2020 Summary of Benefits - Union

Benefit Highlights

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

	CareFirst PPO	and CDHF	Medical F	Plan Highlig	jhts	
	CareFirst PPO			CareFirst CDHP		
	In Network	Out of Net	work	In Network		Out of Network
Deductibles	\$100 Individual \$200 Family	\$500 Indivi \$1,000 Far		\$1,500 Indiv \$3,000 Fam		\$3,000 Individual \$6,000 Family
Office Visits	\$10 Co-pay	70% after (80% after de		70% after deductible
	Prescription Plan Highlig CareFirst PPO			CareFirst CDHP		
	30-day Supply at	90-day Su	pply Mail	34-day Sup		90-day Supply Mail
	Retail Participating Pharmacy	Order Pha	• •	Retail Partic		Order Pharmacy
Generic Drugs	\$10 Co-pay	\$20 Co-pa	у	\$10 Co-pay deductible)		\$20 Co-pay (after deductible)
Listed/Preferred Brand Drugs	\$15 Co-pay	\$30 Co-pa		\$20 Co-pay deductible)		\$40 Co-pay (after deductible)
Unlisted/Non- Preferred Brand Drugs	80% Coinsurance	80% Coins	surance	\$45 Co-pay deductible)	(after	\$90 Co-pay (after deductible)
Specialty Drugs	\$75 Co-pay	\$100 Co-p		up to a maxim Non-P 50% u \$150 n	um referred p to a naximum	Benefits for covered Specialty drugs are available when purchased through mail order
	Kaiser HMO a		Medical P	lan Highligh		
D 1 (1)	Kaiser HMO Kaiser DHMO					
Deductible	None			\$1,000 Individual \$2,000 Family		
Primary Care Office Visit	\$10 Co-pay		\$20 Co-pay			
Specialist/Urgent Care Visit	\$20 Co-pay		\$30 Co-pay			
	Pres	scription P	lan Highli	ghts		
	30-day Supply at Retail Participating Pharmacy	90-day Su Order Pha		34-day Supp Retail Partic Pharmacy		90-day Supply Mail Order Pharmacy
Generic Drugs	\$10 Co-pay	\$20 Co-pay		\$20 Co-pay		\$40 Co-pay
Preferred Brand Drugs	\$20 Co-pay	\$40 Co-pay		\$30 Co-pay		\$60 Co-pay
Non-Preferred Brand Drugs	\$35 Co-pay	\$70 Co-pay		\$45 Co-pay		\$90 Co-pay
	Delt	a Dental P	lan Highlig	ghts		
Annual Maximum Benefits			\$1,250 Per member			
Annual Deductible			\$50 Per member			
Orthodontic Lifetime Maximum				\$2,000 Per member		

1

Effective: January 1, 2020

Vision Program Plan Highlights				
	CareFirst – Blue Vision (Included with participation in the CareFirst medical plan)	Kaiser Vision (Included with participation in the Kaiser medical plan)	VSP (Can be purchased by employees at an additional cost)	
Eligibility	Provided to CareFirst Participants	Provided to Kaiser Participants	All Benefit Eligible Employees	
Routine Eye Exam	\$10 Co-pay CareFirst PPO & CDHP plans	\$10 Co-pay Kaiser HMO \$20 Co-pay Kaiser DHMO	\$10 Co-pay	
Glasses	(See "Lenses & Frames" below)	(See "Lenses & Frames" below)	\$20 Co-pay	
Lenses	Discount on lenses	No charge*	35%-45% discount	
Frames	Discount on frames	No charge*	\$150 allowance; \$170 allowance for brand frames; 20% discount over allowance; \$80 Costco frame allowance	
Contact Lenses	Discount on contact lenses	No charge	\$60 Co-pay	

^{*}Limitations apply

Company Designated Holidays

- New Year's Day
- MLK Birthday
- President's Day
- Christmas Day
- Memorial Day
- Independence Day
- Labor Day
- Presidential Inauguration Day (every 4 years)
- Veteran's Day
- Thanksgiving Day
- Day after Thanksgiving

Paid Time Off

PTO is available to employees after completing 90 days of employment.

Years of Service	PTO
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 earn up to 12 days of PTOA depending on the 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 the end of the 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.

Effective: January 1, 2020

Life and Disability Insurance

Life Insurance	Short Tern	n Disability	Long Term Disability
 Basic coverage is 15k at no cost to employee Supplemental life coverage is \$50k up to \$750k Guarantee issue amount is \$300k Spouse coverage up to \$150k Child(ren) coverage up to 	 WGL provides short term disability (STD) benefits after completion of 6 months of service Benefits are based on years of service and other requirements as follows: 		 60% long term disability at no cost to employee Maximum benefit level is 60% of your base monthly salary
\$10k per child (up to age 26)	Year of	STD	Coverage amounts not to
 Premiums are paid after- 	Service		exceed \$5,000 a month
tax basis through payroll	< 5 years	50%	
deduction	5-9 years	70%	
Employees may purchase	10-19 years	100% for 8	
voluntary Accidental Death &		weeks; 80%	
Dismemberment (AD&D) from		thereafter	
\$25k up to \$250k	20 years	100%	
	Benefits limited up to 26 weeks per calendar year		

Health Savings Account (HSA)

Employer Contribution & Benefits	2020 Contribution Limits
 Available to employees enrolled in CareFirst CDHP WGL annual employer contribution Employee only = \$700 Employee + one or more dependents (Family) = \$1,400 Pre-tax benefits account that works similar to a 401(k) Large selection of no-load mutual funds FDIC insured 	\$3,550* if you enroll in CareFirst Individual coverage \$7,100* if you enroll in CareFirst coverage for Employee + one or more dependents (family) Catch-up contribution if you are 55 or older of \$1,000* *Contribution limits include employer contributions

Flexible Spending Accounts (FSA)

Health Care FSA	Dependent Care FSA	Limited Purpose FSA	Transportation
 Pre-tax payroll deduction for eligible medical, dental, and vision expenses \$260 minimum annual contribution up to a \$2,700 maximum 	 Pre-tax payroll deduction for eligible day care expenses \$120 minimum annual contribution up to a \$5,000 maximum 	 Pre-tax payroll deduction for eligible dental & vision expenses only \$260 minimum annual contribution up to a \$2,700 maximum Must be enrolled in HSA to participate 	WageWorks -Commuter & Parking (pre-tax & post-tax payroll deductions) Up to \$500 per month for commuter transit Up to \$500 per month for commuter parking

Effective: January 1, 2020

Retirement Savings

401(k) Savings Plan	Retirement Benefits Savings Plan (Enhanced Benefit)
 Automatic enrollment of 4% of pay up to \$19,500 Company match is 100% of the first 4% of pre-tax contributions Company match is vested immediately Accepts rollovers from other qualified plans Catch-up contributions up to \$6,500 for employees age 50 of older 	 Non-elective company contribution of 4% of eligible earnings to a 401(k) account, as outlined in the respective collective bargaining agreement. Automatic benefit that does not require participation in the 401(k) plan Immediate vesting 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 educational 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 90 days of service
- Requires prior approval for reimbursement of 100% of eligible tuition and registration expenses
- Reimbursement is limited to up to \$5,250 per calendar year up to a \$30,000 employment
- Requires grade 'C' or above to be eligible for reimbursement

Other Benefits

- Employee Assistance Program
- Ombudsman
- Credit Union Membership Available
- Wellness
- Special Interest Groups
- Community Service