

## UNIFIED FIRE AUTHORITY BOARD BENEFITS & COMPENSATION COMMITTEE AGENDA

March 13, 2025, 8:00 a.m.

#### NOTICE IS HEREBY GIVEN THAT THE UNIFIED FIRE AUTHORITY BENEFITS AND COMPENSATION COMMITTEE SHALL ASSEMBLE BOTH ELECTRONICALLY AND IN-PERSON FOR A MEETING AT 3380 SOUTH 900 WEST, SLC, UT 84119

#### THE PUBLIC MAY ATTEND ELECTRONICALLY VIA ZOOM WEBINAR AT: https://zoom.us/j/91681046879?pwd=MEtoVmtwRG95ZFYrV0J3TUZtZUNBdz09 Webinar ID: 916 8104 6879 Passcode: 8675309

#### 1. <u>Call to Order</u> – Chair Silvestrini

2. <u>Public Comment</u>

Please limit comments to three minutes each. The UFA Benefits and Compensation Committee typically will not engage directly but may direct staff to address comments following the meeting.

There are three options for comments during this meeting:

- a. In-Person.
- b. Live during the Webinar by logging in as described above. If you wish to make a comment, select the "Raise Hand" button at the bottom of the screen. You will then be added to the queue and invited to speak.
- c. EMAIL: Public comments will be accepted prior to the meeting via email at <u>publiccomment@unifiedfire.org</u> until 7:00 a.m. March 12, 2025. Emailed comments submitted prior to 7:00 a.m. March 12, 2025, will be read or summarized into the record, comments received after the deadline will be forwarded to the UFA Benefits and Compensation Committee, but not read into the meeting record or addressed during the meeting.
- 3. <u>Minutes Approval</u> Chair Silvestrini
  - February 13, 2025
- 4. <u>FY25/26 Part-Time EMS Pay Plan</u> CFO Hill
- 5. <u>FY25/26 Seasonal Wildland Firefighter Pay Scale</u> CFO Hill
- 6. <u>Paramedic II Compression</u> Chief Burchett
- 7. <u>Member Fee Chart</u> Chief Burchett

- 8. <u>Insurance Review & Recommendation</u> HR Director Day/Gallagher
  - a. Health Insurance
  - b. Dental Insurance

#### 9. <u>Possible Closed Session</u>

The UFA Benefits and Compensation Committee may consider a motion to enter into Closed Session. A closed meeting described under Utah Code Section 52-4-205 may be held for specific purposes including, but not limited to:

- a. discussion of the character, professional competence, or physical or mental health of an individual;
- b. strategy sessions to discuss pending or reasonably imminent litigation;
- c. strategy sessions to discuss the purchase, exchange, or lease of real property;
- d. discussion regarding deployment of security personnel, devices, or systems; and
- e. investigative proceedings regarding allegations of criminal misconduct.

A closed meeting may also be held for attorney-client matters that are privileged pursuant to Utah Code § 78B-1-137, and for other lawful purposes that satisfy the pertinent requirements of the Utah Open and Public Meetings Act.

#### 10. <u>Adjournment</u> – Chair Silvestrini

#### THE PUBLIC IS INVITED TO PARTICIPATE IN ALL UFA MEETINGS.

In accordance with the Americans with Disabilities Act, UFA will make reasonable accommodation for participation in the meetings. Please call the clerk at least three working days prior to the meeting at 801-743-7213. Motions relating to any of the foregoing, including final action, may be taken at the meeting. This meeting will also be held electronically to allow members of the UFA Benefits & Compensation Committee to participate. This agenda is subject to change with a minimum 24-hour notice.

#### CERTIFICATE OF POSTING

The undersigned, does hereby certify that the above agenda notice was posted on this 12<sup>th</sup> day of March 2025 on the UFA bulletin boards, the UFA website <u>www.unifiedfire.org</u>, posted on the Utah State Public Notice website <u>http://www.utah.gov/pmn/index.html</u> and was emailed to at least one newspaper of general circulation with the jurisdiction of the public body.



#### UNIFIED FIRE AUTHORITY BOARD

#### BENEFITS AND COMPENSATION COMMITTEE MEETING MINUTES

February 13, 2025 at 8:00 a.m.

This meeting was held both in-person and electronically via ZOOM

#### **Committee Members Present:**

Mayor Silvestrini Council Member Buroker Mayor Overson

#### **Committee Members Absent:**

Council Member Hull

#### Staff:

Chief Burchett CLO Roberts CFO Hill

#### **Guests:**

AC Dern AC Pilgrim AC Robinson Aaron Whitehead Anthony Widdison Barrett LaJeunesse Ben Porter Ben Reeves Bryan Case Cal Ricotta Chandler Kingsbury Chrystal Butterfield, UFA Board Cliff Burningham Dan DeVoogd Debbie Cigarroa Embret Fossum Eric VanDuren Erica Langenfass Jake Dodds Jay Torgersen Jon Wilde Kate Turnbaugh Kelly Long Kelly Millard Kyle Maurer Lana Burningham Michael Conn Michelle Morse, Gallagher

Council Member Henderson Mayor Weichers Council Member Fotheringham

> Kiley Day Cyndee Young Kiyoshi Young, Local 1696

> > Molly Swenson Nate Bogenschutz Nile Easton Rebecca Norfleet, Gallagher Rian Andrus Richard Rich Rob Ayres Sam Christensen Shelli Fowlks Station115 Steve Prokopis Val Greensides Wade Russell

#### Call to Order

Meeting called to order by Chair Silvestrini at 8:02 a.m.

#### Public Comments

None

Public comment made available live and with a posted email address

Minutes Approval

Council Member Henderson moved to approve the minutes from the January 23, 2025 Benefits & Compensation Committee Meeting as submitted Council Member Fotheringham seconded the motion

All in favor, none opposed

#### FY25/26 URS Rate Update – CFO Hill

- There is good news with the URS rates
- Tier I rates are reducing
  - Tier II rates are not changing for Firefighters, public safety and public employees are seeing a savings as well
  - The total anticipated savings are \$561,000
  - There is currently legislation for consideration for the employer to pick up the employee portion as this is not allowed currently
    - If approved, the possible cost would be just over \$12,000
- No questions

#### Health Insurance Update - HR Director Day/Gallagher

- Michelle Morse presented the current status of insurance with SelectHealth
  - SelectHealth released an 9.87% increase for the coming year
  - This is due to large claims and overall usage
  - Comparing the rolling 12-month average, UFA is utilizing SelectHealth exactly as expected, no monies were left on the table
  - Gallagher is working on the market with bids coming back in the coming weeks, which should help with negotiations with SelectHealth
- Mayor Silvestrini noted that the SelectHealth percentage is consistent with other insurers
- Local President Young asked if there are any investigations done with large claimants to possibly address issues earlier
  - Michelle Morse replied that much of the preventative exams lapsed during COVID and those cancers are now stage 3/4 vs 1/2 on a normal preventative exam year
  - Gallagher is working with UFA HR on getting some information out to employees on the importance of preventative care for their families
- CFO Hill stated that this increase would cost UFA \$581,000, .82% to the member fee

#### <u>COLA Comparison/Sworn Market Comparison</u> – Chief Burchett

- For consideration is a 10-Year average and 7-year average and the West, Mountain, and All City CPI history
- Local 1696 is in favor of the West CPI and in order to balance predictability and responsiveness to the market, they are looking at the 7-year average as a compromise between the originally suggested 5-year and 10-year
- Council Member Henderson recommends the 10-year using the West with the higher average
- Council Member Fotheringham stated that in the end, the COLA number is the most easily compared to the outside and the more the number is softened the more adjustable the market amount
- Council Member Henderson explained that the longer the term, the more stable and predictable the number, therefore easier for external comparison
  - The market being the reactionary piece
  - Council Member Fotheringham disagrees
  - If the scope for COLA is narrower, then it is more volatile and the goal is predictability, per Council Member Henderson
- President Young stressed that the COLA average is a lot less important than remaining in the Top 3



- Mayor Silvestrini stated that compromising on the 7-year is appropriate as a first step toward stability, for entities to better predict taxing needs
- Council Member Henderson stated that the unspent funds will go toward the Fund Balance and then the monies are there to pay any increase necessary to remain competitive
  - Thereby reaching the Top 3 goal in a sustainable way
  - Council Member Henderson wishes to present both options again to the UFA Board next week
  - Mayor Silvestrini would like to choose one
  - Chief Burchett would like a consensus as well

Council Member Henderson moved to recommend the 10-year COLA, and West CPI and market adjustment as discussed

Council Member Fotheringham seconded the motion Roll call vote taken

Buroker	Ν	Hull	-	
Fotheringham	Ν	Overson	Ν	
Henderson	Y	Silvestrini	Ν	
		Weichers	Y	
				-

Motion did not pass

Council Member Fotheringham moved to recommend the 7-year COLA, and All City CPI and market adjustment as discussed

Council Member Henderson seconded the motion

Roll call vote taken

Buroker	Y	Hull	-
Fotheringham	Y	Overson	Y
Henderson	Y	Silvestrini	Y
		Weichers	Y

- Chief Burchett pointed to pages 41-43
  - This is detailed data on each sworn position and step
  - Each position is reviewed for market and how the compression between ranks looks
  - This compression is important for advancement encouragement and the market has kept the position progression where Chief Burchett desires it to be
  - There is a concern between entry level paramedic and senior paramedic as the gap is just under 2%
    - Chief Burchett will continue working on the impact internally
    - This is a rank with a significant number of personnel and his focus is to make sure they are comfortable with the gap
  - The total increase for sworn is a 3.27% member fee increase, just over \$2.3M

<u>Civilian Market Comparison</u> – HR Director Day

- There are 79 total civilian positions, 16 are proposed for reclassification
- This will result in a 43,000 member fee increase, .06%
- President Young stated that labor is in support for the mechanic increases
- Chief Burchett pointed out that the COLA agreed upon for sworn is also applied to the civilian personnel
  - This would be a \$180,000 increase, .25% of the member fee

Council Member Fotheringham moved to recommend the civilian market as discussed Mayor Overson seconded the motion

All voted in favor, none opposed



Firefighter II Final Discussion - Chief Burchett

- Chief introduced this concept at the last meeting, the replacement of the AEMT rank with the Firefighter II rank
- The cost is approximately \$4,000 per person, anticipating that 15 per year move into this rank
  - This would provide incentive for entry level firefighters to begin advancement in the department, which in turn helps with retention

Council Member Fotheringham moved to recommend the Firefighter II rank as discussed Mayor Weichers seconded the motion All voted in favor, none opposed

Closed Session None

Adjournment

Council Member Fotheringham moved to adjourn the February 13, 2025 Benefits & Compensation Committee Meeting

Mayor Weichers seconded the motion All voted in favor, none opposed

## UNIFIED FIRE AUTHORITY PART-TIME EMS PAY PLAN FY24/25

EMT	Hourly Rate
Starting	\$17.16
6 Months	\$17.72
1.5 Years	\$18.28
2.5 Years	\$18.84
Paramedic	\$28.12

AEMT	Hourly Rate
Starting	\$18.28
6 Months	\$18.84
1.5 Years	\$19.41
2.5 Years	\$19.96
Paramedic	\$28.12

## UNIFIED FIRE AUTHORITY PART-TIME EMS PAY PLAN FY25/26

EMT/AEMT	Hourly Rate
Starting	\$18.28
6 Months	\$18.84
1.5 Years	\$19.41
2.5 Years	\$19.96

Paramedic	Hourly Rate
Starting	\$29.13

#### UNIFIED FIRE AUTHORITY SEASONAL WILDLAND FIREFIGHTERS PAY SCALE FY25/26 (7/1/25 through 6/30/26)

		Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9	Step 10
Grade 4 (Crew Member)	Basic	18.00	18.25	18.50	18.75	19.00	19.25	19.50	19.75	20.00	20.25
Firefighter Type 2 (FFT2) Qualified	Overtime	27.00	27.38	27.75	28.13	28.50	28.88	29.25	29.63	30.00	30.38
Grade 5 (Squad Boss 2 Trainee, Sawyer)	Basic	19.00	19.25	19.50	19.75	20.00	20.25	20.50	20.75	21.00	21.25
Minimum one year of documented fire experience	Overtime	28.50	28.88	29.25	29.63	30.00	30.38	30.75	31.13	31.50	31.88
Firefighter Type 1 (FFT1) Trainee											
Incident Commander Type 5 (ICT5) Trainee											
Faller 2 (FAL2) Trainee											
Grade 6 (Squad Boss Type 2) (7 Personnel)	Basic	20.25	20.75	21.25	21.75	22.25	22.75	23.25	23.75	24.25	24.75
Firefighter Type 1 (FFT1) Qualified	Overtime	30.38	31.13	31.88	32.63	33.38	34.13	34.88	35.63	36.38	37.13
Incident Commander Type 5 (ICT5) Qualified											
Grade 7 (Engine Boss) (2 Personnel)	Basic	23.50	24.00	24.50	25.00	25.50	26.00	26.50	27.00	27.50	28.00
Engine Boss (ENGB) Qualified	Overtime	35.25	36.00				39.00	39.75	40.50	41.25	
	Ovenime	55.25	56.00	50.75	57.50	50.25	37.00	57.75	40.30	41.25	42.00
Incident Commander Type 5 qualified (ICT5)											
Commercial Driver License											

#### EFFECTIVE 07/01/2024

Steps are not years of service, but based on years in role/grade

When moving grades you will move into the step that is .25 higher than the previous year (Ex: Grade 4, Step 5 to Grade 5, Step 2)

	SERVICE DEMA		SERVICE DEMAN	
STATION - MEMBER	INCIDENTS	PERCENTAGE	INCIDENTS	PERCENTAGE
103 - Herriman	3,050	95.02%	2,902	94.44%
103 - UFSA	160	4.98%	171	5.56%
TOTAL	3,210	100%	3,073	100%
104 - Holladay	5,029	67.83%	4,844	68.35%
104 - UFSA	2,385	32.17%	2,243	31.65%
TOTAL	7,414	100%	7,087	100%
110 - Cottonwood Heights	4,321	85.90%	4,412	86.63%
110 - Holladay	684	13.60%	658	12.92%
110 - UFSA	25	0.50%	23	0.45%
TOTAL	5,030	100%	5,093	100%
112 - UFSA	3,198	82.91%	3,266	84.24%
112 - Holladay	654	16.96%	606	15.63%
112 - Cottonwood Heights	5	0.13%	5	0.13%
TOTAL	3,857	100%	3,877	100%
116 - Cottonwood Heights	2,332	83.85%	2,387	83.08%
116 - UFSA	282	10.14%	310	10.79%
116 - Holladay	167	6.01%	176	6.13%
TOTAL	2,781	100%	2,873	100%
121 - Riverton	2,950	94.10%	2,883	93.57%
121 - Herriman	185	5.90%	198	6.43%
TOTAL	3,135	100%	3,081	100%
123 - Herriman	2,352	83.05%	2,301	83.13%
123 - Riverton	480	16.95%	467	16.87%
TOTAL	2,832	100%	2,768	100%

#### SERVICE DEMAND PROPORTIONING AMONG UFA MEMBERS

	STAFFING	R	EGIONAL COST	S		UF	SA	COTTONWO	OD HEIGHTS	HOLL	ADAY	HERR	IMAN	RIVE	RTON
STATION	ENGINES/TRUCKS	SERVICE DELIVERY	SUPPORT	CAPITAL FUND TRANSFER	TOTAL COST	FY23/24 %	AMOUNT	FY23/24 %	AMOUNT	FY23/24 %	AMOUNT	FY23/24 %	AMOUNT	FY23/24 %	AMOUNT
101	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0		0		0
102	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0		0	0	
103	1,952,050	409,894	567,207	178,308	3,107,459	4.98%	154,751		0		0	<b>95.02%</b>	2,952,707		0
104	1,952,050	409,894	567,207	178,308	3,107,459	<b>32.17%</b>	999,669		0	<mark>67.83</mark> %	2,107,789		0		0
106	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0		0		0
108	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0		0		0
109	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0		0		0
110	1,952,050	409,894	567,207	178,308	3,107,459	0.50%	15,537	85.90%	2,669,307	13.60%	422,614		0		0
111	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0		0		0
112	1,952,050	409,894	567,207	178,308	3,107,459	82.91%	2,576,394	0.13%	4,040	16.96%	527,025		0		0
113	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0		0		0
115	1,496,992	409,894	567,207	178,308	2,652,401	100.00%	2,652,401		0		0		0		0
116	1,496,992	409,894	567,207	178,308	2,652,401	10.14%	268,953	83.85%	2,224,038	6.01%	159,409		0		0
117A	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0		0	0	
117B	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0	0		0	
118	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459	0		0		0		0	
119	1,496,992	409,894	567,207	178,308	2,652,401	100.00%	2,652,401		0	0		0		0	
121	1,952,050	409,894	567,207	178,308	3,107,459	0.00%	0		0	0		5.90%	183,340	<b>94.10%</b>	2,924,119
123	1,952,050	409,894	567,207	178,308	3,107,459	0.00%	0		0	0		83.05%	2,580,744	16.95%	526,714
124	1,952,050	409,894	567,207	178,308	3,107,459	0.00%	0		0	0		0		100.00%	3,107,459
125	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0	0				0	
126	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0	0		0	
251	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0		0	0	
252	1,952,050	409,894	567,207	178,308	3,107,459	100.00%	3,107,459		0		0		0		0
TOTAL:	45,484,019	9,837,456	13,612,968	4,279,392	73,213,835										
						UF	SA	COTTONWO	OD HEIGHTS	HOLL	ADAY	HERR	IMAN	RIVE	RTON
	Total Nun	nber of Fire Stations	with a First Due ar	ea serving Member		2	21	:	3		4	:	3		3
	Proportiona	I number of stations	member is financ	ially responsible for	24	17	.31	1.	70	1.	04	1.	84	2.	11
			Membe	er Fee before credit	\$73,213,835	\$52,8	24,529	\$4,89	7,385	\$3,21	6,838	\$5,71	6,792	\$6,55	8,291
	Percent of total Member Fee		100.00%	72.	15%	6.6	9%	4.3	<b>9%</b>	7.8	11%	8.9	6%		
	Fund Balance Credit (Under expend from previous FY)			\$1.69	9,452		7,557	\$10	3,491		3,919	\$210	0.991		
				nber fee with credit	, ,,		25,077		39,828		3,347		2,873	\$6,347,301	
			FY24/25 4	Actual Member Fee	70.858.426	51.18	2.063	4 74	2,016	3.071.616		5,533,776		6.328.955	
				e) from current fee			,986		188		731	-903		6,328,955 18,346	
		Percen	tage adjustment fr	om FY24/25 Actual	0.00%	-0.	11%	-0.0	05%	1.36%		-0.02%		0.2	<b>!9</b> %

#### UFA MEMBER FEE BREAKDOWN BY STATION - FY 24-25 (ADJUSTED with Updated Proportion Among UFA Members)

(1) REGIONAL COST = Total member fee costs (including station operating costs) minus engine and truck staffing divided by 24 Engine and Truck Companies

(1) The actual functions that support service delivery. Administration, Finance, Human Resources, Training, Medical, and parts of Logistics, Information Outreach, and Information Technology

# Unified Fire Authority Renewal Discussion

Michelle Morse and Rebecca Norfleet March 13, 2025



Insurance | Risk Management | Consulting

# **Discussion Guide**



## **Medical Utilization Review**



**Renewal & Market Analysis** 



## **Appendix & Disclosures**



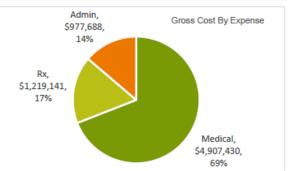
## Claim Experience Executive Summary - Rolling 12 Months

	Medical Plan	Summary	
	Feb 2024 - Jan 2025	Feb 2023 - Jan 2024	% Change
Avg. Employees	461	450	2.5%
Avg. Members	1494	1490	0.2%
Avg. Contract Size	3.24	3.31	-2.2%
Gross Claims PMPM	\$341.79	\$304.74	12.2%
Net Claims PMPM	\$340.34	\$304.74	11.7%
Fixed Costs PMPM	\$54.54	\$51.97	5.0%
Premium PMPM	\$381.86	\$365.37	4.5%
Gross Loss Ratio	103.8%	97.6%	6.2%
Net Loss Ratio	103.4%	97.6%	5.8%

Utilization and Trends by Cost Category												
Category		Feb 2024 -	Jan 2025			Feb 2023 - J	an 2024			% Cha	nge	
	Paid	Paid PMPM	Benchmark		Paid	Paid PMPM	Benchmark		Paid	Paid PMPM	Benchmark	
IP Facility	\$891,482	\$49.73	\$88.37		\$766,944	\$42.88	\$88.37		16.2%	16.0%	0.0%	
OP Facility	\$1,284,626	\$71.67	\$87.09		\$875,540	\$48.96	\$87.09		46.7%	46.4%	0.0%	
ER	\$437,540	\$24.41	\$36.88		\$450,531	\$25.19	\$36.88		-2.9%	-3.1%	0.0%	
Office Visits	\$648,176	\$36.16	\$36.62		\$629,671	\$35.21	\$36.62		2.9%	2.7%	0.0%	
Prof & Other	\$1,645,607	\$91.81	\$141.61		\$1,570,273	\$87.80	\$141.61		4.8%	4.6%	0.0%	
Medical	\$4,907,430	\$273.78	\$390.57		\$4,292,959	\$240.04	\$390.57		14.3%	14.1%	0.0%	
Pharmacy	\$1,219,141	\$68.01	\$109.07		\$1,156,943	\$64.69	\$109.07		5.4%	5.1%	0.0%	
Total	\$6,126,570	\$341.79	\$499.64		\$5,449,902	\$304.74	\$499.64		12.4%	12.2%	0.0%	

					Claims B	y Plan								
Plan		Feb 2024 - Jan 2025							Feb 2023 - Jan 2024					
	Curr. Mbrs.	Premium	Med Claims	Rx Claims	Admin	Loss Ratio	Avg. Mbrs.	Premium	Med Claims	Rx Claims	Admin	Loss Ratio		
Select Med	1364	\$6,063,927	\$4,020,750	\$902,110	\$876,892	95.6%	1331	\$5,773,451	\$3,737,588	\$959,792	\$830,104	95.7%		
Select Care	154	\$781,002	\$886,679	\$317,030	\$100,796	167.0%	159	\$760,764	\$555,371	\$197,151	\$99,255	112.0%		
Total	1518	\$6,844,929	\$4,907,430	\$1,219,141	\$977,688	103.8%	1490	\$6,534,215	\$4,292,959	\$1,156,943	\$929,358	97.6%		
Plan		Feb 2024 - Ja	n 2025			Feb 2023	Jan 2024 % Change							
	Mbr Mths	Prem. PMPM	Med. PMPM	Rx PMPM	Mbr Mths	Prem. PMPM	Med. PMPM	Rx PMPM	Avg. Mbrs.	Prem PMPM	Med PMPM	Rx PMPM		
Select Med	16077	\$377.18	\$250.09	\$56.11	15974	\$361.43	\$233.98	\$60.08	0.6%	4.4%	6.9%	-6.6%		
Select Care	1848	\$422.62	\$479.80	\$171.55	1910	\$398.31	\$290.77	\$103.22	-3.2%	6.1%	65.0%	66.2%		
Total	17925	\$381.86	\$273.78	\$68.01	17884	\$365.37	\$240.04	\$64.69	0.2%	4.5%	14.1%	5.1%		

Top 10 Large Claimants - Rolling 12 Months		
Diagnosis Pooling Point = \$250,000	Paid Claims	Pooled Claims
1) Diseases of the circulatory system \$210,472; 2) Diseases of the respiratory system \$20,272; 3) Symptoms, signs and	\$275,887	\$25,887
1) Pharmacy \$200,689; 2) Diseases of the musculoskeletal system and connective tissue \$12,180; 3) Diseases of the b	\$219,095	\$0
1) Factors influencing health status and contact with health services \$88,099; 2) Congenital malformations, deformation:	\$123,566	\$0
1) Neoplasms \$49,373; 2) Injury, poisoning and certain other consequences of external causes \$16,831; 3) Factors influ	\$89,714	\$0
1) Pharmacy \$80,466; 2) Diseases of the nervous system \$1,409; 3) Symptoms, signs and abnormal clinical and labora	\$85,110	\$0
1) Factors influencing health status and contact with health services \$71,067; 2) Certain conditions originating in the peri	\$77,156	\$0
1) Injury, poisoning and certain other consequences of external causes \$37,831; 2) Pharmacy \$31,387; 3) Diseases of 1	\$76,561	\$0
1) Injury, poisoning and certain other consequences of external causes \$20,874; 2) Diseases of the genitourinary syster	\$75,796	\$0
1) Congenital malformations, deformations and chromosomal abnormalities \$51,845; 2) Injury, poisoning and certain oth	\$73,601	\$0
	\$71,495	\$0



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# July 2025 Renewal

Line of Coverage	Carrier/ Vendor	EE/ER Paid	2025 Proposed Renewal	Notes
Medical	SelectHealth	EE / ER	9.9%	Contingent Funding Option (down 10 up 5)
Dental	SelectHealth	EE / ER	5.9%	
Vision	EyeMed	EE	0%	Entering 3 <sup>rd</sup> year of 4-year rate guarantee ending 06.30.2027
Basic Life and AD&D	PEHP	ER	0%	
Voluntary Life and Voluntary AD&D	PEHP	EE	0%	
Accident Weekly Indemnity	PEHP	EE	0%	
Accident Medical Expense	PEHP	EE	0%	
Long Term Disability	PEHP	ER	0%	
Hospital Indemnity	Aflac	EE	0%	
Critical Illness	Aflac	EE	0%	
Identity Protection	Allstate Identity Protection	EE	0%	Offering enhanced plan design that includes Cyber protection at no additional cost for this renewal
EAP	Blomquist Hale	ER	0% \$4 PEPM FT & \$2 PEPM PT	
FSA & HRA	APA Benefits	ER	0% \$4 PEPM FSA & \$2 PEPM HRA	



# 2025 Market Analysis - Medical

	Carrier	Funding	2025 Proposal	Notes
Option 1	UHC	Fully-Insured	-2.3%	<ul> <li>Surest: Plan design is copayment based and uses high quality providers to drive lower cost</li> <li>Network: Choice Plus (Intermountain &amp; MountainStar)</li> </ul>
Option 2	Aetna	Fully-Insured	8.3%	<ul> <li>Offering a \$20,000 wellness credit</li> <li>Network: Aetna Whole Health Network (AWH) (Intermountain)</li> </ul>
Option 3	UHC	Fully-Insured	12.9%	Network: Choice Plus (Intermountain & MountainStar)
Option 4	Regence BCBS	Contingent (+5 / -10 Plan)	13.4%	Network: Preferred Blue Option (PBO) (Intermountain)
Option 5	PEHP	Fully-Insured	13.8%	Network: Advantage (Intermountain)
Option 6	EMI Health	Fully-Insured	13.9%	<ul> <li>1% bundling discount if bundled with EMI dental</li> <li>Network: EMI Health Care Plus (Intermountain)</li> </ul>
Option 7	MotivHealth	Level-Funded	-0.5%	<ul> <li>Requires a HDHP option to be offered</li> <li>Estimated claims saving \$957k 1<sup>st</sup> year</li> <li>Network: Motiv (Non-Intermountain)</li> </ul>
Option 8	Regence BCBS	Contingent (+5 / -10 Plan)	0.1%	Network: Focal Point (Non-Intermountain)
Option 9	University of Utah	Fully-Insured w/ retro refund	4.8%	Network: Healthy Premier (Non-Intermountain)
Option 10	Aetna	Fully-Insured	8.3%	<ul> <li>Offering a \$20,000 wellness credit</li> <li>Network: Aetna Choice (Non-Intermountain)</li> </ul>
N/A	Cigna	Declined to Quote	N/A	- Page 17

# 2025 Market Analysis - Dental

	Carrier	Carrier Response	2025 Proposal	Notes
Option 1	PEHP	Provided Proposal	3.8%	<ul> <li>Gain of 69 providers and loss of 63</li> </ul>
Option 2	EMI Health	Provided Proposal (Fully-Insured)	4.1%	<ul> <li>1% medical rate discount when bundled with dental</li> <li>Gain of 26 providers and loss of 113</li> <li>Network outside of UT is Dentemax</li> </ul>
Option 3	Delta Dental	Provided Proposal	13.9%	<ul> <li>2-year rate guarantee</li> <li>Proposal includes a one-time \$1,500 implementation credit</li> <li>Gain of 58 providers and loss of 13</li> </ul>
Option 4	EMI Health	Provided Proposal (ASO)	\$8.75 PEPM	<ul> <li>1% medical rate discount when bundled with dental</li> <li>Gain of 26 providers and loss of 113</li> <li>Network outside of UT is Dentemax</li> </ul>
Option 5	Delta Dental	Provided Proposal (ASO)	\$7.50 PEPM	<ul> <li>2-year rate guarantee</li> <li>Proposal includes a one-time \$1,500 implementation credit</li> </ul>
Dental	Cigna	Declined to Quote	N/A	
Dental	Aetna	Declined to Quote	N/A	
Dental	United Healthcare	Declined to Quote	N/A	

# Appendix, Disclaimers and Disclosures





# July 2025 Medical Renewal

				RENT		RENEWAL SelectHealth		
		ier Name		tHealth				
	PI	an Name	Med / Value Tier \$1,000	Care / Value Tier \$1,000	Med / Value Tier \$1,000	Care / Value Tier \$1,000		
PLAN DE SIGN*								
In-Network Benefits Deductible Type			Med / Value Network	Care / Value Network	Med / Value Network	Care / Value Network		
	Comit.		Embedded	Embedded	Embedded	Embedded		
Calendar Year (CY) Deductible (Individual / Out-of-Pocket Max Type	Farriny)		\$1,000 / \$2,000 Embedded	\$1,000 / \$2,000 Embedded	\$1,000 / \$2,000	\$1,000 / \$2,000 Embedded		
CY Out-of-Pocket Max (Individual / Family)		\$3,000 / \$6,000	\$3,000 / \$6,000	Embedded \$3,000 / \$6,000	\$3,000 / \$6,000			
Coinsurance (member pays after deductible	4		20%	20%	20%	20%		
Preventive Care	7		Covered 100%	Covered 100%	Covered 100%	Covered 100%		
Primary Care Visit			\$15 Copay	\$15 Copay	\$15 Copay	\$15 Copay		
Specialist Visit			\$20 Copay	\$20 Copay	\$20 Copay	\$20 Copay		
UrgentCare			\$30 Copay	\$30 Copav	\$30 Copay	\$30 Copay		
Emergency Room			\$75 Copay after deductible	\$75 Copay after deductible	\$75 Copay after deductible	\$75 Copay after deductible		
Inpatient Hospital			20% after deductible	20% after deductible	20% after deductible	20% after deductible		
			20% after deductible	20% after deductible	20% after deductible	20% after deductible		
Outpatient Surgery			Ambulatory Surgical: 10%	Ambulatory Surgical: 10%	Ambulatory Surgical: 10%	Ambulatory Surgical: 10%		
			after deductible	after deductible	after deductible	after deductible		
Chiropractic (visit limits may apply)			\$15 Copay	\$15 Copay	\$15 Copay	\$15 Copay		
			(20 Visits)	(20 Visits)	(20 Visits)	(20 Visits)		
Diagnostic Test (X-ray, blood work)			Covered 100%	Covered 100%	Covered 100%	Covered 100%		
				Diagnostic Tests Major: 20% after deductible				
Imaging (CT/PET scan, MRI)	Imaging (CT/PET scan, MRI)		after deductible Imaging: 10% after	Imaging: 10% after	after deductible Imaging: 10% after	after deductible Imaging: 10% after		
			deductible	deductible	deductible	deductible		
Prescription Drug Benefit								
Retail			30 Days	30 Days	30 Days	30 Days		
Tier I / Tier II / Tier III			\$10 / \$25 / \$45	\$10 / \$25 / \$45	\$10 / \$25 / \$45	\$10 / \$25 / \$45		
Specialty			\$100	\$100	\$100	\$100		
Mail Order			90 Days	90 Days	90 Days	90 Days		
Tier I / Tier II / Tier III			\$10 / \$50 / \$135	\$10 / \$50 / \$135	\$10 / \$50 / \$135	\$10 / \$50 / \$135		
Out-of-Network Benefits								
Deductible Type			Embedded	Embedded	Embedded	Embedded		
CY Deductible (Individual / Family)			\$2,000 / \$4,000	\$2,000 / \$4,000	\$2,000 / \$4,000	\$2,000 / \$4,000		
Out-of-Pocket Max Type			Embedded	Embedded	Embedded	Embedded		
CY Out-of-Pocket Max (Individual / Family)			\$6,000 / \$12,000	\$6,000 / \$12,000	\$6,000 / \$12,000	\$6,000 / \$12,000		
Coinsurance (member pays after deductible COST ANALYSIS	e)		40%	40%	40%	40%		
PEPM Rates	Maril/Malua	Cara/Malur	Med (Melue Ties §1 000	0 ()/-b Ti 64 000	Mad (Malue Ties 64,000	Orace (Malue Tire 64,000		
Employee(EE) Only	93	Care/ Value 14	Med / Value Tier \$1,000 \$525.40	Care / Value Tier \$1,000 \$539.60	Med / Value Tier \$1,000 \$577.40	Care / Value Tier \$1,000 \$593.00		
Employee(EE) Only EE + 1 Dep	93 75	14	\$525.40	\$539.60	\$577.40 \$1.270.70	\$1,305.00		
EE + Toep EE + Family	262	22	\$1,156.20	\$1,107.40	\$1,732.90	\$1,779.20		
Total Enrollment	430	53	ψ1,570.00	\$1,010.50	ψ1,132.30	ψ1,113.20		
Estimated Monthly Premium	.00		\$548,699	\$63.356	\$603.021	\$69.629		
Estimated Annual Premium			\$6,584,386	\$760.272	\$7.236.246	\$835.553		
Dollar Difference from Current		,		\$651,860	\$75,281			
Percent Change from Current				9.9%	9.9%			
Total Combined Annual Cost								
				RENT		WAL		
Estimated Annual Premium		_	\$7,34	4,658		1,799		
	erence from					7,141		
	hange from	Current			9.9	9%		
PLAN PROVISIONS			1.1/		1 1/			
Rate Guarantee				e ending 06/30/2025 HRS/WK		e ending 06/30/2026 HRS/WK		
Eligibility			FIE 30	IKO/WK	FIE 30	IKO/WK		

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# July 2025 Dental Renewal

		CUR	RENT	REN	EWAL
(	Carrier Name	Select He	alth Inc.	Select Hea	alth Inc.
	Plan Name	Denta	al Plan	Denta	Il Plan
PLAN DESIGN*					
	Network	INN Classic Network	OON	INN Classic Network	OON
Calendar Year (CY) Deductible (Individual / Family)		\$0 / \$0	\$0 / \$0	\$0 / \$0	\$0 / \$0
Annual Maximum		\$1,500	\$1,500	\$1,500	\$1,500
Coinsurance					
Preventive Services		100%	80%	100%	80%
Cleaning Frequency		2 per year	2 per year	2 per year	2 per year
Deductible Waived?		Yes	Yes	Yes	Yes
Basic		80%	60%	80%	60%
Periodontics		80%	60%	80%	60%
Endodontics		80%	60%	80%	60%
Major		50%	30%	50%	30%
Major Waiting period		None	None	None	None
Implants		50%	30%	50%	30%
Orthodontics		50%	50%	50%	50%
Maximum Age		Children and Adult	Children and Adult	Children and Adult	Children and Adult
Deductible		No	No	No	No
Lifetime Max		\$1,500	\$1,500	\$1,500	\$1,500
Ortho Waiting Period		None	None	None	None
OON Reimbursement Level		M	MAC MAC		AC
COST ANALYSIS					
PEPM Rates	Enrollment	Denta	al Plan	Denta	al Plan
Employee (EE) Only	105	\$49	9.10	\$52.00	
EE + 1 Dep	108	\$67	7.10	\$71	1.10
EE + Family	293	\$10	1.50	\$107.50	
Total Enrollment	506				
Estimated Monthly Premium		\$42	,142	\$44	,636
Estimated Annual Premium		\$505,702		\$535,636	
Dollar Difference from	Current			\$29	,934
Percent Change from	Current			5.	9%
PLAN PROVISIONS					
Rate Guarantee		1 Year rate guarantee	ending 06/30/2025	1 Year rate guarantee	ending 06/30/2026
Premium Paid Basis		Contributory (Employee pays all or a portion of the premium)		Contributory (Employee pays all or a portion of the premium)	
Eligibility		FTE 30HI	RS/WK	FTE 30HI	RS/WK

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# July 2025 Vision Renewal

	CURRENT/ RENEWAL					
Ca	rrier Name	EyeMed				
	Plan Name	Visio	n Plan			
PLAN DESIGN*						
Not	work Name	INN Insight	OON			
Net		Network				
Exam (including eyewear exam)						
Frequency		12 Months	12 Months			
Benefit		\$10 Copay; Plus Provider: \$0 Copay	Reimburse up to \$40			
Lenses						
Frequency		12 Months	12 Months			
Single		\$25 Copay	Reimburse up to \$30			
Bifocal		\$25 Copay	Reimburse up to \$50			
Trifocal		\$25 Copay	Reimburse up to \$70			
Standard Progressive		\$90 Copay	Reimburse up to \$50			
Frames						
Frequency		12 Months	12 Months			
		Up to \$130 plus 20% off balance;				
Allowance		Plus provider: Up to \$180 plus 20%	Reimburse up to \$91			
		off balance				
Contact Lenses						
Frequency		12 Months	12 Months			
Allowance		Up to \$130	Reimburse up to \$130			
Medically Necessary		Covered in full	Reimburse up to \$300			
COSTANALYSIS						
PEPM Rates	Enrollment		n Plan			
Employee (EE) Only	74		.03			
EE + Spouse	46		1.45			
EE + Child(ren)	26		2.05			
EE + Family	131	\$17	7.71			
Total Enrollment	277					
Estimated Monthly Premium		\$3,606				
Estimated Annual Premium		\$43	,275			
Dollar Difference fro Percent Change fro						
Percent Change fro	urrent					
Rate Guarantee		Entoring 3rd year of 4 year rate	e guarantee ending 06/30/2027			
Premium Paid Basis			all or a portion of the premium)			
Eligibility			HRS/WK			
Engloting		F1E30				

Line of Coverage	Carrier Name	Response	Rate Guarantee	Commission	Direct Fees
Medical	SelectHealth	Current	1 Year	0%	N/A
Medical	SelectHealth	Renewal	1 Year	0%	N/A
Medical	UnitedHealthcare	Quote	1 Year	0%	N/A
Medical	EMI Health	Quote	1 Year	0%	N/A
Medical	Regence BlueCross BlueShield of Utah	Quote	1 Year	0%	N/A
Medical	University of Utah	Quote	1 Year	0%	N/A
Medical	Aetna	Quote	1 Year	0%	N/A
Medical	Cigna		· · ·	DTQ	•

#### Medical | Fully-Insured Marketing Activity Summary | Effective 07/01/2025

While Gallagher does not guarantee the financial viability of any health insurance carrier or market, it is an area we recommend that clients closely scrutinize when selecting a health insurance carrier. There are a number of rating agencies that can be referred to including, A.M. Best, Fitch, Moody's, Standard & Poor's, and Weiss Ratings (TheStreet.com). Generally, agencies that provide ratings of Health Insurers, including traditional insurance companies and other managed care organizations, reflect their opinion based on a comprehensive quantitative and qualitative evaluation of a company's financial strength, operating performance and market profile. However, these ratings are not a warranty of an insurer's current or future ability to meet its contractual obligations.

#### Supplemental Compensation

Gallagher may receive supplemental compensation from insurance carriers and vendors, normally calculated at the end of each calendar year, that are contingent on a number of factors including the overall number of employer plans represented, plan retention rates, and overall premium growth. Historically, supplemental compensation has ranged, on average, between 0-3% based on specific carrier programs. These plans have no effect on premiums. Further, Gallagher may receive non-cash compensation from plan vendors or service providers that are not in connection with any particular client. If you have any questions regarding direct or indirect compensation received by Gallagher, please contact your dedicated Gallagher advisor or refer to the Gallagher Global Standards of Business Conduct (https://www.ajg.com/us/about-us/global-standards).

Line of Coverage	Carrier Name	Response	Rate Guarantee	Commission	Direct Fees		
Dental	Select Health Inc.	Current	1 Year	3%	N/A		
Dental	Select Health Inc.	Renewal	1 Year	3%	N/A		
Dental	EMI Health	Quote	1 Year	3%	N/A		
Dental	PEHP Health & Benefits	Quote	1 Year	\$6 PEPM	N/A		
Dental	Delta Dental Fully Insured	Quote	1 Year	3%	N/A		
Dental	Delta Dental ASO	Quote	1 Year	\$4 PEPM	N/A		
Dental	EMI Health ASO	Quote	1 Year	\$4 PEPM	N/A		
Dental	Aetna	DTQ					
Dental	Cigna	DTQ					
Dental	United Healthcare	DTQ					
Vision	EyeMed	Current / Renewal	4 Year	0%	N/A		

While Gallagher does not guarantee the financial viability of any health insurance carrier or market, it is an area we recommend that clients closely scrutinize when selecting a health insurance carrier. There are a number of rating agencies that can be referred to including, A.M. Best, Fitch, Moody's, Standard & Poor's, and Weiss Ratings (TheStreet.com). Generally, agencies that provide ratings of Health Insurers, including traditional insurance companies and other managed care organizations, reflect their opinion based on a comprehensive quantitative and qualitative evaluation of a company's financial strength, operating performance and market profile. However, these ratings are not a warranty of an insurer's current or future ability to meet its contractual obligations.

Non-Health Lines of Coverage							
Line of Coverage	Carrier Name	Response	**AM Best Rating	Rate Guarantee	Commission	Direct Fees	
Basic Life AD&D	Public Employer's Health Plan (PEHP)	Current	NR	1 Year	3%	N/A	
Voluntary Life AD&D	Public Employer's Health Plan (PEHP)	Current	NR	1 Year	3%	N/A	
Long Term Disability	Public Employer's Health Plan (PEHP)	Current	NR	1 Year	3%	N/A	

**A.M. Best Rating					
Required Standards for Gallagher Benefit Services					
Group 1 A - to A++	Recommended				
Group 2 B + to B ++ and/or financial rating under "VI", or any of Best's "NR" group. This would apply to Best's "A- or higher" rated companies with a financial size under "VI".	Acceptable with signed client acknowledgement letter				
Financial Strength Ratings					
Secure	Vulnerable				
A++, A+ (Superior)	B, B - (Fair)				
A, A -, A U (Excellent)	C++, C+ (Marginal)				
B++, B+ (Very Good)	C, C - (Weak)				
Supplemental Compensation					

Gallagher may receive supplemental compensation from insurance carriers and vendors, normally calculated at the end of each calendar year, that are contingent on a number of factors including the overall number of employer plans represented, plan retention rates, and overall premium growth. Historically, supplemental compensation has ranged, on average, between 0-3% based on specific carrier programs. These plans have no effect on premiums. Further, Gallagher may receive non-cash compensation from plan vendors or service providers that are not in connection with any particular client. If you have any questions regarding direct or indirect compensation received by Gallagher, please contact your dedicated Gallagher advisor or refer to the Gallagher Global Standards of Business Conduct (https://www.ajg.com/us/about-us/global-standards).

# **General Disclaimers**



#### **Coverage Disclaimer**

This proposal is an outline of the coverages proposed by the carrier(s) based upon the information provided by your company. It does not include all the terms, coverages, exclusions, limitations, and conditions of the actual contract language. See the policies and contracts for actual language. This proposal is not a contract and offers no contractual obligation on behalf of GBS. Policy forms for your reference will be made available upon request.

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#### <u>Legal</u>

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