

Summary of Summary of Summary

Union Employees

This document provides highlights of the WGL benefit programs. Full details are contained in the official plan documents. If a description in this document or any oral representation differs from the plan documents, the plan documents prevail.

Benefit Highlights

WGL offers employees a comprehensive benefit program to union-eligible employees. Union employees working full-time are eligible for benefits after 90 days of employment.

working full-time	are eligible for ben	efits after 90 da	ays of empl	oyment.				
CareFirst Medica	ıl Plan Highligh	nts						
		CareFirst PPO			CareFirst CDHP			
	In Network	Out of I	Network	In Net	work		Out of Network	
Deductibles	\$100 Individual			ndividua	1	\$2000 Individual		
	\$200 Family	\$100 Far	nily	\$2000 F	\$2000 Family		\$4000 Family	
Office Visits	\$10 Co-pay	70% afte	er deductible	80% aft	after deductible		70% after deductible	
Prescription Coverag	e							
		Car				First CDHP		
		30-day Supp		90-day Supply		y Supply		
		at Retail		Mail Order/		Retail	Mail Order	
0 1 0		Pharmacy		armacy		armacy	Pharmacy	
Generic Drugs		\$10 Co-pay		\$20 Co-pay		Co-pay	\$15 Co-pay	
Listed / Preferred Brand		\$15 Co-pay		\$30 Co-pay		Co-pay	\$40 Co-pay	
Unlisted / Non-preferred Specialty Drugs	brand drugs	80% coinsura		80% coinsurance		Co-pay	\$60 Co-pay	
Specialty Drugs		\$75 Co-Pay	\$10	0 Co-Pay		N/A		
Kaiser Medical P	lan Highlights							
		Ka	iser HMO		Kaiser DHMO			
Deductible	N/A			\$1000 Individual \$2000 Family				
Office Visits		\$10 Co-pay			\$20 Co-pay			
Urgent Care/Special Office Visit				\$30 Co-pay				
Prescription Coverage		# -	20 Co-pay			#0	·	
Trescription coverag		Retail	Mai	l Order	R	Retail	Mail Order	
		Pharmacy	1,141	Older		armacy	TVIAIT OTGET	
Generic		\$10 Co-pay	\$8	\$8 Co-pay		Co-pay	\$30 Co-pay	
Preferred Brand		\$20 Co-pay		\$18 Co-pay		Co-pay	\$50 Co-pay	
Non-Preferred		\$35 Co-pay		Co-pay			\$65 Co-pay	
Delta Dental Higl	hliahts	. 1 7		1 3	"	1 7	" 1 3	
Annual Max Benefits		\$1500 per mem	ber					
Annual Deductible		\$50 per membe						
Orthodontic Lifetime N	Лах	\$2000 Per Member						
Vision Program I								
	CareFirst – I	Davis Vision		ser Vision			VSP	
	(Included with pa CareFirst mo	edical plan)	(Included with participation Kaiser medical plan)		an additio		purchased by employees at an additional cost)	
Eligibility	Provided to Car	reFirst		Provided to Kaiser		All Benefit Eligible		
		participants		Participants			Employees \$10 Co-pay	
Routine Eye Exam		\$10 Co-Pay CareFirst PPO &		\$10 Co-pay Kaiser HMO \$20 Co-pay Kaiser DHMO			pay	
Classes	CDHP Plans		1 ,	Kaiser DH	MO	\$20 C-		
Glasses	IN/ A	N/A		N/A			\$20 Co-pay	
Lenses	Discount on ler	Discount on lenses		Discount on lenses			35%-45% discount	
Frames	Discount on fra	imes	Discount on frames			\$150 allowance; 20% discount over allowance		
Contact Lenses	Discount on co	ntact lenses	Discount on contact lenses			\$150 all		
Contact Lenoes	Discount on co.	1111111 1111111	Discount on contact lenses			Ψ150 am	O W MILLO	

Company Designated Holidays

- ❖ New Year's Day
- Dr. Martin Luther King Jr Birthday
- President's Day
- Memorial Day
- **❖** Independence Day

- Labor Day
- ❖ Veteran's Day
- Thanksgiving Day
- Day After Thanksgiving
- Christmas Day
- Presidential Inauguration Day (every 4 years)

Paid Time Off

PTO is available to employees after 90 days of employment.

Years of Service	PTO Granted
Less than 1 year	5 days
1 year, but less than 5 years	10 days
5 years, but less than 10 years	15 days
10 years, but less than 20 years	20 days
20 years, but less than 30 years	25 days
30 years or more	30 days

- ❖ Employees will accrue up to 12 days of PTOA depending upon date of hire at a rate of 8 hours per month (must be employed for 90 days before PTOA accrual begins)
- ❖ May carry over up to 80 hours of PTO/PTOA from year to year
- May cash out up to 40 hours of PTOA at end of year (carry over first, cash out second)
- Employees may be eligible for additional unpaid leave in accordance with Federal and/or State Family Leave Laws

Life & Disability Insurance

Life Insurance Short Term Disability Long Term Disability ❖ Basic coverage is \$15K at no ❖ WGL provides short term ❖ WGL provides long term cost to employees disability (STD) benefits after disability (LTD) benefits of Supplemental Life coverage is completion of 6 months of 40% of pre-disability income \$50k up to \$750k service. replacement Guaranteed issue is \$300k A 20% LTD "buy-up" option ❖ Benefits are based on years of ❖ Spousal coverage up to \$150K service and other requirements is available to employees on a Child(ren) coverage up to \$10k pre-tax basis STD Benefit per child (up through age 26) Years of Service Premiums paid after-tax < 5 years 50% through payroll deductions 5-9 years 70% Employees may purchase 10 - 19 years 100% for 8 accidental death & weeks, 80% dismemberment insurance from thereafter \$25k up to \$250k (evidence of 20 years 100% insurability not required) Benefits limited to up to 26 weeks per calendar year

Flexible Spending Accounts (FSA)

Health Care Account			pendent Care Account	Pre-Tax Transportation		
	 Pre-tax payroll deduction for 	*	Pre-tax payroll deduction for	*	Smart Benefits – SmarTrip	
	eligible medical, dental, and		eligible day care expenses		Metro Fare Card & Parking	
	vision expenses	*	\$1300 minimum annual		(pre-tax payroll deductions)	
	❖ \$260 minimum annual		contribution up to \$5000		O Up to \$255 a month for	
	contribution up to \$2550		maximum		transit	
	maximum				 Up to \$255 per month 	
					towards Metro parking	
				*	Monthly parking expenses up	
					to \$255 a month	

Retirement Savings

4	01K Savings Plan		irement Benefits Savings Plan (Enhanced nefit)
**	Automatic enrollment of 4% of pay up to \$18,000	*	Non-elective company contribution of 4% of
*	Company match is 100% of the first 4% of		eligible earnings to a 401k account, as outlined in
	contributions		the respective collective bargaining agreement.
*	Company match is vested immediately	*	Automatic benefit that does not require
**	Accepts rollovers from other qualified plans		participation in the 401k plan
*	Catch-up contributions up to \$6,000 for employees	*	Immediate vesting
	age 50 or older	*	Rollover available to another employer's eligible
			plan or an IRA

Business Travel Accident Plan

WGL offers business travel accident insurance at 5x your annual base salary up to \$1,000,000 at no cost to employees.

Educational Assistance

WGL offers employees an education assistance program for approved courses of study through an accredited educational institution.

- Union eligible employees are eligible to participate in the educational assistance program after completing one year of service
- Requires prior approval for reimbursement of up to 75% of tuition and registration expenses
- Reimbursement limited to up to \$5,250 per calendar year and up to \$30,000 employment maximum
- Requires grade 'C' or above to be eligible for reimbursement

Other Benefits

- ❖ Employee Assistance Program
- Ombudsman
- Credit Union Membership Available