

Benefit Summary 2015

Helping you make informed choices about your employee benefits.



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Contact Information

Medical	SelectHealth	800.538.5038	www.selecthealth.org
Dental	EMI Health	800.662.5851	www.emihealth.com
Life and AD&D Insurance	Lincoln Financial Group	800.423.2765	www.lfg.com
Long-Term and Short-Term Disability	Lincoln Financial Group	800.423.2765	www.lfg.com
Flexible Spending Account	APA Benefits	801.561.4980	www.apachoicepoint.net
HSA	APA Benefits	801.561.4980	www.apachoicepoint.net
Vision	VSP	800.877.7195	www.vsp.com
Accident	Allstate	800.348.4489	www.allstateatwork.com/mybenefits
Employee Assistance Program	Intermountain Healthcare	800.832.7733	www.intermountainhealthcare.org/eap
Benefits Coordinator	Heather Sundquist	801.944.7022	hsundquist@ch.utah.gov
Broker – Arthur J. Gallagher & Co.	Leah Dunn	801.559.2946	leah_dunn@ajg.com

If you have general insurance questions, or questions on how the plan works, please refer to this benefit guide, your Summary of Benefits and Coverage (medical only) or contact your Benefits Coordinator. If you are having claims issues, need help finding a provider, or need preauthorization, contact the applicable insurance carrier as they are able to resolve most questions and issues within a single phone call. For more advanced claims issues, please contact your Benefits Coordinator or Leah Dunn at Arthur J. Gallagher.



Benefits Overview

Cottonwood Heights City is proud to offer a comprehensive benefits package to eligible, full-time employees who work 40 hours per week and part-time employees are offered all but medical. The complete benefit package is briefly summarized in this booklet.

You share the costs of some benefits (medical and dental), and Cottonwood Heights City provides other benefits at no cost to you (life, accidental death & dismemberment, EAP and disability). In addition, there are voluntary benefits with reasonable group rates that you can purchase through Cottonwood Heights City payroll deductions.

Benefits Offered

- » Medical
- » Dental
- » Vision
- » Life Insurance
- » Accidental Death & Dismemberment (AD&D) Insurance
- » Voluntary Life and AD&D
- » Short-Term Disability
- » Long-Term Disability
- » Flexible Spending Account (FSA)
- » EAP
- » Accident

Eligibility

You and your dependents are eligible for Cottonwood Heights City benefits on the first of the month following date of employment.

Eligible dependents are your spouse, domestic partner, children under age 26, disabled dependents of any age, or Cottonwood Heights City eligible dependents. Elections made now will remain until the next open enrollment unless you or your family members experience a qualifying event. If you experience a qualifying event, you must contact your Benefits Coordinator within 30 days.

Qualifying Events

- » Marriage, divorce or legal separation.
- » Addition of a dependent child through birth, adoption or a change in legal custody.
- » Death of a spouse or dependent.
- » Loss of other coverage.

Medical Benefits

Administered by SelectHealth

Comprehensive and preventive healthcare coverage is important in protecting you and your family from the financial risks of unexpected illness and injury. A little prevention usually goes a long way—especially in healthcare. Routine exams and regular preventive care provide an inexpensive review of your health. Small problems can potentially develop into large expenses. By identifying the problems early, often they can be treated at little cost.

Comprehensive healthcare also provides peace of mind. In case of an illness or injury, you and your family are covered with an excellent medical plan through Cottonwood Heights City.

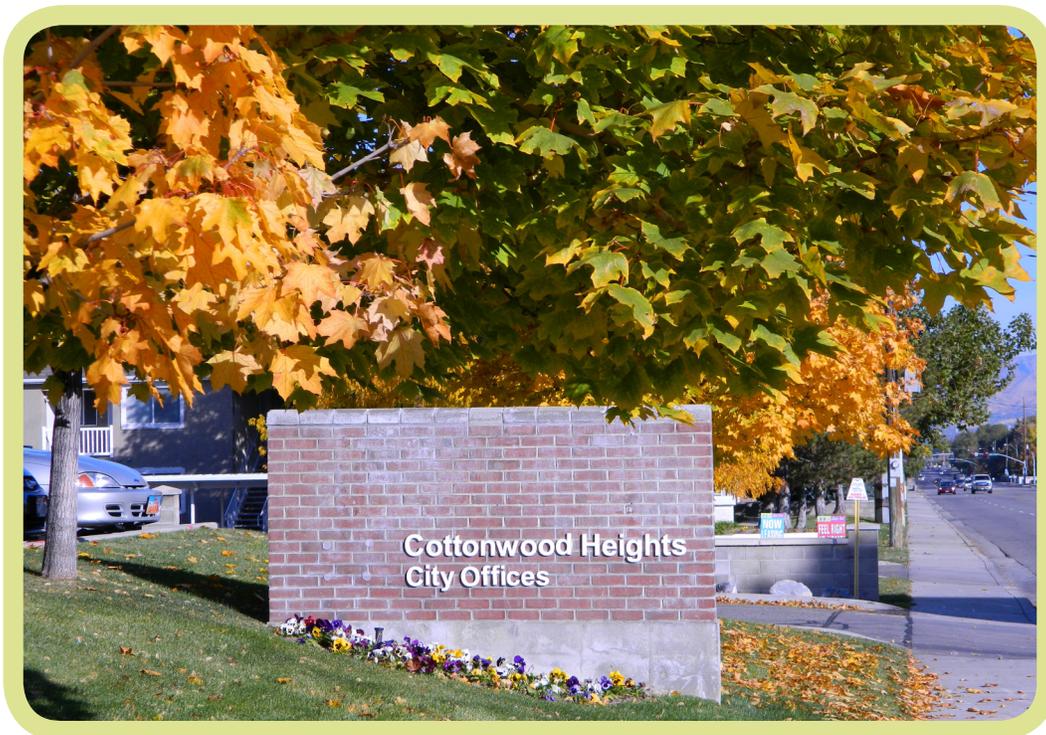
Cottonwood Heights City offers you a choice of an additional PPO medical plan and a High Deductible Health Plan (HDHP).

With the other plan, you may select where you receive your medical services. If you use in-network providers, your costs will be less.

The amount the plan pays for covered services provided by non-network providers is based on a maximum allowable amount for the specific service rendered. Although your plan stipulates an out-of-pocket maximum for out-of-network services, please note the maximum allowed amount for an eligible procedure may not be equal to amount charged by your out-of-network provider. Your out-of-network provider may bill you for the difference between the amount charged and the maximum allowed amount. This is called balance billing and the amount billed to you can be substantial. The out-of-pocket maximum outlined in your policy will not include amounts in excess of the allowable charge and other non-covered expenses as defined by your plan. The maximum reimbursable amount for non-network providers can be based on a number schedules such as a percentage of reasonable and customary or a percentage of Medicare. Contact your claims payer or insurer for more information. The plan document or carrier's master policy is the controlling document, and this Benefit Highlight does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual plan language.

Health Insurance Waiver

An employee that has available alternate, comparable health insurance coverage, through an employee's spouse or otherwise, has the option to decline and waive medical insurance and have the city use a portion of the premium saving resulting from that waiver for additional contributions to a retirement account, HSA, or be paid out. An employee must show proof of insurance coverage. For FY 2015–2016, the amount of contribution is equal to the amount the City pays for single coverage on the \$1,300 deductible plan.



	Traditional PPO — Select Med +		High Deductible HSA — Select Med +	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Lifetime Benefit Maximum	Unlimited		Unlimited	
Annual Deductible	\$750 / \$1,500	\$1,500 / \$3,000	\$1,300/\$2,600	\$1,550 / \$3,100
Annual Out-of-Pocket Maximum (includes deductible)	\$2,000 / \$4,000	\$4,000 / \$8,000	\$2,500/\$5,000	\$4,000 / \$8,000
Coinsurance	20% after deductible	40% after deductible	20% after deductible	40% after deductible
Office Visits				
Primary Care Provider	\$25	40% after deductible	\$15 after deductible	40% after deductible
Secondary Care Provider (SCP)	\$45	40% after deductible	\$25 after deductible	40% after deductible
Chiropractic (15 visits per year) Not applied to Medical out-of-pocket maximum.	\$20	Not Covered	Not Covered	Not Covered
Preventive Care				
Primary Care Provider (PCP) Secondary Care Provider (SCP) Adult and Pediatric Immunizations Elective Immunizations Diagnostic Tests: Minor	100% Covered	Not Covered	100% Covered	Not Covered
Emergency Room	\$200 after deductible	\$200 after deductible	\$75 after deductible	\$75 after deductible
Inpatient Medical, Surgical and Hospice Maternity and Adoption Rehab Therapy: (Physical, Speech, Occupational- Up to 40 days per calendar year for all therapy types combined)	20% after deductible	40% after deductible	20% after deductible	40% after deductible
Outpatient Surgery, Ambulance, Home Health, Hospice, Private Nurse, Rehab Therapy: (Physical, Speech, Occupational- Up to 20 visits per calendar year for each type)	20% after deductible	40% after deductible	20% after deductible	40% after deductible
Urgent Care	\$50	40% after deductible	\$35 after deductible	40% after deductible
Kids Care	\$25	40% after deductible	\$15 after deductible	40% after deductible
Mental Health and Chemical Dependency				
Office visit	\$25		\$15 after deductible	
Inpatient	20% after deductible	40% after deductible	20% after deductible	40% after deductible
Outpatient	20%		20% after deductible	
Injectable Drugs & Specialty Meds	20% after deductible		20% after deductible	
Prescription Drugs — Up to 30 day supply of covered medications				
Tier 1		\$15		\$7 after deductible
Tier 2		\$30		\$21 after deductible
Tier 3		\$50		\$42 after deductible
Tier 4		\$100		\$100 after deductible
Maintenance Drug Benefit — 90 day supply (Medco by Mail or Retail90) — Selected drugs				
Tier 1		\$15		\$7 after deductible
Tier 2		\$60		\$42 after deductible
Tier 3		\$150		\$126 after deductible

Employee Contributions Per Pay Period	Traditional PPO	High Deductible HSA
Single	\$52.27	\$35.97
Two-Party	\$109.90	\$75.45
Family	\$166.30	\$100.70

Health Savings Account (HSA)

Administered by APA Benefits

Your Health Savings Account (HSA) is a personal savings account that works in conjunction with the High-Deductible Health Plan being offered by SelectHealth. You can use your HSA to pay for current and future qualified medical expenses—tax free.

Increase Your Healthcare Buying Power

Employees may make contributions to their own HSA. Because the money you contribute to your Health Savings Account is tax-deductible, using your HSA to pay for qualified medical expenses—from doctor's fees and dental work to prescription and over-the-counter medications—can help maximize your healthcare buying power! The company will contribute a base amount without any commitment from the employees to contribute their own dollars to their HSA.

Cottonwood Heights City Annual Contribution*		2015 IRS Allowed Maximum Annual Funding	
Single	\$600	Single	\$3,350
Two-Party	\$1,200	Two Party / Family	\$6,650
Family	\$1,200	55+ Catch-Up	\$1,000

*Contributions will be prorated for new hires. The city will be depositing HSA funds throughout the year: single= \$50 a month, 2-party-family= \$100 a month.

You can change HSA election as often as necessary and you don't have to contribute the funds in a lump sum. The funds you elect will be made through pretax payroll deductions. The more you contribute, the more you have available to pay for medical expenses on a tax-favored basis. The annual contribution limits run on a calendar year from January through December.

HSA Funding

In 2015 the maximum amount the IRS allows you to contribute to your HSA is \$3,350 for a single and \$6,650 for family coverage, but you don't have to contribute it as a lump sum. Employees age 55+ may contribute \$1,000 catch-up contribution. You can contribute to pay for medical expenses on a tax-favored basis. The annual contribution limits run on a calendar year from January through December.

Convenient Payment Option

With a swipe of your HSA debit card, you can pay for prescriptions, doctor visits, dental expenses and more. Funds will automatically be deducted from your HSA.

HSA = Health Savings Account

HDHP = High Deductible Health Plan

Now, let's show what happens when you visit your provider.

As usual, you present your ID card to the provider, who submits a claim on your behalf to SelectHealth. Next, SelectHealth determines how much the plan will pay in network discounts and covered expenses. If you owe money, you may use your tax-advantaged HSA to pay for the expenses if funds are available. You and your provider will receive a health statement confirming how the expenses were paid.

How Does an HSA Work?

Each time you visit your physician, pharmacy or hospital, give the provider your HDHP health insurance card. The charges for each of those visits will be submitted to your health insurance carrier and eligible charges will be applied to your annual deductible. Upon receipt of your Explanation of Benefits (EOB) from the health insurance carrier, which details the negotiated network discount on your medical visit, you pay the provider using the pretax money set aside in your HSA. When picking up a prescription from the pharmacy, present your HDHP health insurance card. The pharmacy will apply the SelectHealth discount and then you pay the pharmacy using your HSA debit card. The amount you pay will then be applied to your deductible.

Once your single or family deductible has been satisfied, your physician visits, hospital claims and pharmacy charges will be processed by your health insurance plan and you will pay coinsurance or pharmacy copay. You can pay these charges using your HSA debit card as long as you have a balance in your HSA.

Keep in mind, all the money left in your HSA at the end of the year each year rolls over. This allows you to accumulate—tax-free—a nest egg for future medical expenses.

HDHP Components

Annual Deductible—Amount that needs to be satisfied before health coverage begins. If you are enrolled on a plan with single coverage, you must satisfy single deductible. If you are enrolled on a plan with your spouse and/or child(ren) you must satisfy the family deductible.

Out-of-Pocket Maximum—The maximum amount your health insurance plan will require you to contribute out-of-pocket towards the cost of your care per calendar year (excluding cost of premiums). This protects you and your family from very high costs by capping the total amount you will have to spend on healthcare annually.

Preventive Care—Your preventive care is free and not subject to deductible for participating providers.

Pharmacy—Your pharmacy benefit is subject to your single/family deductible.

Who is eligible for an HSA?

Anyone who satisfies all of the following:

- » Covered by a Qualified High Deductible Health Plan (HDHP);
- » Not covered under another medical plan that is not a HDHP;
- » Not entitled to Medicare benefits; and
- » Not eligible to be claimed on another person's tax return.



Group Supplemental Accident Insurance

Insured by Allstate

An accidental injury can be costly, especially if you are financially unprepared. Your current medical coverage will help pay for expenses associated with an injury, but won't cover all of the out-of-pocket expenses you may face. Don't wait until you are rushed to the emergency room to realize you need more protection.

Base Accident Benefits	
Accidental Death	
Employee	\$40,000
Spouse	\$20,000
Child	\$10,000
Common Carrier Accidental Death	
Employee	\$200,000
Spouse	\$100,000
Child	\$50,000
Dismemberment	
Employee	up to \$40,000
Spouse	up to \$20,000
Child	up to \$10,000
Dislocation or Fracture	up to \$4,000
Hospital Confinement	\$1,000
Daily Hospital Confinement	\$200
Intensive Care	\$400
Ambulance	
Regular Ambulance	\$200
Air Ambulance	\$600
Accident Physician Treatment	\$100
X-ray*	\$200
Emergency Room Services	\$200
Benefit Enhancements	
Lacerations	\$50
Burns	
< 15% of body surface	\$100
> 15% or more	\$500
Skin Graft (% of Burns Benefit)	50%
Brain Injury Diagnosis	\$150
Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI)	\$50
Paralysis	
Paraplegia	\$7,500
Quadriplegia	\$15,000
Coma with Respiratory Assistance	\$10,000
Open Abdominal or Thoracic Surgery	\$1,000
Tendon, Ligament, Rotator Cuff of Knee Cartilage Surgery	
Surgery	\$500
Exploratory	\$150
Ruptured Disc Surgery	\$500
Eye Surgery	\$100
General Anesthesia	\$100
Blood and Plasma	\$300

The annual contribution limits run on a calendar year from January through December.

Appliance	\$125
Medical Supplies	\$5
Medicine	\$5
Prosthesis	
One Device	\$500
Two or More	\$1,000
Physical Therapy	\$30
Rehabilitation Unit	\$100
Non-Local Transportation	\$400
Family Member Lodging	\$100
Post-Accident Transportation	\$200
Accident Follow-Up Treatment	\$50
Additional Rider Benefit	
Outpatient Physician's Benefit	\$100
Loss of Life or Limb	
Life, or both eyes, hands, arms, feet, or legs, or one hand or arm and one foot or leg	\$40,000
One eye, hand, arm, foot, or leg	\$20,000
One or more entire toes or fingers	\$40,000
Complete Dislocation	
Hip Joint	\$4,000
Knee or ankle joint, bone or bones of the foot	\$1,600
Wrist joint	\$1,400
Elbow joint	\$1,200
Shoulder joint	\$800
Bone or bones of the hand, collarbone	\$600
Two or more fingers or toes	\$280
One finger or toe	\$120
Complete, Simple or Closed Fracture	
Hip, thigh (femur), pelvis	\$4,000
Skull	\$3,800
Arm, between shoulder and elbow (shaft), shoulder blade (scapula), leg (tibia or fibula)	\$2,200
Ankle, knee cap (patella), forearm (radius or ulna), collarbone (clavicle)	\$1,600
Foot, hand or wrists	\$1,400
Lower jaw	\$800
Two or more ribs, fingers or toes, bones of face or nose	\$600
One rib, finger or toe, coccyx	\$280

Rates

	Cost per check
Employee	\$6.44
Employee + children	\$9.77
Employee + spouse	\$15.08
Family	\$18.88

Dental Benefits

Administered by EMI Health

	In-Network Advantage Plus Network	In-Network Premier Network	Out-of-Network
Type 1 — Preventive (Oral Exams, Cleanings, X-rays, Fluoride)	100%	100%	100%
Type 2 — Basic (Fillings, Oral Surgery)	80%	80%	80%
Type 3 — Major (Crowns, Bridges, Prosthodontics)	50%	50%	50%
Type 4 — Orthodontics			
Dependent children up to age 19	50%	50%	50%
Adults	No coverage	No coverage	No coverage
Orthodontic Discount (all members)	25% discount	25% discount	No discount
Endodontics	Type 2—Basic	Type 2—Basic	Type 2—Basic
Periodontics	Type 2—Basic	Type 2—Basic	Type 2—Basic
Sealants	Type 2—Basic	Type 2—Basic	Type 2—Basic
Space Maintainers	Type 2—Basic	Type 2—Basic	Type 2—Basic
Specialists	Paid same as General Dentists		
Waiting Periods	None		
Deductible			
Per person	\$0	\$0	\$50
Family Max	\$0	\$0	\$150
Deductible Applies To	N/A	N/A	Type 2 and Type 3
Annual Maximum Per Person	\$2,000 All maximums are combined up to limits above	\$2,000 All maximums are combined up to limits above	
Orthodontics Lifetime Maximum	\$1,500		
Network/Reimbursement Schedule	Advantage Plus	Premier	Premier

Provisions/Limitations/Exclusions

Exams (including Periodontal), Cleanings and Fluoride	2 per year
Fluoride	Up to age 16
Sealants	Up to age 16
Space Maintainers	Up to age 16
Bitewing X-Rays	Up to 4, twice per year
Periapical X Rays	6 per year
Panoramic X-Ray	1 every 3 years
Impacted Teeth	Covered in Type 2—Basic

Provisions/Limitations/Exclusions

Anesthesia — (Age 8 and over for the extraction of impacted teeth only)	Covered in Type 3—Major
Anaesthesia — (For children age 7 and under, once per year)	Covered in Type 3—Major
Implants	Covered in Type 3—Major
Crowns, Pontics, Abutments, Onlays, Dentures	1 every 5 years per tooth
Fillings on the same surface	1 every 18 months

Benefits illustrated are in summary only. Refer to your Dental Handbook for a complete description of benefits, limitations and exclusions. All services are to object to EMI Health Table of Allowances. When using a Non-participating Provider, the insured is responsible for all fees in excess of the Table of Allowances.

Employee Contributions Per Pay Period	Dental Plan
Single	\$4.56
Two-Party	\$9.65
Family	\$16.20

Vision Benefits

Administered by VSP

Regular eye examinations can not only determine your need for corrective eyewear but also may detect general health problems in their earliest stages. Protection for the eyes should be a major concern to everyone.

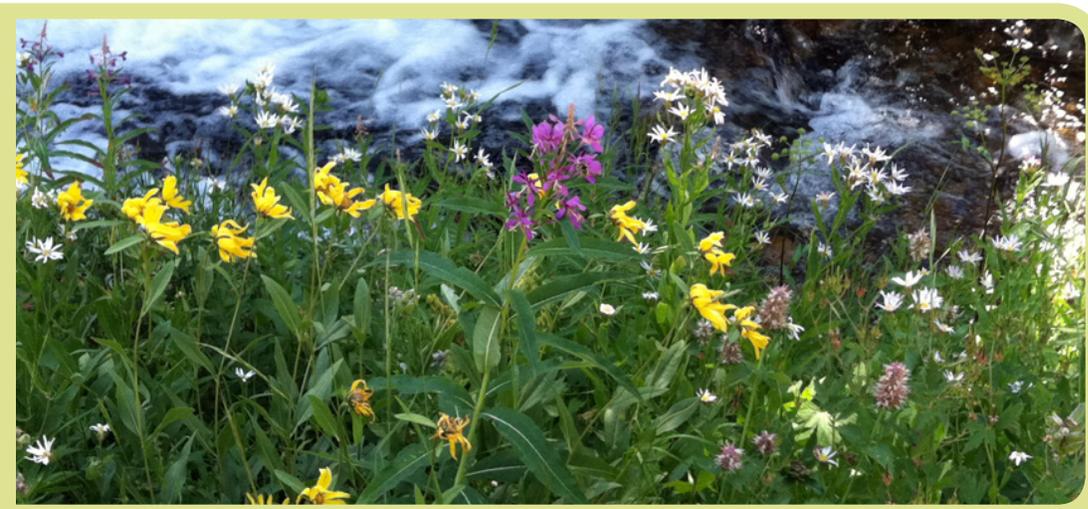
Your coverage from a VSP doctor:

Service	In-Network	Out-of-Network
Exam Copy	\$10	Up to \$45
Lenses		
Single	\$10	Up to \$30
Bifocal	\$10	Up to \$50
Trifocal	\$10	Up to \$65
Frames	\$130 Allowance, then 20% saving on the amount over the allowance.	Up to \$70
Contacts	\$130 Allowance, Up to \$60	Up to \$105
Frequency (Lens, Frames)	Once in 12 Months	Not covered
Laser Correction	15% off regular price, 5% off promotional price.	Not covered
Lens Options		
Progressive	\$55 Copay	Not covered
Premium	\$95 - \$105	
Custom Progressive	\$150 - \$175	
Other lens enhancements	20% - 25% discounts	

No need for an ID card. To take advantage of your VSP vision benefit, simply contact a VSP provider and let them know you have VSP coverage—they handle the paperwork for you.

Rates

	Cost per check
Employee	\$5.05
Employee + children	\$8.09
Employee + spouse	\$8.25
Family	\$13.31



Life and Accidental Death & Dismemberment Insurance

Insured by Lincoln Financial Group

Life Insurance

Life insurance provides financial security for the people who depend on you. Your beneficiaries will receive a lump-sum payment if you die while employed by Cottonwood Heights City. The company provides basic life insurance of \$50,000 at no cost to you. Your Spouse will receive \$10,000 and each of your children will receive \$10,000.

Accidental Death and Dismemberment (AD&D) Insurance

Accidental Death and Dismemberment (AD&D) insurance provides payment to you or your beneficiaries if you lose a limb or die in an accident. Cottonwood Heights City provides AD&D coverage of \$100,000 at no cost to you. This coverage is in addition to your company-paid life insurance described above if you participate in the medical plans offered by Cottonwood Heights City.

Voluntary Life

Insured by Lincoln Financial Group

You may purchase life insurance in addition to the company-provided coverage. You are guaranteed coverage of \$100,000 (\$40,000 for your spouse) without answering medical questions if you enroll when you are first eligible.

Employee—Increments of \$10,000; \$400,000 maximum amount, not to exceed 5x's salary.

Spouse—Increments of \$5,000; \$250,000 maximum amount

Children—\$10,000

Calculate Your Voluntary Supplemental Life Premium Per Pay Period

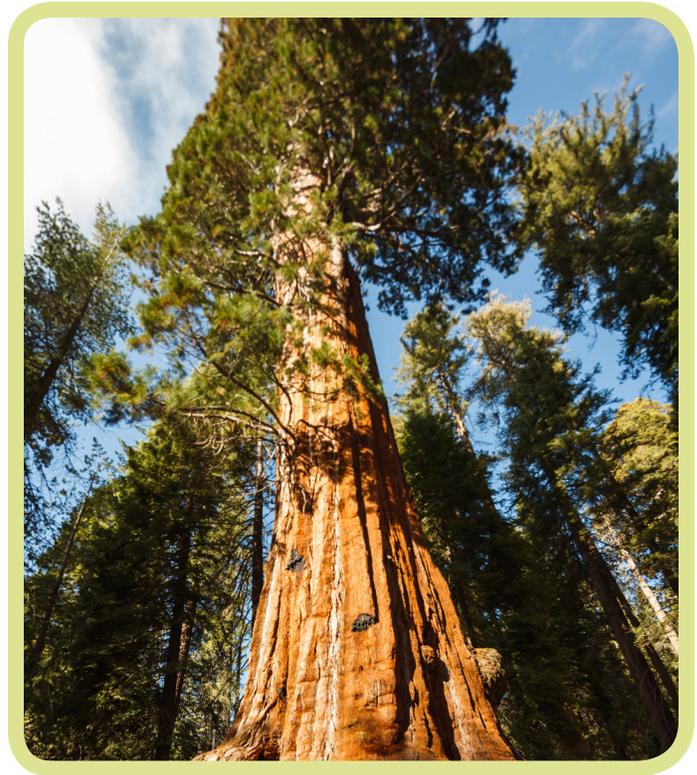
Supplemental Life Coverage Amount		Number of 1,000's	Rate from above			Premium Per Pay Period
Employee	/ 1,000 =		x		=	
Spouse	/ 1,000 =		x		=	
Child(ren)	/ 1,000 =		x		=	

Voluntary Supplemental Life Premiums Per Pay Period

Age	Employee Premiums Per Pay Period					Spouse Premiums Per Pay Period*			
	\$20,000	\$40,000	\$60,000	\$80,000	\$100,000	\$100,000	\$10,000	\$20,000	\$30,000
Under 30	\$0.50	\$1.00	\$1.50	\$2.00	\$2.50	\$0.25	\$0.50	\$0.75	\$1.00
30 - 34	\$0.54	\$1.08	\$1.62	\$2.16	\$2.70	\$0.27	\$0.54	\$0.81	\$1.08
35 - 39	\$0.76	\$1.52	\$2.28	\$3.04	\$3.80	\$0.38	\$0.76	\$1.14	\$1.52
40 - 44	\$0.92	\$1.84	\$2.76	\$3.68	\$4.60	\$0.46	\$0.92	\$1.38	\$1.84
45 - 49	\$1.75	\$3.50	\$5.25	\$7.00	\$8.75	\$0.88	\$1.75	\$2.63	\$3.50
50 - 54	\$2.10	\$4.20	\$6.30	\$8.40	\$10.50	\$1.05	\$2.10	\$3.15	\$4.20
55 - 59	\$3.35	\$6.70	\$10.05	\$13.40	\$16.75	\$1.68	\$3.35	\$5.03	\$6.70
60 - 64	\$5.69	\$11.38	\$17.07	\$22.76	\$28.45	\$2.85	\$5.69	\$8.54	\$11.38
65 - 69	\$5.69	\$11.38	\$17.07	\$22.76	\$28.45	\$2.85	\$5.69	\$8.54	\$11.38
70 - 74	\$5.69	\$11.38	\$17.07	\$22.76	\$28.45	N/A	N/A	N/A	N/A
75 - 79	\$5.69	\$11.38	\$17.07	\$22.76	\$28.45	N/A	N/A	N/A	N/A

Rates Per Pay Period Per \$1,000 of Coverage		
Age	Employee	Spouse*
Under 30	\$0.025	\$0.025
30 - 34	\$0.027	\$0.027
35 - 39	\$0.038	\$0.038
40 - 44	\$0.046	\$0.046
45 - 49	\$0.088	\$0.088
50 - 54	\$0.105	\$0.105
55 - 59	\$0.168	\$0.168
60 - 64	\$0.285	\$0.285
65 - 69	\$0.285	\$0.285
70 - 74	\$0.285	N/A
75 and over	\$0.285	N/A
Per Pay Period Dependent Life	\$0.50 per \$1,000 (rate is fixed regardless of number of children)	

Guaranteed Issue (GI)	
Employee	\$100,000
Spouse	\$40,000 (not to exceed 100% of the Employee's Election)
Children	\$10,000



Voluntary AD&D

Insured by Lincoln Financial Group

You may also purchase Voluntary Accidental Death and Dismemberment in addition to the company provided coverage. This coverage is separate from Voluntary Life insurance and it is not required to have Voluntary Life in order to enroll in Voluntary AD&D. See the election amounts available below.

Voluntary AD&D—100% Employee Paid

	\$50,000	\$100,000	\$150,000	\$200,000	\$250,000
Employee Only	\$0.92	\$1.84	\$2.76	\$3.68	\$4.60
Employee + Family	\$1.24	\$2.48	\$3.72	\$4.96	\$6.20

Calculate your Voluntary Accident Death and Dismemberment Premium per pay period

AD&D Coverage Amount	Number of 25,000's	Premium per Pay Period
Employee Only	\ 25,000 =	x 0.46 =
Employee + Family	\ 25,000 =	x .62 =

Short-Term Disability Insurance (STD)

Administered by Lincoln Financial Group

Short-Term Disability (STD) insurance provides income if you become disabled due to an injury or illness. Benefits begin on the 15th day of any injury, hospitalization or illness and can continue for up to 12 weeks.

Benefit Amounts — 60% of weekly covered earnings.

Benefit Maximum — \$1,000 per week.

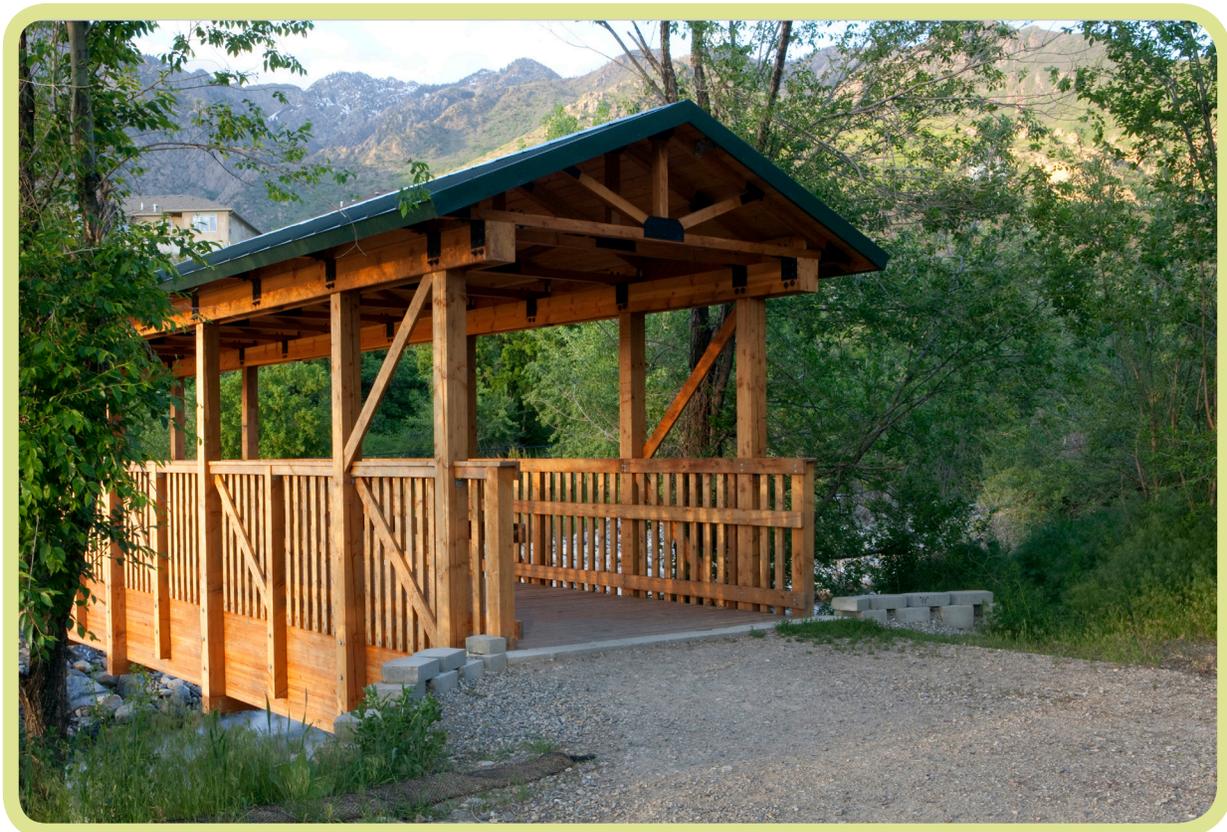
Please see your Benefits Coordinator for more details.

Long-Term Disability Insurance (LTD)

Insured by Mutual of Lincoln Financial Group

Meeting your basic living expenses can be a real challenge if you become disabled. Your options may be limited to personal savings, spousal income and possibly Social Security. Disability insurance provides protection for your most valuable asset—your ability to earn an income. Cottonwood Heights City provides Long-Term Disability insurance (LTD) coverage for you at no cost.

LTD coverage provides income when you have been disabled for 90 days or more. Your benefit is 60% of your monthly earnings, up to \$6,000 per month. This amount may be reduced by other deductible sources of income or disability earnings. Benefit payments can continue to age 65 if you are under age 60 at the time of disability.



Flexible Spending Accounts (FSAs)

Administered by APA Benefits

You can save money on your health care and/or dependent day care expenses with an FSA. You set aside funds each pay period on a pre-tax basis and use them tax-free for qualified expenses. You pay no federal income or Social Security taxes on your contributions to an FSA. (That's where the savings comes in.) Your FSA contributions are deducted from your paycheck before taxes are withheld, so you save on income taxes and have more disposable income.

Healthcare Spending Limit \$2,550

Dependent Care Spending Limit \$5,000

Here's How an FSA Works

1. You decide the annual amount (up to \$2,550 for Healthcare and \$5,000 for Dependent Care) you want to contribute to either or both FSAs based on your expected health care and/or dependent childcare/elder care expenses.
2. Your contributions are deducted from each paycheck before income and Social Security taxes, and deposited into your FSA.
3. You can pay with the Health Care FSA debit card for eligible health care expenses. For dependent care, you pay for eligible expenses when incurred, and then submit a reimbursement claim form or file the claim online.
4. You are reimbursed from your FSA. So, you actually pay your expenses with tax-free dollars



Intermountain Healthcare Employee Assistance Program (EAP) - 100% Company Paid

What is an Employee Assistance Program? (EAP)

An Employee Assistance Program provides short-term, confidential counseling for you, your spouse or significant other and dependent children regardless if they are covered under your health insurance plan at no out-of-pocket expense to you.

Is it Confidential?

Yes, all discussions between you and the EAP counselor are confidential. Personal information is never shared with anyone (including Cottonwood Heights) at any time without your direct knowledge and approval. Exceptions are made only in cases governed by law to protect individuals threatened by violence.

Employee Assistance Program counselors are experienced, caring professionals who hold a Master's degree in counseling or a related field. They are certified or licensed by the appropriate state agency.

Counselors use a solution-focused therapy model and teach you how to resolve your unique problem while providing caring support along the way.

The entire cost of EAP services is covered in a monthly fee paid by Cottonwood Heights. All EAP services are free to you with no Co-pay or deductible required.

Each household member is entitled to unlimited face-to-face visits per incident. Should you elect to receive mental health services through your medical benefit, Intermountain will not absorb the cost.

Setting up an appointment is as simple as calling the office. You will be offered an appointment time, generally within a couple working days of your initial call. Crisis cases are seen the same day, generally within two hours. No paperwork or approval is needed and there is no charge. Counselors are available around the clock for emergency and crisis situations.

Seeking help early minimizes the chances of problems escalating and requiring more extensive services. Often, a few visits with a counselor are all you need to gain perspective and regain a sense of control over your life.

Call **1.800.832.7733**

Or visit www.eap@intermountainmail.org

To reach an EAP Representative Call **1.800.832.7733**

All services are free and accessible 24 hours a day, 365 days a year.

The EAP is your resource for everything - from the everyday to the unexpected.

At times, we can all use help with a personal problem or issue that is interfering with our life or work. Most people experience personal or family challenges in the course of their lives. Our professional counselors are available to discuss the issues you face in your life, including:

Life Changing Birth/Adoption	Legal Advice Finances
Child Care Parenting	ELder Care Relationships
Family Conflicts Stress	Grief Aging
Depression Job Pressures	Drugs/Alcohol Eating Disorders

Workers Compensation

Who is eligible?

All employees are eligible for Workers Compensation.

When am I eligible?

Eligibility begins the first day of employment.

5. All employees are covered by workers compensation, which provides medical reimbursement and disability benefits for job-related illness or injury. For exact coverage, check the workers compensation contract on file with the Administrative Services Director. Worker's compensation claims may not be filed with the insurer of the City's regular health insurance plan.
6. Employees may use PTO or other compensatory time to bridge the difference between workers compensation benefits and base pay.
7. Medical Attention. An employee who sustains a bona fide, on-the-job injury should seek medical attention from FIRST MED, located at 1950 East 7000 South, or the nearest emergency room if necessary. The employee MUST inform the medical provider HOW, WHEN and WHERE the injury occurred.
8. Initial Reporting of Illness or Injury. Reporting the accident or illness is critical to qualification for payment under workers compensation. If an employee is injured while on the job, no matter how minor, the circumstances should be reported to the supervisor immediately. Administrative Services will provide paperwork to all Department heads that must be completed and sent back to HR within 24 hours of the injury.
9. Reporting While Off the Job. While on leave because of a bona fide, on-the-job injury or illness, the employee must contact his supervisor or the City Manager on a weekly basis to report on his condition. Failure to provide the required medical status reports may result in revocation of the leave and/or immediate termination of employment.
10. Return to Service after a Workers Compensation Claim. A statement from the attending physician stating that the employee is able to resume normal duties will be required before the City will allow the employee to return to work. An injured employee must return to work promptly after such physician approval is received. Failure to return to work when directed may result in disciplinary action, up to and including termination. An employee who is able to return to work on light duty status may be required to work in a different department and perform duties not contained within his current job classification.
11. If no vacancy exists at the time of final release or settlement of a workers compensation claim, and if the City is unable (despite reasonable efforts) to place the employee in another position, the employee may be terminated and paid any accrued benefits then due.

COBRA

The consolidated Omnibus Budget Reconciliation Act (COBRA) of 1986 gives workers and their families who lose their health benefits the right to choose to continue group health benefits provided by their group health plan for limited periods of time under certain circumstances such as voluntary or involuntary job loss, reduction in the hours worked, transition between jobs, death, divorce and other life events. Qualified individuals may be required to pay the entire premium for coverage up to 102 percent of the cost of the plan. Cottonwood Heights offers Medical, Dental, Vision and sometimes FSA as COBRA benefits. When you enroll in any of these group health benefits, you will receive an "initial cobra notice" in the mail and when you term any of these benefits, you will receive a "cobra election notice" in the mail.

If you have any additional questions, please see your Benefits Coordinator.

Utah State Retirement System

Who is eligible?

All appointed and regular employees. Part-time employees working over 20 hours a week, excluding some officials, are eligible for the Utah Retirement System (URS). Appointed and elected employees who began working before July 1, 2011 may be eligible to opt out of the URS. Those employees who choose to opt out of the URS will receive their retirement into a 401(k) account. Seasonal and part-time (less than 20 hours per week) employees are not eligible for the URS. In the Utah Retirement System, separate divisions exist for Police Officers, Firefighters and Public employees. Police employees must be employed for 40 or more hours a week to be eligible for the program. All other eligible employees must work an average minimum of 20 hours per week.

The amount of benefit paid is determined by your hire date, age, years of service credit, final average salary, and a benefit formula designed by the Utah Retirement System. The URS has designated two categories of employees according to enrollment date. Once you are enrolled in the URS as either a Tier 1 or a Tier 2 employee, you will keep that designation, even if you stop working for a participating employer for a period of time and then return at a later date.

URS ACCOUNT ACCESS: To access your Utah Retirement System account, go to www.urs.org. You can login to my URS which will display your years of service and account information. You can also view account statements, update your address and beneficiaries and print forms.

TIER 1 EMPLOYEES: Employees initially enrolled in the Utah Retirement System before July 1, 2011 are classified as Tier 1 employees. The City will pay the full URS Tier 1 rate for eligible employees. All City employees are enrolled in the Noncontributory System.

NONCONTRIBUTORY SYSTEM: If you leave employment covered by the Utah Retirement System, you are not eligible for a refund, but your retirement funds will remain in your account and you will receive a benefit when you retire. Benefits are vested after four years of service.

TIER 2 EMPLOYEES: Employees initially enrolled in the Utah Retirement System on or after July 1, 2011 are classified as Tier 2 employees. The City will pay the required URS Tier 2 rate for eligible employees. Tier 2 employees may choose between a defined contribution or a hybrid plan which are described below. Employees have one year after employment begins to make this irrevocable choice of plans.

DEFINED CONTRIBUTION PLAN: The full City contribution will be put into a 401(k) account administered by the URS. Employees may elect to make voluntary contributions as well. Employees in this plan become vested after four years of service.

HYBRID PLAN: This plan is a combination defined benefit (pension) and defined contribution. As long as the defined benefit rate remains below 10 percent for public employees, employees will receive the difference between the 10 percent of the required contribution rate into a 401(k) account administered by the URS. If the defined benefit rate reaches or exceeds 10 percent, employees will no longer receive any of this amount into a 401(k) account.

In addition, if the defined benefit rate exceeds 10 percent, employees will be required to pay the portion of the contribution amount above these rates. Employees on this plan may elect to make voluntary 401(k) contributions as well. Employees in this plan become vested after four years of service.

For additional information regarding your Utah Retirement System accounts, contact the URS or your Benefits Coordinator.

Employee Savings Plans:

Employees have the option to participate in a variety of retirement savings plans. These plans are available through the Utah State Retirement System and ICMA-RC. Contributions to your savings plan can be made through payroll deductions with pre-tax or post-tax dollars. There are several different options, and different funds which you can invest in. Please see Administrative Services for additional information.

ICMA-RC offers the following plan:

1. 457 Deferred Compensation Plan
2. Roth deferral provision to 457 Plan
3. Roth IRA
4. Traditional IRA

URS (Utah State Retirement) offers the following plans:

1. URS 401(k) Defined Contribution Plan
2. URS 457 Deferred Compensation Plan
3. Roth IRA
4. Traditional IRA

Paydays

Paydays for fiscal year 2014–15 are as follows:

July 10	November 13	March 18
July 24	November 27	April 1
August 7	December 11	April 15
August 21	December 25	April 29
September 4	January 8	May 13
September 18	January 22	May 27
October 2*	February 5	June 10
October 16	February 19	June 24
October 30	March 4	

*In months with three paychecks, benefit premiums will not be taken out of the first check.

Paid Holidays

Who is eligible?

Regular full-time employees working 40 hours per week and regular part-time employees at a pro-rated basis.

When am I eligible?

On date of hire.

BENEFIT: The City is closed in recognition of the listed scheduled holidays and provides time off with pay to its employees. A personal floating holiday is also available to the employees during each budget year. The floating holiday is not accumulated or vested past the end of the budget year or paid out upon termination.

Independence Day	July 3
Pioneer Day	July 24
Labor Day	September 7
Thanksgiving Day	November 26
Day After Thanksgiving	November 27
Christmas Day	December 25
Day Before Christmas	December 24
New Years Day	January 1
Martin Luther King Day	January 18
President's Day	February 15
Memorial Day	May 30
Floating holiday	as scheduled

Employees on duty for emergency services on designated holidays shall be compensated in accordance with the policy set forth in Section 13 of the Personnel Policies and Procedures manual dealing with overtime.

Police Department Employees: Due to the nature of scheduling in the Police Department, sworn employees will accrue holiday hours on a quarterly basis. Hours for the quarter will be added on the first day of the quarter and must be used by the end of the quarter in which accrued. Any holiday hours left on the books after the end of the quarter will be removed.

Hours will be accrued as follows:

First Quarter (July through September): 24 hours added July 1 to be used by December 31

Due to the number of holidays and Butlerville Days, schedule time is extended.

Second Quarter (October through December): 32 hours added October 1 to be used by December 31

Third Quarter (January through March): 24 hours added January 1 to be used by March 31

Fourth Quarter (April through June): 8 hours added April 1 to be used by June 30

Personal holiday: 8 hours added July 1 to be used at anytime during the year prior to the following June 30

Paid Time Off (PTO)

Who is eligible?

Regular full-time employees working 40 hours per week and regular part-time employees working a minimum of 20 hours per week accrue PTO on a pro-rated basis.

When am I eligible?

PTO accrual begins on the first paycheck.

It is the policy of Cottonwood Heights to provide Paid Time Off (PTO) for regular full-time and part-time, regular employees. PTO gives

you the flexibility to take time off from work for the reasons you choose. PTO leave can be utilized for planned leaves from work (including vacations) and unforeseen absences from work (including illness, emergencies and bereavement).

Vacations shall be scheduled well in advance so as to meet the operating requirements of the City and, insofar as possible, the preference of the employee. Employees are required to use 40 hours of PTO per fiscal year (part-time employees on a prorated basis). If they are not used you will be ineligible to participate in the PTO buyout. If you are in a situation where you are at risk of losing your PTO, you may use PTO prior to using accrued comp time. The management of your PTO hours is very important. If you utilize all your time for vacations and have not kept a reserve for unforeseen events, you may find yourself in a leave without pay situation which is subject to discipline, up to and including termination.

BENEFIT: For regular full time employees (benefit prorated for part-time employees based on their actual hours worked per week.)

Year of Service	Per Pay Period Accrual Rate	Maximum Accrual of Hours	Hours Vested at Separation
Less than 1	6.16	N/A	0
1 to 5	6.16	480	50%
6 to 10	7.39	480	65%
11 to 15	8.62	480	80%
16 and Over	9.85	480	80%

Computation

Note: Vesting does not begin until the completion of your first year and is based on an employee’s anniversary date.

5. PTO Usage Guidelines for Non Exempt Employees

- » All time off will be authorized by the employee’s immediate supervisor, preferably at least one week prior to the event, if possible.
- » PTO must be utilized in one hour increments, except in the situation where employees may fall less than an hour short of reaching their regularly scheduled hours. In that case PTO can then be used to make up the time in ¼ hour increments.
- » PTO must be accrued, meaning it has appeared on the previous paycheck prior to use. During an employee’s first year the city may grant use of unaccrued PTO time that would be accrued during the first year of employment. This exception must be approved by the employee’s supervisor and the City Manager.
- » Employees are allowed to go into arrears with PTO the first 12 months of employment as long as by the end of the 12-month period they are in the positive. If an employee has holiday leave or comp time on the books, that must be used prior to going in arrears.
- » Any deficit balance due to excess utilization of PTO at the end of the first year will be deducted from the final payroll if an employee is terminated or quits employment with the city.
- » Immediate supervisors may deny requests for leave based on scheduling needs of the department. Preference for requested leave may be given to employees who have a large amount of accrued PTO.
- » Excessive PTO usage that is not pre-authorized may require substantiation by the employee in the form of a doctor’s signed excuse for illness or some other type of evidence, at the discretion of the City Manager.

6. PTO Usage Guidelines for Exempt Employees

- » All time off will be authorized by the employee’s immediate supervisor, preferably at least one week prior to the event, if possible.
- » PTO may not be utilized in less than eight hour increments.
- » PTO must be accrued, meaning it has appeared on the previous paycheck prior to use. During an employee’s first year the city may grant use of unaccrued PTO time that would be accrued during the first year of employment. This exception must be approved by the employee’s supervisor and the City Manager.
- » Employees are allowed to go into arrears with PTO the first 12 months of employment as long as by the end of the 12-month period they are in the positive. If an employee has holiday leave or comp time on the books, that must be used prior to going in arrears.
- » Any deficit balance due to excess utilization of PTO at the end of the first year will be deducted from the final payroll if an employee is terminated or quits employment with the city prior to earning the required PTO to cover the deficit.
- » Immediate supervisors may deny requests for leave based on scheduling needs of the department. Preference for requested leave may be given to employees who have a large amount of accrued PTO.
- » Excessive PTO usage that is not pre-authorized may require substantiation by the employee in the form of a doctor’s signed excuse for illness or some other type of evidence, at the discretion of the City Manager.

PTO Buy Out

Full Time employees will be eligible to have PTO bought out by the City as per the following guidelines:

- » Leave year runs July 1 to June 30. On June 1 of each year employees must have used 40 hours of PTO in the prior 12 months to be eligible.
- » Employees must have more than 120 hours of PTO on the books as of June 1 to participate. The city will only purchase time accrued above the 120 hours.
- » The city will purchase up to 100 hours of PTO from the employee. This will be paid out according to the vesting schedule.

Part time employees can participate in this program as well but the part time employees cannot go below 60 hours on the books, and the city will only purchase up to 40 hours. All other program guidelines stated above must be followed.

Sworn Police Officer Vacation and Sick Pay

Vacation

Who is Eligible?

Regular full-time and part-time sworn employees accrue and are eligible to use accrued vacation leave.

Probationary sworn employees accrue vacation but are prohibited from using leave prior to completing one month of employment with Cottonwood Heights, **unless authorized by the Chief of Police.**

If a sworn officer has had his or her service date adjusted in accordance with current policy, the adjusted service date will be used for the purpose of determining the rate of vacation accrual.

Vacation Accrual

Full-time sworn employees shall accrue vacation according to the following schedule:

Years of Service	Per Month	Maximum Accrual of Hours
Less than 1	8	320
1 through 8	8	320
9 through 16	12	320
17 and over	16	320

Vacation leave accrual is capped at 320 hours. Vacation leave in excess of 320 hours, as of the last payroll in the fiscal year, shall be forfeited.

An employee who is terminated or resigns voluntarily shall be compensated for unused accrued vacation leave.

Sick Leave

Who is Eligible?

All regular full-time and part-time sworn employees accrue and are eligible to use accrued sick leave.

Accumulation of Sick Leave

- » Eligible sworn employees shall accumulate sick leave hours at the rate of eight (8) hours per month.
- » There is no limitation to the amount of sick leave that may be accrued and carried forward to succeeding years.
- » Sick leave shall not be accrued during a period in which the member has been granted leave without pay.

Use of Sick Leave

Sick leave may be used to cover a sworn employee's absence from work due to their own illness, medical condition, or injury. Sick leave may also be used to cover a member's absence from work to care for an ill or injured member of the member's immediate family based on FMLA eligibility.

Additional information can be found in the Personnel Manual.

Jury/Witness Duty

Who is eligible?

All employees.

Employees will be granted leave for jury or witness duty. If the jury or witness service is completed during regular work hours, an employee is expected to return to work upon completion of the service. The employee shall receive their regular pay when performing jury and witness duty and their PTO is not charged. Any income earned and received from jury or witness duty during an employee's scheduled working hours shall be turned over to the Finance Department for reimbursement to the City and the employee shall be paid at his/her current rate for the same period of time.

Military Leave

Who is eligible?

All employees.

Annual Military Leave—A regular employee shall be granted a leave of absence for active service in any branch of the armed forces of the state of Utah or the United States as provided in UTAH CODE ANN. §39-3-1, et seq. An employee who is entitled to a leave of absence under this provision shall on receipt of his orders promptly provide a copy of the relevant non-restricted portion of such orders to his supervisor and Administrative Services.

Employees hired BEFORE July 1, 2009: A regular employee shall be granted leave with compensation for work days lost while on active duty in the National Guard or in the armed forces reserves for the purpose required training or call to active duty. Paid military leave shall not exceed

90 hours in any one calendar year. (See UTAH CODE ANN. §39-3-2, et seq.) This benefit will remain in place during the employee's current military commitment. If the employee signs up for further military commitment, they will then transfer to the policy for employee hired after July 1, 2009.

Employees hired AFTER July 1, 2009: A regular employee shall be granted leave for work days while on active duty in the National Guard or in the armed forces reserves for the purpose of required training or call to active duty. Should employees be paid less by the Military than the City, then the City will make the employee whole by compensating the difference between the employee's regular pay and the military pay for up to 90 hours per calendar year (See UTAH CODE ANN. §39-3-2, et seq.). The employee must submit proof of military compensation to his supervisor in order to be compensated by the City.

Leave for Active Military Duty:

Employees serving in the uniformed services and ordered to active military duty under provisions of the Uniformed Services Employment and Reemployment Act (USERRA) will be granted military leave without pay for the period of required service including a reasonable amount of time to return from duty as prescribed by federal law. A copy of the order activating the employee shall be provided to the employee's supervisor along with a copy to the Human Resource office.

The vacated position may be temporarily filled during the employee's absence. After completing active duty the employee will return to service with the City in either the same position or a similar position within the same pay grade and scope of responsibility, if the employee meets the requirements of federal law. During the time of absence, the employee will continue to build seniority, and will not lose seniority obtained prior to the military leave.

Under provisions of USERRA, an employee reinstated under the foregoing provisions shall not be discharged from his/her position within one year after the reinstatement unless there is just cause for the discharge or there is a reduction in force.

Upon reinstatement to City employment, the employee shall be entitled to participate in the retirement, insurance and other benefit programs offered by the City pursuant to the established laws, rules and practices related to persons on leave of absence in effect at the time the reinstated employee commenced such active military service. This section shall not be construed to retain in office or in the employment of the City any person elected or appointed for a definite term of office, or any person appointed by or serving under a person elected or appointed for a definite term of office.

Employees serving on active duty with the armed forces are eligible to participate for 36 months following commencement of active duty leave of absence in the City-sponsored employee group health and accident insurance plan for themselves and dependents. However, the employee is responsible to timely pay the entire monthly premium without contribution by the City.

Appointed, regular and part-time employees may use accrued PTO, holiday or compensatory time or leave without pay for annual military leave or for active military duty.

Please check the employee manual for detailed information.

Administrative Leave Without Pay

Who is eligible?

All employees.

An employee may petition the City Manager to take a leave without pay. Any approval will be handled on a case by case basis.

Family and Medical Care Leave (FMLA)

Who is eligible?

Employees who have worked for the City for at least 12 months and who have worked at least 1,250 hours during the 12-month period prior to requesting a leave.

Benefit: Employees may request family leave for any of the following reasons:

- » To care for a child after birth or after an adoption or foster care placement (In this case, the leave must take place within 12 months of the birth, adoption, or placement for foster care)
- » To care for the employee's spouse, child, or parent with a serious health condition.
- » To meet the needs of a personal serious health condition.
- » Qualifying exigencies when employees spouse, child or parent is called to active duty.
- » Up to 26 weeks caregiver leave to spouse, child, parent or next of kin serving as the caregiver of an active-duty military member who suffered an injury or became ill in the line of duty.

How do I apply for Family Leave?

An employee with a foreseeable family leave (for example, the birth of a child) must provide the City with 30 days advance notice. In other situations, the employee should notify the City as soon as practical, usually within one or two business days. Family leave applications and other materials are available from the Human Resource Office.

How is Family Leave taken?

When taking Family and Medical Leave, the City will require you to use contemporaneously any accrued paid leave (PTO and compensatory time, holiday, etc.) Each employee is entitled to up to 12 weeks of unpaid leave during any 12-month period, minus any leave taken in the prior 12 months. The employee may take family medical leave all at once or may be eligible to take it in blocks. If the employee and spouse both work for the City, they may request a combined total of up to 12 weeks of unpaid leave each year, if the leave is required to:

- » Care for a child following birth, adoption, or foster care placement; or Care for the employee's seriously ill parent. (The leave is not applicable to care for a spouse's parent.)

Otherwise, each employee is eligible for up to the full 12 or 26 weeks each year for an eligible FMLA reason.

How does Family Medical Leave affect my benefits?

For an employee on family leave, medical, dental, and life insurance benefits will continue. If an employee goes on unpaid leave during FMLA they are responsible to repay their portion of the health insurance premiums. Payment plans can be arranged with the Finance Department.

The employee's participation in these plans ends if the employee:

1. Notifies the City that he/she does not intend to return to work.
2. Fails to return from leave
3. Comes to the end of the leave period; or
4. Fails to pay the required premiums

In some cases, the employee can continue coverage under the provisions of COBRA.

What happens when I return to work?

The purpose of a family or medical leave is to ensure that the employee can take care of pressing personal situations. Therefore, the FMLA also includes provisions that protect the employee's job. In brief, he cannot be discriminated against for requesting an FMLA leave. When he returns to work, under most circumstances he must be restored to his original job or, if that is not possible, to an equivalent job with equal pay, benefits and other terms and conditions of employment.

What if I do not return to work?

If you do not return to City service after the expiration of Family and Medical Leave, you will be required to repay the City for any City-paid benefit contributions made for you during the qualified unpaid leave period unless the reason you do not return to work is (1) the continuation, reoccurrence, or onset of a serious health condition that entitles you to leave to care for a child, parent or spouse with a serious health condition, or if you are unable to perform the functions of your position due to your own serious health condition or (2) other conditions beyond your control that prevent you from returning. If you choose not to return to work, and do not meet the conditions listed above, the City will commence legal proceedings to obtain reimbursement for City-paid benefit contributions.

Please check the employee manual for detailed information

Tuition Reimbursement

Who is eligible?

Regular full-time employees.

When am I eligible?

After an employee has passed initial probationary period of employment and has received a satisfactory or higher rating on their most recent performance review, with no unresolved disciplinary actions.

This program is to provide employees equitable financial assistance for courses of study which are directly related to the employees' current position or are beneficial to the City. The City Manager has sole discretion to determine coursework eligible for this program. Tuition reimbursement is subject to budgetary constraints and course eligibility. Employee work commitments must be addressed. The completion of coursework does not guarantee that the employee will advance or receive a pay increase.

Employees must be taking classes that meet one of the three defined eligibility requirements in order to qualify for Tuition Reimbursements:

- » Employee is enrolled in a program leading to a degree in a field relevant to their current position within the City.
- » The course of study or certification is required of the employee by the City.
- » Employee is not enrolled in a degree program but is taking on individual course work that is related to the employee's current job with the City.

School Eligibility

Undergraduate and graduate level courses must be taken for academic credit through colleges and universities accredited by the Northwest Association of Schools and Colleges, or an equivalent association to be eligible for reimbursement. The City recognizes the value of online learning to help balance education and work/life demands and will reimburse for these types of courses. In order for employees to receive a well rounded education it is required that for every two online courses, employees participate in one traditional classroom course. If your current school cannot meet these requirements we encourage you to transfer your credits to a program that does meet these conditions.

Application

To participate in this program an employee must complete the appropriate paperwork and submit it to their department head or designee 15 days prior to the beginning of class. Department heads or designee will review the request to ensure the employee scheduling is covered and that the class relates directly to the employee's current job, or a degree program relevant to their current position. Department heads or designee will then send the paperwork to Administrative Services no less than 10 days prior to the beginning of class. Human Resource will review to ensure the funding is available, and forward to the City Manager for final approval. Once the tuition reimbursement application has been approved, the employee will be notified.

1. Unless specific approval from the City Manager is obtained in advance, an employee may not take a course during scheduled working hours.
When the educational program requires class work during normal work hours, the employee and his/her supervisor must agree on such a schedule in advance and make necessary arrangements to assure that expectations for ongoing work assignments are met.
2. An eligible employee may receive reimbursement for tuition only. This policy does not cover costs for books, exams, travel, parking or other related student fees.

Reimbursement

1. The maximum reimbursement for all courses of study, including certification, career development and job-related graduate study, will not exceed \$2,000 per employee per fiscal year. Tuition costs will not be reimbursed for classes that have not been previously approved.
2. Reimbursement is based on satisfactory completion of the course. Satisfactory completion is defined as a final grade of "B-" or better. For classes graded by pass/fail criteria the employee must obtain a passing grade.
3. An employee eligible for reimbursement from another source (such as federal/state aid, scholarships, or grants) may seek assistance under the tuition reimbursement program, but reimbursement will only be approved for the difference between the amount received from the other funding source and the actual documented expense up to the City's allowed annual maximum.
4. Following successful completion of the course, employees wishing to be reimbursed must submit final grades and a copy of the receipt showing the class is paid. Employees need to attach to this form a copy of the final grade and expense receipts for tuition. Employees, who receive any financial support, as noted above, need to attach to their Reimbursement Request Form all documentation from the school of the amount received from each source of financial support, reflecting the time period the assistance applied to and what classes it applied to.

Expectation of the City

An employee who voluntarily terminates employment with the City within twelve (12) months of completing the course work for which they were reimbursed shall refund the entire amount of the reimbursement to the City. An employee who voluntarily terminates employment with the City from months 12 to 24 of completing the course work for which they were reimbursed shall refund 50% of the amount of the reimbursement to the City. Employees must sign the Deduction Authorization form prior to reimbursement granting the right to withhold any such amounts from final compensation due them.

Tax Implications

It is the understanding of the City that tuition reimbursement is excluded from gross income for income tax purposes. However, employees should refer to their own tax advisors to understand how the tax code affects them individually.

Cottonwood Height’s Recreation Membership

Who is eligible?

All Full-Time Employees.

When am I eligible?

At date of hire.

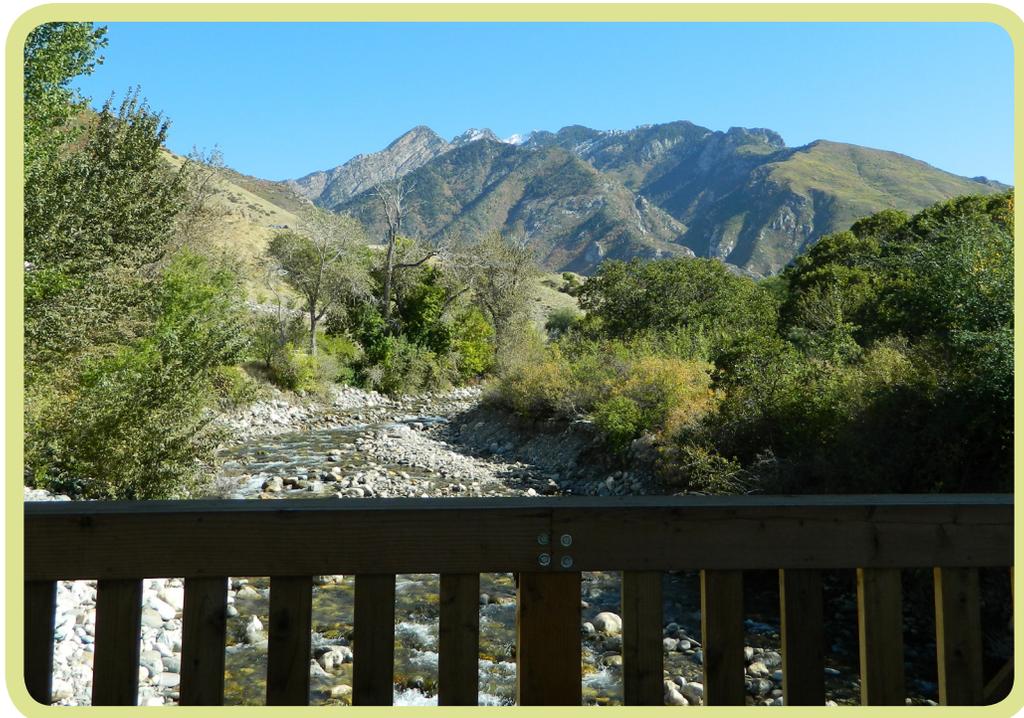
Benefit: The employee is eligible to join the Cottonwood Heights Recreation Center at a discounted price equal to one-half of the regular resident cost for an annual pass (subject to change). The prices listed below are for an annual membership. Three-month memberships are also available. Please call 801.943.3190 for those rates.

	Basic	Premium	Ultimate
Family Pass	\$112.50	\$157.50	\$212.50
Couple Pass	\$95.00	\$145.00	\$190.00
Single Pass	\$65.00	\$105.00	\$140.00

Death Benefits

Benefit: When an employee dies, the listed beneficiaries will be eligible for the following benefits from the City:

- » All applicable URS benefits including the employee’s pension and retirement funds
- » The employee’s life insurance.
- » Payment for PTO and compensatory time accrued will be paid to the designated life insurance beneficiaries.



Employee Contributions for Benefits

Benefit Plan	Per Paycheck Cost
HSA Plan	
Single	\$34.09
Two-Party	\$70.56
Family	\$95.44
Traditional Plan	
Single	\$48.24
Two-Party	\$101.51
Family	\$154.99
Dental	
Single	\$4.35
Two-Party	\$9.19
Family	\$15.43
Vision	
Single	\$5.05
Two-Party	\$8.09
Family	\$13.31
Accident—UNUM	
Employee (EE)	\$7.86
EE+Spouse	\$12.62
EE + Child	\$13.98
EE + Children	\$13.98
Family	\$18.73
Accident—Allstate	
Employee (EE)	\$6.44
EE+Spouse	\$9.77
EE + Children	\$15.08
Family	\$18.88

Voluntary Life—100% Employee Paid

Employee Premiums per Pay Period					
Age	\$20,000	\$40,000	\$60,000	\$80,000	\$100,000
Under 30	\$0.50	\$1.00	\$1.50	\$2.00	\$2.50
30 to 34	\$0.54	\$1.08	\$1.62	\$2.16	\$2.70
35 to 39	\$0.76	\$1.52	\$2.28	\$3.04	\$3.80
40 to 44	\$0.92	\$1.84	\$2.76	\$3.68	\$4.60
45 to 49	\$1.75	\$3.50	\$5.25	\$7.00	\$8.75
50 to 54	\$2.10	\$4.20	\$6.30	\$8.40	\$10.50
55 to 59	\$3.35	\$6.70	\$10.05	\$13.40	\$16.75
60 to 64	\$5.69	\$11.38	\$17.07	\$22.76	\$28.45
65 to 69	\$5.69	\$11.38	\$17.07	\$22.76	\$28.45
70 to 74	\$5.69	\$11.38	\$17.07	\$22.76	\$28.45
75 & Over	\$5.69	\$11.38	\$17.07	\$22.76	\$28.45

Spouse Premiums per Pay Period				
Age	\$10,000	\$20,000	\$30,000	\$40,000
Under 30	\$0.25	\$0.50	\$0.75	\$1.00
30 to 34	\$0.27	\$0.54	\$0.81	\$1.08
35 to 39	\$0.38	\$0.76	\$1.14	\$1.52
40 to 44	\$0.46	\$0.92	\$1.38	\$1.84
45 to 49	\$0.88	\$1.75	\$2.63	\$3.50
50 to 54	\$1.05	\$2.10	\$3.15	\$4.20
55 to 59	\$1.68	\$3.35	\$5.03	\$6.70
60 to 64	\$2.85	\$5.69	\$8.54	\$11.38
65 to 69	\$2.85	\$5.69	\$8.54	\$11.38
70 to 74	NA	NA	NA	NA
75 & Over	NA	NA	NA	NA

Notes

Notes

This benefit summary prepared by:



Arthur J. Gallagher & Co.



This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request.

The intent of this document is to provide you with general information regarding the status of, and/or potential concerns related to, your current employee benefits environment. It does not necessarily fully address all of your specific issues. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by your general counsel or an attorney who specializes in this practice area.