



## **UNIFIED FIRE AUTHORITY BOARD BENEFITS & COMPENSATION COMMITTEE AGENDA**

March 19, 2026, 7:30 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=MEtoVmtwRG95ZFYrVOJ3TUZtZUNBdz09>  
Webinar ID: 916 8104 6879  
Passcode: 8675309

- 
1. Call to Order – Chair Buroker
  2. Public Comment  
Please limit comments to three minutes each and be germane to the agenda items or UFA business. 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 [publiccomment@unifiedfire.org](mailto:publiccomment@unifiedfire.org) until 7:00 a.m. March 18, 2026. Emailed comments submitted prior to 7:00 a.m. March 18, 2026, 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. Minutes Approval—Chair Buroker PAGE 1  
February 12, 2026 Minutes  
**I (state name) move to approve the minutes from February 12, 2026 Benefits and Compensation Committee Meeting as submitted.**  
**Please unmute for a verbal vote**
  4. Insurance—Chief Burchett/HR Director Day PAGE 8

- a. Market Comparison
- b. Renewal Update

5. Contract Employees – Chief Burchett/HR Director Day

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6. Possible Closed Session

None

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.

I, (state name), move to temporarily recess the meeting to convene in a closed session to discuss matters as provided by Utah Code Annotated §52-4-205

7. Adjournment – Chair Buroker

I (state name), move to adjourn the March 19, 2026 UFA Benefits and Compensation Meeting.

**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 17th day of March 2026 on the UFA bulletin boards, the UFA website [www.unifiedfire.org](http://www.unifiedfire.org), posted on the Utah State Public Notice website <http://www.utah.gov/pmn/index.html> and was emailed to at least one newspaper of general circulation with the jurisdiction of the public body.

Micayla Dinkel, UFA Board Clerk



## **UNIFIED FIRE AUTHORITY BOARD BENEFITS & COMPENSATION COMMITTEE MINUTES**

February 12, 2026, 9:00 a.m.

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1. Call to Order  
Chair Buroker called the meeting to order at 9:01 a.m.
2. Public Comment  
None  
Public comment was available live and with a posted email address.
3. Minutes Approval  
Mayor Jackson made a motion to approve the minutes from January 22, 2026, Benefits and Compensation Committee Meeting as submitted. Mayor Fotheringham seconded the motion, and all voted in favor; none opposed.
4. Voluntary Employees Beneficiary Association (VEBA) Overview  
Chief Burchett introduced Bill Brass, retired Assistant Chief and current policy analyst for UFA to provide an overview of the VEBA program.

### Program Background

Bill explained that in 2013, the UFA Board eliminated the Other Post-Employment Benefit (OPEB) program due to concerns regarding long-term financial liabilities associated with providing retirees with up to 80% of their single health insurance premiums. To transition away from OPEB, the Board established VEBA accounts funded by approximately \$1.75 million, distributed to employee accounts using a Board-approved formula. Additional funds from a previous Nationwide post-employment program were also transferred into the VEBA accounts.

### Purpose of VEBA

The VEBA program is a tax-exempt trust designed to help employees cover healthcare costs between retirement and Medicare eligibility. It reimburses qualified medical expenses under IRS guidelines. Eligible uses include:

- Health insurance premiums
- Medicare Part B premiums
- Dental and vision expenses
- Prescription costs
- Co-pays

- Long-term care premiums (subject to IRS limits)

#### Funding Sources

The VEBA program is funded through several sources:

- 2% employer contribution of employee salary (approved in 2022)
- Conversion of excess sick leave
- Sick leave and vacation leave conversion upon retirement
- Vacation leave conversion upon separation

Sick leave caps currently include:

- 640 hours for civilian employees
- 960 hours for firefighters

Excess sick leave above the cap is purchased by the organization at 60% of salary value and deposited into VEBA accounts.

#### Tax Advantages

VEBA accounts offer a triple tax advantage:

1. Contributions are not taxed.
2. Qualified withdrawals are not taxed.
3. Investment earnings grow tax-free.

#### Program Administration

Funds are pooled for investment purposes but tracked individually for each participant.

Program oversight includes:

- VEBA Board of Trustees
- Outcome Private Wealth (investment manager)
- APA Benefits (third-party administrator)

The Board discussed the importance of VEBA in bridging the healthcare coverage gap between retirement and Medicare eligibility. The tax efficiency of VEBA compared to other retirement vehicles, such as 401(k) plans. The role of pooled investments and professional management in improving outcomes for retirees. The Board expressed support for the program and stated that VEBA is widely regarded as a valuable benefit within public safety organizations.

#### 5. 401K Contribution

Chief Burchett presented a proposal for potential implementation of an employer 401(k) contribution for employees.

#### Background

UFA currently does not offer a 401(k) contribution, though several peer agencies do.

Comparable agency contributions include:

- South Salt Lake: 3%
- Sandy: 3%
- Draper: 3.5%
- West Valley: 2%
- West Jordan: 2%
- Orem, Provo, Park City, South Jordan: 4%

Chief Burchett explained that the proposal is largely driven by changes in the Tier 2 retirement system, employees working longer before retirement eligibility, and concerns about employees' ability to retire at appropriate ages. Average hire age is approximately 28, meaning employees may not be eligible for retirement until approximately age 53 under Tier 2 rules. A 401(k) contribution could help bridge financial gaps and support workforce sustainability.

The Chief suggested a phased approach:

- Initial contribution between 1% and 1.5%
- Gradual increase over several years
- Target range between 2% and 3%

The Board discussed whether a 401(k) contribution should be funded through COLA adjustments or implemented as a separate benefit, considering long-term financial sustainability and market competitiveness with other fire agencies.

Union leadership emphasized the importance of maintaining wage growth separately from retirement benefits to support employees early in their careers.

6. Utah Retirement System Update

CFO Hill presented updated URS contribution rates for the upcoming fiscal year. For Tier 2 employees, the employee portion of the retirement contribution will increase from 4.73% to 5.98%, a difference of 1.25%. UFA has historically covered the employee share of this contribution. If UFA continues this practice, the estimated cost increase to the organization will be approximately \$267,000.

Mayor Jackson made a motion to recommend that UFA pick up the Tier II employee portion for sworn and public safety employees. Council Member Henderson seconded the motion and all voted in favor; none opposed.

7. Cost-of-Living Adjustment (CPI) Process

CFO Hill presented the COLA adjustment, calculated using the seven-year rolling average of the Consumer Price Index (CPI). Current CPI seven-year average is 3.6%, and the annual CPI for 2025 2.6%. Funding the COLA at 3.6% would be approximately \$2.5 million for the budget.

The Board discussed the benefits of using a rolling CPI average for predictable budgeting. There were some concerns expressed about applying a uniform percentage across all salary levels as well as the need to remain competitive with other fire agencies.

Mayor Gettel made a motion to recommend the Cost of Living as discussed. Mayor Gray seconded the motion, and all voted in favor; none opposed.

8. Sworn Market Comparison

HR Director Day presented the sworn wage comparable summary report. Human Resources conducted an annual wage comparison using wages from 15 agencies across the Wasatch Front. The comparison evaluates base wages, guaranteed compensation elements, and non-performance pay factors. HRD Day stated that overall, UFA remains well-positioned across all sworn classifications relative to the surveyed agencies. The exception is the Senior Paramedic

classification. The Senior Paramedic rank target is held at 3% above market to encourage advancement and retention. A targeted 0.68% market adjustment was identified to maintain the classification's structure positioning at approximately 3% above market.

Council Member Henderson made a motion to recommend the Sworn Market Comparison increases as discussed. Mayor Fotheringham seconded the motion, and all voted in favor; none opposed.

9. Battalion Chief/Division Chief Rank

Chief Burchett gave the committee a historical explanation of the Battalion Chief/Division Chief rank. The goal for staff has been to maintain a 16% spread from the Captain rank to the BC/DC rank. It would be the recommendation of staff to increase the spread to 18%, which would result in a \$63,000 increase to the budget.

Mayor Gettel made a motion to recommend the Battalion Chief/Division Chief compensation as discussed. Mayor Fotheringham seconded the motion and all voted in favor; none opposed.

10. Civilian Market Comparison

HR Director Day presented the civilian compensation market review to the committee, stating that 80 civilian positions were reviewed. As a result, 23 positions will receive market adjustments. Recommended increase ranged between 3-6%, with no position reclassifications required.

Mayor Jackson made a motion to recommend the Civilian Market Compensation increases as discussed. Mayor Bennion seconded the motion, and all voted in favor; none opposed.

11. Health and Dental Insurance Renewal Update

Deputy HR Director Calogero Ricotta introduced Gallagher representatives Rebecca Norfleet and Nathan Lamb, who presented the preliminary renewal analysis for UFA's health and dental insurance programs. Gallagher began by reviewing UFA's recent claims experience to provide context for the renewal projections.

For the 2025 calendar year, UFA experienced approximately \$5.5 million in medical claims, equating to \$293 per member per month (PMPM). This represents an 8.9% increase over the previous year. Gallagher explained that the increase was primarily driven by a rise in emergency room utilization and increased use of mental health and chemical dependency services.

Prescription drug claims also increased significantly. Pharmacy claims totaled approximately \$1.7 million, or \$90.87 PMPM, representing a 33.8% increase from the prior year. This increase was largely attributed to the use of high-cost specialty medications and claims related to chronic conditions requiring ongoing treatment.

Combined medical and pharmacy claims totaled approximately \$7.16 million for the year, resulting in a loss ratio of 103.5%. Gallagher explained that a loss ratio above 100% means the insurance carrier paid out more in claims than it received in premiums. In this case, for every dollar UFA paid in premiums, the carrier paid approximately \$1.03 in benefits.

Historical Cost Trends

Gallagher also reviewed the historical trend of plan costs compared to premium increases.

Over the past six years:

- Plan costs have increased approximately 42%
- Premiums have increased approximately 15%

Gallagher explained that Select Health had previously provided relatively low renewal increases, and in some years even reduced premiums, in order to remain competitive and retain UFA's business. However, with recent increases in claims utilization and the loss ratio exceeding 100%, the carrier indicated that it would be less willing to reduce the renewal amount significantly this year.

Select Health's preliminary renewal proposal included the following increases:

Medical Insurance

- 16.8% increase
- Approximately \$1.3 million in additional annual cost shared between UFA and employees

Dental Insurance

- 9.9% increase
- Approximately \$52,000 in additional annual cost

Gallagher noted that this proposed medical increase represents the largest renewal increase UFA has experienced in several years.

Plan Design Options to Reduce Premium Increases

Gallagher presented several plan design options intended to reduce the proposed premium increase while minimizing disruption to employees.

Option 1 – Moderate Deductible Adjustment

Under this option:

- Individual deductible increases from \$1,000 to \$2,000
- Family deductible increases from \$2,000 to \$4,000
- Out-of-pocket maximums increase proportionally

All other plan design features would remain the same. This adjustment would reduce the premium increase from 16.8% to approximately 6.7%.

Option 2 – Higher Deductible Adjustment

Under this option:

- Individual deductible increases to \$3,000
- Family deductible increases to \$6,000
- Out-of-pocket maximums increase to \$5,000 / \$10,000

This approach would effectively result in a rate hold, eliminating the premium increase.

Gallagher explained that increasing deductibles shifts some financial responsibility from the insurance carrier to plan participants, which lowers the overall cost of the plan.

Health Reimbursement Account (HRA) Options

Gallagher recommended pairing any deductible adjustments with changes to UFA's Health Reimbursement Account (HRA) program in order to offset the increased out-of-pocket exposure for employees. Currently, UFA provides HRA reimbursement through APA Benefits. Two potential approaches were presented:

#### Expanded HRA with Existing Administrator (APA)

Under this approach:

- Deductibles would increase
- HRA reimbursement limits would increase proportionally
- Employees would continue to utilize the current APA reimbursement structure

Gallagher explained that approximately 100 employees currently maximize their HRA benefit each year, and those utilization patterns were used in estimating the financial impact of the proposed changes. This option would maintain the existing administrative structure and minimize disruption for employees.

#### Alternative HRA with Care Navigation (Garner Health)

Gallagher also presented an option utilizing Garner Health, a healthcare navigation platform designed to guide employees toward high-quality, lower-cost medical providers.

The program includes:

- Provider recommendations based on cost and quality data
- Immediate HRA reimbursement beginning with the first dollar spent
- Financial incentives for employees who utilize recommended providers

Gallagher explained that this approach could reduce overall claims costs by encouraging employees to select more cost-effective providers.

The Board discussed several aspects of the proposal. Some members expressed concern about introducing an additional administrative layer through the Garner platform and questioned how provider rankings were determined and weighted. Other members noted that increasing deductibles while expanding the HRA could create an appropriate balance by encouraging responsible plan utilization while still protecting employees from significant out-of-pocket expenses. The Board members also discussed the importance of maintaining a competitive benefits package and ensuring employees have access to quality healthcare options.

The Board discussed a Health Savings Account (HSA) Consideration and asked whether transitioning to a High Deductible Health Plan (HDHP) with a Health Savings Account (HSA) had been evaluated. Gallagher explained that this option was reviewed but was not recommended at this time. Because HSA contributions are deposited directly into employee-owned accounts regardless of utilization, a significant portion of those funds would likely remain unused in the short term, reducing the cost savings compared to the HRA model. Gallagher recommended revisiting the HSA option in the future as claims trends evolve.

#### Dental Insurance Review

Gallagher recommended that UFA re-market the dental insurance plan to determine whether more competitive rates could be obtained. They also suggested exploring a self-funded dental model, which would allow UFA to pay actual claims rather than fixed premiums.

Under a self-funded dental structure:

- UFA would pay a monthly administrative fee to the carrier
- Claims would be paid directly by UFA
- Carrier profit margins built into traditional premiums would be avoided

Gallagher noted that dental plans are often suitable for self-funding because annual benefits are capped, which limits financial risk.

The Board expressed interest in exploring competitive bids for dental coverage and evaluating the feasibility of a self-funded dental plan.

12. Contract Employees/Possible Closed Session

Chair Buroker explained that the possible closed session was intended to allow the board members to discuss topics related to the contract employee compensation and performance considerations.

To ensure compliance with open meeting requirements and to provide the Board with an opportunity to give direction, the group agreed that the possible closed session discussion would be deferred to the March UFA Board Meeting.

13. Adjournment

Mayor Gary moved to postpone the closed session until the March UFA Board Meeting and adjourn the February 12, 2026, UFA Benefits and Compensation Committee Meeting. Mayor Fotheringham seconded the motion, and all voted in favor; none opposed.

BOARD MEMBERS IN ATTENDANCE

Council Member Henderson	Mayor Overson
Mayor Buroker	Mayor Gettel
Mayor Jackson	Mayor Gray
Mayor Fotheringham	Mayor Bennion

STAFF IN ATTENDANCE

Chief Dominic Burchett	CFO Tony Hill	CLO Brian Roberts
HRD Kiley Day	Clerk Micayla Dinkel	

ATTENDEES

AC Dern	AC Russell	AC Robinson
Union President Young	Union Vice President Doyle	
DOC Easton	HR Deputy Director Ricotta	Courtney Samuel
Captain Conn	Captain Beckman	Bill Brass
Sylvia Cardenas	BC Fossum	Rebecca Norfleet
Nathan Lamb		

## 2026 Renewal and Marketing Analysis

# Unified Fire Authority

**Presented By:**

**Michelle Morse | Area Vice President**

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Insurance | Risk Management | Consulting

Gallagher Benefit Services, Inc.

			CURRENT		RENEWAL OPTION #1		ALTERNATIVE PLAN DESIGN				
Carrier Name			SelectHealth		SelectHealth		SelectHealth				
Plan Name			Med / Value Tier \$1,000	Care / Value Tier \$1,000	Med / Value Tier \$1,000	Care / Value Tier \$1,000	Med/Value Tier \$2,000	Care/Value Tier \$2,000			
PLAN DESIGN*											
In-Network Benefits			Med / Value Network	Care / Value Network	Med / Value Network	Care / Value Network	Med / Value Network	Care / Value Network			
<b>Deductible Type</b>			Embedded	Embedded	Embedded	Embedded	Embedded	Embedded			
<b>Plan Year (PY) Deductible (Individual / Family)</b>			\$1,000 / \$2,000	\$1,000 / \$2,000	\$1,000 / \$2,000	\$1,000 / \$2,000	\$2,000/ \$4,000	\$2,000/ \$4,000			
<b>Out-of-Pocket Max Type</b>			Embedded	Embedded	Embedded	Embedded	Embedded	Embedded			
<b>CY Out-of-Pocket Max (Individual / Family)</b>			\$3,000 / \$6,000	\$3,000 / \$6,000	\$3,000 / \$6,000	\$3,000 / \$6,000	\$4,000 / \$8,000	\$4,000 / \$8,000			
<b>Coinsurance (member pays after deductible)</b>			20%	20%	20%	20%	20%	20%			
<b>Preventive Care</b>			Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%			
<b>Primary Care Visit</b>			\$15 Copay	\$15 Copay	\$15 Copay	\$15 Copay	\$15 Copay	\$15 Copay			
<b>Specialist Visit</b>			\$20 Copay	\$20 Copay	\$20 Copay	\$20 Copay	\$20 Copay	\$20 Copay			
<b>Urgent Care</b>			\$30 Copay	\$30 Copay	\$30 Copay	\$30 Copay	\$30 Copay	\$30 Copay			
<b>Emergency Room</b>			\$75 Copay after deductible	\$75 Copay after deductible	\$75 Copay after deductible	\$75 Copay after deductible	\$75 Copay after deductible	\$75 Copay after deductible			
<b>Prescription Drug Benefit</b>											
<b>Retail</b>			30 Days	30 Days	30 Days	30 Days	0	0%			
<b>Tier I / Tier II / Tier III</b>			\$10 / \$25 / \$45	\$10 / \$25 / \$45	\$10 / \$25 / \$45	\$10 / \$25 / \$45	30 Days	30 Days			
<b>Specialty</b>			\$100	\$100	\$100	\$100	\$10 / \$25 / \$45	\$10 / \$25 / \$45			
<b>Mail Order</b>			90 Days	90 Days	90 Days	90 Days	\$100	\$100			
<b>Tier I / Tier II / Tier III</b>			\$10 / \$50 / \$135	\$10 / \$50 / \$135	\$10 / \$50 / \$135	\$10 / \$50 / \$135	90 Days	90 Days			
<b>Out-of-Network Benefits</b>											
<b>Deductible Type</b>			Embedded	Embedded	Embedded	Embedded	Embedded	Embedded			
<b>CY Deductible (Individual / Family)</b>			\$2,000 / \$4,000	\$2,000 / \$4,000	\$2,000 / \$4,000	\$2,000 / \$4,000	\$4,000 / \$8,000	\$4,000 / \$8,000			
<b>Out-of-Pocket Max Type</b>			Embedded	Embedded	Embedded	Embedded	Embedded	Embedded			
<b>CY Out-of-Pocket Max (Individual / Family)</b>			\$6,000 / \$12,000	\$6,000 / \$12,000	\$6,000 / \$12,000	\$6,000 / \$12,000	\$8,000 / \$16,000	\$8,000 / \$16,000			
<b>Coinsurance (member pays after deductible)</b>			40%	40%	40%	40%	40%	40%			
COST ANALYSIS											
PEPM Rates - Enrollment		Med/ Value	Care/ Value	Med / Value Tier \$1,000	Care / Value Tier \$1,000	Med / Value Tier \$1,000	Care / Value Tier \$1,000	Med/Value Tier \$2,000	Care/Value Tier \$2,000		
<b>Employee (EE) Only</b>		101	14	\$564.80	\$580.10	\$641.00	\$658.40	\$585.40	\$601.30		
<b>EE + 1 Dep</b>		93	21	\$1,242.90	\$1,276.50	\$1,410.70	\$1,448.80	\$1,288.40	\$1,323.20		
<b>EE + Family</b>		246	18	\$1,695.10	\$1,740.30	\$1,923.90	\$1,975.20	\$1,757.10	\$1,804.00		
<b>Total Enrollment</b>		<b>440</b>	<b>53</b>								
<b>Estimated Monthly Premium</b>				\$589,629	\$66,253	\$669,216	\$75,196	\$611,193	\$68,677		
<b>Estimated Annual Premium</b>				\$7,075,549	\$795,040	\$8,030,586	\$902,352	\$7,334,318	\$824,129		
<b>Dollar Difference from Current</b>						\$955,037	\$107,312	\$258,769	\$29,089		
<b>Percent Change from Current</b>						13.5%	13.5%	3.7%	3.7%		
<b>Total Combined Annual Cost</b>											
				CURRENT		RENEWAL OPTION #2		ALTERNATIVE PLAN DESIGN			
<b>Estimated Annual Premium</b>				\$7,870,589		\$8,932,938		\$8,158,447			
<b>Dollar Difference from Current</b>						\$1,062,349		\$287,858			
<b>Percent Change from Current</b>						13.5%		3.7%			
PLAN PROVISIONS											
<b>Rate Guarantee</b>			1 year rate guarantee ending 06/30/2026			1 year rate guarantee ending 06/30/2027			1 year rate guarantee ending 06/30/2027		
<b>Eligibility</b>			FTE 30HRS/WK			FTE 30HRS/WK			FTE 30HRS/WK		

\*NOTE: Benefit deviations from Current are identified in blue font

Notes and Assumptions

Select Health rates are illustrative and require final approval



Unified Fire Authority

Dental | Fully-Insured Renewal | Effective 07/01/2026

		CURRENT		RENEWAL	
Carrier Name		Select Health Inc		Select Health Inc	
Plan Name		Dental Plan		Dental 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
<b>Coinsurance</b>					
Preventive Services		100%	80%	100%	80%
Cleaning Frequency		2 per year	2 per year	2 per year	2 per year
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		MAC		MAC	
COST ANALYSIS					
PEPM Rates		Dental Plan		Dental Plan	
Enrollment					
Employee (EE) Only		113		\$51.00	
EE + 1 Dep		129		\$69.60	
EE + Family		275		\$105.40	
Total Enrollment		517		\$115.80	
Estimated Monthly Premium		\$43,726		\$48,042	
Estimated Annual Premium		\$524,717		\$576,498	
Dollar Difference from Current				\$51,781	
Percent Change from Current				9.9%	
PLAN PROVISIONS					
Rate Guarantee		1 Year rate guarantee ending 06/30/2026		1 Year rate guarantee ending 06/30/2027	
Premium Paid Basis		Contributory		Contributory	
Eligibility		FTE 30HRS/WK		FTE 30HRS/WK	

\*NOTE: Benefit deviations from Current are identified in blue font

\*\*Exclusions/limitations may apply

Notes and Assumptions

**Unified Fire Authority**
**Dental | Fully-Insured Market Options | Effective 07/01/2026**

		CURRENT		MARKET OPTION 1	
Carrier Name		Select Health Inc		PEHP Health and Benefits	
Plan Name		Dental Plan		Preferred Dental Care	
PLAN DESIGN*					
Network		INN Classic Network	OON	INN	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
<b>Coinsurance</b>					
Preventive Services		100%	80%	80%	60%
Deductible Waived?		N/A	N/A	N/A	N/A
<b>Basic</b>		80%	60%	80%	60%
Periodontics		80%	60%	80%	60%
Endodontics		80%	60%	80%	60%
<b>Major</b>		50%	30%	50%	30%
Major Waiting period		None	None	None	None
Implants		50%	30%	50%	30%
Orthodontics		50%	50%	50%	50%
Deductible		No	No	No	No
Lifetime Max		\$1,500	\$1,500	\$1,500	\$1,500
Ortho Waiting Period		None	None	None	None
COST ANALYSIS					
PEPM Rates	Enrollment	Dental Plan		Preferred Dental Care	
Employee (EE) Only	113	\$51.00		\$36.90	
EE + 1 Dep	129	\$69.60		\$73.66	
EE + Family	275	\$105.40		\$114.72	
<b>Total Enrollment</b>		<b>517</b>			
Estimated Monthly Premium		\$43,726		\$45,220	
Estimated Annual Premium		\$524,717		\$542,638	
Dollar Difference from Current				\$17,921	
Percent Change from Current				3.4%	
PLAN PROVISIONS					
Rate Guarantee		1 Year rate guarantee ending 06/30/2026		1 Year rate guarantee ending 06/30/2027	
Premium Paid Basis		Contributory		Contributory	
Eligibility		FTE 30HRS/WK		FTE 30HRS/WK	

\*NOTE: Benefit deviations from Current are identified in blue font

\*\*Exclusions/limitations may apply

**Notes and Assumptions**

**Unified Fire Authority**
**Dental | Self Funded Market Options | Effective 07/01/2026**

	<b>CURRENT</b>		<b>MARKET OPTION 2</b>	
<b>Carrier Name</b>	Select Health Inc		Select Health Inc	
<b>Plan Name</b>	Dental Plan		Dental Plan	
<b>PLAN DESIGN*</b>				
<b>Network</b>	<b>INN Classic Network</b>	<b>OON</b>	<b>INN Classic Network</b>	<b>OON</b>
<b>Calendar Year (CY) Deductible (Individual / Family)</b>	\$0 / \$0	\$0 / \$0	\$0 / \$0	\$0 / \$0
<b>Annual Maximum</b>	\$1,500	\$1,500	\$1,500.00	\$1,500.00
<b>Coinsurance</b>				
<b>Preventive Services</b>	100%	80%	100%	80%
<b>Cleaning Frequency</b>	2 per year	2 per year	2 per year	2 per year
<b>Deductible Waived?</b>	N/A	N/A	N/A	N/A
<b>Basic</b>	80%	60%	80%	60%
<b>Periodontics</b>	80%	60%	80%	60%
<b>Endodontics</b>	80%	60%	80%	60%
<b>Major</b>	50%	30%	50%	30%
<b>Major Waiting period</b>	None	None	None	None
<b>Implants</b>	50%	30%	50%	30%
<b>Orthodontics</b>	50%	50%	50%	50%
<b>Maximum Age</b>	Children and Adult	Children and Adult	Children and Adult	Children and Adult
<b>Deductible</b>	No	No	No	No
<b>Lifetime Max</b>	\$1,500	\$1,500	\$1,500.00	\$1,500.00
<b>Ortho Waiting Period</b>	None	None	None	None
<b>OON Reimbursement Level</b>	MAC		MAC	
<b>COST ANALYSIS</b>				
<b>Administration Rates PEPM</b>	N/A		<b>RENEWAL</b> \$5.22 PEPM	
<b>PLAN PROVISIONS</b>				
<b>Rate Guarantee</b>	1 Year rate guarantee ending 06/30/2026		1 Year rate guarantee ending 06/30/2027	
<b>Premium Paid Basis</b>	Contributory		Contributory	
<b>Eligibility</b>	FTE 30HRS/WK		FTE 30HRS/WK	

\*NOTE: Benefit deviations from Current are identified in blue font

\*\*Exclusions/limitations may apply

**Notes and Assumptions**



## Unified Fire Authority

### Medical | Fully-Insured Marketing Activity Summary | Effective 07/01/2026

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

*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>).*

Unified Fire Authority  
 Fully-Insured Marketing Activity Summary | Effective 07/01/2026

Health Lines of Coverage: Including Medical, Dental, Vision and EAPs					
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	Self-Funded Quote	1 Year	\$2.75 PEPM	N/A
Dental	PEHP Health and Benefits	Quote	1 Year	\$6 PEPM	N/A
Vision	EyeMed	Current / Renewal	4 Year	0%	N/A
Dental	Cigna	Declined to Quote			
<p><i>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 &amp; 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.</i></p>					

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

<b>**A.M. Best Rating</b>	
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	
<p><i>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 (<a href="https://www.ajg.com/us/about-us/global-standards">https://www.ajg.com/us/about-us/global-standards</a>).</i></p>	

## Unified Fire Authority 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.*

### Renewal / Financial Disclaimer

*This analysis is for illustrative purposes only, and is not a proposal for coverage or a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. See your policy or contact us for specific information or further details in this regard.*

### Legal

*The intent of this analysis is to provide you with general information regarding the status of, and/or potential concerns related to, your current employee benefits environment. It should not be construed as, nor is it intended to provide, legal advice. Laws may be complex and subject to change. This information is based on current interpretation of the law and is not guaranteed. Questions regarding specific issues should be addressed by legal counsel who specializes in this practice area.*

# UNIFIED FIRE AUTHORITY

## Chief Legal Officer

### Base Salary Comparison - Local Jurisdictions (Top 10 Actual)

9/18/2025

Entity	Title	Salary 2025
SOUTH SALT LAKE	CITY ATTORNEY	\$264,430
DAVIS COUNTY	COUNTY ATTORNEY	\$254,255
SALT LAKE CITY	City Attorney - 001553	\$237,640
MURRAY	CITY ATTORNEY	\$236,558
LAYTON	CITY ATTORNEY	\$226,741
SALT LAKE COUNTY	District Attorney	\$223,059
WEST VALLEY	CITY ATTORNEY	\$222,893
SANDY	CITY ATTORNEY	\$220,771
PROVO	CITY ATTORNEY	\$213,179
UTAH COUNTY	Elected County Attorney(1002)	\$212,867
AVERAGE		\$231,239
UNIFIED FIRE AUTHORITY	CHIEF LEGAL OFFICER	\$222,410

### Compensation Adjustment Breakdown

Adjustment Type	Percentage Increase	Dollar Impact	Adjusted Salary
COLA (Per Contractual Agreement)	3.60%	\$8,007	\$230,417
Market Adjustment	0.37%	\$853	\$231,269

FIRE CHIEF COMPENSATION ANALYSIS - September 2025					Nov-21	Mar-25	Feb-26
Agency	Role	Employees	Population Served	Municipalities Served	Total Wage	Total Wage	Total Wage
South Metro Fire District (CO)	CEO	728	540,000	10	301,788	397,439	349,522
Sacramento Metropolitan Fire District (CA)	CEO	749	738,000	23	248,535	333,799	333,799
Orange County Fire Authority (CA)	CEO	1,737	2,000,000	23	242,052	350,000	350,000
West Metro Fire District (CO)	CEO	471	280,000	4	220,897	220,897	220,897
Tualatin Valley Fire and Rescue (OR)	CEO	556	535,000	11	241,298	277,283	337,193
Salt Lake City (UT)	Department Director	355	218,518	1	203,303	232,609	261,500
Park City Fire District (UT)	CEO	140	30,000	1	193,217	225,000	218,411
Average Wage of all seven comparable agencies					235,870	291,004	295,903
Unified Fire Authority (UT)	CEO	759	473,921	16		241,926	260,660
UFA Relative to Average Wage						-20.29%	-13.52%

Compensation Adjustment Breakdown			
Adjustment Type	Percentage Increase	Dollar Impact	Adjusted Salary
COLA (Per Contractual Agreement)	3.60%	\$9,384	\$270,044
Market Adjustment	9.92%	\$26,788	\$296,832