

## Employee Benefits

At Washington Trust Bank, we firmly believe our most valuable asset is our employees.

Our benefit philosophy is to provide you with a comprehensive package to secure your overall wellness and help you become and remain a fulfilled and productive employee. These benefits include health, financial, retirement and work/life benefits.

**We are proud to offer you and your family the following benefits as part of your total compensation. For a full list of benefits, you can reference our Benefits Guide.**

Benefit	Notes
<b>Medical</b>	PPO and HDHP medical plan options available with Premera/Blue Cross network of providers.
<b>Dental</b>	Delta Dental and Willamette Dental options.
<b>Vision</b>	Basic and Premium options available through VSP.
<b>Flexible Spending Accounts</b>	Pre-tax accounts for health care and dependent care expenses.
<b>Health Savings Account</b>	Pre-tax savings account with bank contribution when enrolled in eligible medical plan.
<b>Bank Paid Life Insurance</b>	Bank paid life insurance for employee (2x or 3x salary), spouse (\$2,000) and children (\$2,000).
<b>Voluntary Life Insurance</b>	Coverage for employee and family at group rates to supplement bank paid life insurance.
<b>Voluntary Accidental Death &amp; Dismemberment</b>	Guaranteed issue coverage available for employee and family.
<b>Bank Paid Long Term Disability</b>	Fully paid by the Bank, coverage pays you if you become disabled and are unable to work.
<b>Short Term Disability</b>	Pays you if you are unable to work for a short period of time.
<b>Supplemental Insurance</b>	Coverage available for Accident, Critical Illness and Hospital plans.
<b>Aflac</b>	Coverage available for cancer care plan.
<b>Critical Care Transport</b>	Life Flight discounts.
<b>Education Assistance Plan</b>	Reimbursement of \$5,250 per year available.
<b>Mental Health Benefits</b>	Includes Employee Assistance Program (free counseling) and benefits available under medical plan.
<b>Pet Insurance</b>	Cover your cat or dog with ASPCA Pet Health Insurance.
<b>Subsidized Bus Passes</b>	Discount or reimbursement available for bus passes.

Benefit	Notes
Travel Assistance Coverage	Bank paid coverage for employee and family
401(k) Plan	<b>Match:</b> If you contribute to the 401(k) plan, WTB will match 50% of your contribution up to your first 6% of pay. In other words, if you contribute at least 6%, it's like getting an additional 3% of pay from WTB. <b>Additional annual 3% deposit:</b> After your 1 year anniversary, you will get an additional 3% of your pay deposited into your 401(k). This is in addition to the 401(k) match and is fully funded by the bank ( <i>the employee does not need to have any contributions of their own to get this!</i> )
Paid Time Off	<b>Vacation:</b> Starting at 15 days per year <b>Sick:</b> 12 days per year <b>Holidays:</b> 11 paid holidays per year <b>Doctor/dental:</b> 10 hours per year for health care appointments <b>Bereavement:</b> 3-15 days per year, depending on relationship <b>Jury/witness:</b> Unlimited <b>Volunteer time:</b> 10 hours per year
Wellness Program	<ul style="list-style-type: none"> <li>- Annual cash bonus for preventive care visits</li> <li>- Wellness portal/app</li> <li>- Annual cash award for participation</li> <li>- Monthly lunchtime education</li> <li>- Wellness events and competitions</li> <li>- Prizes for participation</li> </ul>
Financial Services	<ul style="list-style-type: none"> <li>- No service charges on checking and savings accounts</li> <li>- Reduced rate rewards credit card</li> <li>- Discounted mortgage loan fees</li> <li>- 0% APR computer loans</li> </ul>
Community Involvement	<ul style="list-style-type: none"> <li>- Crew in Blue volunteer opportunities</li> <li>- Diversity, Equity, and Inclusion (DEI) committee and Employee Resource Groups (ERGs)</li> <li>- United Way</li> </ul>
Career Advancement/ Professional Development	<ul style="list-style-type: none"> <li>- Formal training programs</li> <li>- Personalized one-on-one coaching</li> <li>- Leadership and non-leadership development opportunities</li> <li>- Career Pathing Tools</li> </ul>
Employee Connection Opportunities	<ul style="list-style-type: none"> <li>- Employee events <i>(Regional activities like baseball and hockey games and other fun get-togethers)</i></li> <li>- Holiday celebrations</li> <li>- Annual Sales and bi-annual All-Producer Summit meetings</li> <li>- Team building events</li> <li>- Employee Facebook page</li> <li>- Young Professionals networking group</li> <li>- Employee classified site</li> </ul>

## Employee Benefits Cost

Coverage for most benefits starts on the 1st of the month following your first full month of employment. The exception is 401(k), which starts on the 1st of the month after first day of work.

Most benefit costs are deducted from employee paychecks twice per month (half of the cost on the 1st check of the month, half on the 2nd check of the month). Note that most premiums are deducted in the month prior to coverage (e.g., the health insurance premiums deducted in January are for February's coverage).

## **BELOW ARE THE RATES YOU'LL PAY TWICE PER MONTH**

Washington Trust Bank pays 80% of the total medical, dental and vision premium for employee coverage and 50% of the total premium for dependent coverage. Your cost is below.

### **Medical**

<b>Coverage</b>	<b>Your Cost</b>	<b>WTB's Cost</b>
<b>PPO Plus Medical Plan</b>		
Employee	\$78.18	\$326.57
Employee + Spouse	\$250.24	\$506.24
Employee + 1 Child	\$168.10	\$420.46
Employee + 2 or more Children	\$227.16	\$482.14
Employee, Spouse + 1 Child	\$349.37	\$609.75
Employee, Spouse + 2 or more Children	\$408.43	\$671.42
<b>HDHP Plus Medical Plan</b>		
Employee	\$66.65	\$295.44
Employee + Spouse	\$224.66	\$447.65
Employee + 1 Child	\$160.17	\$363.10
Employee + 2 or more Children	\$206.53	\$423.89
Employee, Spouse + 1 Child	\$302.48	\$549.68
Employee, Spouse + 2 or more Children	\$348.85	\$610.46

### **Dental**

<b>Coverage Type</b>	<b>Delta</b>	<b>Willamette</b>
Employee	\$5.66	\$6.25
Employee + Spouse	\$15.90	\$17.49
Employee + 1 Child	\$14.03	\$15.45
Employee + 2 or more Children	\$27.42	\$30.30
Employee, Spouse + 1 Child	\$24.28	\$26.86
Employee, Spouse + 2 or more Children	\$37.67	\$41.56

### **Vision**

<b>Coverage Type</b>	<b>VSP</b>
Basic	\$1.13
Premium	\$5.37

The premiums for vision covers you, your spouse, and any dependent children if enrolled.

## BELOW ARE THE RATES YOU'LL PAY TWICE PER MONTH

### Group Term Life Insurance

The Bank provides basic term life and accidental death and dismemberment insurance through The Standard Insurance Company at no cost to you.

### Short Term Disability Insurance

Cost for employee is based on age and benefit amount (determined by your earnings). Your cost may change when you move into a new age category.

### Long Term Disability Insurance

The Bank provides Long Term Disability coverage to all benefits eligible employees through The Standard Insurance Company at no cost to you.

### Voluntary AD&D Insurance

Cost is dependent on amount of coverage and coverage options. Coverage options are Employee only (rate \$0.0165) and Family (rate \$0.0275). To calculate your cost, use the following formula:

$$\frac{\text{(Amount of AD\&D Insurance)}}{\$1000} = \text{Rate (from table)} \times \text{Your Cost} = \$$$

### AFLAC Cancer Care Plan

Cost for Aflac Cancer Care Plan coverage varies. Contact Rob Ferrero, our Aflac representative, at 509.242.1836 or [robert\\_ferrero@us.aflac.com](mailto:robert_ferrero@us.aflac.com) to discuss your options and costs for coverage for their cancer care plan.

### Hospital Indemnity Insurance

Coverage Type	Your Cost
Employee	\$6.69
Employee + Spouse	\$14.21
Employee + Child(ren)	\$12.80
Employee, Spouse + 2 or more Children	\$21.68

### Accident Insurance

Coverage Type	Your Cost
Employee	\$5.92
Employee + Spouse	\$9.40
Employee + Child(ren)	\$11.12
Employee, Spouse + 2 or more Children	\$17.46

### Critical Illness Insurance

#### Employee Rates

Cost for employee coverage depends upon amount of coverage and age category. Cost will change when you move into a new age category. Employee rates automatically include coverage for dependent children under the age of 26 in the amount of 25% of the employee coverage amount.

Coverage Amount	18-29	30-39	40-49	50-59	60-70	71-79
\$10,000	\$3.01	\$3.76	\$6.36	\$11.86	\$21.61	\$42.36
\$20,000	\$4.31	\$5.81	\$11.01	\$22.01	\$41.51	\$83.01
\$30,000	\$5.61	\$7.86	\$15.66	\$32.16	\$61.41	\$123.66

#### Spouse Rates

Cost for spouse coverage depends upon amount of coverage and age category and is available in the amount of 50% or less of the employee coverage amount. Cost for spouse coverage is determined by the employee's age and will change when employee moves into a new age category.

Coverage Amount	18-29	30-39	40-49	50-59	60-70	71-79
\$5,000	\$2.36	\$2.73	\$4.03	\$6.78	\$11.66	\$22.03
\$10,000	\$3.01	\$3.76	\$6.36	\$11.86	\$21.61	\$42.36
\$15,000	\$3.66	\$4.78	\$8.68	\$16.93	\$31.56	\$62.68

## BELOW ARE THE RATES YOU'LL PAY TWICE PER MONTH

### Voluntary Term Life Insurance

#### Employee / Spouse Rates

Cost for employee and spouse is based on age and tobacco user status. Your cost may change when the insured moves into a new age category. To calculate your cost, use the following formula:

$$\frac{\text{(Amount of Life Insurance)}}{\$1000} = \text{Rate (from table)} \times \text{Rate (from table)} = \$ \text{Your Cost}$$

Non-Smoking Rates									
Age	Under 35	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
Rate	0.0400	0.0600	0.0900	0.1550	0.2400	0.4150	0.5050	1.0100	2.0150

Smoking Rates									
Age	Under 35	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
Rate	0.0650	0.0850	0.1400	0.2350	0.3600	0.6100	0.7400	1.3450	3.1350

#### Children Rates

The premium for children voluntary term life insurance covers all of your children for one cost.

Children Rates			
Amount of Coverage	\$2,000	\$5,000	\$10,000
Cost	\$0.14	\$0.35	\$0.70