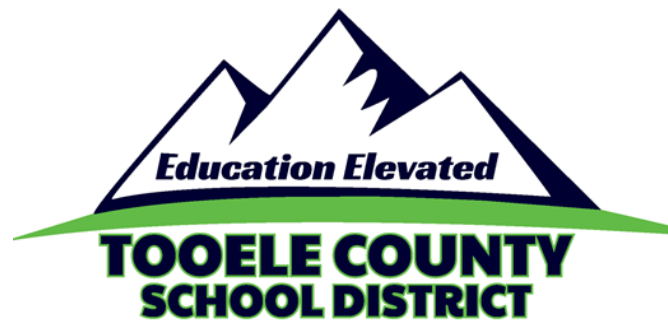


A GUIDE TO YOUR

# Employee Benefits

*September 1, 2025 - August 31, 2026*



# Benefits at Tooele County School District

## 2025-2026 Contacts

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### Medical

Select Health  
(800) 538-5038  
[www.selecthealth.org](http://www.selecthealth.org)

### Vision

EMI Health  
(800) 662-5851  
[www.emihealth.com](http://www.emihealth.com)

### Health Savings Account (HSA)

HealthEquity  
(866) 346-5800  
[www.healthequity.com/hsalearn](http://www.healthequity.com/hsalearn)

### Flexible Spending Account

Axis Plus Benefits  
(877) 872-2125  
[www.myaxisplus.com](http://www.myaxisplus.com)

### Voluntary Accident, Critical Illness & Hospital Indemnity

Voya  
(877) 236-7564  
<https://presents.Voya.com/EBRC/Tooele>

### Life, AD&D, Disability

Lincoln Financial  
(800) 423-2765  
[www.lincolnfinancial.com](http://www.lincolnfinancial.com)

### Legal

LegalEase  
(800) 248-9000  
[www.legaleaseplan.com/tooeleschools](http://www.legaleaseplan.com/tooeleschools)

### Employee Assistance Program (EAP)

Intermountain Live Well  
(800) 832-7733  
[www.intermountainhealthcare.org/eap](http://www.intermountainhealthcare.org/eap)

*For escalated claims and questions  
related to Voya or LegalEase products:*

GBS Voluntary Department  
(801) 819-7744  
[vbcustomerservice@gbsbenefits.com](mailto:vbcustomerservice@gbsbenefits.com)

### General Benefits Information

Kamille Ortiz, Insurance Benefit Specialist  
(435) 833-1900 ext 1103  
[kortiz@tooeleschools.org](mailto:kortiz@tooeleschools.org)

### Dental

Delta Dental  
(801) 521-2651  
[www.deltadentalins.com](http://www.deltadentalins.com)

The benefits in this guide are effective September 1, 2025 - August 31, 2026. This benefit guide serves as a summary of material modifications regarding certain plan provisions or costs for the 2025 plan year. This guide is an overview and does not provide a complete description of all benefit provisions. For more detailed information, please refer to your plan benefit booklets or summary plan descriptions (SPDs). The plan benefit booklets determine how all benefits are paid.

This guide is designed to highlight your benefit options so that you can make the best possible decisions for you and your family. The choices you make will remain in effect during the plan year, unless you have a qualifying life event.

We are committed to providing our employees with quality benefits programs that are comprehensive, flexible and affordable. Giving our employees the best in benefit plans is one way we can show you that as an employee, YOU are our most important asset.

This information, along with links to valuable resources, is available in our Edge course!



<https://courses.gbsbenefits.com/tooelecountyschooldistrict2025benefits>

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# Benefits Overview

Making wise decisions about your benefits requires planning. By selecting benefits that provide the best care and coverage, you can optimize their value and minimize the impact to your budget. The best thing you can do is “shop” for benefits carefully, using the same type of decision-making process you use for other major purchases.

- 1. Take advantage of the tools available to you.** That includes this guide, access to plan information, provider directories, and enrollment materials.
- 2. Be a smart shopper.** If you were buying a car or purchasing a home, you would do a lot of research beforehand. You should do the same for benefits because the wrong decision could be costly.
- 3. Don't miss the deadline and keep record of your enrollment!** Pay attention to the enrollment deadline and be sure to provide Human Resources with your benefit elections in a timely manner. It is important to review your paycheck to ensure the accuracy of payroll deductions. Notify HR immediately if there are any discrepancies.

## Who Is Eligible?

To qualify for health insurance at a full time rate, Certified/Administrative employees must work a minimum of 30 hours per week.

Classified Support Professional employees in a permanent position must work a minimum of 30 hours per week and at least 170 days per year in an equal pay position to qualify. You may also enroll your eligible dependents in the same plans you choose for yourself.

Eligible dependents include your legal spouse and your natural, adopted or step-child(ren). The dependent age limit for children on your medical plan is age 26, but may vary for other benefits offered.

## When Do I Enroll?

You can enroll for coverage within 30 days of your date of hire, or during the annual open enrollment period. Outside of your open enrollment period, the only time you can change your coverage is within 30 days after you experience a qualifying event.



# Benefits Overview

## Making Changes During The Year

The IRS provides strict regulations about the changes to pre-tax elections during the plan year. Once you enroll in benefits, you will not be able to make any changes to your elections until the next annual open enrollment period, unless you experience a qualified life event.

Qualified life events include, but are not limited to:

- › Change in your legal marital status
- › Change in number of dependents
- › A dependent no longer meets the eligibility requirements
- › You and/or your dependent becomes eligible or loses eligibility for Medicare, Medicaid or the Children's Health Insurance Program (CHIP)
- › Employee or dependents change in employment status resulting in loss or gain of eligibility for employer sponsored benefits
- › A court or administrative order

It is your responsibility to notify Human Resources within 31 days after a qualified life event. Any benefit changes must be directly related to the qualified life event.

## When Coverage Ends

For most benefits, coverage will end on the day in which:

- › Your regular work schedule is reduced to fewer than 30 hours per week
- › Your employment with TCSD ends.

Your dependent(s) coverage ends:

- › When your coverage ends, or
- › The last day of the month in which the dependent is no longer eligible

## Health Care Reform and You

For the most up-to-date information regarding the ACA, please visit [www.healthcare.gov](http://www.healthcare.gov).

In addition to the plan information in this Benefits Guide, you can also review a Summary of Benefits and Coverage for each medical plan. This requirement of the ACA standardizes health plan information so that you can better understand and compare plan features. We will automatically provide you a copy of the SBC and Uniform Glossary annually during open enrollment. Please contact HR should you need an additional copy.



# Medical

## Select Health - Traditional Share

### Traditional Share Plan Year Benefits

### In-Network

<b>Deductible</b>	\$1,650/ Single \$3,300/ Family
<b>Out-of-Pocket Maximum</b>	\$4,000 / Single \$8,000 / Family
<b>Preventive Care</b>	100% Covered
<b>Office Visits</b>	
Primary Care	\$40
Specialist	\$50
Primary Care Virtual Visits	100% Covered
Urgent Care	\$50
<b>Emergency Room</b>	\$250 then 20% AD
<b>Hospital Services</b>	
Minor Lab Testing and X-Ray	Covered 100%
Major Diagnostic and Imaging Services	20% AD
OP Mental Health/Substance Abuse	20% AD
Inpatient Hospital	20% AD
Outpatient Surgery	10% AD
<b>Pharmacy - Retail</b>	
<b>Pharmacy Deductible - Per Person per plan year</b>	\$100
Tier 1	20%
Tier 2	30% APD
Tier 3	40% APD
Tier 4	20% APD
Mail Order	\$10 / \$50 APD / \$135 APD

*AD = After Deductible  
APD = After Pharmacy Deductible*

[Download the Full Plan Summary](#)

[Select Health Provider Search](#)

[Download the Share Network Flyer](#)



# Medical

Select Health - Share HealthSave

## Share HealthSave HSA Plan Year Benefits

### In-Network

<b>Deductible</b>	\$3,300/ Single \$6,600/ Family
<b>Out-of-Pocket Maximum</b>	\$4,000 / Single \$8,000 / Family
<b>Preventive Care</b>	100% Covered
<b>Office Visits</b>	
Primary Care	\$15 AD
Specialist	\$25 AD
Primary Care Virtual Visits	100% Covered AD
Urgent Care	\$35 AD
<b>Emergency Room</b>	\$75 AD
<b>Hospital Services</b>	
Minor Lab Testing and X-Ray	Covered 100% AD
Major Diagnostic and Imaging Services	20% AD
OP Mental Health/Substance Abuse	20% AD
Inpatient Hospital	20% AD
Outpatient Surgery	10% AD
<b>Pharmacy - Retail</b>	
Tier 1	\$7 AD
Tier 2	\$21 AD
Tier 3	\$42 AD
Tier 4	\$100 AD
Mail Order	\$7 AD / \$42 AD / \$126 AD

*AD = After Deductible*

[Download the Full Plan Summary](#)

[Select Health Provider Search](#)

[Download the Share Network Flyer](#)



# Medical

## Select Health - Share HealthSave Dual Plan

### Share HealthSave HSA Dual Plan Plan Year Benefits

### In-Network

<b>Deductible</b>	\$1,650/ Single \$3,300/ Family
<b>Out-of-Pocket Maximum</b>	\$3,000 / Single \$6,000 / Family
<b>Preventive Care</b>	100% Covered
<b>Office Visits</b>	
Primary Care	0% AD
Specialist	0% AD
Primary Care Virtual Visits	0% AD
Urgent Care	0% AD
<b>Emergency Room</b>	0% AD
<b>Hospital Services</b>	
Minor Lab Testing and X-Ray	0% AD
Major Diagnostic and Imaging Services	0% AD
OP Mental Health/Substance Abuse	0% AD
Inpatient Hospital	0% AD
Outpatient Surgery	0% AD
<b>Pharmacy - Retail</b>	
Tier 1	0% AD
Tier 2	0% AD
Tier 3	0% AD
Tier 4	0% AD
Mail Order	0% AD / 0% AD / 0% AD

AD = After Deductible

[Download the Full Plan Summary](#)

[Select Health Provider Search](#)

[Download the Share Network Flyer](#)



# Medical

Select Health - Care + Traditional (Out of Area Only)

## Care + Traditional Plan Year Benefits

### In-Network

### Out-of-Network

Care + Traditional Plan Year Benefits	In-Network	Out-of-Network
<b>Deductible</b>	\$1,650/ Single \$3,300/ Family	\$3,300 / Single \$6,600 / Family
<b>Out-of-Pocket Maximum</b>	\$4,000 / Single \$8,000 / Family	\$8,000 / Person \$16,000 / Family
<b>Preventive Care</b>	100% Covered	Not Covered
<b>Office Visits</b>		
Primary Care	\$40	40% AD
Specialist	\$50	40% AD
Primary Care Virtual Visits	100% Covered	Not Covered
Urgent Care	\$50	40% AD
<b>Emergency Room</b>		20% AD
<b>Hospital Services</b>		
Minor Lab Testing and X-Ray	100% Covered	40% AD
Major Diagnostic and Imaging Services	20% AD	40% AD
OP Mental Health/Substance Abuse	20%	40% AD
Inpatient Hospital	20% AD	40% AD
Outpatient Surgery	10% AD	40% AD
<b>Pharmacy - Retail</b>		
<b>Pharmacy Deductible - Per Person per year</b>		\$100
Tier 1		20%
Tier 2		30% APD
Tier 3		40% APD
Tier 4		20% APD
Mail Order		\$10 / \$50 APD / \$135 APD

AD = After Deductible  
APD = After Pharmacy Deductible

[Download the Full Plan Summary](#)

[Select Health Provider Search](#)



# Medical

Select Health - Care + HealthSave (Out of Area Only)

## Care + HealthSave HSA Plan Year Benefits

### In-Network

### Out-of-Network

	In-Network	Out-of-Network
<b>Deductible</b>	\$3,300/ Single \$6,600/ Family	\$3,500 / Single \$7,000 / Family
<b>Out-of-Pocket Maximum</b>	\$4,000 / Single \$8,000 / Family	\$5,500 / Person \$11,000 / Family
<b>Preventive Care</b>	100% Covered	Not Covered
<b>Office Visits</b>		
Primary Care	\$15 AD	40% AD
Specialist	\$25 AD	40% AD
Primary Care Virtual Visits	100% Covered AD	Not Covered
Urgent Care	\$35 AD	40% AD
<b>Emergency Room</b>		\$75 AD
<b>Hospital Services</b>		
Minor Lab Testing and X-Ray	100% Covered AD	40% AD
Major Diagnostic and Imaging Services	20% AD	40% AD
OP Mental Health/Substance Abuse	20% AD	40% AD
Inpatient Hospital	20% AD	40% AD
Outpatient Surgery	10% AD	40% AD
<b>Pharmacy - Retail</b>		
Tier 1		\$7 AD
Tier 2		\$21 AD
Tier 3		\$42 AD
Tier 4		\$100 AD
Mail Order		\$7 AD / \$42 AD / \$126 AD

AD = After Deductible

[Download the Full Plan Summary](#)

[Select Health Provider Search](#)



# Medical

## Select Health - Care + HealthSave Dual Plan (Out of Area Only)

### Care + HealthSave HSA Dual Plan Plan Year Benefits

#### In-Network

#### Out-of-Network

	In-Network	Out-of-Network
<b>Deductible</b>	\$1,650/ Single \$3,300/ Family	\$1,900 / Single \$3,800 / Family
<b>Out-of-Pocket Maximum</b>	\$3,000 / Single \$6,000 / Family	\$4,500 / Person \$9,000 / Family
<b>Preventive Care</b>	100% Covered	Not Covered
<b>Office Visits</b>		
Primary Care	0% AD	40% AD
Specialist	0% AD	40% AD
Primary Care Virtual Visits	0% AD	Not Covered
Urgent Care	0% AD	40% AD
<b>Emergency Room</b>		0% AD
<b>Hospital Services</b>		
Minor Lab Testing and X-Ray	0% AD	40% AD
Major Diagnostic and Imaging Services	0% AD	40% AD
OP Mental Health/Substance Abuse	0% AD	40% AD
Inpatient Hospital	0% AD	40% AD
Outpatient Surgery	0% AD	40% AD
<b>Pharmacy - Retail</b>		
Tier 1		0% AD
Tier 2		0% AD
Tier 3		0% AD
Tier 4		0% AD
Mail Order		0% AD / 0% AD / 0% AD

AD = After Deductible

[Download the Full Plan Summary](#)

[Select Health Provider Search](#)



# Share Program Information

**Create an online Select Health account.** This is key to accessing your Healthy Living tools and tracking your engagements. It's your health hub.

**Create a Personify Health account.** Go to your Select Health account Tasks page and select Membership Rewards - Sign-up & Track Steps.

**Complete a Health Physical by attending a work-site health screening event or obtaining the screening from a physician.** This is how we establish your health baseline and figure out the best plan for you.

**Complete the annual online health assessment (via Personify "Health Check").** Your assessment can identify health risks so you can address those risks sooner rather than later.

**Get moving with Personify Health.** Complete at least two of the wellness/activity campaigns. Keep in mind, company team challenges and 7,000 steps in 20 days count as one activity campaign, or four Healthy Habits Challenges count as one activity campaign.

## New Offering

**Try out Sworkit.** Sworkit is a wellness app offered by Select Health. It provides personalized workouts with over 500 unique workouts and over 900 exercises. It also includes mindfulness videos and nutritional information. To connect, download the Sworkit app and click sign in followed by sign up with Personify Health. Use your Personify Health username (email) and password. For the Share program, Sworkit does not replace Personify but is an additional physical activity resource. Participants will still need to track their activities in Personify for credit.

[Click Here](#) to access the SHARE Member Guide

## A Few Extras

For employees who have a condition or are of a specific age and/or gender, there are a few special engagements that will help you feel your best. Please check your Select Health Account Task list to see your personalized engagements. \*SHARE Rewards available through Select Health are included.

### Complete age and gender-based screenings. (\*\$20 Each)

- Women aged 50-74: one mammogram every two years
- Women aged 21- 29: one pap test every three years
- Women aged 30-65: One cervical Pap smear every 3 years, or an HPV test every 5 years
- Men & women aged 45 - 74: one colonoscopy every 10 years, or other colorectal cancer screening every 1 - 5 years

### Diabetes Prevention Program

For individuals with Prediabetes or who are identified as at-risk for Prediabetes:

- Required: HbA1c lab test every year - \*\$60
- Optional activities: Prediabetes 101 Class- \*\$20, Health Coach- \*\$40, Medical Nutrition Therapy-\*\$60, and Way to Wellness program- \*\$120

### Diabetes Management Program

For individuals with a Diabetes Diagnosis:

- Three required activities: Blood sugar monitoring test, Kidney function monitoring test, and Diabetic retinal eye exam. \*\$60 each
- Optional activities: Health Coach-\*\$40, Medical Nutrition Therapy-\*\$60, and Way to Wellness program- \*\$120



# Personify Health

## Register for Personify Health

The Select Health Share program uses Personify Health to support your health goals. First, create your Personify Health account by signing into your Select Health account at [www.selecthealth.org](http://www.selecthealth.org). On the home page, scroll to your Tasks page and select Membership Rewards Details page, select Sign-Up & Track Steps. This will take you to the Personify Health platform to create an account. You will use the same Personify account login information created at registration to sign in on the Personify Health app. \*If you have an existing Personify Health account from the previous plan year, it will rollover.

## Remember

You must first register on the Personify Health website before using the app!

The screenshot shows a dashboard with a navigation bar at the top left containing a menu icon and the text "Dashboard / Tasks". Below the navigation bar is a large heading "Tasks" and a sub-heading "Required Tasks (5)". There are five task cards arranged in a grid. Each card has an icon, a title, a description, and a list of items with their status and due dates. To the right of the task cards are two summary cards: "Membership Rewards" and "Progress Tracking & Rewards".

Task Category	Item	Status	Due Date
Cancer Screenings	Breast Cancer Screening	Pending	DUE BY 06/23
	Cervical Cancer Screening	COMPLETE	
	Colorectal Cancer Screening	Pending	DUE BY 06/23
Diabetes Prevention	HbA1C Test	Pending	DUE BY 06/23
Diabetes Management	HbA1C Test	Pending	DUE BY 06/23
	Kidney Lab Tests	COMPLETE	
	Retinal Eye Exam	Pending	DUE BY 06/23
Digital Coaching	Virgin Pulse Journey	Pending	
Activity Campaigns	Virgin Pulse Campaign One	Pending	
	Virgin Pulse Campaign Two	Pending	

## Questions?

### Personify Health

Call (833) 235-6890,  
or email  
[selecthealth.support@  
personifyhealth.com](mailto:selecthealth.support@personifyhealth.com)

### Healthy Living

Call the Member Services  
Team at (800) 538-5038  
  
Weekdays from  
7:00 am - 8:00 pm  
  
Saturdays from  
9:00 am - 2:00 pm

### Select Health Member Account

Call the Online Services  
Team at (800) 442-5502  
  
Weekdays from  
7:00 am - 8:00 pm  
  
Saturdays from  
9:00 am - 2:00 pm



# Health Savings Account

HealthEquity

A Health Savings Account (HSA) paired with one of our qualified high deductible health plans helps you and your family plan, save and pay for qualified health care expenses. An HSA empowers you to build savings for health care expenses in a tax advantaged account.

## Advantages of Health Savings Accounts

A Health Savings Account (HSA) is a tax advantaged savings account that you own and control. Here are some of the benefits:

- › Funds roll over from year-to-year and never expire
- › Portable when you move jobs or retire
- › Triple tax advantage: you won't pay taxes on contributions, distributions, or earnings
- › Able to invest your funds to grow your money tax-free
- › Contribution elections can be changed mid-year without a life event

## Who Is Eligible?

You must be enrolled in one our qualified high deductible health plans and meet the following requirements:

- › Have no other health insurance coverage except what's permitted by the IRS
- › Not be enrolled in Medicare
- › Not be claimed as a dependent on someone else's tax return

## How Much Can I Contribute to an HSA?

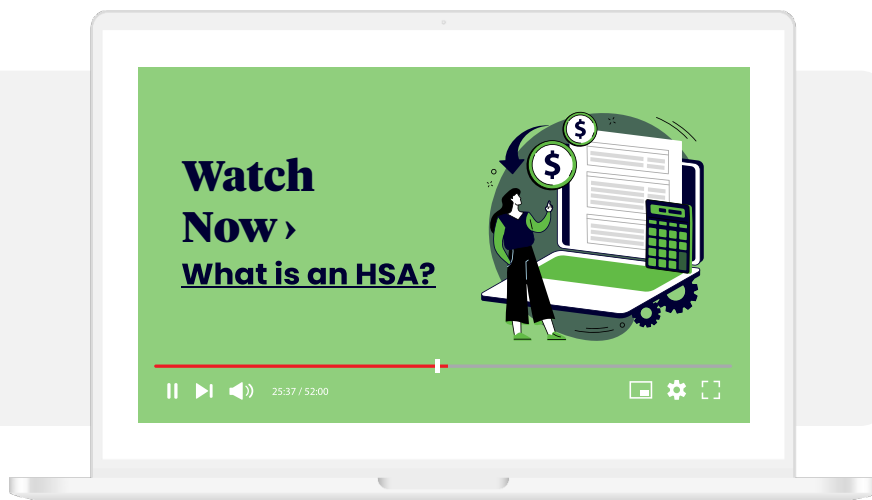
Each year the IRS establishes the maximum contribution limit. The chart below represents the limits for 2025. These limits are for the total funds contributed, including company contributions, your contributions and any other contributions. Please keep in mind you can change your HSA allocation at any time during the plan year.

[Download the HSA Flyer](#)

## IRS HSA Limits

	2025
Single	\$4,300
Family	\$8,550

*At age 55, an additional \$1,000 contribution is allowed annually*





# Health Savings Account

HealthEquity

## What Is A Qualified Health Care Expense?

You can use money in your HSA to pay for any qualified health care expenses for you, your spouse and your tax dependents, even if they are not covered on your plan. Examples of qualified health care expenses include: your insurance plan deductibles, copayments, and coinsurance; doctor's office visits; prescriptions; dental treatments and x-rays; and eyeglasses and vision exams You can use money in your HSA to pay for any qualified health care expenses you, your legal spouse and your tax dependents incur, even if they are not covered on your plan. Qualified health care expenses are designated by the IRS (Publication 502). They include medical, dental, vision and prescription expenses not covered by the insurance carrier.

## Important

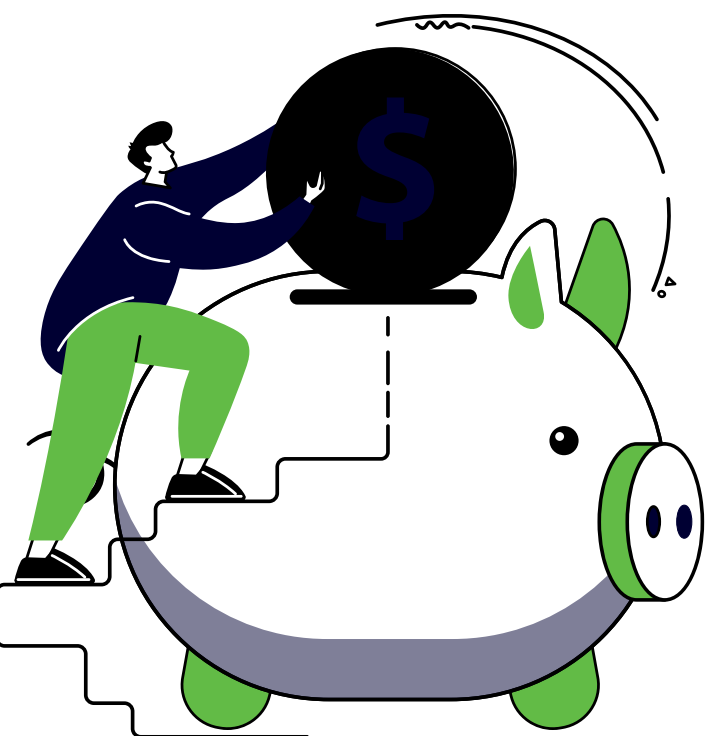
Any funds you withdraw for non-qualified expenses will be taxed at your income tax rate plus a 20% tax penalty if you're under age 65. After age 65, you pay taxes but no penalty.

## Documentation is Key

An HSA can be used for a wide range of health care services within the limits established by law. Be sure you understand what expenses are HSA qualified, and be able to produce receipts for those items or services that you purchase with your HSA. You must keep records sufficient to show that:

- › The distributions were exclusively to pay or reimburse qualified medical expenses,
- › The qualified expenses had not been previously paid or reimbursed from another source, and
- › The qualified expense had not been taken as an itemized deduction in any year. Do not send these records with your tax return. Keep them with your tax records.

**Qualified Medical Expenses**





# Prescription Savings

## Strategies to Save

The average American spends about \$1,200 each year on prescription drugs. And with drug prices on the rise, 1 in 4 Americans are paying more today than they were a year ago. Consider the following ways to help lower your bills for pills:

- › Go generic or ask your doctor or pharmacist if there's a similar drug with a generic version.
- › Compare prices by using an app, like GoodRx, to find the least expensive option. Call stores and pharmacies as well.
- › Order a 90-day supply and look into a mail-order program.
- › Sign up for a drugstore or chain store reward program to receive coupons and accumulate points.
- › Use a preferred pharmacy in your network.

If you have prescription drug questions, talk to your pharmacist for additional cost-cutting tips and guidance.

### GoodRx

Stop paying too much for your prescriptions! With the GoodRx Comparison Tool, you can compare drug prices at over 70,000 pharmacies, and discover free coupons and savings tips.

### Isn't health insurance all I need?

Your health insurance provides valuable prescription and other health benefits, but a smart consumer can save much more,

especially for drugs that are not covered by health insurance (weight-loss medications, some antihistamines, etc.), drugs that have limited quantities, drugs that can be found for less than your copay, or drugs with a lower priced generic.

### How can I find these savings?

The GoodRx Comparison Tool provides you with instant access to current prices on more than 6,000 drugs at virtually every pharmacy in America.

1. On the web: <https://www.goodrx.com/>  
Instantly look up current drug prices at CVS, Walgreens, Walmart, Costco, and other local pharmacies.
2. On your phone: Available in the App Store or Google Play. Or, simply visit [m.goodrx.com](https://m.goodrx.com) from your phone.

Please Note:

- › Prescription drug pricing displayed on the GoodRx Comparison Tool may be more or less than your insurance drug card.
- › Please be sure to compare all discount pricing options before you purchase.
- › Check your insurance carrier's pharmacy benefit before purchasing a 90-day supply.



# Accident

Voya

Accident insurance can help provide you with a cushion to help cover expenses and living costs when you get hurt. While you can count on health insurance to cover medical expenses, it doesn't usually cover indirect costs that can arise with a serious or even not-so-serious injury. With accident insurance, the benefits you receive can help take care of these extra expenses and anything else that comes up.

**With Voya Group Accident Insurance you can have peace of mind knowing:**

- › Coverage is guaranteed issue - no evidence of insurability required at initial enrollment.
- › Benefits are paid directly to you unless assigned to someone else.
- › Benefits are paid in addition to any other coverage.

## Plan Features

## Benefit Amounts

Accident Physician	\$75
Emergency Room/Urgent Care	\$200
X-ray	\$60
Ambulance	\$300 ground / \$1,250 air
Dislocation/Fracture Benefit	Up to \$6,400 / Up to \$6,720
Hospital Confinement/Daily Benefit	\$1,125 admission / \$250 day
Accident Follow-Up Visits	\$75
Lacerations	Up to \$400
Organized Sport	25% increase to sport benefits, to a max of \$1,000
Wellness Benefit	\$50 per person per year

## Accident Plan Monthly Premiums

Employee Only	\$5.47
Employee & Spouse	\$10.93
Employee & Child(ren)	\$11.75
Family	\$17.21

[Download the Full Plan Summary](#) ↓



# Critical Illness

## Voya

Critical Illness insurance provides a lump sum benefit to help you cover the out-of-pocket expenses associated with a critical illness diagnosis.

**With Voya Group Critical Illness Insurance you can have peace of mind knowing you're covered in the event of:**

### Conditions covered at 100%

- › Heart Attack
- › Stroke
- › Cancer
- › Sudden Cardiac Arrest
- › Major Organ Transplant
- › Coronary Artery Bypass
- › Type 1 Diabetes
- › Severe Burns
- › Benign Brain Tumor
- › Permanent Paralysis
- › Loss of Sight, Hearing or Speech
- › Coma
- › ALS
- › MS
- › Advanced Parkinson's

- › Advanced Dementia, Including Alzheimer's Disease
- › Huntington's Disease
- › Addison's Disease
- › Myasthenia Gravis
- › Occupational HIV
- › Occupational Hepatitis B or C

### Conditions Covered at 50%

- › Systemic Lupus Erythematosus (SLE)
- › Carcinoma in Situ
- › Open Heart Surgery for Valve Replacement or Repair
- › ICD Placement
- › Skin Cancer
- › Bone Marrow Transplant

### Conditions Covered at 25%

- › Carcinoma in Situ
- › Open Heart Surgery for Valve Replacement or Repair
- › ICD Placement
- › Skin Cancer
- › Bone Marrow Transplant

- › Stem Cell Transplant
- › Muscular Dystrophy
- › Infectious Disease
- › Systemic Sclerosis (scleroderma)

### Conditions Covered at 10%

- › TIA
- › Ruptured or Dissecting Aneurysm
- › Abdominal or Thoracic Aortic Aneurysm
- › Transcatheter Heart Valve
- › Coronary Angioplasty
- › Pacemaker Placement

### 12 Childhood Conditions at 100%

Plan Features	Employee	Spouse	Dependent
<b>Coverage</b>	\$10,000, \$20,000 or \$30,000	50% of Employee's amount	50% of Employee's amount
<b>Guarantee Issue</b>	\$30,000	\$15,000	All child amounts are GI
<b>Pre-Existing</b>	None	None	None
<b>Wellness Benefit</b> <i>Must complete a health screening</i>	\$50	\$50	\$50

[Download the Full Plan Summary](#) ↓



# Hospital Indemnity

Voya

An inpatient stay in the hospital is expensive, and there may be additional costs unrelated to your stay such as having a baby or missing work. Hospital Indemnity coverage pays a cash benefit when you are admitted for an inpatient stay for a minimum of **20** confinement hours. You can use the money to pay for medical bills not covered by insurance, or in any way you see fit.

## With Voya's Group Hospital Indemnity Insurance:

- › Benefits from a Hospital Indemnity plan can be used to assist you in paying deductibles, coinsurance, out-of-network costs, daily living expenses, etc.
- › Benefits are paid regardless of other coverage and this plan is compatible with Health Savings Accounts.

### Benefits Include:

Guarantee Issue	Yes
Pre-Existing	No Pre-Ex
Maternity Waiting Period	No waiting period
First Day Hospital Confinement <i>Up to 4 per person per year</i>	\$1,500
Daily Hospital Benefit <i>Up to 31 days</i>	\$150 per day
Intensive Care <i>Up to 31 days</i>	\$150 per day
Observation Unit <i>4-20 Hours</i>	\$100 per day

### Hospital Indemnity Monthly Premiums

Employee Only	\$15.55
Employee & Spouse	\$34.20
Employee & Child(ren)	\$31.09
Family	\$49.74

[Download the Full Plan Summary](#) ↓



# Legal & ID Theft

## LegalEASE

Life events can lead to unexpected legal concerns that are difficult to handle alone. Enrolling in a legal insurance plan reduces the stress of finding and paying for an attorney when it matters most.

LegalEASE offers a legal insurance plan that provides support and protection for unexpected personal legal issues.

### What you get with a LegalEASE insurance plan:

- › An attorney with expertise specific to your personal legal matter
- › Access to a national network of attorneys with exceptional experience that are matched to meet your needs
- › In and out-of-network coverage
- › Concierge help navigating common individual or family legal issues
- › The value of a LegalEASE insurance plan.

As a member, you have access to a national network of over 20,300 attorneys who are matched to your specific legal needs. Being a LegalEASE insurance member also saves you time and costly legal fees. But most importantly, it gives you confidence and provides coverage\* for:

- › Home and consumer (Buying, selling, foreclosure and tenant disputes)
- › Financial (Debt collection, collections, contracts)
- › Auto and traffic (Traffic matters and license suspensions)
- › Family (Adoption, name change)
- › Estate planning and wills (Will, living will, health care power of attorney)

You work hard to make the right choices for your loved ones - especially when it comes to legal and financial matters. Get the peace of mind you want and the protection you need with LegalEASE.

### Connecting with an Attorney:

Please call 800-248-9000 and let the LegalEASE concierge team help find the best one for you - do not contact an Attorney directly from the website as it is for informational purposes only and does not represent the network Attorneys.

## ID Theft Plan

Identity Monitoring offers valuable services to shield your family from unexpected identity theft issues and can help ease your worries if your personal information is ever compromised.

- › **Single Bureau Credit Monitoring**
- › **Full-service Identity Restoration**
- › **Lost Wallet**
- › **\$1,000,000 Identity Theft Insurance**
- › **Child Identity Monitoring**

To learn more about your Legal or ID Theft insurance plans visit <https://www.legaleaseplan.com/tooeleschools> or call (800) 248-9000.

### Monthly Premiums:

**Legal Plan Only:** \$15.82

**Legal Plan + ID Theft:** \$18.82

**ID Theft only:** Employee \$6.95 Family \$11.85

[Download Legal Plan Summary](#)

[Download ID Theft Plan Summary](#)



# Dental

## Delta Dental - PPO

Plan Features	Delta Dental PPO Dentist You Pay	Delta Dental Premier Dentist You Pay	Non-Delta Dental Dentist You Pay
Plan Year Deductible		\$0	
Annual Maximum	\$1,500 per person (for all Class I, II, and III expenses)		
<b>Class I - Preventive Services</b> (e.g. x-rays, cleanings, exams)	0%	0%	0%
<b>Class II - Basic Services</b> (e.g. fillings, extractions, root canals)	20% AD	20% AD	40% AD
<b>Class III - Major Services</b> (e.g. dentures, crowns, bridges)	50% AD	50% AD	60% AD

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[Provider Search](#)



# Vision

## EMI Health - VSP 100 - Choice Plus Network

Driving to work, reading a news article and watching TV are all activities you likely perform every day. Your ability to do all of these activities, though, depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various health problems.

Tooele County School Districts vision insurance entitles you to specific eye care benefits.

	In-network You Pay	Out-of-network Plan Reimburses You
<b>Exam</b>	Not Covered	Not Covered
<b>Frames</b> (one every 12 months)	\$100 allowance at any VSP provider or \$55 at Costco, Sam’s Club or Walmart	Up to \$70
<b>Lenses</b> (one every 12 months)		
Single Vision	\$10	Up to \$30
Bifocal	\$10	Up to \$50
Trifocal	\$10	Up to \$65
Lenticular	\$10	Up to \$100
<b>Contact Lenses in Lieu of Eyeglasses</b> (one every 12 months)		
Elective	\$100 allowance	Up to \$85

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[Provider Search](#)



# Vision

## EMI Health - VSP Plus 10-100 - VSP Choice Plus Network

Driving to work, reading a news article and watching TV are all activities you likely perform every day. Your ability to do all of these activities, though, depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various health problems.

Tooele County School District’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.

	In-network You Pay	Out-of-network Plan Reimburses You
<b>Exam</b> (once every 12 months)	\$10	Up to \$65
<b>Frames</b> (one every 12 months)	\$100 allowance at any VSP provider or \$55 at Costco, Sam’s Club or Walmart	Up to \$70
<b>Lenses</b> (one every 12 months)		
SingleVision	\$10	Up to \$30
Bifocal	\$10	Up to \$50
Trifocal	\$10	Up to \$65
Lenticular	\$10	Up to \$100
<b>Contact Lenses in Lieu of Eyeglasses</b> (one every 12 months)		
Elective	\$100 allowance	Up to \$85

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[Provider Search](#)



# Flexible Spending Account

## AxisPlus Benefits

A Flexible Spending Account (FSA) provides you the opportunity to pay for health care and dependent care expenses on a pre-tax basis. By anticipating your family’s health care and dependent care costs for the next plan year, you can lower your taxable income.

### How It Works

Each plan year you designate an annual election to be deposited into your health care and/or dependent care accounts. Your annual election will be divided by the number of pay periods in the plan year and deducted equally from each paycheck on a pre-tax basis. For health care expenses, you have immediate access to the total amount you elected to contribute for the plan year. With the dependent care, you have access to the amount of the current contributions in your account at the time you request reimbursement.

### Things To Consider

- › Be conservative when estimating your annual election amount. The IRS has a strict “use it or lose it” rule. You will forfeit any funds left in your account after the end of the plan year. The plan does include a \$660 rollover provision wherein **\$660** of your

elected amount can roll over to the following year. You will forfeit any funds that exceed the rollover benefit after the end of the plan year.

- › Your 2025-2026 contributions must be used for expenses you incur September 1, 2025 - August 31, 2026.
- › The health care and dependent care FSAs are two separate accounts and funds cannot be transferred between accounts.
- › You cannot stop or change your FSA contribution amount during the year unless you have a qualified change in family status.
- › Expenses reimbursed through an FSA cannot be used as a deduction or credit on your federal income taxes.

### FSA Reimbursement Options

To receive reimbursement from your FSA, you can submit a claim online, complete a paper claim form or use your FSA debit card. It is important to save your receipts. National Benefit Services may ask you to provide a copy to substantiate a claim.

Click [here](#) to download the FSA Flyer.

	Health Care FSA	Limited Health FSA	Dependent Care FSA
Maximum Plan Year Contribution Amount	Up to \$3,300	Up to \$3,300	Up to \$5,000 (\$2,500 if married and filing separate income tax returns)
Examples of Eligible Expenses	Medical, Rx, Dental, & Vision Deductible, Coinsurance, and Copays	Dental, Vision Expenses Only	Cost of childcare for children under age 13 so you and your spouse can go to work or look for work.



# Life and AD&D

## Lincoln Financial

Life Insurance and Accidental Death & Dismemberment (AD&D) benefits provide you and your loved ones financial protection in the event of an illness, accident, or death.

### Basic Life Insurance and Accidental Death and Dismemberment (AD&D)

Tooele County School District provides all eligible employees with a basic group life insurance and accidental death and dismemberment coverage at **no cost to you**.

### Voluntary Life Insurance

You also have the option to purchase additional life insurance coverage for yourself, your spouse and your dependent children to age 26. However, you may only elect coverage for your dependents if you elected additional coverage for yourself. You pay for the cost of additional coverage through payroll deductions on a post-tax basis.

Plan Features	Basic Life And AD&D	Voluntary Life
Life Benefit Amount	Employee: \$20,000 Spouse: \$2,000 Child(ren): \$2,000	Employee: \$400,000 Spouse: \$2,000 Child(ren): \$2,000
AD&D Benefit Amount	Employee: \$20,000 Spouse: \$2,000 Child(ren): \$2,000	N/A
Maximum Life / AD&D Benefit	Employee: \$20,000 Spouse: \$2,000 Child(ren): \$2,000	Employee: \$500,000 Spouse: \$300,000 Child(ren): \$20,000
Guaranteed Issue	Employee: \$20,000 Spouse: \$2,000 Child(ren): \$2,000	Employee: \$400,000 Spouse: \$50,000 Child(ren): \$10,000 or \$20,000
Age Reductions	Coverage amounts begin to reduce at age 65 and benefits terminate at retirement.	Coverage amounts begin to reduce at age 65 and benefits terminate at retirement.

[Download the Basic Life Plan Summary](#)

[Download the Vol Life Plan Summary](#)



# Value Added Benefits

## Lincoln Financial Group

### Who is Eligible?

Included with your Lincoln Term Life Insurance you can also access services that make a real difference now as well as in the future.

### Travel Connect

TravelConnect is a comprehensive program that can bring help, comfort, and reassurance if you face a medical emergency while traveling 100 or more mile from home. Whether traveling for business or leisure, you and your loved ones can count on TravelConnect for responsive and caring support - 24 hours a day, 7 days a week. Services include but are not limited to:

- › **Coordinate and provide transportation** from an initial medical facility that cannot adequately treat the patient due to their condition.
- › **Coordinate travel and airfare** for your dependent children. This includes the services, transportation expenses and accommodations of a qualified escort.
- › TravelConnect will also coordinate and pay for a safe evacuation due to natural disaster, or when a political or security threat occurs.
- › **Medical care, and travel services recovery.** Assistant services include, but are not limited to: medical records requests, intermediary services, recovering lost or stolen documents or luggage, medical and dental referrals, language translation, corrective lenses and medical device replacement, or arrangements for a deceased traveler.

Visit <https://mysearchlightportal.com> and enter your group ID: LFGTravel123 for a complete list of TravelConnect services and access to Plan Documents, International Calling Instructions, and Destination Information.

### LifeKeys

LifeKeys services, included with all Lincoln Term Life and Accidental Death and Dismemberment Insurance policies, provide assistance to you, your family and your beneficiaries.

#### › **EstateGuidance Will Preparation.**

Create your will online - easily and economically. Follow a step-by-step guide through the entire process, and then use online instructions to execute your will. You can: Name an executor to manage your estate, choose a guardian for your children, specify wishes for your property, and provide funeral and burial instructions.

#### › **GuidanceResources Online:**

GuidanceResources Online is the place to go for articles, tutorials, streaming videos and “Ask the Expert” personal responses on topics such as: law and regulations, health and wellness, money and investments, work and education, family and relationships, leisure and home.

#### › **Identity Theft:**

Identity theft is one of the fastest-growing crimes in the U.S. Be sure you have the information you need to recognize and prevent it. Online resources help you: spot the warning signs, take steps to protect your cell phone/computer/tax records from fraud, lessen the damage and repair your credit if identity theft occurs, and link to essential resources online.

[Download the Travel Connect Flyer](#)

[Download the LifeKeys Flyer](#)



# Disability

Lincoln Financial

Disability insurance benefits replace a portion of your income if you are unable to work for a period of time due to a qualified off-the-job injury or illness.

## Employer Paid Short-Term Disability (STD)

Short-term disability provides a source of income should your qualified disability keep you from working for more than a week

## Employer Paid Long-Term Disability (LTD)

Long-term disability provides an ongoing source of income if your disability is prolonged.

## Definition of Disability

The definition of disability is used to determine an employee's eligibility for benefits. An individual's physical or mental inability to perform the major duties of his/her occupation because of illness or injury.

Plan Features	Short-Term Disability	Long-Term Disability
Benefit Amount	85% of weekly salary	66.67% of monthly salary
Maximum Benefit	\$2,125 weekly	\$12,000 monthly
Benefit Waiting Period	14 days	120 days
Maximum Benefit Duration	17 weeks	Social Security Normal Retirement Age

[Download the STD Summary](#)

[Download the LTD Summary](#)



# Tooele County School District Wellness Program

## Select Health Healthy Living Share Program

Tooele County School District, in partnership with Select Health, provides opportunities for employees to engage in healthy activities throughout the year. Tooele County School District supports all employees in reaching their personal health and wellness related goals and encourages employees to participate in the Select Health Share wellness offerings.

By completing the wellness activities listed in the wellness program employee engagement tasks list by the given deadlines, all insured employees can avoid paying a premium differential of **\$100 extra/month** for the 2026-2027 plan year.

Employees have a chance to remove the premium differential by completing ALL the wellness activities listed below by **December 31st, 2025** and letting Kamille Ortiz know by **January 9th, 2026**. Once you have completed the activities and let Kamille know, the differential will be removed the following month.

### Wellness Program Employee Engagement Tasks list:

1. Attend a workplace health education and screening event or complete a preventative exam from a physician by **December 31st, 2025**
2. Complete the online Health Check on the Personify Health portal by **December 31st, 2025**
3. Successfully participate and record results in Personify Health for one activity campaign by **December 31st, 2025**
4. Successfully participate and record results in Personify Health for a second activity campaign by **April 30th, 2026**

\*Some Select Health Share employees have additional measured engagements to complete (based on age, gender, medical history, or risk factors). These do not count towards the Tooele County School District premium differential but are tied to Select Health provided incentives.

**\*\* For a full list of the detailed Share program engagements, please refer to <https://selecthealth.org/share/employees>**

Please note: Employees who did not complete the 2024/2025 wellness activities by June 30<sup>th</sup> 2025, will pay \$100 extra/month for medical premiums, beginning September 1st, 2025.

If you are unable to participate in any of the health-related activities required to earn an incentive, you may request a reasonable accommodation by contacting Kamille Ortiz, 435-833-1900 x 1103, [kortiz@tooeleschools.org](mailto:kortiz@tooeleschools.org).



# Employee Assistance Program

## Intermountain EAP

Your EAP partner is offering free, confidential, brief counseling to employees and their family members.

The Intermountain 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 well being as taking care of your physical health. Creating positive relationships at home and work, effectively managing stress, and thriving during times of change.

### 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 ages 6-26.

### Legal/Financial Assist

When legal or financial situations arise, you may need the counsel of an expert. The Intermountain Employee Assistance Program can help connect you with a participating attorney or financial advisor for a free consultation either on the phone or in person.

### Crisis Response

Crisis response is available by phone 24 hours a day 7 days a week at 1-800-832-7733.

Employees and family members are encouraged to use this service when urgent situations arise. Clients with emergency situations receive immediate attention by phone.

Scan the QR code below to visit [www.intermountainhealthcare.org/eap](http://www.intermountainhealthcare.org/eap)



Contact by phone: 800-832-7733  
Website: [www.intermountainhealthcare.org/eap](http://www.intermountainhealthcare.org/eap)  
Email: [eap@imail.org](mailto:eap@imail.org)

# Cost of Coverage



September 1, 2025 - August 31, 2026  
**Certified & Administrative Employees**

## Medical

### Traditional Select Health Share

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month
Employee Only	\$734.00	\$458.70	\$275.30
Two Party	\$1,627.00	\$1,221.40	\$405.60
Family	\$2,328.80	\$1,795.60	\$533.20

## Medical

### Traditional Select Health Care + (Out of Area Only)

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month
Employee Only	\$813.20	\$458.70	\$354.50
Two Party	\$1,802.80	\$1,221.40	\$581.40
Family	\$2,580.50	\$1,795.60	\$784.90

## Medical

### Select Health Share HealthSave HSA

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month	Monthly HSA Contribution
Employee Only	\$648.70	\$623.70	\$25.00	\$125.00
Two Party	\$1,438.00	\$1,214.80	\$223.20	\$140.00
Family	\$2,058.40	\$1,684.00	\$374.40	\$150.00

## Medical

### Select Health Care + HealthSave HSA (Out of Area Only)

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month	Monthly HSA Contribution
Employee Only	\$718.90	\$623.70	\$95.20	\$125.00
Two Party	\$1,593.50	\$1,214.80	\$378.70	\$140.00
Family	\$2,280.90	\$1,684.00	\$596.90	\$150.00

## Medical

### Select Health Share HealthSave DUAL plan

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month	Monthly HSA Contribution
Two Party	\$1,734.30	\$1,425.00	\$309.30	\$140.00
Family	\$2,482.30	\$2,098.20	\$384.10	\$150.00

## Medical

### Select Health Care + HealthSave DUAL plan (Out of Area Only)

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month	Monthly HSA Contribution
Two Party	\$1,921.40	\$1,425.00	\$496.40	\$140.00
Family	\$2,750.40	\$2,098.20	\$652.20	\$150.00

# Cost of Coverage



September 1, 2025 - August 31, 2026  
 Support Professionals & Retired Employees

## Medical

### Traditional Select Health Share

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month
Employee Only	\$734.00	\$596.70	\$137.30
Two Party	\$1,627.00	\$1,419.40	\$207.60
Family	\$2,328.80	\$2,060.60	\$268.20

## Medical

### Traditional Select Health Care + (Out of Area Only)

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month
Employee Only	\$813.20	\$596.70	\$216.50
Two Party	\$1,802.80	\$1,419.40	\$383.40
Family	\$2,580.50	\$2,060.60	\$519.90

## Medical

### Select Health Share HealthSave HSA

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month	Monthly HSA Contribution
Employee Only	\$648.70	\$623.70	\$25.00	\$125.00
Two Party	\$1,438.00	\$1,287.80	\$150.20	\$140.00
Family	\$2,058.40	\$1,859.00	\$199.40	\$150.00

## Medical

### Select Health Care + HealthSave HSA (Out of Area Only)

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month	Monthly HSA Contribution
Employee Only	\$718.90	\$623.70	\$95.20	\$125.00
Two Party	\$1,593.50	\$1,287.80	\$305.70	\$140.00
Family	\$2,280.90	\$1,859.00	\$421.90	\$150.00

## Medical

### Select Health Share HealthSave DUAL plan

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month	Monthly HSA Contribution
Two Party	\$1,734.30	\$1,498.00	\$236.30	\$140.00
Family	\$2,482.30	\$2,213.20	\$269.10	\$150.00

## Medical

### Select Health Care + HealthSave DUAL plan (Out of Area Only)

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month	Monthly HSA Contribution
Two Party	\$1,921.40	\$1,481.00	\$440.40	\$140.00
Family	\$2,750.40	\$2,213.20	\$537.20	\$150.00



# Cost of Coverage

September 1, 2025 - August 31, 2026

## Dental Premier PPO Plan

Status	Total Premium Per Month	TCSD Contribution Per Month	Employee Cost Per Month
Employee Only	\$38.20	\$38.20	\$0.00
Employee + 1	\$80.40	\$38.20	\$42.20
Family	\$132.30	\$38.20	\$94.10

## Vision - VSP Plus

Status	Total Premium Per Month	Employee Cost Per Month
Employee Only	\$8.00	\$8.00
Employee + 1	\$15.70	\$15.70
Family	\$24.90	\$24.90

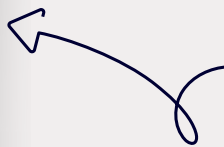
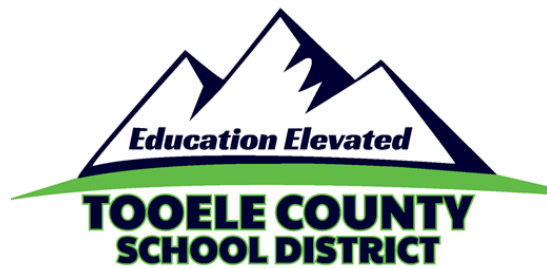
## Vision - VSP 100

Status	Total Premium Per Month	Employee Cost Per Month
Employee Only	\$5.40	\$5.40
Employee + 1	\$10.40	\$10.40
Family	\$16.50	\$16.50









**SCAN THE QR CODE TO  
VIEW YOUR BENEFITS  
EDUCATION COURSE  
ON EDGE!**

This Employee Benefits Guide was created for the employees of Tooele County School District by GBS Benefits.