



# Benefits Enrollment Guide '20

## **Benefit Carrier Information**

**Selecthealth- Medical**  
[www.selecthealth.org](http://www.selecthealth.org)  
800-538-5038

**DentalSelect- Dental**  
[www.dentalselect.com](http://www.dentalselect.com)  
800-999-9789

**Dental Select- Vision**  
[www.dentalselect.com](http://www.dentalselect.com)  
800-999-9789

**The Hartford- Voluntary Life**  
Customer Solutions Center at 800-523-2233

**Intermountain Employee Assistance Plan**  
1-800-832-7733  
1-801-442-3509  
[www.intermountainhealthcare.org/EAP](http://www.intermountainhealthcare.org/EAP)

**Flexible Spending Account- NBS**  
1-801-532-4000  
[www.NBSBenefits.com](http://www.NBSBenefits.com)

**Keyes Insurance Services, Inc. - Broker/Claims Assistance**  
[www.keyesinsuranceservices.com](http://www.keyesinsuranceservices.com)  
Dirk Keyes- 801-394-2600  
dirk@keyesinsuranceservices.com  
Toll Free: 800-331-0167

**Utah State Retirement Systems**  
[www.URS.org](http://www.URS.org)  
1-800-695-4877





# Health Plans

# YOUR COST IN 2020

Despite rising health care costs and unprecedented changes resulting from health care reform, Weber County is still able to provide multiple options with minimal cost out of your check. The County will provide you with the following contributions with which to purchase one of the 4 medical plan options available.

Employee Only	\$350
Employee +1	\$815
Family	\$1000

Additionally if you enroll in the High Deductible Health Plan option, the County will make the following contribution to your H.S.A accounts for 2020

Employee	\$600
Two- Party	\$850
Family	\$1,100

1/12 of these amounts will be deposited into your Health Equity H.S.A. Accounts on a monthly basis.

# Health Insurance

## Traditional Plans

The following charts compares our current health benefits for the 2020 plan year.



Services	SelectMed Network		Select Value Network
	In- Network	Out of Network	In - Network
Deductible - Individual - Family	\$1,000/\$2,000	\$2,000/\$4,000	1,000/\$2,000
Out-of-pocket Maximum - Individual - Family	\$4,000/\$8,000	\$8,000/\$16,000	\$4,000/\$8,000
PCP/ SCP- Physician Visit Copay	\$35/\$50	40% After Ded	\$35/\$45
Hospitalization	20% After Ded	40% After Ded	20 % After Ded
Preventive Care	100%	Not Covered	100%
Emergency Room Copay	\$300 After Ded	\$300 After Ded	\$300 After Ded
Prescription Drugs			
- Tier 1	\$10		\$10
- Tier 2	\$100 Ded-		\$100 Ded-
- Tier 3	\$30		\$30
- Tier 4	\$50		\$50
	\$100		\$100

### Per Pay Period Cost After County Contribution

	SelectMed Plus	Value
Employee	\$74.70	\$55.25
Employee + One	\$180.15	\$134.65
Employee and Family	\$211.75	\$156.90

# Health Insurance

\$2500/ \$5000 Deductible HDHP Plans



Services	SelectMed Network		Select Value Network
	In- Network	Out of Network	In -Network
<b>Deductible</b> - Individual - Family	\$2,500/\$5,000	\$2,750/\$5,500	\$2,500/\$5,000
<b>Out-of-pocket Maximum</b> - Individual - Family	\$2,500/\$5,000	\$4,000/\$8,000	\$2,500/\$5,000
<b>PCP/ SCP- Physician Visit Copay</b>	100% After Ded	40% After Ded	100% After Ded
<b>Hospitalization</b>	100% After Ded	40% After Ded	100% After Ded
<b>Preventive Care</b>	100%	Not Covered	100%
<b>Emergency Room Copay</b>	100% After Ded	\$75 After Ded	100% After Ded
<b>Prescription Drugs</b> - Retail - Tier 1 - Tier 2 - Tier 3 - Tier 4	After Ded 100%		After Ded 100%

**Per Pay Period Cost After County Contribution**

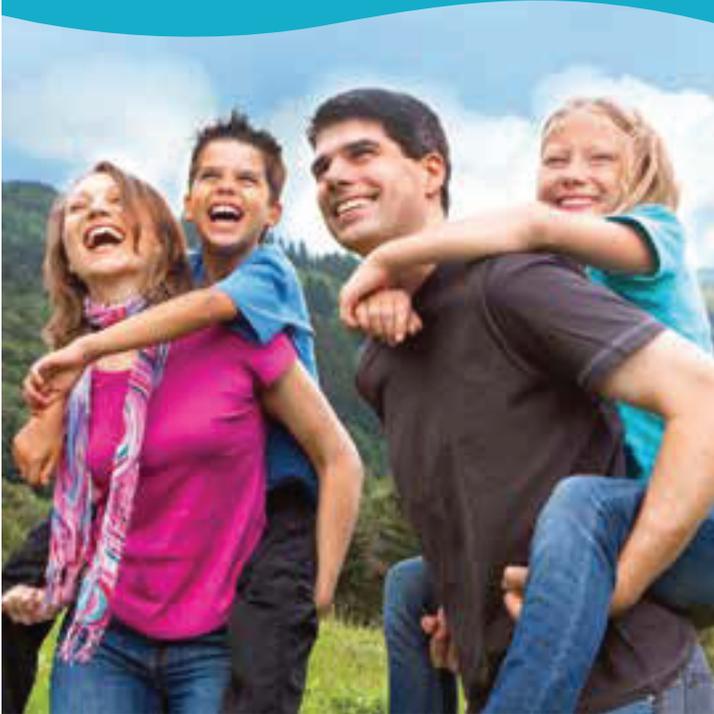
	SelectMed Plus	Value
<b>Employee</b>	\$42.25	\$25.05
<b>Employee + One</b>	\$103.75	\$63.40
<b>Employee and Family</b>	\$119.20	\$70.55



# Employee Assistance Program

"Thank you for providing this service. It has really helped ease my burdens and made my life better, including my worklife!"

~ EAP CUSTOMER



## Your LiVe Well Partner Offering free, confidential, and brief counseling to employees and their family members.

The LiVe Well Employee Assistance Program is your partner in living a life filled with energy, strength, and vitality. Taking care of your mental health is as essential to your wellbeing as taking care of your physical health. Rewarding relationships at home and work, effective stress management skills, and learning to thrive with life changes all improve your ability to LiVe Well.

### EAP SERVICES

**Counseling:** Free, brief counseling for life problems such as conflict at work or with a family member, depression, anxiety, and life stress. Services are available to employees, spouses or partners, and dependent children (under 26 years old and single.)

**Help for Caregivers:** Information, resources, and coaching for employees who are providing assistance to a spouse or relative who is ill, disabled, or needs help with basic activities of daily living. Caregiver services can help identify medical, legal, and financial resources, as well as provide support for the emotional issues of caregiving.

**Crisis Services:** 24/7 telephone crisis services with a licensed mental health professional. Adverse Event Support Services are available when an unexpected trauma occurs affecting the worksite.

**Website:** Valuable resources for employees and family members including *Quick Tips* on common life problems, resources such as "Our Favorite Books," and a sign up for bi-monthly *LiVe Well E-Tips*. You will also find details about our office locations and staff biographies.

[www.intermountainhealthcare.org/eap](http://www.intermountainhealthcare.org/eap)

### CONTACT US

Call 801.442.3509 or 800.832.7733 from 8:00 a.m. – 5:00 p.m. (MST) to schedule an appointment or speak with the office staff. A crisis counselor is available by phone 24/7 at the same number.

You can also e-mail us at [eap@imail.org](mailto:eap@imail.org) with non-urgent questions or feedback.



**YOUR**  
HEALTHCARE

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# Online Tools

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Whether you need to see how much a doctor billed, look up prescription costs, or learn more about your benefits, *My Health* is your source for personal plan information. *My Health* is available 24 hours a day, seven days a week at **selecthealth.org** or through our mobile app.

## COVERAGE AND CLAIMS

View your plan information, claim details, Explanations of Benefits (EOBs), and sign up for paperless EOBs.

## PHARMACY TOOLS

Access your pharmacy benefit information, claims, prescription history, and lower-cost drug alternative information.

## ID CARDS

No worries—view and print copies of your ID Card by clicking on “Coverage” in the “Insurance” tab.

## SEND SECURE MESSAGES

Send secure messages to SelectHealth® Member Services or your doctor. This is a confidential and convenient way to get your questions answered.

## ACCESS MEDICAL RECORDS

Our integration with Intermountain Healthcare® gives you access to your medical records\* through *My Health*. You can view lab results, medications, and imaging reports. You can also track your doctors’ appointments and email questions to providers who participate in this program.

*\*May not be available for all providers and facilities.*



### NEED MORE INFORMATION?



WEB

**[selecthealth.org/myhealth](https://selecthealth.org/myhealth)**



PHONE

**800-538-5038**

## REQUEST A CALL

Use our call request feature to get in touch with Member Services. You can schedule an immediate call or set a time for us to call you back.



# Dental

# DENTAL INSURANCE

In addition to protecting your smile, dental insurance helps pay for dental care and usually includes regular checkups, cleanings, and X-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body including your heart. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery.

The following chart outlines the dental benefits we offer.



Type of Service	Dental Plan Coverage Amount - In Network
<b>Preventive Services</b>	Exams, cleanings, X-rays – 100%
<b>Deductible</b>	Applies to basic and major services only – \$50/\$150
<b>Basic Services</b>	Fillings, simple extractions – 80% (After Deductible)
<b>Major Services</b>	Oral surgery, root canal, crowns – 50% (After Deductible)
<b>Annual Maximum</b>	\$3000
<b>Orthodontia Child or Adult</b>	50% to \$1000 <b>lifetime</b> maximum benefit
	***Services out of network may be subject to balance billing***

### Per Pay Period Cost After County Contribution

<b>Employee</b>	<b>\$1.55</b>
<b>Employee + One</b>	<b>\$2.95</b>
<b>Employee and Family</b>	<b>\$4.44</b>

Customer Service 1-800-999-9789  
[www.dentalselect.com](http://www.dentalselect.com)

A vertical decorative bar on the left side of the page, featuring a teal-to-white gradient. It contains various white line-art icons including a dollar sign, a group of people, an eye, a wheelchair, a clock, a heart with a plus sign, a piggy bank, a speech bubble, a hand holding a heart, a medical building, and a pulse line.

# Pre-Tax Accounts

# FLEXIBLE SPENDING ACCOUNTS



Paying for health care can be stressful. That's why Weber County offers an employer-sponsored flexible spending account (FSA).

## WHAT ARE THE BENEFITS OF AN FSA?

- **It saves you money.** Allows you to put aside money tax-free that can be used for qualified medical expenses.
- **It's a tax-saver.** Since your taxable income is decreased by your contributions, you will pay less in taxes.
- **It is flexible.** You can use your FSA funds at any time, even if it's the beginning of the year.

You cannot stockpile money in your FSA. **If you do not use it, you lose it.** You should only contribute the amount of money you expect to pay out of pocket that year.

## WHAT IS A DEPENDENT CARE FSA?

Dependent Care FSAs allow you to contribute pre-tax dollars to qualified dependent care. The maximum amount you may contribute each year is \$5,000 (or \$2,500 if married and filing separately).

## HOW DO I ENROLL?

Fill out the FSA Enrollment section on Employee Navigator during Open Enrollment. Even if you signed up last year, you must re-enroll for 2020.

FSA savings example: *Bob and Jane's combined gross income is \$30,000. They have two children and file their income taxes jointly. Since Bob and Jane expect to spend \$2,000 in adult orthodontia and \$3,000 for day care next plan year, they decide to direct a total of \$5,000 into their FSAs.*

	Without FSAs	With FSAs
Gross income	\$30,000	\$30,000
FSA contributions	0	-\$5,000
Gross income	\$30,000	\$25,000
Estimated taxes		
Federal tax	-\$2,550*	-\$1,776*
State tax	-\$900**	-\$750**
FICA tax	-\$2,295	-\$1,913
After-tax earnings	\$24,255	\$20,314
Eligible out-of-pocket expenses		
Medical and dependent care expenses:	-\$5,000	\$0
Remaining spendable income	\$19,255	\$20,561
Spendable income increase		\$1,306

\*Assumes standard deductions and four exemptions. \*\*Varies, assume 3 percent.

## Flexible Spending Account (FSA)

### Two types of FSAs

For a health FSA, start by choosing an annual election amount. This amount will be available on day one of your plan year for eligible medical expenses.

Then, payroll deductions will be made throughout the plan year to fund your account.

A dependent care FSA works differently than a health FSA. Money is only available as it is contributed and can only be used for dependent care expenses.

Both are pre-tax benefits your employer offers through a cafeteria plan. Choose one or both —whichever is right for you.

### What's a cafeteria plan?

A cafeteria plan enables you to save money on group insurance, health care expenses, and dependent care expenses. Your contributions are deducted from your paycheck by your employer before taxes are withheld. These deductions lower your taxable income which can save you up to 35% on income taxes!

## Partial List of Eligible Expenses:

- ✓ Medical/Dental/Vision Copays and deductibles
- ✓ Prescription Drugs
- ✓ Physical Therapy
- ✓ Chiropractor
- ✓ First-Aid Supplies
- ✓ Lab Fees
- ✓ Psychiatrist/Psychologist
- ✓ Vaccinations
- ✓ Dental Work/Orthodontia
- ✓ Eye Exams
- ✓ Laser Eye Surgery
- ✓ Eyeglasses, Contact Lenses, Lens Solution
- ✓ Prescribed OTC Medications

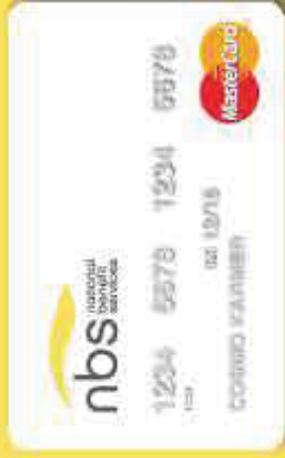


### Enrollment Considerations

After the enrollment period ends, you may increase, decrease, or stop your contribution only when you experience a qualifying "change of status" (e.g. marriage, divorce, employment change, dependent change).

Be conservative in the total amount you elect to avoid forfeiting money at the end of the plan year.

## How to Spend



### Spending is easy

Our convenient NBS Benefits Card allows you to avoid out-of-pocket expenses, cumbersome claim forms and reimbursement delays. Or you may also utilize the "pay a provider" option on our web portal.

### Account access is easy

Get account information from our easy-to-use online portal and mobile app. See your account balance, contributions and account history in real time.

## What if I don't use it all?

Because an FSA is a planning tool with great tax benefits, you must use the account balance in its entirety before the end of the plan year or it will be forfeited. This is known as the "use-it-or-lose-it" rule.

Your employer may offer a grace period or a \$500 rollover to help if you miss the mark a little bit. *Just make sure to plan carefully when you enroll.*

# HEALTH SAVINGS ACCOUNTS

Health savings accounts (HSAs) are a great way to save money and budget for qualified medical expenses. HSAs are tax-advantaged savings accounts that accompany high deductible health plans (HDHPs). HDHPs offer lower monthly premiums in exchange for a higher deductible (the amount you pay before insurance kicks in).

## WHAT ARE THE BENEFITS OF AN HSA?

- **It saves you money.** HDHPs have lower monthly premiums, meaning less money is being taken out of your paycheck.
- **It is portable.** The money in your HSA is carried over from year- to -year and is yours to keep, even if you leave Weber County.
- **It is a tax-saver.** HSA contributions are made with pre-tax dollars. Since your taxable income is decreased by your contributions, you'll pay less in taxes.
- **It is Adjustable.** You have flexibility on the amount you want to contribute, up to the allowable yearly limit. You can change or adjust your contribution anytime during the year.
- **It is Another Way to Invest.** Once your account balance reaches the amount determined by Health Equity, you have the option to invest your money in several investment options.
- **Save for Medical Expenses.** The money you save can be used now, and into retirement to pay for out of pocket medical expenses.

The maximum amount that you can contribute to an HSA in 2020, it is \$3,550 for individual coverage and \$7,100 for family coverage.

Additionally, if you are age 55 or older, you may make an additional "catch-up" contribution of \$1,000. You may change your contribution amount at any time throughout the year as long as you don't exceed the annual maximum.

For more information visit [www.healthequity.com](http://www.healthequity.com)



# Vision

# VISION INSURANCE

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

If you seek the services of a provider listed in our Preferred Provider Directory, your benefits include:



Type of Service	Benefit- In Network
Eye Exam	\$10 Co-Pay
Standard Lenses	\$10 Co-Pay
Lens Options	\$15-\$65 Co-Pay
Frames	\$140 Allowance
Frequency	Exams, Lenses, Frames, Contact – Once every 12 month

## Cost per pay period

Employee	\$3.10
Two-Party	\$5.83
Family	\$8.61

Customer Service 1-800-999-9789

[www.dentalselect.com](http://www.dentalselect.com)



# Life Insurance

# VOLUNTARY LIFE INSURANCE

Weber County offers group supplemental life insurance for you and your dependents. Think about your personal circumstances. Are you the sole provider for your household? What other expenses do you expect in the future? Depending on your needs, you may want to consider buying supplemental coverage.

With voluntary life insurance, you are responsible for paying the full cost of coverage through bi-weekly payroll deductions. You can purchase coverage for yourself or for your spouse in \$10,000 increments. The minimum coverage level is \$10,000 and the maximum is \$300,000.

**Guarantee Issue:**

If you enroll within 30 days of becoming eligible then you qualify for the Guaranteed Issue amount. This means you can purchase up to the amount listed without having to prove good health.

Employee      Up to \$250,000  
 Spouse        Up to \$ 50,000  
 Children      Up to \$10,000

The chart below outlines the monthly costs of purchasing additional coverage.



Monthly Cost for Every \$1,000 of Employee and Spouse Life Insurance Coverage										
Age	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
	\$.072	\$.072	\$.100	\$.138	\$.245	\$.358	\$.509	\$.813	\$1.802	\$3.775
Dependent Children										
Amount	\$1,000	\$2,000	\$3,000	\$4,000	\$5,000	\$6,000	\$7,000	\$8,000	\$9,000	\$10,000
Cost-monthly	\$.25	\$.50	\$.75	\$1.00	\$1.25	\$1.50	\$1.75	\$2.00	\$2.25	\$2.50

**Premium Calculation:**

$$\frac{\text{Amount}}{\text{Div by } \$1,000} = \text{Rate} \times \text{Amount} = \$ \text{Monthly Cost}$$

# VOLUNTARY ACCIDENT

**What is accident insurance?** Accident insurance offers financial protection by paying a cash benefit if you or an insured dependent are unexpectedly injured in a covered accident. This coverage is offered by your employer which you pay for through convenient deductions from your paycheck. The benefits are paid in lump sum amounts to you (or your beneficiary), and can be used to help pay for health care expenses not covered by your major medical insurance, help replace income lost while not working, or however you choose. This highlight sheet is an overview of your accident insurance. A certificate of insurance will be available after you enroll to explain your coverage in detail.

**Who is eligible?** You are eligible if you are an active full-time employee who works at least 30 hours per week on a regularly scheduled basis and are less than age 80. Your spouse's eligibility is based upon your age, and your dependent child(ren) must be under age 26 to be eligible.

**What is covered?** This insurance provides benefits for medical treatment and services related to accidental injuries. Benefits for specific types of injuries and catastrophic injuries (including accidental death) are also available. Please refer to the benefits table on the following page for more detailed plan information.

*\*subject to any plan limitations and exclusions\**



Type of Service	Benefit	Type of Service	Benefit
Daily Hospital Confinement	\$200 per day up to 365 days/lifetime	Ambulance - Air	\$900 once per accident
Emergency Room	\$150 once per accident	Chiropractic Care	\$25 per visit up to 10 visits
Fractured Forearm	\$1000 radius or Ulna	Abdominal Surgery	\$1500 once per accident
Fractured Ankle	\$1000 once per bone/accident	Burn - 3rd Degree	Up to \$10,000
Ambulance - Ground	\$300 once per accident	Knee Cartilage Repair	Up to \$750
Dislocated Shoulder	\$1000 once per joint/lifetime	Fractured Collarbone	\$1000 once per bone/accident
Urgent Care	\$75 once per accident	Fractured Wrist	\$1000 once per bone/accident
Arthroscopic Surgery	\$300 within 90 days of accident	Accidental Death	\$30,000 (employee)
Emergency Dental Crown	\$300 one within 90 days	Loss of sight - both eyes	\$30,000 within 90 days

## Full Schedule of Benefits Available Through HR

### Cost per pay period

Employee	\$4.04
EE + Spouse	\$6.36
EE+ Child(ren)	\$6.67
Family	\$10.51

# VOLUNTARY CRITICAL ILLNESS



**What is critical illness insurance?** Critical illness insurance is coverage offered by your employer which you pay for through convenient deductions from your paycheck. It can assist you financially if you or a covered dependent are ever diagnosed with a covered critical illness (shown below).

The benefits are paid in lump sum amounts and can serve as a source of cash to use as you wish, whether to help pay for health care expenses not covered by your major medical insurance, help replace income lost while not working, or however you choose. This highlight sheet is an overview of your critical illness insurance. A certificate of insurance will be available after you enroll to explain your coverage in detail.

**Who is eligible?** You are eligible if you are an active full-time employee who works at least 30 hours per week on a regularly scheduled basis, and are less than age 80. Your spouse's eligibility is based upon your age, and your dependent child(ren) must be under age 26 to be eligible.

**How much coverage can I purchase?**

You may enroll for \$5,000, \$10,000, \$20,000, or \$30,000 in coverage. You may also enroll your dependent(s) for the following amounts of coverage:

- Spouse: 50% of your elected coverage amount
- Child(ren): \$5,000

A benefit reduction of 50% will apply to the coverage amount for you and your dependent(s) when you reach the age of 70.

**Am I guaranteed coverage?** During designated enrollment periods, this coverage is offered without having to provide information about your health for coverage amounts up to \$30,000. This is called "guaranteed issue (GI)" coverage – all you have to do is check the box to enroll and become insured. All amounts of dependent coverage are guaranteed issue.

**How many times will the policy pay?** This insurance will pay a benefit multiple times, in the unfortunate event you or a dependent are diagnosed with more than one covered illness. The total amount of benefits payable for covered illnesses for each covered person under the policy is subject to a maximum, as follows:

- You – 500% of the coverage amount
- Spouse – 500% of the coverage amount
- Child(ren) – 300% of the coverage amount

If the benefits paid for a dependent reach the coverage maximum, coverage for the dependent will end. If the benefits paid for you reach the coverage maximum, coverage for you and your dependent(s) will end.

**What illnesses are covered?** This insurance will pay a lump sum benefit if you or a dependent are diagnosed with any of the following covered illnesses while insurance is in effect, subject to any pre-existing condition limitation.

**Cancer Conditions**

Invasive Cancer; Benign Brain Tumor; Non-Invasive Cancer

**Vascular Conditions**

Heart Attack; Heart Transplant; Stroke; Coronary Artery Bypass Graft; Angioplasty/Stent;

**Other Specified Conditions**

Major Organ Transplant; End Stage Renal Failure; Coma; Paralysis; Loss of Vision; Loss of Hearing; Loss of Speech

*\*subject to any plan limitations and exclusions\**

# Critical Illness Cost

Attained Age Per Pay Period Premium for \$30,000 Coverage Amount

Age	Employee	Employee & Spouse	Employee & Child	Family
18-24	\$4.72	\$7.32	\$6.16	\$9.00
25-29	\$5.87	\$9.03	\$7.21	\$10.59
30-34	\$6.64	\$10.17	\$7.80	\$11.53
35-39	\$8.60	\$13.11	\$9.65	\$14.34
40-44	\$12.21	\$18.63	\$13.18	\$19.76
45-49	\$19.23	\$29.47	\$20.18	\$30.57
50-54	\$26.98	\$41.50	\$27.91	\$42.57
55-59	\$37.05	\$57.16	\$37.97	\$58.23
60-64	\$52.42	\$80.98	\$53.33	\$82.04
65-69	\$71.84	\$110.57	\$72.74	\$111.62
70-74	\$48.02	\$74.00	\$48.70	\$74.79
75-79	\$62.62	\$96.17	\$63.30	\$96.96

# VOLUNTARY SHORT TERM DISABILITY

Disability insurance is critical in protecting your income should you become disabled due to injury or illness. Weber County offers group Long Term Disability through PEHP at no cost to you. Long Term Disability can protect your income in the event you are disabled due to accident or illness and can provide coverage to bridge the gap to until your retirement. Short Term Disability can provide you coverage for the time between when you become disabled up to the time when the PEHP benefits start.



Type of Service	Benefit
Benefit Schedule	66 2/3 of Weekly earnings
Maximum weekly benefit	\$1700
Benefit start	Benefits start the 8 <sup>th</sup> day after becoming disabled
Benefit duration	12 weeks

The chart below outlines the monthly costs of purchasing additional coverage.

Monthly Cost for Every \$10 of weekly benefit										
Age	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
	\$.545	\$.62	\$.675	\$.469	\$.405	\$.451	\$.537	\$.702	\$.846	\$.922

Premium Calculation:

$$\frac{\text{Monthly Salary}}{\text{Monthly Salary}} \times 12 = \frac{\text{annual salary}}{\text{annual salary}} \quad \text{Div. by } 52 = \frac{\text{Weekly salary}}{\text{Weekly salary}} \quad \times .6666 = \frac{\text{Weekly benefit}}{\text{Weekly benefit}}$$

$$\text{Div. by } 10 \quad \times \text{rate} = \frac{\text{(Above)}}{\text{(Above)}} = \$ \frac{\text{Monthly cost}}{\text{Monthly cost}}$$

# Enrolling Through



- Watch for an email inviting you to enroll
- Click on the enrollment link in the email

From: Employee Navigator [mailto:noreply@employeenavigator.com]  
Sent: Tuesday, August 15, 2017 9:56 AM  
To: dirk@keyesinsuranceservices.com  
Subject: New Hire Benefit Enrollment

Dear Dirk Keyes,

Congratulations on your new position with Weber County! You can now begin the new hire enrollment process by accessing this [Registration](#) link. You are required to complete the enrollment process even if you are declining benefits. Enrollment must be completed immediately or you may not be able to enroll until our next Open Enrollment.

During the registration process you will be required to enter personal identifying data as well as the following **company identifier: webco.**

Please direct any questions about enrollment or benefits to your HR administrator.

Thank you,  
Weber County

\*\*This is an automatic email. Please do not reply.\*\*

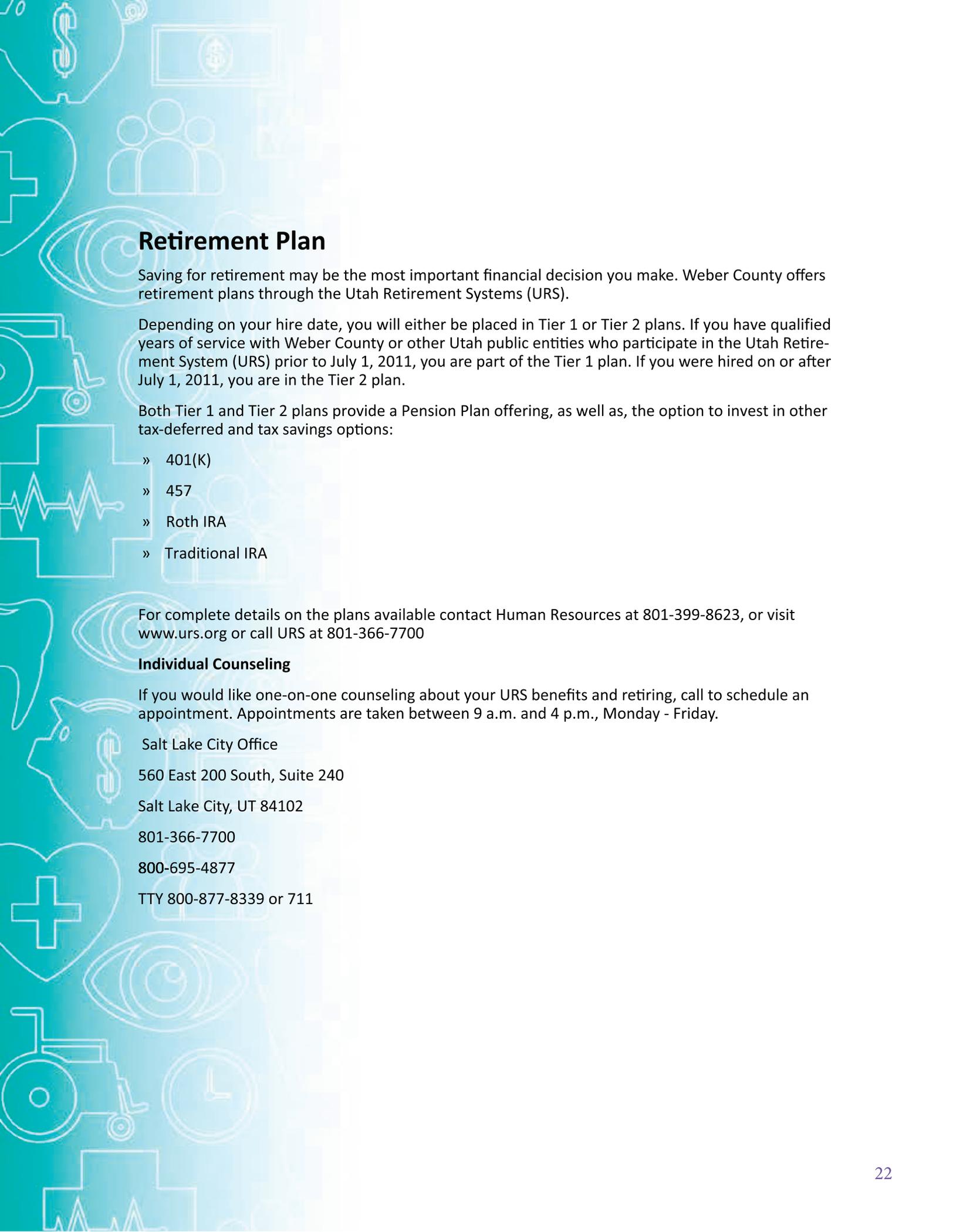
Input your information, including all your dependents information  
Review and Select your benefits for 2020

The screenshot shows the Employee Navigator web portal. The top navigation bar includes links for DEMO EMP, PROFILE, BENEFITS, REQUIRED TASKS, and RESOURCES. The left sidebar has a menu with PROFILE, BENEFITS, FORMS, and SUMMARY. The main content area is titled 'Medical' and contains a 'Who am I enrolling?' section with 'Myself' selected. Below that is a 'Which plan do I want?' section with three options: '2018: Select MED Signature 1000/2000' (cost \$42.10), '2018 Select Value Signature 1000/2000' (cost \$25.20), and '2018 Select MED Healthsave 2500/5000'. The right sidebar shows 'MY SELECTIONS' with 'Open Enrollment: No election yet' and 'Current: No election on file'. Below that are 'HELPFUL RESOURCES' including 'Select Value Healthsave 2500', 'Select Value Signature', 'SelectMed Healthsave 2500', and 'SelectMed Signature'.

- Confirm your enrollment and submit
- Print off a copy of your enrollment confirmation for your records



# Retirement



## Retirement Plan

Saving for retirement may be the most important financial decision you make. Weber County offers retirement plans through the Utah Retirement Systems (URS).

Depending on your hire date, you will either be placed in Tier 1 or Tier 2 plans. If you have qualified years of service with Weber County or other Utah public entities who participate in the Utah Retirement System (URS) prior to July 1, 2011, you are part of the Tier 1 plan. If you were hired on or after July 1, 2011, you are in the Tier 2 plan.

Both Tier 1 and Tier 2 plans provide a Pension Plan offering, as well as, the option to invest in other tax-deferred and tax savings options:

- » 401(K)
- » 457
- » Roth IRA
- » Traditional IRA

For complete details on the plans available contact Human Resources at 801-399-8623, or visit [www.urs.org](http://www.urs.org) or call URS at 801-366-7700

### Individual Counseling

If you would like one-on-one counseling about your URS benefits and retiring, call to schedule an appointment. Appointments are taken between 9 a.m. and 4 p.m., Monday - Friday.

Salt Lake City Office

560 East 200 South, Suite 240

Salt Lake City, UT 84102

801-366-7700

800-695-4877

TTY 800-877-8339 or 711