treatment is needed, Dr. Sheehan will refer you to a provider in your network.

The HealthyMe Clinic staff are employees of Intermountain Healthcare (IHC) and adhere to the processes and policies of IHC. The staff is unable to research your claims or make adjustments to an EOB. They don’t determine county benefit plans or payment structures, and questions about your benefits should be directed to PEHP or SelectHealth customer service. The HealthyMe Clinic is a medical clinic and complies with HIPAA and privacy laws. Please treat clinic staff with respect and understanding. If you have detailed questions about benefits, please contact the Employee Benefits Team.

High Deductible Health Plan (HDHP)		Traditional PPO Plan		No SLCO Medical Plan Coverage	
Services	Service Fee	Services	Service Fee	Services	Service Fee
Preventive Care	\$0	Preventive Care	\$0	All Visits	\$0
Office Visit	\$30	Office Visit	\$10		

Location and Hours
385-468-0555
Salt Lake Government Center
2001 S. State Street, SLC, UT
South Building - 2nd Floor- S2-500
Open 8:00 am to 5:00 pm Monday - Friday



Dental

Cigna - DPPO

Plan Features	In-Network Advantage Provider	In-Network Any Cigna Provider	Out-of-Network
Calendar Year Deductible (waived for Preventive Services and Orthodontics)	\$0	\$50 Single/ \$150 Family	\$50 Single/ \$150 Family
Annual Maximum	\$2,000	\$1,200	\$1,200
Preventive Services (e.g. x-rays, cleanings, exams) No Waiting Period	100%	80%	80%
Basic Services (e.g. fillings, extractions, root canals) No Waiting Period	90%	60% AD	60% AD
Major Services (e.g. dentures, crowns, bridges) No Waiting Period	50%	40% AD	40% AD
Orthodontics (for adults and children) No Waiting Period	50%	40%	40%
Orthodontic Lifetime Maximum		\$1,750 per person	

[Download the Full Plan Summary](#) ↓

[Provider Search](#) ↗



Vision

VSP

Driving to work, reading a news article and watching TV are all activities you likely perform every day. Your ability to do all of these activities, though, depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various health problems.

Salt Lake County’s vision insurance entitles you to specific eye care benefits. Our policy covers routine eye exams and other procedures, and provides specified dollar amounts or discounts for the purchase of eyeglasses and contact lenses.

	In-network You Pay	Out-of-network Plan Reimburses You
Exam (once every calendar year)	\$10	Up to \$47
Frames (once every calendar year)	\$0 copay; \$180 featured frame allowance; \$160 frame allowance; 20% of balance	Up to \$80
Lenses (once every calendar year)		
SingleVision	\$0	Up to \$30
Bifocal	\$0	Up to \$50
Trifocal	\$0	Up to \$62
Standard Progressive	\$0	Up to \$50
Contact Lenses in Lieu of Eyeglasses (once every calendar year)		
Elective	\$0 copay; \$160 allowance	Up to \$145

[Download the Full Plan Summary](#) ↓

[Provider Search](#) ↗



Flexible Spending Account

ASI Flex

A Flexible Spending Account (FSA) provides you the opportunity to pay for health care and dependent care expenses on a pre-tax basis. By anticipating your family’s health care and dependent care costs for the next plan year, you can lower your taxable income.

How It Works

Each plan year you designate an annual election to be deposited into your health care and/or dependent care accounts. Your annual election will be divided by the number of pay periods in the plan year and deducted equally from each paycheck on a pre-tax basis. For health care expenses, you have immediate access to the total amount you elected to contribute for the plan year. With the dependent care, you have access to the amount of the current contributions in your account at the time you request reimbursement.

Things To Consider

- › Be conservative when estimating your annual election amount. The IRS has a strict “use it or lose it” rule. You will forfeit any

funds left in your account after the end of the plan year.

- › Your 2024 contributions must be used for expenses you incur January 1, 2024-December 31, 2024.
- › The health care and dependent care FSAs are two separate accounts and funds cannot be transferred between accounts.
- › You cannot stop or change your FSA contribution amount during the year unless you have a qualified change in family status.
- › Expenses reimbursed through an FSA cannot be used as a deduction or credit on your federal income taxes.

FSA Reimbursement Options

To receive reimbursement from your FSA, you can submit a claim online, complete a paper claim form or use your FSA debit card. It is important to save your receipts. ASI Flex may ask you to provide a copy to substantiate a claim.

	Health Care FSA	Limited Health FSA	Dependent Care FSA
Maximum Plan Year Contribution Amount	Up to \$3,300	Up to \$3,300	Up to \$5,000 (\$2,500 if married and filing separate income tax returns)
Examples of Eligible Expenses	Medical, Rx, Dental, & Vision Deductible, Coinsurance, and Copays	Dental, Vision Expenses Only	Cost of childcare for children under age 13 so you and your spouse can go to work or look for work.



Basic Life and AD&D

The Standard

Life Insurance and Accidental Death & Dismemberment (AD&D) benefits provide you and your loved ones financial protection in the event of an illness, accident, or death.

Basic Life Insurance and Accidental Death and Dismemberment (AD&D)

Salt Lake County provides all eligible employees with a basic group life insurance and accidental death and dismemberment coverage at no cost to you. Public safety officers who die or are dismembered in an accident while acting in the line of duty may receive an additional AD&D benefit. You may continue the basic life or AD&D benefits if you leave the County by exercising the plan's portability or conversion options.

Plan Features:

- › Life Benefit Amount: \$50,000
- › AD&D Benefit Amount: \$50,000
- › Maximum Benefit: \$50,000
- › Guarantee Issue: *Up to \$50,000*
- › Age Reductions: *Reduces to 50% at age 70; 25% at age 75*

Additional Plan Services

You also receive the following benefits at no additional cost:

Life Services Toolkit

The Life Services Toolkit helps you or your beneficiaries cope with grief and loss, get answers to legal questions, plan a memorial or a funeral, and address financial concerns. It also gives you access to online will preparation and other estate planning documents.

AD&D Occupational Assistance

The AD&D Occupational Assistance service provides access to a Workplace Possibilities (SM) Consultant who helps you return to productive work and life following a specified accidental dismemberment.

Travel Assistance

Travel Assistance provides you with assistance for pre-trip planning, medical assistance services, emergency transportation services, travel and technical assistance services and legal referral.

[Basic Life Plan Summary](#) ↓

[Tool Kit Flyer](#) ↓

[Travel Assistance Flyer](#) ↓



Optional Life and AD&D

The Standard

Optional Life Insurance and AD&D

You also have the option to purchase additional life insurance coverage for yourself, your spouse and your dependent children to age 26. However, you may only elect coverage for your dependents if you elected additional coverage for yourself. You pay for the cost of additional coverage through payroll deductions on a post-tax basis.

Coverage	Election Increments	Maximum Benefit	Guaranteed Issue
Employee Life Benefit	\$25,000	\$500,000	\$300,000
Spouse Life Benefit	\$25,000	Lesser of \$500,000 or total employee benefit	\$50,000
Child Life Benefit	\$5,000	\$15,000	\$15,000

Coverage	Election Increments	Minimum Benefit	Maximum Benefit
Employee AD&D	\$25,000	\$25,000	\$250,000
Employee + Family AD&D	\$25,000	\$25,000	\$250,000

Employee or Spouse Age	Rate Per \$1,000	Child Per \$5,000
<25	\$0.050	
25 - 29	\$0.060	
30-34	\$0.080	
35-39	\$0.090	\$0.48
40-44	\$0.100	
45-49	\$0.150	
50 - 54	\$0.230	
55-59	\$0.430	
60-64	\$0.660	
65-69	\$1.270	
70+	\$2.060	

Note: The premium paid for child coverage is based on the cost of coverage for one child, regardless of how many children you have

[Optional Life Plan Summary](#) ↓

[Optional AD&D Plan Summary](#) ↓



Short Term Disability

The Standard

Disability insurance benefits replace a portion of your income if you are unable to work for a period of time, due to a qualified off-the-job injury or illness.

Short-term Disability

Short-term disability provides a source of income should your qualified disability keep you from working for more than a week.

Definition of Disability

The definition of disability is used to determine an employee's eligibility for benefits. An individual's physical or mental inability to perform the major duties of his/her occupation because of illness or injury.

Plan Features	Short-term Disability
Benefit Amount	66.67% of weekly salary
Maximum Benefit	\$3,000 weekly
Benefit Waiting Period	14 days
Maximum Benefit Duration	11 weeks

[Download the Full Plan Summary](#) ↓

[Watch the STD Video](#) ↗





Long Term Disability

The Standard

Disability insurance benefits replace a portion of your income if you are unable to work for a period of time, due to a qualified off-the-job injury or illness.

Employer Paid Long-term Disability

Long-term disability provides an ongoing source of income if your disability is prolonged.

Definition of Disability

The definition of disability is used to determine an employee’s eligibility for benefits. An individual’s physical or mental inability to perform the major duties of his/her occupation because of illness or injury.

Plan Features

Long-term Disability

Benefit Amount	60% of weekly salary
Maximum Benefit	\$15,000 monthly
Benefit Waiting Period	90 days
Maximum Benefit Duration	2-years own occupation or Social Security Normal Retirement Age

[Download the Full Plan Summary](#) ↓

[Watch the LTD Video](#) ↗



Employee Assistance Program



Vest

VEST's services are designed to care for your mental health and wellbeing and that of your family. VEST provides services in two ways - through in-the-moment support and traditional counseling.

In-the-Moment Situational Support

VEST provides 24/7/365 support through their Care Center. The center is an anonymous and unlimited resource to provide in-the-moment support with whatever is happening in your life. Whether you need referrals for services or just someone to talk to, a Care Connector will be there offering a listening ear and tools to help you cope.

EAP Support

The second service provided by VEST is EAP Support. Whether you need short-term counseling or a financial or legal consultation, the EAP will connect you with a local provider - using your responses about preferences or needs to find the best possible fit. As with the Care Center conversations, all EAP services are confidential and free.

Additional Services

In addition to coaching and counseling, VEST provides access to a wide variety of expert courses on demand through their website, monthly webinars and other activities. Members can also sign up to receive weekly tips and wellness advice sent out by Hope, while Norm shares weekly helps for supervisors and managers.

Get Connected!

Get started by downloading the free VEST app from the Apple or Android store or by using the QR code.

- Use the code SL County to register
- Select "Text" or "Talk" to reach a Care Connector

You can also reach VEST by calling: 385-205-6789

Registration Code: **SLCounty**

Email: go@vesteap.com

Website: <https://www.vesteap.com>





Pension, Hybrid & 401(k)

URS

If you are thinking about retiring or have any questions, please see below for guidance on the process.

Step 1:

Contact URS

URS is available to discuss your options at 801-366-7700. Contact URS 1-3 months before retirement date and request a packet.

Step 2:

Choose Your Retirement Date

Work with your Division and the HR Benefits Team regarding your retirement date and review HR policy 4-900: Retirement. Contact HR Benefits at 385-468-0580 to schedule a retirement meeting to discuss your benefits and next steps in the process

Resources to help with your retirement decisions:

Review URS Guide “Preparing to Retire”

www.urs.org/content/members/publications

Review your retirement Options at:

www.urs.org/content/members/publications

Attend a free URS Seminar

Visit: www.urs.org/us/seminars

If you wish to buy out years of service

Contact URS at 801-366-7770 for a cost calculation

Insurance coverage is offered

To those currently enrolled and hired before December 31, 2012, per HR Policy 4-300.



Student Loan Services

GrandFin

GradFin is an employee benefit program that helps employees reduce their student loan debt. GradFin seeks to become a critical part of your overall benefits and compensation package.

Our Core Services

Our four core student loan benefit program services will improve the financial future of your employees by helping them pay off their student loans faster so that they can begin saving for the future.

Student Loan Financial Education

GradFin offers personal consultations, live webinars, and in house “town hall” meetings to educate and provide options for reducing student debt.

Student Loan Refinancing

GradFin refinances and consolidates student loan(s) through our lending platform which is made up of 11 lenders to maximize the changes for employees to be approved for a new loan and find the lowest rates.

Loan Repayment

GradFin administers a seamless employer repayment program through our technology platform and in partnership with Corestream, a third party administrator in the voluntary benefits market.

Public Service Loan Forgiveness Membership

GradFin will work with employees to stay compliant with the public service loan forgiveness program by enrolling your loans in the program, certifying your employment, annually certifying your income based repayment plan, and auditing your “qualified payments” as part of the PSLF program.

Healthy Lifestyles

Employee Wellness Program



Purpose

As part of SLCo Health Department, Healthy Lifestyles Employee Wellness Program rewards you for investing in your health. Our mission is to create a culture of holistic wellness for employees and their spouses/adult designees to achieve their personal health goals. We use evidence-based practices to educate and encourage participants to engage in sustainable healthy lifestyle behaviors to enhance their well-being. To register for Healthy Lifestyles, email myhealthylifestyles@slco.org and start earning points towards incentives for engaging in Healthy Lifestyles wellness activities and programs.



Incentives

All SLCo employees and their spouse/adult designee can participate in the Healthy Lifestyles program and earn prizes. SLCo employees and their spouse/adult designee who are eligible for benefits are qualified to earn up to a \$250 Healthy Lifestyles cash rebate AND \$275 HSA incentive by participating in a variety of wellness activities throughout the year.

Earning Points

Participants begin earning points January 1st and conclude point earnings on October 31st of each year. Incentive amounts are determined by the number of points participants earn during this period. Cash rebates will be distributed in December and HSA incentives will be issued in January of each year.

IMPORTANT: Participants must submit proof of an annual physical examination conducted by a medical practitioner to qualify for incentives.

Points	Cash Reward	HSA Reward
1-449	\$50	\$50
450-699	\$175	\$175
700-899	\$200	\$200
900+	\$250	\$275

Voluntary Benefits

Powered by Corestream



Your unique insurance needs may extend beyond your core benefits. Through our voluntary benefits offerings you can meet the need for Auto to Accident insurance while enjoying discounts and the convenience of payroll deduction.

How Do I Enroll?

Enrollments for the voluntary services listed below are made through the Corestream system. This system will be available to you through the Open Enrollment period.

Where Can I Learn More?

For a full list of services visit slcountyvoluntarybenefits.com or use the QR code below:



A variety of options to meet your unique needs.

Accident Insurance



There are things that may lead to an accident and out-of-pocket expenses. Get protected.

Auto & Home Insurance



Cover your car, boat, motorcycle, home & more.

Critical Illness Insurance



Gain the power to make treatment decisions when you experience a heart attack, cancer or stroke.

Discount Shopping



Shop the brands you love with exclusive discounts you can't get anywhere else.

Hospital Indemnity Insurance



Achieve peace of mind with coverage to help ease your financial responsibility while you recover.

Identity Theft Protection



Protect your financial and social wellness from identity thieves.

Pet Health Insurance



Give more to your furbabies. Save on vet expenses for accidents, illnesses and more, nationwide.

Purchase Financing



Buy a variety of products such as computers, cameras, and furniture via payroll deduction.

Student Loan Refinancing



Find the perfect plan whether you need a new loan, refinance or loan forgiveness.



ID Theft Protection

Norton LifeLock

Protect your privacy, identity, and finances.

Norton LifeLock Protection Includes

- › Comprehensive Identity Monitoring: Our proprietary monitoring platform detects high-risk activity to alert you at the first sign of fraud. We scour the dark web for comprised credentials and monitor financial transactions, all while keeping tabs on your credit reports.
- › Fraud Remediation and Restoration: Should identity theft or fraud occur, you have a dedicated Privacy Advocate to fully manage your recovery and restore

your identity. And since fraud doesn't take a holiday, our Privacy Advocate are available 24/7.

- › Identity Theft Reimbursement: You never have to worry about covering the costs of ID theft. Essential/Premier \$1 million identity theft insurance policy covers any out-of-pocket expenses, lost wages, or legal fees. Plus, we'll reimburse funds stolen from your bank, HSA and 401(k) accounts.

Plan Features	Essential	Premier
ID & Credit Monitoring	✓	✓
Dark Web Monitoring	✓	✓
\$1 Million Identity Theft Insurance Policy	✓	✓
Tri-Bureau Credit Alerts	●	✓
Court Records Scanning	●	✓

ID Theft Protection Monthly Premiums

	Essential	Premier
Employee Only	\$3.23	\$4.61
Family	\$5.99	\$8.76

[Download the Full Plan Summary](#) ↓



Pet Insurance

Nationwide

Plan Coverage	Essential	Plus	Elite
Annual Coverage Limit for Unexpected Accidents and Illnesses	\$5,000 - Unlimited	\$5,000 - Unlimited	\$5,000 - Unlimited
Annual Deductible Options	\$50 - \$1,000	\$50 - \$1,000	\$50 - \$1,000
Reimbursement Percentage Options*	70% - 90%	70% - 90%	70% - 90%
Accidents, Illnesses, Cancer, Hereditary Conditions, Emergency Surgeries & Rx Meds	✓	✓	✓
Accident & Illness Exam Fees associated with the diagnosis of your pet for an eligible injury or illness. This is not intended to cover routine exams		✓	✓
Rehabilitative, Acupuncture & Chiropractic Coverage to treat eligible injuries and illnesses			✓

Optional Routine Care

Available with BestBenefit plan only

Coverage to help pay for regular and expected veterinary visits. Please see Wellness Plans Summary for pricing information.

The price of the BestBenefit plans vary on location, age and breed of pet. As with all pet insurance companies, pre-existing conditions are not covered.

**50% and 60% reimbursement levels available in CA. Deductible up to \$2,000 available in CA.*

Coverage applies to conditions that are determined not to be pre-existing. Claim administration is subject to all terms, conditions, limitations and exclusions in the policy. Please review policy form for complete details.



Full Time Employees Cost of Coverage

January 1, 2025 - December 31, 2025

Employee Cost Per Pay Period

Medical - High Deductible Health Plans

Status	PEHP & SelectHealth HSA Plans
Employee Only	\$0
Family	\$0

Medical - Traditional Plans

Status	PEHP & SelectHealth Traditional Plans
Employee Only	\$71.76
Employee +1	\$157.62
Family	\$212.34

Dental

Status	Cigna
Employee Only	\$5.26
Employee + 1	\$6.74
Family	\$10.15

Vision

Status	VSP
Employee Only	\$3.58
Employee + 1	\$7.43
Family	\$11.51



Part Time Employees Cost of Coverage

January 1, 2025 - December 31, 2025

Employee Cost Per Pay Period

Medical - High Deductible Health Plans

Status	PEHP & SelectHealth HSA Plans
Employee Only	\$93.26
Family	\$267.89

Medical - Traditional Plans

Status	PEHP & SelectHealth Traditional Plans
Employee Only	\$143.51
Employee +1	\$315.23
Family	\$424.8

Dental

Status	Cigna
Employee Only	\$10.52
Employee + 1	\$13.48
Family	\$20.31

Vision

Status	VSP
Employee Only	\$3.58
Employee + 1	\$7.43
Family	\$11.51

