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|  | UNIFIED FIRE AUTHORITY ORGANIZATIONAL MANUAL | |
| | Affiliation: Human Resources Policies | |
| | Title: Insurance Eligibility Number: 900 - 320 | |
| | Approved: 06/04/2024 | By: Fire Chief Dominic Burchett |
| | Last Reviewed: | By: |

REFERENCES:

[UFA Policy and Procedure – Family and Medical Leave Act \(FMLA\)](#)

[UFA Policy and Procedure – Voluntary Leave Without Pay](#)

[UFA Policy and Procedure – Fitness for Duty Evaluations and Return to Duty after Illness or Injury](#)

[Utah Code Title 49 Utah State Retirement and Insurance Benefit Act](#)

[Utah Code Title 53 Public Safety Code Chapter 17 Part 2 Section 201: Surviving spouse and children health coverage for line-of-duty death](#)

POLICY:

1.0 Employee Coverage.

- 1.1 The effective date for group insurance for eligible employees will be based on the date of hire or other qualifying event.
 - 1.1.1. Enrollment material must be received by the Human Resources Division no later than 30 days from the date of hire or qualifying event.
 - 1.1.2 Employees are eligible for benefits as of their full-time date of hire.
- 1.2 A copy of the marriage certificate, if enrolling a spouse, or birth certificates, if enrolling dependents, may be required by the insurance provider(s) at the time of initial enrollment or when changing to two-party or family status.
- 1.3 The termination date for group insurance for eligible employees will be based upon the date of separation of employment. Coverage may be continued through the end of the month following the date of separation.
 - 1.3.1 In the event of a divorce, a spouse is no longer eligible for group insurance as of the date indicated on the divorce decree. A copy of the divorce decree must be provided within thirty days of being signed and must be provided to the Human Resources Division to terminate the ex-spouse's and ex-spouse's dependent's coverage and avoid incurring responsibility for claims.

- 1.4 Information on the various group insurance plans can be obtained from the Human Resources Division or from the carriers themselves. It is the employee's responsibility to review materials for coverage, benefits, costs, and enrollment information.
- 1.5 Dependent coverage must be obtained within 30 days after a change in dependent status (e.g. birth of a child, a legal adoption of a child, a new marriage). Dependent children, except unmarried children who are incapable of self-support because of mental or physical disability (requires medical documentation), are no longer eligible for group insurance coverage after their 26th birthday.
- 1.6 If an employee declines enrollment because of other health or dental coverage, the employee may request enrollment within 30 days after the other coverage ends or must wait until the next open enrollment period.
- 1.7 COBRA is the federal health care continuation law which requires an employer to offer employer-provided health and dental coverage to employees and their dependents that lose coverage due to separation of employment or other qualifying events. Notification letters will be sent out to any affected individuals (employee and/or his or her dependents) by the insurance carrier (or another third-party provider) informing them if they have a right to continue coverage. The length of COBRA coverage available varies between eighteen and thirty-six months, depending upon the qualifying event. The notification letter will indicate the specific length of coverage available to the affected individuals. The notification letter will also indicate the deadline by which coverage must be elected.
- 1.8 Employees are responsible for any change(s) that need to be made in their coverage. If an employee does not remove dependents from their coverage, the employee may incur responsibility for claims.
- 1.9 Employees are eligible for a refund only when an overpayment of premium has been made due to an administrative error on the part of Unified Fire Authority (UFA).

2.0 Disability—Firefighter Employees.

- 2.1 All firefighter employees eligible for and enrolled in one of UFA's insurance plans will be eligible for health, dental and life insurance coverage while waiting for a determination of disability (medical retirement).
- 2.2 Application for disability benefits (medical retirement) for Tier 1 Firefighters must be made by contacting the Utah State Retirement System(s), Firefighters' Program. For more information, refer to the Utah State Retirement System(s) Firefighters' booklet. Application for disability benefits for Tier 2 firefighters must be made by contacting the PEHP Long Term Disability Program within six months from the last day working in regular job. Application must be made within this time frame even in instances where the firefighter is on Worker's Compensation or working light duty. For more information, refer to the disability benefits booklet.

- 2.3 Firefighter employees who have applied for disability (medical retirement) may be placed in a leave without pay status after exhausting all accrued vacation and sick leave until a determination has been made by the Utah State Retirement System(s) under the provisions of the State of Utah Public Employees Disability Act, with the exception of those firefighter employees on an approved Worker's Compensation.
 - 2.3.1 Firefighter employees awaiting a determination of disability (medical retirement) may continue existing UFA insurance upon payment of the standard rate for the employee's premium.
 - 2.3.2 Firefighter employees on an approved Worker's Compensation leave will pay the standard rate for the employee's premium.
- 2.4 Eligible firefighter employees who are enrolled in UFA's group insurance plans at time of application for disability (medical retirement) will be eligible for continuation of group insurance coverage for a maximum of one year while awaiting determination of disability (medical retirement) contingent upon payment of their portion of the premium.
 - 2.4.1 Eligible firefighter employees on an approved Worker's Compensation leave will pay their portion of the premium to continue coverage.
 - 2.4.2 If a determination of disability (medical retirement) eligibility has not been made within one year from last day worked, a firefighter employee, who is on LWOP, may continue group insurance coverage as provided in UFA Policy and Procedure – Voluntary Leave Without Pay.
 - 2.4.3 If a determination of disability (medical retirement) eligibility has not been made within one year from last day worked, and a firefighter employee has separated employment with UFA, he or she may continue group insurance coverage at 100% of total premium until a final determination has been made.
- 2.5 Firefighter employees not granted medical retirement will return to active employment status. In cases where the firefighter employee is unable to continue performing, with or without accommodations, the essential functions of the position held, the Fire Chief or designee will follow the provisions of UFA Policy and Procedure – Fitness for Duty Evaluations and Return to Duty after Illness or Injury or, if eligible, may consider the firefighter employee for a temporary light duty assignment.
 - 2.5.1. A firefighter employee who has separated employment with UFA and has paid premiums for medical and/or dental coverage, and is subsequently not granted medical retirement, is eligible for COBRA coverage.
 - 2.5.2 Application for COBRA must be made within sixty days of receiving the COBRA notice from the provider.

- 2.6 If a firefighter applying for disability (medical retirement) is approved by Utah Retirement Systems (URS) or the disability insurance carrier it will be the responsibility of the firefighter to speak to URS or the disability insurance carrier and see what benefits they are entitled to.

3.0 Disability—Non-firefighter Employees.

- 3.1 Eligible non-firefighter employees covered by The Utah Retirement Systems Public Employees & Public Safety Retirement Plans, are covered under a long-term disability benefit program.
- 3.2 Application for disability benefits must be made by contacting the PEHP Long Term Disability (LTD) Program within six months from last day working in regular job. Application must be made within this time frame even in instances where the employee is on Workers Compensation or working light or restricted duty. For detailed information refer to the Disability Benefits booklet.
- 3.3 Upon application for disability, non-firefighter employees may be placed in a leave without pay status after exhausting all accrued vacation and sick leave until a determination of disability has been made under the provision of the State of Utah Public Employees Disability Act with the exception of those non-firefighter employees on an approved Worker's Compensation. Employees will also be subject to UFA Policies and Procedures Section 6191 Family and Medical Leave Act (FMLA).
- 3.4 Eligible non-firefighter employees who are enrolled in UFA's group insurance plans at time of application for disability will be eligible for continuation of group insurance coverage for a maximum of one year while awaiting determination of disability contingent upon payment of their portion of the premium.
 - 3.4.1 Eligible non-firefighter employees on an approved Worker's Compensation leave will pay their portion of the premium to continue coverage.
 - 3.4.2 If a determination of LTD eligibility has not been made within one year from the last day worked, an employee who is on leave without pay may continue group insurance coverage as provided in UFA Policy and Procedure – Voluntary Leave Without Pay.
 - 3.4.3 If a determination of LTD eligibility has not been made within one year from last day worked, and an employee has terminated employment with the UFA, he or she may continue group insurance coverage at 100% of total premium until a final determination has been made.
- 3.5 Non-firefighter employees determined not to be disabled will: return to active employment status with an accommodation, in accordance with ADA, be terminated upon determination that the essential job functions cannot be performed or, at the discretion of the Fire Chief or designee, be allowed to remain on Voluntary Leave Without Pay.

- 3.5.1 An employee who has separated employment and has paid premiums for medical and/or dental coverage, and is subsequently determined not to be disabled, is eligible for COBRA.
- 3.5.2 If the Social Security Administration has approved the disability, COBRA may be extended, in accordance with Social Security Administration rules and procedures.
- 3.5.3 Application for COBRA must be made within sixty days of receiving the COBRA notice from the provider.
- 3.6 If an applicant for disability (medical retirement) is approved by the Public Employees Health Program's Long-Term Disability program, it will be the responsibility of the applicant to speak to URS or PEHP and see what benefits he/she is entitled to.
- 3.7 If Utah Retirement Systems Long-Term Disability benefits are discontinued because of qualification for full retirement benefits (under age 65), the employee is eligible for the current prevailing retiree insurance premium thereafter until age 65.

NOTE - The provision for providing early retiree health and dental insurance was repealed as of December 31, 2013.

- 3.8 Applicants for disability may continue their minimum term life insurance by paying their portion of the premium until a determination of disability is made.
 - 3.8.1 If eligibility for LTD has not been determined within one-year time period, he or she may continue to pay the entire minimum term life insurance premium until a determination is made.
- 3.9 Applicants for disability may continue their basic and/or additional term life insurance by paying the entire premium until a determination of disability is made.

4.0 Death

- 4.1 COBRA is the federal health care continuation law which requires an employer to offer employer-provided health and dental coverage to dependents that lose coverage due the death of the employee. Notification letters will be sent out to any affected individuals (spouse and/or his or her dependents) by the insurance carrier (or another third-party provider) informing them if they have a right to continue coverage. The length of COBRA coverage available varies between eighteen and thirty-six months, depending upon the qualifying event and the notification letter will indicate the specific length available to the affected individuals. The notification letter will also indicate the deadline by which coverage must be elected.
- 4.2 In accordance with Utah State Law, the surviving spouse and children of any Firefighter or Public Safety employee whose death is classified by the Utah State Retirement Office as a line-of-duty death under the provisions of Title 49, Utah

State Retirement and Insurance Benefit Act, will remain eligible for health coverage under the UFA's group health plan as if the surviving spouse was an employee of the UFA.

4.2.1 For the first 24 months UFA will pay 100% of the premium costs and, if the health coverage is a high-deductible plan, the UFA share of any contribution into a health savings account for the surviving spouse and dependent children and may not require payment from the surviving spouse for premium costs or health savings account contributions as a condition of qualifying to continue to receive the health coverage.

4.2.2 Beginning 25 months after the line-of-duty death UFA will pay the amount specified under 4.2.1 until:

4.2.2.1 The surviving spouse becomes eligible for Medicare and:

4.2.2.2 A child reaches the age of 26.

4.3 Non-firefighter merit employees whose death is determined by the UFA Board to be in the line-of-duty will be provided insurance benefits in the same manner as firefighter or public safety employees as described in paragraph 4.2.

4.4 For merit and probationary employees who die other than in the line-of-duty, the Authority will pay the COBRA premiums for three months for any family or two-party health and dental insurance programs that the employee was enrolled in at the time of death if COBRA coverage is elected by the surviving, eligible parties. Continuing COBRA coverage beyond three months may be continued by the surviving spouse in accordance with this policy.

5.0 Early Retirees Under Age 65 (**NOTE – The provision for providing early retiree health and dental insurance was repealed as of December 31, 2013. The provisions of this paragraph will continue to apply only to employees who retired from UFA between July 1, 2004, and December 31, 2013, and who were enrolled in health and/or dental insurance under the provisions of this paragraph on December 31, 2013.**)

5.1 Upon retirement and approval by the Utah State Retirement System(s), the following is applicable if a retiree wishes to continue insurance coverage:

5.1.1 A retiree and his or her dependents are eligible to enroll in available life, health and dental insurance.

5.1.2 A retiree will be charged a premium share according to their years of service with UFA for any available health or dental coverage in which he or she enrolls. The retiree premium share will be based on the following:

| YEARS OF FULL-TIME SERVICE | UFA CONTRIBUTION |
|-------------------------------|---------------------|
| Less than 4 years | 0% |
| 4 to 6 years | 10% |
| 7 to 9 years | 20% |
| 10 to 11 years | 30% |
| 12 to 13 years | 40% |
| 14 to 15 years | 50% |
| 16 to 17 years | 60% |
| 18 to 19 years | 70% |
| 20 years or more | 80% |

*UFA Contribution based on active employee premium.

5.1.2.1 For UFA employees hired after June 1, 2011, years of service with UFA will include only those years of actual full-time employment by UFA as an employee of UFA.

5.1.3 In order to continue health and dental plan, the retiree must enroll within sixty days from the date of separation.

5.2 If insurance is voluntarily discontinued, UFA will not make any further contribution towards the retiree's insurance premiums. Insurance coverage will be cancelled and cannot be reinstated.

6.0 Retirees Over Age 65.

6.1 Upon retirement and approval by the Utah State Retirement System(s), a retiree and spouse (over the age of 65) may be eligible to enroll in either a URS Medicare supplement plan or other Medicare supplement plans provided by another carrier. The UFA does not participate in, coordinate with or contribute to Medicare supplement plans with the exception of those employees who retired from UFA between July 1, 2004, and June 15, 2012, and who were enrolled in a Medicare supplement plan under the provisions of the policy in effect at that time.

7.0 Frequency of Insurance Provider Evaluation

7.1 UFA understands that health-related benefits are among the most valued benefits an employer can offer its employees. To ensure UFA offers its employees a comprehensive plan at an affordable cost, it will periodically reevaluate its providers

7.1.1 UFA will conduct a comprehensive evaluation of health and dental insurance providers at a minimum of every five years. This evaluation aims to assess the competitiveness of existing plans and explore potential alternatives.

7.1.1.1 The evaluation cycle begins on the effective date of the provider's contract with Unified Fire Authority.

7.2 During the evaluation period, UFA may solicit bids from various health and dental insurance carriers. These bids will include details on coverage, premiums, deductibles, network access, and additional benefits.

7.2.1 Existing providers are encouraged to participate in the bidding process.

7.3 Participation in the evaluation does not imply a commitment to change health insurance carriers.

7.4 Under extenuating circumstances, such as significant changes in the insurance landscape, or increase in cost, UFA may elect to go out for bid.

8.0 For purposes of computing the time that an employee has been employed by UFA, the time that an employee was employed by an entity that was merged into UFA at the time of the creation of UFA will be included.

Replaces policy dated November 3, 2021