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Leadership Elevated: Leadership vs. Management

By: Dan Chase, Human Resource Training Manager

As I travel across the state working with managers from various agencies often the question is asked, “Is there a difference between leadership and management?” This question is not unique to State of Utah employees. Hundreds, if not thousands, of leadership/management books and articles attempt to address this same question and vary their answers. When I am asked this question I usually respond by saying, “Yes, they are different . . . but not entirely.” Although the subject is very complex and there are many valid opinions I want to suggest three points regarding the relationship between leadership and management by using my recent experiences working with leaders across the state.

First let’s look at an important way that leadership and management overlap. In organizational settings, leaders who hold formal management positions cannot neglect their routine supervisory and program management duties and still be leaders. If, as a manager, I am required to plan, budget, organize, do paperwork, and perform other transactional behaviors, I cannot ignore these duties and still be a leader because I will have lost credibility with my staff and my neglect would also hurt the organization. So in this sense managers across the agencies of the State of Utah must attend to the more “day-to-day,” mundane tasks if they are going to be leaders. I often hear people rightly say that “supervisors aren’t necessarily leaders and leaders don’t have to be supervisors.” I think that is absolutely true; but in most organizations, those with supervisor responsibilities, if they are to be leaders as well, must be effective supervisors first.

The second point speaks to the idea that just because someone has formal authority in an agency it does not necessarily make them a leader. One key area that distinguishes leaders from managers is passion. There are many employees who accept promotions to supervisory positions exclusively for the small pay bump. Often, employees with these kinds of motivations don’t make good leaders and they soon realize the added responsibilities aren’t worth the slight raise. Rather, it is people with passion who make effective leaders and passion can and should exist among employees throughout the organization.

Passion is contagious and excites people into giving their best each day at work. Employees with passion can be leaders because they remind everyone just how important and meaningful the work of the agency is. Also, employees with passion can be effective leaders because they tend to be the ones that persist in trying to reach goals in the face of obstacles and challenges. Every agency experiences these frustrations and needs leaders with passion to “rally the troops” and re-ignite the collective enthusiasm of their agency’s goals and mission.

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Leadership Elevated: Leadership vs. Management

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Lastly, in the question of how management and leadership are different, organizational culture can serve as a sort of barometer. Edgar Schein, perhaps the most notable expert on organizational culture and leadership, contends that leaders shape organizational culture whereas managers are shaped by it. Culture is a powerful force guiding much of what happens in an organization; but it can be very difficult to discern, especially internally. Leaders take the time to examine their organizational culture by looking at three layers of culture: underlying assumptions, values, and visible artifacts that drive much of what happens in an agency. Only as these layers of culture are made evident and evaluated can they be changed -- and leaders at all levels understand how important this is for an organization to be effective. Managers, on the other hand, are often content to travel with the "current," so to speak, and let the culture shape them, even if it is harmful to productivity and morale.

Effective leaders in our agencies have made a conscious decision to evaluate their current cultures and to re-establish a culture which fits the ultimate aims the department is trying to accomplish. This task is neither easy nor quick, but through effort and time it can and will yield fruitful results.

What About ERIC?

By Bart Olsen, HR Manager, Employee Resource Information Center (ERIC), DHRM

How is ERIC doing now that it has been open for a few months? I've heard ERIC is just a computer system, but others tell me ERIC is a team of seasoned state HR employees – which is right? Is ERIC performing as expected? What do customers think about ERIC? These are a few questions you may have asked yourself since ERIC launched on September 19, 2011. I am pleased to provide you some answers to those questions.

Between ERIC's open date on September 19, 2011 and the latter part of April 2012, this team of highly trained and seasoned HR employees has fielded more than 13,000 calls. The current customer satisfaction rate is 87%. This team of employees has processed 259 retirements, and has on-boarded 2,322 new hires. 95% of the new hires on-boarded reported satisfaction with their onboarding experience.

Here are a couple of comments taken from agency customers of ERIC services:

"I think ERIC has been a great success! I especially like the new On-boarding for new employees, and I hope this never changes." -- Employment Supervisor, Department of Workforce Services

"Great service! This is one of the best state-run programs we have!" -- Rotational Engineer, Department of Transportation

Seasoned HR staff members on the ERIC team are actively participating in benefit fairs this year and are eager to meet you and give you more information about ERIC services if you have not yet taken advantage of those services. Although ERIC staff members do use computer systems to perform their work, your interaction with ERIC staff members is with a live, seasoned HR representative located at the State Office Building in Salt Lake City. If you prefer to seek out HR information on your own, you can search the Employee Gateway using the search field on the homepage. Additionally, you can submit a question to a live, seasoned HR representative at ERIC by using the AskERIC link on the right hand side of the Employee Gateway.

Perhaps another indicator of ERIC's performance so far is the passage of HB80 in this year's legislative session. Currently, ERIC processes only about half of the state agencies' payroll. With exception of three agencies, ERIC is taking on the rest of the state agencies' payroll no later than September 19, 2012. Some of those agencies are transitioning to ERIC payroll as early as June 2012.

We will continue providing the best possible customer service to you and encourage you to contact us with your benefits, retirement, and payroll questions. We look forward to serving you!

Have You Heard About the Swing Out Option?

By: Barbara Smith, and Billie King, HR Consultants, DHRM, and Justin Seal, Marketing Specialist, PEHP

If you are an employee participating in the Advantage or Summit Care networks starting January 1st, 2012 you are allowed to swing out of your network provider anywhere in the State of Utah. This means that eligible claims received by PEHP from non-contracted providers will now be paid at a reduced percentage instead of being denied.

This change goes a long way toward making the high premium costs employees pay on the Preferred Care network less desirable since the Advantage and Summit Care networks now provide an out-of- network benefit.

There are a few things that you should know about the Swing Out Option:

- First, out-of-network charges will apply towards your annual deductible; however, those charges will not apply towards your annual out-of-pocket maximum.
- Second, you should be aware that providers who are contracted with Advantage or Summit Care are obligated to write-off any balance after PEHP pays their share and you have paid yours. Under the swing out option, non-contracted providers have no such obligation and can bill you the balance after PEHP has paid.
- Finally, this added benefit does not apply to out-of-state claims, so you should continue to use the MultiPlan national provider card to receive eligible services at the in-network benefit when traveling outside the state.

You need to understand these stipulations before seeking care from a non-contracted provider and/or switching from the Preferred Care network to the Advantage or Summit Care networks this year.

PEHP and DHRM will be marketing this change to employees during the 2012 open enrollment period for benefits. Additionally, the annual benefits book will have information about how both contracted and non-contracted providers work for each type of service under the benefits grid for the Advantage and Summit care networks.

STATE Advantage & Summit Care>>MEDICAL BENEFITS GRID

Refer to the Advantage and Summit Care Provider Plan Master Policy for specific criteria for the benefits listed below, as well as information on limitations and exclusions.

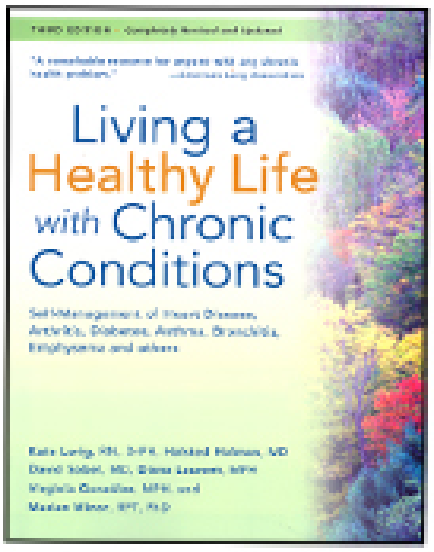
*Services received by a non-contracted provider will be paid at a percentage of PEHP's Maximum Allowable Fee (MAF). You will be responsible for your assigned coinsurance and deductible (if applicable). **You will also be responsible for any amounts billed by a non-contracted provider in excess of PEHP's Maximum Allowable Fee. There is no Out-of-Pocket Maximum for services received from a non-contracted provider.**

DEDUCTIBLES, PLAN MAXIMUMS, AND LIMITS	Contracted	Non-Contracted Applicable 1.1.12
Plan year Deductible *In and Out of Network Deductibles are combined*	$250 per individual, $500 per family	Same as using a contracted provider *See Above for Additional Information **See Below for Additional Information
Pharmacy Deductible	$100 per Individual, $200 Per Family	N/A
Plan year Out-of-Pocket Maximum	$2,500 per individual, $5,000 per double, $7,500 per family	No Out-of-Pocket Maximum *See Above for Additional Information **See Below for Additional Information
Pharmacy Out-Of-Pocket Maximum *Does not apply to non-preferred drugs*	$3,000 per Individual	N/A
Specialty Drug Out-of-Pocket Maximum *Separate Yearly Out-of-Pocket Maximum*	$3,600 per member, per year	No Out-of-Pocket Maximum
Maximum Lifetime Benefit	None	None
Pre-existing Condition Waiting Period *Does not apply to any individual up to age 19*	9-month Waiting Period— waived or reduced with evidence of prior Creditable Coverage	9-month Waiting Period— waived or reduced with evidence of prior Creditable Coverage

***Applicable deductibles and coinsurance for services provided by a non-contracted provider will apply to your in-network plan year deductible and Out-of- Pocket Maximum. However, once your in-network deductible and Out-of-Pocket Maximum are met, coinsurance amounts for non-contracted providers will still apply.*

Living Well with a Chronic Condition

Randy Tanner, Utah Arthritis Program, Utah Department of Health



Seven out of ten people in the U.S. die from a chronic disease such as cancer, heart disease, diabetes, and stroke. About 133 million Americans—nearly one in two adults—live with at least one chronic disease, and more than one in ten have three or more.[1]

The U.S. health care system is primarily designed to treat patients with acute medical problems. "At no point in medical school are physicians exposed to patients with chronic illness, except for acute episodes leading to hospitalization," says Michael Lockshin, M.D., a Harvard Medical School graduate and head of the women and rheumatic disease center at New York City's Hospital for Special Surgery. The result: Many patients shuffle from doctor to doctor in search of relief from the many symptoms of their chronic illnesses. Furthermore, for many, there is no support system in place to help them cope with their conditions.

What is the Chronic Disease Self-Management Program (CDSMP)?

The Chronic Disease Self-Management Program (CDSMP) is a program developed by the Stanford Patient Education Research Center, and is supported by the Agency for Healthcare Research and Quality, and the Centers for Disease Control and Prevention. In Utah, CDSMP is called *Living Well with Chronic Conditions*. The program helps participants gain greater self-efficacy in managing their chronic conditions through modeling, setting action plans, and peer support.

Who should enroll in this program?

People with a variety of chronic health problems such as arthritis, asthma, cancer, diabetes, heart disease, hypertension, lung disease, and stroke, are encouraged to attend this program. Family members, friends, and caregivers are also encouraged to participate and can also benefit from learning the problem solving skills taught during the course.

What is the goal of the course?

The overall goal of the course is to provide participants with the skills, and self-efficacy they need to assume a major role in maintaining their health and managing their chronic health conditions. Participants are taught to:

- Deal with problems that can complicate managing a disease such as frustration, fatigue, pain, depression, and isolation
- Engage in physical activity in a way that will help them maintain, and improve their strength, flexibility, and endurance
- Use medications as directed
- Communicate effectively with family, friends, and health professionals
- Control their condition with healthy nutrition
- Make informed treatment decisions
- Problem-solve and generate short-term action plans related to chronic condition life complications

How do the classes work?

The classes are led by two trained leaders, who are non-health professionals and have a chronic condition themselves. Course participants provide peer support and help each other learn ways to manage their condition. Classes last for two hours, and are held once a week, for six weeks in community settings such as churches, clinics, hospitals, libraries, and senior centers. Each class participant receives a copy of the book, *Living a Healthy Life with Chronic Conditions*, 4th Edition, and an audio relaxation tape, *Time for Healing*. Although workshops are free, class materials (book and CD) may cost depending on location.

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What are the benefits?
People who complete the CDSMP report improvements in their overall well being. In particular, the course has been shown to help class members:

- Increase healthy behaviors and self-management of condition
- Increase self-efficacy and self-rated health
- Improve their communications with health providers
- Decrease visits to emergency rooms or hospitalizations
- Develop better coping strategies and symptom management
- Decrease their disability, pain, or anxiety
- Increase their energy

Where are classes held?
For information about upcoming classes and class sites or to refer patients who could benefit from this program, please visit the Utah Arthritis Program website at http://health.utah.gov/arthritis/ or call (888) 222-2542 to ask for local class listings. Currently, the Living Well with Chronic Conditions program is offered in most areas of Utah in partnership with local health departments, senior centers, or community-based organizations.

The Living Well with Chronic Conditions program does not conflict with existing programs or medical treatments. It is designed to complement regular medical treatments and other disease-specific education programs. The skills learned and developed in the course often apply and help a person manage more than one of their chronic conditions.

If you would like more information about *Living Well with Chronic Conditions*, please call, or email Christine Weiss at 801-538-9458, or cweiss@utah.gov.

[1] Fischer, M. A. (2010, January/February). Taking Charge of Your Health. In *AARP*. Retrieved March, 2010, from. http://www.aarpmagazine.org/health/take_charge_health.html

**"When I accepted the fact that I had a chronic condition that I needed to manage, I can't begin to tell you how much freedom I felt.
This class was a life-changing event."**

Alternative State Application Program (ASAP)

By: Shannon Casias, HR Consultant

Have you ever wondered how you can fill a position quickly and get the right candidate for the opening that you have in your department? Consider hiring an applicant through the Alternative State Application Program (ASAP).

"Why?" you ask?

- All applicants have to meet the minimum qualifications for the position before they are even referred to the hiring manager.
- You have an additional six (6) month on the job examination with this individual before the probationary period begins.
- Your recruitment can still be in the application phase and you can interview the ASAP applicant.

All positions in the executive branch are eligible for consideration with this program. More information can be found on the state job seeker website at https://statejobs.utah.gov/ on the right hand side of the log in screen.

ASAP is a voluntary program for agencies to participate in that provides state agency hiring managers with an additional tool to quickly staff vacancies with qualified applicants with disabilities. For more information regarding this program, please contact me at (801) 538-9683 or by email at scasias@utah.gov.

Workwell Challenge
Shin Splints

By Matt Hill, Physical Activity Coordinator, PEHP

A lot of people love to run, jog, or just be active. Those that become active too abruptly may begin to experience pain in the shins. Shin splints are that nagging pain that everyone dreads. But the fear of getting shin splints is no reason to give up running, jogging, or walking. Shin splints can be treated with rest, ice, and personal care. Proper footwear and a modified exercise routine can help prevent them from occurring.

The term "shin splints" refers to pain along or just behind the shinbone (tibia) — the large bone in the front of the lower leg. Medically known as medial tibial stress syndrome, shin splints occur during physical activity and result from too much force being placed on the shinbone and connective tissues that attach your muscles to the bone. Shin splints are common in runners and in those who participate in activities with sudden stops and starts, such as basketball, soccer or tennis.

Some symptoms include mild swelling, tenderness, soreness or pains along the inner part of the lower legs. For the most part, shin splints can be treated at home, but if the pain or swelling does not go away with ice and rest, it is important to see a doctor.

Treatment consists of first resting the legs and allowing the body to heal. Then if needed, apply ice to the affected area for 15 to 20 minutes at a time, four to eight times a day for several days. To protect the skin, wrap the ice packs in a thin towel. Elevating the legs at night will help to reduce any swelling. Wear proper shoes and consider using orthotics.

There are a few things that can be done to prevent shin splints: lessen the impact when running or playing sports; strengthen the calf muscles by performing calf raises; and most of all rest as soon as symptoms appear. Shin splints should not be an excuse to stop being active.

Take Action to Verify your Coverage Online

By Barbara Smith, HR Consultant

H.B.437 establishes an affirmative enrollment period for employees to either select their current health insurance plan or choose another option.

Open enrollment is April 13 through June 15. To make changes or verify enrollment in your medical plan during this time log in to your myPEHP account at www.pehp.org . There you will log on to Online Enrollment where you will see your current benefits. To make changes or confirm your current selection you will click on the Change/Enroll button on your medical plan. Then just follow the instructions to confirm your enrollment.

You do not have to confirm any other benefit but medical at this time, but take this opportunity to view your other benefits. Do you have the coverage you want? Are your beneficiaries correct? Plus this is a great time to verify your home address.

Public Service Recognition Week

By: Shannon Casias, Human Resource Consultant

Governor Herbert has issued a declaration designating the week of May 7 - May 11, 2012 as Public Service Recognition Week.

While employee appreciation is always important, employees need to realize how much value they provide to the citizens of this great state. Supervisors can recognize and appreciate staff all year long, not just during Public Service Recognition Week. Here are just a few ideas to recognize employees that will not cost your agency budget a dime!

- Give them a handwritten note to show that you took the time to thank them
- Make work fun – do a team building exercise
- Reward the effort as well as success
- Give positive feedback
- Post an achievement wall in your common gathering areas and allow employees to post their accomplishments

The Governor's Award for Excellence ceremony will be held on May 31, 2012. Congratulations to the winners for their hard work and dedication. Winners will be posted in the July/August edition.

2012 Legislative Update

The 2012 legislative session is notable for the large number of bills that had an impact on employees and the human resource management system. These bills fall into three basic categories; compensation and benefits, changes to state agencies, and DHRM rules.

Compensation and Benefits

It should be no surprise that most of the issues are in the area of compensation and benefits. House bill **HB 9, State Agency and Higher Education Compensation Appropriations,** provides for a one percent general increase in salary for all eligible employees; not the traditional cost of living adjustment (COLA). The difference is that a COLA moves the range and keeps employees in the same relative position on the range. This general increase will move employees within the range while not moving the range. This will help reduce compression at the bottom of the range which is the number one problem in our compensation system. There are a large number of changes in the health and medical insurance benefit, most the result of **HJR 21, Joint Resolution on State Health Insurance.** Most employees will see little if any immediate cost impact from these changes:

Premiums for health insurance for FY 12 will stay the same as FY 11; the Health Savings Account contribution will be $750 for single coverage and $1500 for family coverage. Half will be given in July and half in January.

Increases in medical insurance premiums will be funded through one-time funding sources.

Advantage and Summit Care will stay at a 90/10 premium split.

Dental premiums will change to a 90/10 premium split. Each plan (traditional and preferred) will be restructured so the traditional plans will see a reduction in the premium costs, while the preferred plans will see a slight increase.

Advantage and Summit Care will have a change in co-insurance from a 90/10 split to an 80/20 split to be equivalent to the co-insurance on the high deductible health plans (HDHP).

Creates a new HDHP option for employees, called Utah Basic Plus. This plan will have significantly less benefits and will have a 70/30 co-insurance, plus an HSA. The HSA contribution amount is $1725 for single and $3450 for family coverage.

PEHP is required to explore options for sliding premiums/deductibles based on wellness.

There is continuing interest in high deductible health plans (HDHP) this year. House bill **HB 437 - Public Employee Health Care Benefits,** provides for a few other health insurance changes. PEHP must provide training on HDHP plans, including coordination of benefits, restrictions, and tax implications; they must also coordinate annual open enrollment with DHRM. All HSA contributions for employees on an HDHP plan will be deposited twice yearly, in July and January instead of bi-weekly. The HDHP plans also will include a portability factor, so an employee who has been on an HDHP plan for at least 4 years and leaves state employment can choose to purchase the same plan through PEHP's conversion policy, at their own expense. The bill also requires Employees to participate in health plan option training again this year and affirmatively re-enroll in their medical plan.

Three bills made some important changes for small groups of employees. In Section 67-19-27 a state trooper who is injured or disabled in the line of duty from a felonious act receives 100% of salary and benefits during the period of disability. The circumstances that invoke this benefit are expanded by **HB 121, Disabled Law Enforcement Amendments,** to include a motor vehicle accident where the trooper was not negligent in causing the accident. One provision of **HB 256, Retirement Modifications,** establishes an exemption to vesting requirements for the tier II system for certain positions, similar to an exemption that now exists in the tier I system. This will impact about two dozen employees who were hired in elected officials offices between July 1, 2011 and the passage of this bill, and all new hires in these eligible positions going forward. And of interest to all, the post-retirement health care benefit is eliminated for legislators and governors who begin service on or after January 1, 2012 with the passage of **SB 156, Elected Official Retirement Benefits Amendments.**

And finally, state employees need to be aware that **HB 46, Electronic Personal Medical Records**, places state employees and their dependents in the Clinical Health Information Exchange (CHIE). The CHIE will allow medical professionals to view a person's medical records when treatment is required away from the chosen provider. This should result in more accurate diagnosis and treatment for the employee. In the long run it will also help reduce health care costs by reducing duplicate tests and procedures. The bill requires notification from PEHP that the employee is enrolled in the exchange and has the right to opt out.

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2012 Legislative Update

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Changes to Executive Branch Agencies

Operations in three executive branch agencies are seriously impacted as a result of legislation this year. The passage of **HB 80, Reorganization of Administrative Support Functions in State Agencies,** gives the Department of Human Resource Management authority to provide all payroll services for the executive branch with the exception of the Attorney General, Treasurer, Auditor, DOT, DTS, and DNR beginning Sept. 19, 2012. Implementation for DPS is delayed to June 30, 2013. The Department of Administrative Services is also required to conduct a study of administrative support services such as purchasing and finance in certain agencies to asses the feasibility of transferring them to DAS or another agency.

The Department of Community and Culture (DCC) is even more seriously impacted by **HB 139, Department of Community and Culture Amendments.** The Division of Housing and Community Development is moved from DCC to the Department of Workforce Services and DCC is renamed the Department of Heritage and Arts. These two bills are recommendations coming out of Governor Herbert's "operational excellence" initiative.

The management structure of the Department of Alcoholic Beverage Control is re-configured by **SB 66, Alcoholic Beverage Control Related Amendments.** Portions of this bill provide a detailed process for the Governor to appoint the director of the department of Alcoholic Beverage Control and for the director to appoint "upper management". Currently the director is appointed by a board. This bill is the result of a legislative audit of the department conducted last summer.

DHRM Rules

A recent audit by the Office of the State Auditor called into question part of the state incentive award program in rule R477-6-5, Incentive Awards. There were two issues; the legal authority of DHRM to establish "market based" awards, and the DHRM interpretation of the phrase "per occurrence" in the rule. The audit was presented to the Legislative Administrative Rules Review Committee who concluded that clarifying language in code and in rule was necessary to resolve differences in the interpretation and use of the rule. Two things needed to happen: the law had to be amended to grant DHRM clear authority to provide "market based" awards, and then a rule had to be crafted and filed under authority of this amendment. Without these changes the state incentive award program would have been eliminated. The amendment of the law was accomplished with the passage of **HB 251, Utah State Personnel Management Act Amendments.** Fortunately this happened early in the session and DHRM was able to file a rule that satisfied the members of the Administrative Rules Review Committee. This new rule will be effective on July 1, 2012.

Let Us Help You Understand Your Benefits

In the early or middle stages of your career? Attend a free (for spouses too) URS Personal Planning Seminar. You'll learn how much you'll need to retire, how much to expect from your pension, and which Retirement Savings Plans are right for you.

In the late stages of your career or within 10 years of retirement? Attend a Pre-Retirement Seminar. You'll learn about your benefit options and how to prepare for the major life change.

Call today and reserve your spot.
801-366-7750 or 800-753-7750

PERSONAL PLANNING SEMINARS

Seminars begin at 9 a.m. and end at 1 p.m.

Ogden . . . . . Fri., May 11
Salt Lake City – Central . . . . . Fri., Aug. 10
Orem . . . . . Fri., Oct. 5

PRE-RETIREMENT SEMINARS

Seminars begin at 9 a.m. and end at 4 p.m.

Sandy . . . . . Fri., April 13
Provo . . . . . Fri., April 20
West Valley . . . . Fri., May 18
Vernal . . . . . Fri., June 8
Farmington . . . . Fri., June 15
Blanding . . . . Thur., June 21
Logan . . . . . Fri., July 13
SLC – Central . . . Fri., Aug. 3
Ogden . . . . . Fri., Sept. 7
St. George . . . Thur., Sept. 20
SLC – North . . . Fri., Oct. 12

UTAH LEADERSHIP INSTITUTE

The **Utah Leadership Institute** provides leadership development services to Utah's public sector leaders and organizations. ULI offers one-stop, hassle-free access to outstanding opportunities at a reasonable price. Visit the Employee Gateway for information on upcoming training opportunities.

On the front cover: 10th Annual Historic 25th Car and Motorcycle Show-Ogden's Historic 25th Street—Friday June 1, 2012 5pm-9pm

If you like antique cars with new engines, if you like unbelievable paint jobs that cost more than many new cars and if you really enjoy the glistening of triple plate chrome, then you really need to attend the annual Historic 25th Street Car & Motorcycle show! Over 200 beautiful hot rods, classic cars, trucks and motorcycles line Historic 25th Street from Wall Avenue to Washington Blvd. Free public admission. For more information visit http://www.historic25.com/index.php/events/car-show.

We'd love to hear from you. Please submit feedback, suggestions, or ideas for future articles to: HRNewsletter@utah.gov

The annual Surplus Property Plant Sale will be held May 22--25 from 8:00 am to 4:00 pm. For more information, please visit www.surplus.utah.gov.

UDOT 2012 ROAD CONSTRUCTION INFORMATION

Visit UDOT.utah.gov for the 2012 Road Construction Guide. The guide includes a list of the 20 most significant UDOT projects going on this summer.

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Open Enrollment is April 13, 2012 through June 15, 2012
Updates available on the Employee Gateway