

THE FOCUS

The Enterprise **F1**

November 12, 2018

INSIDE



Good insurance alternative?

Some Utahns are opting for health insurance coverage with organizations called healthcare sharing ministries or Christian ministry plans. Scott Deru discusses the pros and cons of this kind of plan and explores the liability that employers may face if they offer it to their employees.

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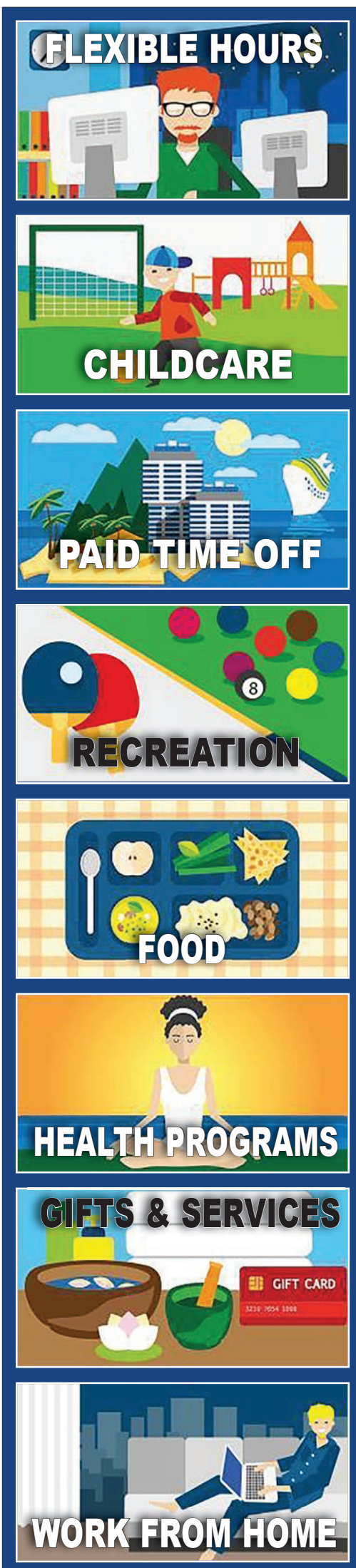
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HEALTHCARE/INSURANCE/BENEFITS



To attract and retain top talent these days, it often takes **MORE THAN MONEY**

Tim Gurrister
The Enterprise

Employers are finding they must (pun unavoidable) perk up the perks, maybe even to include the.

“The trend today and for the past two years has been low unemployment resulting in increased competition for talent between employers,” said Luke Morris, vice president for talent at Intermountain Healthcare, considered Utah’s largest private employer.

Job seekers these days at all skill levels have multiple employment options with companies in different industries, he said. “It’s very different from past years where employees clung to one industry.”

The trend likely goes back further, even before 2015, said Ryan D. Nelson, a Salt Lake City labor law attorney and Utah president of the Employers Council, which serves Utah, Colorado and Arizona.

“The Utah labor market,” he said, “tightened by many years of growth and low unemployment, has encouraged — even emboldened — employees to demand more from employers.”

Enticements in play now from employers include game rooms, fully stocked kitchens, transit passes, day-care, tuition reimbursement, gym access, onsite healthcare, company retreats, work-from-home, flexible hours, personal time off accounts beyond sick time and holiday pay, even humanitarian opportunities that appeal to millennials (workers aged 19 to late 30s.)

Also on the table are benefits for domestic violence survivors, military training leave, loan repayment assistance, insurance programs that pay back policy-holders for their deductibles from healthcare insurance plans. Employers are organizing employee soccer tournaments and offering assistance paying for gender reassignment surgery.

And for pet owners? How about pet healthcare insurance and even pet bereavement leave?

A recent survey found surprising numbers of workers wanting paid time off when the family pet passes. The nationwide poll by the pet product review site MyPetNeeds-That.com details Utahns opting for four days of leave, the near-unanimous norm west of the Rockies, except for those indifferent souls in Wyoming, who only need two days.

Most of those who lose pets across the rest of the country would settle for three days, while South Dakota could bear no less than six. “I have heard a little about that,” said Nelson. “It doesn’t surprise me. It’s a logical outgrowth from pet insurance, which we offer to our employees.”

Intermountain Healthcare also offers pet healthcare insurance for the 37,000 employees in its 23 hospitals, its dominant healthcare insurance arm and its medical group of 1,600 doctors working in 180 clinics in Utah and Idaho.



see PERKS page F4

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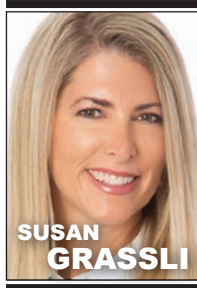
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Where is the Affordable Care Act headed?

You may not be completely clear on what has been happening with healthcare reform or where it currently sits — and for good reason. Considering the mixed messages we hear from a polarized Congress, the media spin and the complexity of the law itself, there is reason to be confused.

There are dozens of provisions in the healthcare reform bill called the “Patient Protection and Affordable Care Act” (PPACA or ACA), which was signed into law on March 23, 2010. Effective dates for the provisions were staggered and most were effective by 2015. Among these provisions, there are two that are central to the heart of healthcare reform and which continue to garner a lot of attention and debate: the individual mandate and the employer mandate.



SUSAN GRASSLI

What is the individual mandate?

The individual mandate (technically “individual shared responsibility”) is an ACA provision that authorizes the IRS to assess a tax penalty on individuals who fail to obtain health insurance coverage for themselves and their families. To avoid the penalty, the required level of health coverage is minimal. It is referred to as minimum essential coverage and just about any health coverage is sufficient.

What happened to the individual mandate?

The individual mandate is still technically part of the ACA but on Jan. 1, 2019, the tax penalty goes away. So, practically speaking, it is no longer effective starting next year. The provision reducing the penalty to nothing was included in the U.S. House bill called the “Tax Cuts and Jobs Act,” which passed both the Senate and House on Dec. 20, 2017, and was signed by the president on Dec. 22, 2017.

How does the reduced individual mandate penalty affect employers?

When the individual mandate was effective, employees who previously had no interest in their employer’s health plan now had motivation to participate. When the penalty goes away, individuals may again decide to opt out of the employer’s plan, thus reducing participation, which

in turn may have different effects for different employers. For example, for insured plans it might lower employer cost, but for self-funded plans it might increase costs because high-claims employees will likely stay enrolled.

What is the employer mandate?

The employer mandate (technically “employer shared responsibility”) is an ACA provision that authorizes the IRS to assess one of two tax penalties on employers (technically “applicable large employers”) who fail to offer a specific level of coverage to at least 95 percent of their full-time employees and their dependents.

To avoid the larger penalty, the required level of health coverage is the same minimum essential coverage noted above and just about any health coverage is sufficient. However, to avoid the other penalty, the health coverage offered must also provide minimum value (based on an actuarial scale) and must be affordable, defined by the ACA to mean the employee cost (for single coverage only) must not exceed a prescribed percentage of household income (9.86 percent for 2019).

It is important to note here that even if an employer fails to meet these thresholds, no penalty applies unless at least one full-time employee qualifies for a federal subsidy and purchases coverage in the ACA Marketplace/Exchange (an online portal created for individuals to purchase insurance).

What happened to the employer mandate?

The employer mandate is still very much a part of the ACA. There are no changes that remove it or reduce requirements. In fact, in November 2017, the IRS began sending notices of proposed penalties (based on 2015 calendar year obligations) to large employers. So, just because an employer hasn’t received a penalty letter *yet* doesn’t mean it is in the clear. See the graphic at the bottom of the page to see how penalties are calculated.

What is a large employer?

A large employer under the ACA employer mandate provision is one which employs at least 50 full-time or



full-time-equivalent employees. There is a method identified in the employer mandate provisions to calculate size. Generally, a full-time employee is one who works an average of 30 hours per week or 130 hours per month over the prior calendar year. The total number of full-time-equivalent employees in a month is calculated by adding all hours worked that month by all part-time employees divided by 120. Aggregated groups (controlled and affiliated service group) rules as well as contingent worker rules also apply to the calculation.

How does the IRS know which large employers may owe a penalty?

The ACA requires insurance companies, the Marketplace/Exchange, large employers and certain small employers to annually file information returns with the IRS using forms 1094 and 1095. The forms provide specific identifiable information including but not limited to: who was offered coverage, who purchased coverage, the level of coverage, the cost of coverage and who received a subsidy. The IRS cross-references the information provided to determine penalties.

What if a large employer fails to file information returns?

In addition to the proposed penalty letters the IRS is currently sending, it is also sending separate letters to employers who have not filed any 1094-C and 1095-C forms but who are identified as large. The IRS is currently sending these letters based on 2015 and 2016 calendar years. The IRS gleans enough information from the 1094 and 1095 forms it receives from insurance companies and the

Marketplace/Exchange to identify large employers who should have filed.

Why must some small employers submit information returns when they aren’t required to offer health insurance?

Some small employers offer plans that are self- or level-funded rather than a traditional plan that is fully insured by an insurance company. Consequently, there is no obligation by an insurance company to provide information to the IRS about who obtained coverage. In this case, a small employer must provide information to the IRS using 1094-B and 1095-B forms. This helps the IRS identify which individuals owe an individual mandate tax. It is currently unclear whether this requirement will continue in 2019 after the individual mandate penalty goes to zero.

What will happen to healthcare reform?

In addition to the individual mandate penalty reduction, a few other ACA provisions have been delayed or adjusted, or enforcement priorities have changed. However, the employer mandate and employer reporting with forms 1094 and 1095 are still very much alive, as are dozens of other ACA provisions affecting employers. Because healthcare reform is so partisan, much of what happens in the future depends on which political party maintains (or obtains) control of the U.S. House, the Senate and the White House. For now, it is wise for employers of all sizes to expect much of the ACA to stay around, become fully educated on requirements and implement changes to become compliant.

Susan L. Grassli is the director of ACA and benefits compliance for GBS Benefits. She is an attorney and an active member of the Utah State Bar. She served as an assistant attorney general with the Utah Attorney General’s office for 14 years.

	2015	2016	2017	2018	2019
Code §4980H(a) non-offering penalty	\$2,080.00 X all FT employees (minus 30)	\$2,160.00 X all FT employees (minus 30)	\$2,260.00 X all FT employees (minus 30)	\$2,320.00 X all FT employees (minus 30)	\$2,500.00 X all FT employees (minus 30)
Code §4980H(b) affordability/MV penalty	\$3,120 X all FT employees who go to the Marketplace/Exchange and obtain a subsidy	\$3,240 X all FT employees who go to the Marketplace/Exchange and obtain a subsidy	\$3,390 X all FT employees who go to the Marketplace/Exchange and obtain a subsidy	\$3,480 X all FT employees who go to the Marketplace/Exchange and obtain a subsidy	\$3,750 X all FT employees who go to the Marketplace/Exchange and obtain a subsidy

HEALTH INSURANCE COMPANIES

Ranked by Number of Utah Individuals Covered in 2017



List Development Laneace Gregersen | laneace@senterprise.com

Company Name Address	Phone Web	Number of Utah Individuals Covered in 2017	No. of Utah Offices	No. of Utah Employees	Year Est.	Insurance Products Offered	Top Local Executive
1 SelectHealth Inc. 5381 Green St. Murray, UT 84123	801-442-5000 selecthealth.org	785,000	1	1,500	1983	Medical plans, dental, vision, pharmacy benefit management, life & disability coverage, Medicare Advantage, Medicaid enrollees, Children's Health Insurance Plan (CHIP), Federal Employee Health Benefits (FEHB) Plan	Patricia Richards President/CEO
2 Regence BlueCross BlueShield of Utah 2890 E. Cottonwood Parkway SLC, UT 84121	801-333-2000 regence.com	530,000	1	307	1944	A full suite of scalable wellness & health insurance products, as well options for life, dental and vision	Jim Swayze President
3 United Healthcare 2525 Lake Park Blvd. SLC, UT 84120	801-982-4500 uhc.com	443,168	24	1,614	1977	HMO, PPO, dental, vision, life, disability, critical illness	Pam Gold
4 Cigna 9350 S. 150 E., Ste. 700 Sandy, UT 84070	800-261-5731 cigna.com	237,785	1	22	1792	Open Access Plus, PPO	Sean Jolley
5 EMI Health 5101 S. Commerce Drive Murray, UT 84107	801-262-7476 emihealth.com	213,036	1	180	1935	Medical, dental, vision	Steven Morrison President/CEO
6 University of Utah Health Plans 6053 Fashion Square Drive Ste. 110 Murray, UT 84107	801-587-6480 uhealthplan.utah.edu	160,045	1	265	1998	Commercial group (fully insured, self-insured & level-funded), marketplace individual plans (on and off the exchange), Medicaid & Medicare (in partnership with Molina)	Chad Westover CEO
7 Humana 9815 S. Monroe St. Sandy, UT 84070	801-256-6200 humana.com	47,000	1	80	1980	Medicare Advantage, dental, vision, life, wellness (Go365)	Victoria Coley
8 Aetna 10150 Centennial Parkway Ste. 450 Sandy, UT 84070	800-365-1334 aetna.com	*	1	1,000+	1853	Group health, individual health, group dental, group vision, group life & group disability	Todd Trettin Market President



*Did not disclose. Please note that some firms chose not to respond, or failed to respond in time to our inquiries. All rights reserved. Copyright 2018 by Enterprise Newspaper Group. The Enterprise strives for accuracy in its list publications. If you see errors or omissions in this list, please contact us at lists@senterprise.com.

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Nelson said workers have realized if they can't find what they want with one company, they can try others, especially if they're highly skilled. "Many employers, recognizing the dire need to attract and retain quality employees, have capitulated and continue to up the ante in this high-stakes game for talented labor."

Salary is just a starting point, with workers citing other offers and asking, "What else you got?"

"Yes, we are seeing this regularly," said Morris. "It's not just about the salary offered anymore."

Pay must be "in the ballpark," he said, but job seekers increasingly want to work for an organization whose mission resonates. "We at Intermountain believe that perks not tied to organizational mission will ultimately fail to attract and keep the best talent."

Nelson credited millennials with fueling the change. "Salary is still the primary slice of the total compensation pie employees expect, along with good

benefits and a solid retirement plan. However, as millennials continue to influence and, in some ways, upend the traditional workforce, more employees want a workplace environment that offers additional benefits."

Those benefits range from the tangible like recreation rooms and snack bars, Nelson said, to the intangible, "like a fun, engaging culture ... and involvement in a cause."

Mark Tenney, Intermountain's director of compensation and benefits, said the healthcare giant offers many of the perks aforementioned. Intermountain, he said, finds that medical; dental; paid time off; retirement plans, including 401(k) matching; and health savings accounts "are our most highly rated benefits."

Tenney listed recently added benefits changes including expansions and bolstering of various healthcare options and plans and the addition of pet insurance — but no pet bereavement time yet.

"We've been on this expansionary path for roughly six years now," said Carrie Mayne, chief economist for the

Utah Department of Workforce Services. "The ease with which employees are able to find jobs and increase their wages, through job changes, raises, etc., will affect their expectations.

"While employment has been expanding for quite some time, wages were slow to start growing after the Great Recession. Wage growth has since picked up some speed, but still lags other growth measures," Mayne said.

Christina Davis, senior public information officer with the department, said after reaching out to some of the department's employment specialists, she found the more popular benefits are personal time off, tuition reimbursement, stocked kitchens or provided lunch, game rooms, flexible hours and transit passes. The first two are most popular with millennials, Davis said, "For more seasoned workers, they prefer the flexible time and telecommuting options as well as personal time off."

One company Davis came across that is opening its first facility in Utah

posted a job listing offering, in addition to traditional benefits, intramural sports such as softball and flag football, massages and bi-monthly haircuts.

"We haven't heard of any companies that offer pet bereavement at this time," said Davis.

The public sector has a slightly different take on employee benefits.

"I can quickly tell you the Davis County School District doesn't offer things like game rooms, fully stocked kitchens, transit passes, etc.," said Chris Williams, spokesman for the district, one of the state's larger employers, with 8,144 employees, including 3,658 teachers — numbers that make it the second-largest school district in the state.

"We are funded with taxpayer money and need to be as frugal as we can with those funds," he said. "So, competing with the many other industries for the most talented people is difficult. But for the first time in our history — as of two years ago — new teachers were able to earn more than \$40,000 a year."



Employer liability under healthcare cost-sharing ministries plans

Under the Affordable Care Act (ACA), members belonging to an organization known as healthcare sharing ministries, sometimes called Christian health plans or Christian ministries plans, were granted an exemption from the personal tax penalty (up to 2.5 percent of one's household income in 2016 and beyond) for not having a qualified plan under the act. The basic concept behind these plans is to have those who meet certain membership qualifications (attend church regularly, do not smoke or drink, declare their belief in the Trinity, etc.) to co-op and share in the costs of the other participants' medical expenses.

While originally targeting individuals, these plans have gained some momentum as a substitute to an employer-sponsored group medical plan. This article primarily focuses on the dangers and potential legal pitfalls employers should consider before using a Christian ministries plan as a replacement for their group health insurance.

The legal term in Latin, "caveat emptor" or "let the buyer beware," applies here. In order to qualify for membership, you must be screened for medical conditions and can be rejected if you are in poor health. Often, pre-existing conditions are not covered until a person has been on the plan for 12 months. Both of these are prohibited practices for employer-sponsored medical plans. Thus, employers may be subjecting themselves to potential legal liability and participants may inadvertently be assuming personal financial risk when using these programs.

Here is a list of reasons why our agency and its licensed and credentialed professionals (and similarly licensed agents) cannot represent this product in any manner:

- Because the healthcare shar-

ing ministries offering is not a fully insured product, there is no protection or oversight from the states' insurance departments. Complaints to the insurance department in your state will not be addressed because they have absolutely no jurisdiction over these organizations.



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- Because this is not an insured product, it is not covered under any state-guaranteed funds, which promise to pay policyholders in the case of bankruptcy or insolvency of an insurance company. In Utah, this is the Utah

Life and Health Insurance Guaranty Association.

- The normal fallback federal regulatory agency for health insurance complaints is the Department of Labor. They regularly deal with complaints on self-funded plans. They have no oversight or regulatory authority over healthcare sharing ministries offerings. Complaints lodged here will go unheard and unresolved.

- Employers who replace their group health plan with a healthcare sharing ministries offering may be at risk for a lawsuit from their employees should the payments fall short of their expectation/promise, has unreimbursed claims or the organization files for bankruptcy.

- Because the healthcare sharing ministries offering is not insurance, they are not covered by an agent's errors and omissions policy for lack of performance, leaving the consumer and an agency exposed to undue liability exposure.

A recent IRS ruling regarding healthcare sharing ministries plans regarding employer contributions to these plans states: "the law does not exclude employer payment for the cost of employee participation from the employee's gross income. Instead, the law considers it as taxable income and wages to the employee." This clarification reminds us that an employee must

pay federal, state, local and Social Security taxes and an employer must pay the matching Social Security and unemployment taxes. This could add a 30 percent to 50 percent-plus cost differential to the Christian ministry plan. Additionally, because many Christians tithe at 10 percent of their wages, this additional income could take a bigger bite out of the employee's purchasing power.

- Because these plans reimburse claims at Medicaid, plus a certain percentage, more and more hospitals and physicians are refusing to accept these reimbursements as "payment in full." Before being admitted to most any facility, a patient typically signs a mountain of paperwork, including an agreement to be personally liable for any expenses not covered by their insurance. The Christian ministry plan is not health insurance and there is no provider network with pre-negotiated discounts. We are seeing a greater number of medical providers collecting the difference.

- If employers dismantle their group health plan and substitute a Christian ministries plan, there is a potential that it may be determined that the Christian ministries plan is a group plan. Case law has shown that individual plans which are sponsored by and paid for directly or indirectly by an employer (i.e., via direct contributions or through a pay raise) are considered group plans. Employer-sponsored plans need to provide coverage under laws that are required of group plans. For example, the Pregnancy Act of 1978 (which amended the Civil Rights Act of 1964) requires that all employers with 15 or more total employees treat pregnancy the same as any other medical condition. If an employee or their eligible spouse are denied coverage because they are currently pregnant (pre-existing condition) or limitations are placed on the plan coverage (hospital day limits, dollar amount limits or claim denial) because of their

pregnancy, they may run afoul of the Pregnancy Act and risk a civil rights investigation/lawsuit.

- A large employer (50 or more full-time equivalent employees) could not report a Christian ministries plan as an offer of health coverage so they would be subject to the "play or pay" penalty (\$3,000 per employee per year) because this offering is not considered insurance or minimal essential coverage under the Affordable Care Act.

Finally, any employer could also risk a civil lawsuit or investigation from the Department of Labor's Office of Civil Rights under the auspices of discrimination for employees failing to qualify for coverage. Furthermore, employees who fail to qualify for the plan for tobacco and alcohol use, which is considered a health factor, could bring scrutiny and prosecution from the Department of Health and Human Services because discrimination based on a health factor is also prohibited.

The bottom line is that these programs are not insurance and rely totally on the trust and goodwill of the other members in the co-op. Should there be an economic downturn or any number of other reasons where a substantial number of members leave the plan, there is tremendous potential that claims may be unpaid as promised. Furthermore, without regulatory oversight for these offerings, no liability protection for an agent or agency and the potential of a federal discrimination investigation/lawsuit for employers who offer a healthcare sharing ministries plan as a substitute for a group health plan, most professionally licensed agents have made the decision that they cannot in good conscience recommend these offerings to their clients.

Scott Deru is president of Fringe Benefit Analysts LLC, a nationwide employee benefit consulting firm headquartered in Layton.

HOSPITALS IN UTAH

Listed by Number of Beds



List Development Laneace Gregersen | laneace@senterprise.com

	Company Name Address	Phone Web	Total Number of Beds	Number of Employees	Number of Physicians	For Profit?	Specialties	Administrator	Owner
1	University of Utah Hospitals and Clinics 50 N. Medical Drive SLC, UT 84132	801-581-2121 healthcare.utah.edu	680	20,000	1,380	N	Multiple	David Entwistle	University of Utah
2	Intermountain Medical Center 5121 S. Cottonwood St. Murray, UT 84107	801-507-7000 intermountainhealthcare.org	501	4,480	1,458	N	Cardiovascular, neurosciences, oncology, trauma, women's, newborn ICU, medical, surgical, emergency medicine, transplant, orthopedics	Blair Kent	Intermountain Healthcare
3	Utah Valley Hospital 1034 N. 500 W. Provo, UT 84604	801-357-7850 intermountainhealthcare.org	395	3,561	787	N	Level II Trauma Center, newborn ICU, heart & cancer care, obstetrics, surgery	Kevin Brooks	Intermountain Healthcare
4	McKay-Dee Hospital 4401 Harrison Blvd. Ogden, UT 84403	801-627-2800 intermountainhealthcare.org	321	1,859	823	N	Level II Trauma Center, heart & cancer care, newborn ICU, obstetrics, surgery	Mike Clark	Intermountain Healthcare
5	St. Mark's Hospital 1200 E. 3900 S. SLC, UT 84124	801-268-7111 stmarkshospital.com	317	1,500+	600+	Y	ER, heart services, cancer services, imaging & surgery centers	Steven B. Bateman	Mountainstar Medical Group
6	Dixie Regional Medical Center 1380 E. Medical Drive St. George, UT 84790	435-251-1000 intermountainhealthcare.org	297	2,713	330	N	ER, neurosurgery, heart surgery, newborn ICU, surgery, cancer therapy, LiVe Well Center	Mitch Cloward	Intermountain Healthcare
7	Primary Children's Hospital 100 N. Mario Capecchi Drive SLC, UT 84113	801-662-1000 intermountainhealthcare.org	289	2,531	900	N	Pediatric Level I Trauma Center, heart services, cancer services, brain & spine services, organ transplants	Katy Welkie	Intermountain Healthcare
8	LDS Hospital 8th Ave. & C St. SLC, UT 84143	801-408-1100 intermountainhealthcare.org	256	1,574	1,131	N	Medical, surgical, blood cancer, bone marrow transplant, orthopedics, women & newborn, special care nursery, psychiatry, chemical dependency, bariatrics	Shawn Morrow	Intermountain Healthcare
9	Ogden Regional Medical Center 5475 S. 500 E. Ogden, UT 84405	801-479-2111 ogdenregional.com	239	1,000+	300+	Y	Level II Trauma Center, certified stroke center, maternity care	*	Mountainstar Medical Group
10	Jordan Valley Medical Center 3580 W. 9000 S. West Jordan, UT 84088	801-561-8888 jordanvalleymc.com	183	783	492	N	Cancer, woman's services, orthopedics, general surgery, pediatrics	Steven M. Anderson	IASIS Health Care
11	Salt Lake Regional Medical Center 1050 E. South Temple SLC, UT 84102	801-350-4111 saltlakeregional.com	158	700+	500+	Y	Emergency medicine, heart care, cancer care, diagnostic imaging, etc.	*	Physician-owned
12	Logan Regional Hospital 500 E. 1400 N. Logan, UT 84341	435-716-1000 intermountainhealthcare.org	146	1,070	247	N	ER, obstetrics, surgery, cancer center	Kyle Hansen	Intermountain Healthcare
13	Lakeview Hospital 630 E. Medical Drive Bountiful, UT 84010	801-299-2200 lakeviewhospital.com	128	597	226	Y	Orthopedics, chest pain, women's services, behavioral health, wound care & ER	Troy Wood	Mountainstar Medical Group
14	Jordan Valley Medical Center West Valley Campus 3460 S. 4155 W. West Valley City, UT 54120	801-964-3100 jordanvalleywest.com	102	439+	492	N	Orthopedics, general surgery, women's services, behavioral health	Jon Butterfield	IASIS Health Care
15	Riverton Hospital 3741 W. 12600 S. Riverton, UT 84065	801-285-2010 intermountainhealthcare.org	97	750	670	N	Women & newborns, ER, pediatric services, medical, surgical, outpatient, diagnostic imaging	Todd Neubert	Intermountain Healthcare
16	Alta View Hospital 9660 S. 1300 E. Sandy, UT 84094	801-501-2600 intermountainhealthcare.org	71	374	247	N	Women & newborn care, medical & surgical services, imaging, ER	Bryan Johnson	Intermountain Healthcare
16	American Fork Hospital 170 N. 110 E. American Fork, UT 84003	801-501-2600 intermountainhealthcare.org	71	580	247	N	Women & newborn care, medical & surgical services, imaging, ER	Lisa Paletta	Intermountain Healthcare
18	Brigham City Community Hospital 950 S. Medical Drive Brigham City, UT 84302	435-734-9471 brighamcityhospital.com	49	*	*	Y	Acute-care hospital	*	Mountainstar Medical Group
19	Cedar City Hospital 1303 N. Main St. Cedar City, UT 84721	435-868-5000 intermountainhealthcare.org	48	451	91	N	ER, obstetrics, surgery, cancer services, cardiology, spine & pain services, diagnostic imaging	Eric Packer	Intermountain Healthcare
20	Layton Hospital 201 W. Layton Parkway Layton, UT 84041	801-543-6705 intermountainhealthcare.org	43	410	162	N	ER, obstetrics, surgery	Judy Williamson	Intermountain Healthcare

Record-low unemployment shifts employer focus from reducing benefits costs to long-term engagement strategies

Although the cost of employee benefits continues to rise and health-care remains a hotly debated political topic, Utah's highly competitive labor market is forcing employers to rethink their overall total rewards strategy. According to the just-released 2018 Gallagher "Benefits Strategy & Benchmarking Survey," attracting and retaining talent remains the No. 1 operational priority for two-thirds of Utah's employers. That figure has increased 14 percentage points from 2017 and is in sharp contrast to the 31 percent of Utah employers who ranked controlling benefit costs as their top priority, a figure that declined 11 percentage points from 2017.



JAKE TURLEY

workforce training and development to enhance employee career well-being. This will help your organization earn a reputation for talent management, which, in turn, will attract and productively engage the right employees in meaningful roles to strengthen overall organizational well-being.

Strategy No. 2: Increase benefits choice and flexibility by allowing employees to select a better fit for their different needs

and preferences.

To support a variety of lifestyle

needs and the diverse requirements of a multigenerational workforce without substantially increasing costs, employers are adding choice and flexibility through a wider range of medical plan choices, voluntary benefits and related options. By offering employees the opportunity to customize their benefits, employers foster greater employee satisfaction and more productive work-life integration.

Provide multiple medical plans with a range of deductibles and include a high-deductible health plan in the mix. The goal is to provide employees with more choices that

will better fit their own lifestyles and needs. Make health savings accounts available as a tax-effective vehicle to help employees build a reserve of healthcare funds for retirement.

Expand and change the use of voluntary options, such as coverage for critical illness, legal services, identity theft protection and commuter benefits, to keep benefit offerings distinctly competitive as employee expectations continue to diversify. Include tuition assistance as a voluntary benefit and

see **ENGAGEMENT** page F8

Shifting an organization's approach from a primary focus on cost control to a broader focus on overall employee engagement is no easy challenge given that today's workforce is comprised of five very different generations. Employers will need to consider tactics that address their employees' total wellbeing in order to optimize organizational retention and recruitment efforts while keeping costs maintainable. Incorporating the following three strategies is key to creating or redefining a successful and sustainable engagement plan:

Strategy No. 1: Increase the focus on engagement, culture and employee empowerment through education.

Physical, emotional, career and financial well-being all play a part in driving an employee's engagement. Thus, investments in the health, financial security and career growth of an organization's workforce should be a top consideration. Equally important is supporting these initiatives with well-designed employee communication and education.

Incorporate physical well-being components into an overall benefits strategy to encourage employees to live healthy lifestyles. The most popular physical well-being benefits include flu shots, tobacco cessation, health risk assessments and physical activity programs.

Provide financial well-being programs that prepare employees to make better saving and spending decisions. This will help them meet timely goals for a secure retirement while containing compensation costs. Two popular options are financial advisor sessions and financial literacy education.

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HEALTH PLANS
 UNIVERSITY OF UTAH

VISION CENTERS

Listed Alphabetically



List Development Laneace Gregersen | laneace@slenterprise.com

	Company Name Address	Phone Web	Number Full- Time Utah Employees	On-Site Optical Shop?	Services Offered	Owner/Officer
1	Broadway Eye Clinic 250 E Broadway., Ste. 110 SLC, UT 84111	801-322-0467 visionsource-broadway.com	7	Y	Eye disease, eye conditions, contact lenses, eyewear, vision therapy, dry eye	Karri Buresh Terry Berner
2	Clair Optical 1025 E. 3300 S. SLC, UT 84106	801-466-3937 clairoptical.com	4	Y	Contacts, eyeglasses, sunglasses	Alan Seyboldt
3	Cottonwood Eye and Laser Center 201 E. 5900 S., Ste. 101 Murray, UT 84107	801-268-6600 cottonwoodeye.com	5	Y	Eye exams, tear duct procedures, eyelid surgery, eye muscle surgery, cataract surgery & LASIX surgery	Alan E. Jackson
4	The Eye Institute of Utah 755 E. 3900 S. SLC, UT 84107	801-266-2283 theeyeinstitute.com	65	N	Cataracts, LASIK/PRK, ICL surgery, corneal inlays, glaucoma, retina, dry eye, cornea, eyelid & facial plastics, comprehensive eye care	Robert J. Cionni
5	Hoopes Vision 11820 S. State St. Draper, UT 84020	801-568-0200 hoopesvision.com	60+	N	LASIK, PRK, cataract surgery & many other vision correction procedures	Phillip C. Hoopes Sr.
6	John A. Moran Eye Centers 65 S. Mario Capecchi Drive SLC, UT 84132	801-581-2352 moraneyecenter.org	565	Y	Cataract, corneal disease & refractive surgery, LASIK, glaucoma, pediatric ophthalmology, retinal diseases & surgery, urgent care, etc.	Randall J Olson
7	The LASIK Vision Institute 7440 S. Creek Road, Ste. 150 Sandy, UT 84047	801-266-2010 lasikvisioninstitute.com	5	N	Traditional LASIK, custom wavefront LASIK, PRK laser eye surgery, Bleph-Ex, eye exams	The LASIK Vision Institute
8	Salt Lake Eye Associates 1025 E. 3300 S., Ste. B SLC, UT 84106	801-281-2020 saltlake-eye.com	6	Y	Complete eye exams, cataract surgery, LASIK, treatment for dry eyes, diabetic eye exams	Rachel S. Benator
9	Standard Optical 1901 Parkway Blvd. SLC, UT 84119	801-886-2020 standardoptical.net	135	Y	Routine eye care, glasses, contacts, medical eye care, LASIK, cataracts, general ophthalmology	Aaron Schubach CEO
10	Utah Eye Centers 440 D St. SLC, UT 84103	801-476-0494 utaheyecenters.com	90+	Y	General ophthalmology, LASIK, laser cataract surgery, KAMRA inlay, retina specialists, pediatric specialist, cosmetic specialists	Jimmy Smith



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ENGAGEMENT

from page F7

couple this with debt counseling and student loan forgiveness programs to help employees reduce financial stress.

Strategy No. 3: Explore value-based and innovative health management options to improve health-care and contain costs.

During the 2008 financial crisis, employers began to increase employee cost-sharing through the design of their healthcare plan structure and requirements by implementing higher deductibles, copays and coinsur-

ance. Today's stronger economy has slowed this trend and there is now a movement away from cost-shifting. In fact, only 42 percent of Utah employers surveyed by Gallagher increased their employees' share of these costs in 2018, down from 49 percent in the prior year, and more are adopting plan structures based on incentives and value. This change creates an opening to remove barriers to affordable and desirable healthcare, educate and empower employees, and explore market-level innovations that enforce vendor accountability. Employers can encourage vendors to step up their game by asking how they are help-

ing to drive down physician costs and advocate for an improved quality of care and member experience.

Give employees access to health-care cost-transparency tools such as cost calculators, apps and other options. Offer disease management programs that can help employees with chronic conditions like asthma, chronic obstructive pulmonary disease, diabetes and other ailments to better control their health outcomes.

Embrace value-based medical tactics, including reduced costs of prescription drugs that treat high-cost chronic conditions, designated centers of excellence for specified procedures,

and decision-support consultations before certain elective procedures.

Looking ahead, changes in employer delivery of healthcare point to greater adoption of telemedicine, cost-transparency tools and disease management programs. Telemedicine in particular provides the advantages of employee convenience and potential cost savings for both employees and employers. Of Utah employers surveyed by Gallagher, 71 percent currently offer these services, up 25 percentage points over 2017.

Jake Turley is area president of Arthur J. Gallagher & Co.'s Benefits and Human Resources division in Salt Lake City.

SPONSORED CONTENT



Why these key healthcare terms are important to know

by Regence BlueCross BlueShield of Utah

The world of healthcare can seem like another universe with its own particular language. When you're selecting a plan, you might feel like you need a translator to explain all the new words you come across. Fortunately, decoding healthcare-specific terms and phrases is easier when you have examples. Use this guide to enable a more thorough understanding of some key terms you see while you're shopping for a plan.

Formulary: Many healthcare plans cover the costs of prescription medications. A formulary is a list of all the prescription drugs that your insurance plan pays for when a doctor prescribes them to you. Most formularies have different levels or tiers. Medications are organized into different tiers based on their costs and whether they're name brand or generic¹.

Example: Jessica's doctor prescribes a name-brand medication that's on the second tier of her plan's drug formulary. This

medication requires Jessica to make a higher copayment or the part of the payment that her insurance plan doesn't cover. Jessica asks her doctor to find an equivalent generic medication on the first tier of her plan's formulary so she can have a lower copayment².

paid \$120 for an appointment with a specialist. Now that Ahmad has met his deductible, he pays 20 percent of \$120 or \$24 coinsurance, for an appointment with that specialist. His healthcare plan covers the remaining \$96 for the visit.

Cost Share: Cost-sharing hap-

pen when an employee and his or her employer both cover the cost of the employee's health insurance premium and/or some healthcare services³. Cost share also describes the amount of money you pay on your own for healthcare services that your employer doesn't pay for. Cost share can include coinsurance, deductibles and co-payments⁴.

cover her cost-sharing portion of her health insurance premium.

Pre-authorization: Some healthcare services and medical equipment need pre-authorization. This means your doctor needs to make sure your insurance plan covers the service or equipment before providing or prescribing it to you. After your doctor requests pre-authorization, your health insurance company approves or denies the claim

request. If the claim is approved, insurance covers the treatment⁵.

Example: Lou's doctor diagnosed him with sleep apnea and Lou needs a special CPAP machine to treat this condition. Before Lou can get the CPAP machine, his doctor needs pre-authorization from Lou's health insurance company to prescribe it. The insurance company determines whether or not the cost of the CPAP machine is covered under Lou's plan. Lou's doctor gets pre-authorization from the insurance company and Lou gets his medical equipment.



Coinsurance: A health insurance plan has a deductible, which is the amount of money you pay for healthcare services before your plan begins covering those costs. Once you've fulfilled your deductible, you may also need to pay coinsurance for healthcare services. Coinsurance is the percentage of the cost you incur until you meet your out-of-pocket maximum.

Example: Ahmad's health care plan has a \$5,000 deductible, which he's already paid down for the year. It also has a 20 percent coinsurance rate. Before he met his deductible, he

pens when an employee and his or her employer both cover the cost of the employee's health insurance premium and/or some healthcare services³. Cost share also describes the amount of money you pay on your own for healthcare services that your employer doesn't pay for. Cost share can include coinsurance, deductibles and co-payments⁴.

Example: Claire's monthly health insurance premium costs \$165. Her employer covers 70 percent of the cost or \$115.50. The remaining \$49.50 is deducted from one of Claire's paychecks each month to

1. <https://www.healthcare.gov/glossary/formulary/>

2. <https://blog.medicaremadeclear.com/blog/bid/78229/what-is-a-tiered-formulary-and-what-does-it-mean-for-me>

3. <https://www.healthcare.gov/glossary/cost-sharing/>

4. <http://healthcoverageguide.org/reference-guide/benefits-providers-and-costs/cost-sharing/>

5. <http://electronichealthreporter.com/prior-authorization-healthcare-primer/>

SPORTS MEDICINE FACILITIES

Listed Alphabetically



List Development Laneace Gregersen | laneace@slenterprise.com

Company Name Address	Phone Web	Primary Services	Owner/Operator
1 Alpine Sports Medicine 2645 E. Parleys Way SLC, UT 84109	435-645-9095 alpinesportspc.com	Orthopedic, sports rehab, back & neck, golf analysis & conditioning, aquatic therapy, cardiac rehab, neurological injury, etc.	Michael Jennings
2 Alta View Sports Medicine 74 E. Kimballs Lane, Ste. 230 Draper, UT 84020	801-571-9433 altaviewsportsmedicine.com	Complete coverage of all orthopedic conditions & work-related injuries. Leading-edge treatments for chronic pain & acute injuries	Anthony Gordon
3 Center of Orthopedic & Rehabilitation Excellence 13348 S. Market Center Drive Riverton, UT 84065	385-877-7100 utahorthopediccenters.com	Hand & arm, elbow, shoulder, spine, hip, knee, foot & ankle, sports medicine	Part of Physician Group of Utah, Farley Sowards, Director of Orthopedic Services
4 Davis Orthopedics & Sports Medicine 1407 N. 2000 W. Clinton, UT 84015	801-820-3755 utahorthopediccenters.com	Comprehensive range of surgical & non-surgical orthopedic and sports medicine care for patients of all ages	Part of Physician Group of Utah, Farley Sowards, Director of Orthopedic Services
5 Endurance Orthopedics and Sports Medicine 2645 E. Parleys Way, Ste. 500 SLC, UT 84109	801-424-5042 enduranceortho.com	Injuries, rehabilitation & prevention, specialized care for recreationists & for general orthopedic issues	Farley Sowards
6 Heiden Orthopedics 6360 S. 3000 E., Ste. 210 SLC, UT 84121	435-615-8822 heidendavidsonortho.com	Knee, shoulder, hand, wrist & elbow, spine, hip, foot & ankle	Eric Heiden
7 LiVe Well Center-Salt Lake 389 S. 900 E. SLC, UT 84102	385-282-2700 intermountainhealthcare.org	Services focused on improving the health & wellness of every individual, regardless of age or condition	Intermountain Healthcare
8 Lone Peak Orthopedics 9844 S. 1300 E., Suite 275 Sandy, UT 84094	801-571-7061 lonepeakorthopedics.com	Dedicated to utilizing the best technology available for treatment of orthopedic problems	Dr. Gordon R. Kimball Dr. Donald A. Schmidt Bryan A. Clark, PA
9 McKay-Dee Sports Medicine 4401 Harrison Blvd. Ogden, UT 84403	801-387-2775 intermountainhealthcare.org	Orthopedics & sports medicine clinic	Intermountain Healthcare
10 Orthopedic Specialty Group-Alta View 9450 S. 1300 E., Ste. 120 Sandy, UT 84094	801-501-6150 orthopedicspecialtygroup.com	Sports-related injury treatment & supervision	*
11 Orthopedic Specialty Group-Intermountain Medical Center 5169 Cottonwood St., Ste. 430 Murray, UT 84107	801-507-3475 orthopedicspecialtygroup.com	Branch of medicine concerned with the musculoskeletal system	Intermountain Healthcare
12 Orthopedic Specialty Group-LDS Hospital 324 E. 10th Ave. Ste., 100 SLC, UT 84103	801-408-8700 orthopedicspecialtygroup.com	Sports-related injury treatment & supervision	Intermountain Healthcare
13 Orthopedic Specialty Group-Riverton Hospital 3723 W. 12600 S. Riverton, UT 84065	801-285-4650 orthopedicspecialtygroup.com	Cardiology, internal medicine & clinical cardiac electrophysiology procedures	Intermountain Healthcare
14 Orthopedic Specialty Group-TOSH 5848 S. Fashion Blvd., Ste. 120 Murray, UT 84107	801-314-2996 toshutah.com	Wide variety of orthopedic, physical therapy, sports medicine, & sports training services, the highest quality of care	Intermountain Healthcare
15 Peak Physical Therapy and Sports Medicine 12198 S. State St., Ste. 3 Draper, UT 84020	801-571-6600 peakptdraper.com	Injury treatment, state-of-the-art facility, positive & fun atmosphere, all insurances accepted	*
16 Professional Physical Therapy and Sports Medicine 155 W. Canyon Crest Road, Ste. 100 Alpine, UT 84004	801-855-6841 physicaltherapists.com	Neck, shoulder, back, hip, knee	*
17 Salt Lake Clinic Orthopedics 389 S. 900 E. SLC, UT 84102	385-282-2450 saltlakeclinic.org	Hip & knee replacement, sports medicine, hand & wrist, physical therapy, spine, shoulder surgery, foot & ankle, physiatry	*
18 South Mountain Sports Medicine & Rehabilitation 12226 S. 1000 E., Ste. 1 Draper, UT 84020	801-523-3415 southmountainrehab.com	General physical therapy & pain management, post-surgical rehabilitation, sports injuries, outpatient orthopedics, neck & back pain, general joint pain, chronic pain	Kevin Shepherd
19 University Orthopaedic Center 590 S. Wakara Way SLC, UT 84108	801-587-7109 healthcare.utah.edu	Sports medicine, total joint, knee & hip replacement, physical therapy & a complete range of orthopaedic services	Bart Adams
20 Utah Valley Orthopedics and Sports Medicine 1157 N. 300 W. Provo UT, 84604	801-357-1200 intermountainhealthcare.org	Wide variety of care, including everyday injuries, concussions, total joint replacement, etc.	Intermountain Healthcare

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DON'T FIND YOURSELF CROSSWISE WITH



HIPAA.

These five letters that can immediately cause headaches or instill fear. HIPAA, the Health Insurance Portability and Accountability Act of 1996, was created and exists to create national standards for electronic healthcare records, transactions and security, allowing for proper protection while facilitating the proper flow of information required to provide a high level of care.



BAHAR FERGUSON

One incredibly easy and helpful area to protect is your email. In healthcare, if someone were to hack into your email accounts, it may immediately be a HIPAA violation if you have any sort of patient information accessible through your email account.

With MFA for Office 365, the feature increases security by requiring you to log in not only using your email address and password, but also one secondary authentication method (code from SMS text message, code from mobile app, phone call or app pass-

word for non-browser clients).

Off-line: While electronic MFA is often most commonly discussed, it is critical to implement the same concept into various off-line exchanges. Whether it be the transferring of funds, sending of sensitive information, etc., it is important to put policies into place that help ensure the information is being requested from the appropriate people before such information is sent. For example, hackers are continually sending emails attempting to cause someone to fall

for their impersonation of a legitimate person or request. Often it is a request to wire money, a request for employee W-2 forms or even customer or patient information. It is important to require a second method for such important information transfers, like an in-person confirmation or text confirmation. Having the email coming from a legitimate address is not enough. If that individual had his/her email

see HIPAA page F12

The penalties for HIPAA breaches can result in significant financial and reputational damage. We are all constantly inundated with attempted hacking emails that, if fallen for, could trigger a HIPAA breach (among all sorts of other complications) if you or your company is bound by HIPAA. With every device and every user being a direct door to a HIPAA breach, it is important to be proactive. To do so, we must both protect the physical device and constantly educate the individuals on hacking trends and company policies. Here are four tips for starting down the more proactive road trying to avoid or minimize a HIPAA breach:

1. Encryption for remote devices. Whether you need to take your laptop to and from clinic sites, offices, or just home to finish up various work and projects, our devices often follow us from the office, introducing a number of potential HIPAA violation triggering events. Unfortunately, cars get broken into or devices get stolen, left behind or misplaced. At a minimum, it is important for employees who must take laptops out of the office to have encrypted devices. This can help protect the loss of sensitive information. Additionally, the ability to remotely wipe any lost computer and having a policy in place for reporting and wiping the lost device is crucial.

2. Multi-factor authentication. Electronic: We have all seen this a lot lately. Apps or websites asking if we want to set up multi factor authentication (MFA), a second step to ensure we are who we claim to be when we log into an account. This is always a smart feature to implement as it may put in that one last obstacle to keep out nefarious folks from your account and private information. However, if you're just warming up to the concept of adding a second step, definitely place the greatest emphasis on the services that hold the most sensitive information.



A Leavitt Group Company

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BENEFIT BROKERS

Ranked by Premium Volume in Utah 2017



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Company Name Address	Phone Web	Premium Volume in Utah 2017	Year Est.	Number of Licensed Utah Agents	No. of Utah Employees	No. of Utah Offices	Number of Worldwide Offices	Specialties	Owner
1 HUB International 75 W. Towne Ridge Parkway Tower, Ste. 400 Sandy, UT 84070	801-727-6000 hubinternational.com	\$400M	1999	30	35	2	300+	Employee benefits, self-funding, renewal forecasting, data analytics, benefit communications	Privately Held
2 Gallagher 6967 S. River Gate Drive Ste. 200 SLC, UT 84047	801-559-2929 ajg.com	\$300M	1927	13	130	2	150+	Insurance, health insurance, employee benefits, risk management, consulting	J. Patrick Gallagher Jr.
3 Ventris 10913 S. River Front Parkway Ste. 100 South Jordan, UT 84095	385-355-0000 ventris.com	\$75M	1999	8	20	1	1	Ventris is a full-service insurance agency & consulting group	Joel Mills Senior Consultant Partner
4 Fringe Benefit Analysts LLC 393 W. Gordon Ave. Layton, UT 84041	801-546-6004 fbabenefits.com	\$74.5M	1970	49	73	7	7	Employee benefit consulting, multiple private insurance pools, proprietary workforce solutions	Scott Deru
5 Beehive Insurance Agency Inc. 302 W. 5400 S. Murray UT, 84107	801-685-6860 beehiveinsurance.com	\$38M	1961	26	61	4	4	Association health plans, data analytics, comprehensive group benefits, alternate funding	Clyde Companies Inc.
6 FirstWest Group of Companies 1139 S. Orem Blvd. Orem, UT 84058	801-224-9600 firstwestcompanies.com	*	1987	28	40	2	2	Benefit & retirement plan consulting, wealth management, risk management, HR solutions	FirstWest Brokerage Service Dave Jackson
7 GBS Benefits, A Leavitt Group Company 465 S. 400 E., Ste. 300 SLC, UT 84111	801-364-7233 gbsbenefits.com	*	1989	37	147	4	9	Employee benefits consulting services highlighting population health strategies, compliance and providing a superior employee experience	Richard K. Fielding
8 Hays Cos. 201 S. Main St., Ste. 2100 SLC, UT 84111	801-505-6500 hayscompanies.com	*	1994	*	20	1	37	Employee benefits, risk management, data analytics, consulting, communications, technology, wellness	David Knoop
9 Poulton Insurance Services 2137 E. 3300 S. SLC, UT 84109	801-484-4477 poultoninsurance.com	*	1956	16	9	1	1	P&C insurance, commercial insurance, workers compensation insurance, personal lines	Steve Poulton Mike Poulton
10 RBI Benefits 655 E. Medical Drive, Ste. 102 Bountiful, UT 84010	801-298-5020 rbibenefits.com	*	2001	15	6	1	1	Individual & group health insurance, employee benefits	Blake Izatt
11 Utah Business Insurance Co. 10421 South Jordan Gateway South Jordan, UT 84095	801-432-8121 utahbic.com	*	2006	*	16	1	2	A strong emphasis on providing outstanding customer service & results-oriented risk management programs.	Ronald E. Nielsen



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HIPAA

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hacked, the hacker may send from their account, leaving little question to where it comes from, even speaking in their email style, causing the receiving end to not call into question the legitimacy of the request.

3. Acceptable-use policy. An acceptable-use policy (AUP), also known as a fair use policy, is an integral component of a company's device management. An AUP is designed by the company leadership, governing how the platform should and should not be used, explaining various monitoring strategies used to enforce such behaviors and the consequences for policy violations. It is here that a company can define what behaviors are

unacceptable, such as excessive use of resources or time-wasting activities, distribution of confidential information, distribution of indecent or offensive data, password change requirements, off-site device use and other security measures surrounding virus transmission or dissemination.

4. Education. You can have the most sophisticated system available but if a user clicks something they shouldn't, your entire network can be compromised. Regular training by your IT team can help keep people informed of the latest tricks and hacks and serve as a reminder to always slow down and be hyper-vigilant. Hacking trends are constantly changing and we must keep people aware of trends in order to help reduce the chances of individuals falling victim to various attacks.

This cannot be emphasized

enough. It is incredibly important to slow down and investigate the file or email you have received to determine if it is legitimate. We have seen an increase in spoofing attacks where the cybercriminal, who has accessed information regarding the company, its customers, etc. (either through a quiet email hack or other methods), purchases a domain similar to that of the target user to create an almost exact email replica and sends customers invoices with "updated payment methods." And of course, the very common email to key contacts requesting the wiring of money or simply sending virus-laden files. The spoofed domains may replace a "q" with a "g" or leave out a letter that, without careful attention, may go unnoticed. Additionally, slow down to determine whether the request follows normal procedure

from the company supposedly sending or just check to see where the link actually will take you instead of actually clicking in order to see where it takes you.

Unfortunately, that is only one part of the issue. Even if you are never hacked or your domain isn't spoofed, the rise of cybercriminals using DropBox, DocuSign, UPS, etc., as covers for people to open files causes any legitimate files sent to be properly introduced. It is important to check the sender and determine whether you should be receiving an email. When in doubt, reach out to your IT team or simply delete the questionable email.

Bahar Ferguson is president of Wasatch I.T., a Utah provider of outsourced IT services for small and medium-sized businesses.

Controlling workers' compensation expenses



Maintaining an affordable workers' compensation premium takes ongoing effort and commitment. Several factors affect workers' compensation premiums in an organization. Review these items with your insurance agent to ensure you have the right amount of affordable coverage. Learn about the key items that affect your premium and what you can do to control costs.

Classification Codes

Based on the industry, employers are assigned classification codes. Different codes are assigned to employees based on the type of labor in which they engage. These classification codes are set by the National Council on Compensation Insurance (NCCI) and are state-specific.

To ensure you have the right coverage for your employees, conduct an audit of your employee classification codes annually. This can be done by reviewing current employee classification codes and identifying any employees who are classified incorrectly. For example, if you have an employee who has moved from a job on the factory floor to the office, this employee may be assigned a less-costly classification code to reflect the change in work responsibilities.

Payroll

The premium you pay for workers' compensation insurance is generally based on the size of your payroll. If you have recently decreased the size of your payroll, these changes need to be communicated to your insurance agent. Making this simple update to your workers compensation records may have a significant effect on the premium you pay going forward.

Safety Culture

The best way to keep costs down is to not incur claims. The severity, type and frequency of claims has a significant effect on your workers' compensation premium.

Make a substantial impact on your workers' compensation premium over time by developing and maintaining a safety culture geared toward preventing accidents and injuries. Here are a few key practices that will improve your safety culture:

- **Make safety a top priority.**

Engage employees directly in the effort. Solicit ideas from employees on how to create a safer workplace.

- **Establish a written safety program.** Your safety program should

include training on preventing workplace accidents and injuries. Get commitment from management and employees with incentives for maintaining an accident-free environment.

- **Be selective in your hiring process.** Choose new hires who share the company's safety culture values. Provide accurate job descriptions to applicants, obtain previous work references and conduct background checks.

Also, conduct a pre-start, post-offer drug test and obtain a motor vehicle report for all new hires.

- **Thoroughly train employees.**

Nearly one-third of workers compensation claims result from accidents with new employees. Evaluate your orientation program for ways to improve new employee training. Ensure employees know the correct methods and procedures to accomplish their assigned

tasks. Require employees to demonstrate skill and proficiency before performing a particular task.

- **Prevent accident recurrences.**

Investigate and document every injury and near-miss. Identify why and how the accident occurred and make proper corrections to prevent future incidents.

see **WORKER COMP** page F14

HEALTHCARE BENEFITS COSTING YOU AN ARM & A LEG? MAYBE WE CAN HELP

As an employer, you know that healthcare costs are high, and the rate at which costs are rising is not sustainable for you or your employees. That's why Revere Health has transitioned to a value-based model of care.

Visit reverehealth.com/vbc to find out more about how we're reducing costs and improving quality, and click the "Employer" link for a downloadable resource with tips to help your workforce reduce the cost of their care, which translates to healthier employees and bottom-line savings for you.



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COMMERCIAL INSURANCE AGENCIES

Listed by Premium Volume in Utah 2017



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Company Name Address	Phone Web	Premium Volume in Utah 2017	Year Est.	No. of Utah Licensed Agents	No. of Utah Employees	No. of Utah Offices	Number of Worldwide Offices	Specialties	Owner/Officer
1 The Leavitt Group 216 S. 200 W. Cedar City, UT 84720	435-586-6553 leavitt.com	\$805M	1962	167	557	35	152	All lines of insurance, including commercial, personal, life, health & benefits	Eric O. Leavitt CEO
2 Marsh USA Inc./ Mercer Health & Benefits 15 W. South Temple, Ste. 700 SLC, UT 84101	801-533-3600 marsh.com mercerc.com	\$740M	1923	51	51	1	400	Property, casualty, health & benefits brokerage & consulting	Taylor Wray Kelly Esselman
3 Moreton & Co. 101 S. 200 E., Ste. 300 SLC, UT 84111	801-531-1234 moreton.com	\$480M	1910	140	160	3	5	Commercial insurance, group employee benefits, voluntary benefits, surety, public entity, construction, healthcare	William R. Moreton
4 The Buckner Company Inc. 6550 S. Millrock Drive, Ste. 300 SLC, UT 84121	801-937-6700 buckner.com	\$216.4M	1936	38	122	2	5	Construction, habitation, bonding, trucking, healthcare, medical benefits	Terry Buckner
5 Diversified Insurance Group 136 E. South Temple, Ste. 2300 SLC, UT 84111	801-325-5000 diversifiedinsurance.com	\$165M	2001	45	60	2	2	Focus on working with high-growth companies at all stages from startup through IPO to mature industry leader	Spencer Hoole President/CEO
6 Arthur J. Gallagher Risk Management Services Inc. 6967 S. River Gate Drive, Ste. 200 Midvale, UT 84047	801-924-1400 ajg.com	\$148M	1927	13	38	1	700	Risk management, loss sensitive programs	John Schlichte Area President
7 Beehive Insurance Agency Inc. 302 W. 5400 S., Ste. 101 Murray, UT 84107	801-685-6860 beehiveinsurance.com	\$112M	1961	26	62	4	4	Trucking, construction, manufacturing, nonprofits, employee benefits	Douglas Snow
8 American Insurance & Investment 448 S. 400 E. SLC, UT 84111	801-364-3434 american-ins.com	\$50M	1950	22	38	1	2	Commercial, personal, employee benefits, professional liability	D. David Bradshaw
9 USI Insurance Services 1100 E. 6600 S., Ste., 280 SLC, UT 84121	801-713-4550 usi.com	\$31M	1994	7	14	1	150	Risk management, alternative risk, loss control, claims management	Chris Swensen Executive VP P&C Practice Leader
10 Summit Risk Management & Insurance 7430 S. Creek Road Sandy, UT 84093	801-563-1131 summit-risk.com	\$30M	2000	11	22	1	2	Contractors, bonds, manufacturing, trucking, healthcare, property	George Swan, Partner Brent Koplin, Partner Mark Hunter, Partner
11 Reliance Risk Management & Insurance 6975 S. Union Park Ave., Ste. 600 Cottonwood Heights, UT 84047	801-755-2839 reliancermi.com	*	1986	8	12	2	2	*	Matthew D. Hunter President
12 SentryWest Insurance Services 3860 S. 2300 E. SLC, UT 84109	801-272-8468 sentrywest.com	*	1976	14	28	5	0	Commercial & personal insurance, property & causality, condo, HOA, apartments, lessor's risk, manufacturing, Realtors	Brayden Jessen
13 Trustco 2063 E. 3900 S., Ste. 100 SLC, UT 84124	801-278-5341 trustcoinc.com	*	1973	41	35	1	*	*	Greg T. Kingdon CEO



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WORKER COMP

from page F13

Claims Management

With effective claims management, you will see a faster recovery time for injured workers, reduced operational downtime, reduced claims costs and less impact on your workers' compensation premium. Here are a few suggestions for managing claims when they occur:

- **Early reporting.** By reporting claims within 24 hours, claims cost 28 percent less, on average, than reporting an injury after seven days. Make sure employees know how to report an

injury, and emphasize that injuries must be reported immediately, no matter how minor.

- **Communication.** In order to minimize the impact of a workers' compensation claim on an organization, it is important to encourage and practice effective communication. Stay in contact with the injured worker, claims adjuster and the treating physician throughout the life of the claim. This is especially important if the injured worker's ability to return to work is delayed due to his/her injuries.

- **Modified duty.** Modified duty offered in accordance with the physician-determined work restrictions

will typically result in a more engaged worker, a shorter claim duration and lower claim costs. Determine modified duty tasks before an injury occurs so you are prepared to bring an injured worker back as soon as possible. When determining modified duties, consider a variety of job tasks — office work doesn't have to be the only option.

- **Respect.** Treat injured workers with dignity and respect. Not only is it the right thing to do but it will also help smooth out the claim process. While you may be unhappy about the events leading to a worker's injury, showing anger or vindictiveness toward injured workers will only complicate the

claims-handling process and increase the potential for higher costs. Instead, engage injured workers in the accident investigation process and look for solutions that will keep similar incidents from occurring again.

Employers can control workers' compensation costs by assigning the correct classifications codes, reviewing payroll numbers, creating a culture of safety and managing claims thoroughly. When implemented effectively, these efforts can pay off significantly with increased cost savings, an improved safety culture and better employee morale.

Open Enrollment

How employers can help curb healthcare costs during this crucial period



Technology continues to reshape how employers select and offer healthcare benefits to employees, putting access to information at our fingertips and creating a more seamless and interactive healthcare experience. At the same time, these advances may help employees become savvier users of healthcare, helping simplify and personalize their journey toward health and, in the process, help curb costs for employers.

The revolution can be important to remember during open enrollment, which occurs during the fall, when millions of Americans select or switch their health benefits for 2019. With that in mind, here are five tips employers in Utah should be aware of during open enrollment and year-round:

Make sense of big data. Big data is a buzzword, but the applications are only meaningful if employers can make sense of that information. To help with that, employers are gaining access to online resources to help enable them to more easily analyze and make sense of health data, taking into account aggregate medical and prescription claims, demographics,

and clinical and well-being information. This can provide an analytics-driven roadmap to help employers implement tailored clinical management and employee-engagement programs, which may help improve health outcomes, mitigate expenses, and help employees take charge of their health.



Help people understand their options. More than three-quarters (77 percent) of Americans say they are prepared for open enrollment, yet most people struggle to understand basic healthcare terms, accord-

ing to a recent UnitedHealthcare survey. In fact, only 6 percent of survey respondents could successfully define all four basic health insurance concepts: plan premium, deductible, co-insurance and out-of-pocket maximum. To support employees during open enrollment, employers can adopt online platforms designed to personalize and simplify the experience to help people select a health plan based on their personal health and financial needs, while encouraging them to select a primary-care physician and enroll in programs such as smoking cessation or weight loss. Employers

can also promote to employees' resources such as JustPlainClear.com, which provides definitions for thousands of healthcare terms.

Encourage your people to move more. An estimated 35 percent of employers now integrate wearable devices into their well-being programs, helping employees more accurately understand their daily activity levels. As these programs become more common, there may be opportunities for cost savings for companies and their workforces. For instance, some wearable device wellness programs may enable people to earn more than \$1,000 per year by meeting certain daily walking goals, while employers can achieve premium renewal discounts based on the aggregate walking results of their employees.

Incent and help employees comparison shop for care. More than one-third (36 percent) of Americans say they have used the Internet or mobile apps during the past year to comparison-shop for healthcare, up from 14 percent in 2012, according to the UnitedHealthcare survey. To encourage employees to participate in this trend, some employers are offering financial incentives, such as \$25

or \$50 gift cards, to employees for using healthcare transparency resources. Healthcare quality and cost varies widely within a city or neighborhood, so encouraging the use of online and mobile transparency resources may yield savings for employers and employees.

Integrate medical and ancillary benefits: Open enrollment is also the time for people to select important ancillary benefits, such as vision, dental and disability coverage. While some people may overlook these plans, offering this coverage as part of an employee's menu of benefits options may maximize the effectiveness of a company's healthcare dollars, provide families with added peace of mind and help build a culture of health. Combining medical and ancillary benefits under a single health plan may enable for the integrated analysis of a wide range of data that can facilitate proactive outreach and clinical support for employees, including for people with chronic conditions such as diabetes or to help prevent the development of such conditions.

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