

# 2025 Summary of Benefits

## Salaried & Office Hourly Employees



EMPLOYEE BENEFIT	DESCRIPTION	COST		ELIGIBILITY DATE	
MEDICAL PLAN		IN-NETWORK	OUT-OF-NETWORK		
<b>A) HSA Basic<sup>1</sup></b> UnitedHealthcare	<ul style="list-style-type: none"> <li>Wellness/Preventive</li> <li>Deductible Ind./Fam.<sup>2</sup></li> <li>Coinsurance — Medical<sup>3</sup></li> <li>Copay — Rx Retail 30<sup>3</sup></li> <li>Mail Order/Retail 90<sup>3</sup></li> <li>OOP Max Ind./2-Person/Fam.</li> </ul>	<ul style="list-style-type: none"> <li>100%</li> <li>\$4,000/\$8,000</li> <li>80%/20%</li> <li>\$15/\$30/\$60</li> <li>\$30/\$60/\$120</li> <li>\$6,000/\$9,100<sup>4</sup>/\$12,000</li> </ul>	<ul style="list-style-type: none"> <li>100%</li> <li>\$8,000/\$16,000</li> <li>60%/40%</li> <li>In-Network only</li> <li>In-Network only</li> <li>\$12,000/\$18,200<sup>4</sup>/\$24,000</li> </ul>	Employee contributions are based on salary, coverage level and wellness (tobacco or non-tobacco user) status and are deducted on a pretax basis. There is a spousal surcharge of \$50 per month if you choose to cover your spouse and they are eligible for coverage through an employer.	Date of hire
<b>B) HSA Plus<sup>1</sup></b> UnitedHealthcare	<ul style="list-style-type: none"> <li>Wellness/Preventive</li> <li>Deductible Ind./Fam.<sup>2</sup></li> <li>Coinsurance — Medical<sup>3</sup></li> <li>Copay — Rx Retail 30<sup>3</sup></li> <li>Mail Order/Retail 90<sup>3</sup></li> <li>OOP Max Ind./2-Person/Fam.</li> </ul>	<ul style="list-style-type: none"> <li>100%</li> <li>\$2,000/\$4,000</li> <li>80%/20%</li> <li>\$15/\$30/\$60</li> <li>\$30/\$60/\$120</li> <li>\$6,000/\$8,150</li> </ul>	<ul style="list-style-type: none"> <li>100%</li> <li>\$4,000/\$8,000</li> <li>60%/40%</li> <li>In-Network only</li> <li>In-Network only</li> <li>\$10,000/\$20,000</li> </ul>		
<b>C) PPO</b> UnitedHealthcare	<ul style="list-style-type: none"> <li>Wellness/Preventive</li> <li>Deductible Ind./Fam.</li> <li>Diagnosis/treatment office visit and specialist visit</li> <li>Coinsurance — Medical Covered Service<sup>3</sup></li> <li>Copay — Rx Retail 30</li> <li>Mail Order/Retail 90</li> <li>OOP Max Ind./Fam.</li> </ul>	<ul style="list-style-type: none"> <li>100%</li> <li>\$1,000/\$2,000</li> <li>\$30 PCP/\$50 Specialist</li> <li>75%/25%</li> <li>\$15/\$30/\$60</li> <li>\$30/\$60/\$120</li> <li>\$4,000/\$8,000</li> </ul>	<ul style="list-style-type: none"> <li>100%</li> <li>\$4,000/\$8,000</li> <li>50% after deductible</li> <li>50%/50%</li> <li>In-Network only</li> <li>In-Network only</li> <li>\$8,000/\$16,000</li> </ul>		Date of hire

<sup>1</sup> **NOTE:** A Health Savings Account (HSA) is provided to all eligible HSA participants. The Company provides one-time base funding of \$200 for Individual or \$400 for 2-Person/Family coverage. For 2025, you may also contribute additional monies up to a combined total of \$4,300 for Individual or \$8,550 for 2-Person/Family coverage. Withdrawals from your HSA are not taxable if used to pay for qualified health care expenses. Unused funds roll over at year's end, and you may take them with you if you leave the plan or the Company.

<sup>2</sup> **NOTE:** If you elect 2-Person or Family coverage under the HSA, you must satisfy the Family deductible (collective) before the plan begins to share expenses for any individual.

<sup>3</sup> After deductible

<sup>4</sup> Individual within a family

WELLNESS PROGRAMS			
<b>A) Castlight</b>	Integrated health and well-being platform that provides a “one-stop shop” for your well-being needs. Develop healthy habits by tracking your activities, such as number of steps throughout the day, participate in well-being challenges, and earn rewards.	Company-paid	Date of hire
<b>B) Family Building Benefit</b> Progyny	Support for building your family regardless of which path you choose, with benefits for fertility, adoption and surrogacy.	Company-paid, with employees paying some cost toward fertility benefits through medical claims.	Date of hire

SUPPLEMENTAL MEDICAL BENEFITS			
<b>A) Critical Illness Insurance</b> UnitedHealthcare	Pays a lump-sum benefit if diagnosed with a covered illness or condition on or after your coverage effective date.	Employee-paid. Age-based rates by coverage type and tobacco user status.	Date of hire
<b>B) Accident Insurance</b> UnitedHealthcare	Pays you benefits for specific injuries and events resulting from a covered accident that occurs on or after your coverage effective date.	Employee-paid. Rates are determined by plan type elected (low or high plan).	Date of hire

EMPLOYEE ASSISTANCE PROGRAM (EAP)			
<b>Employee Assistance Program (EAP)</b> Cigna	Confidential 24-hour resource for counseling and support services as well as referrals to professional resources in your community (e.g., legal, financial, child care, and elder care). Available to you and your household members, regardless of whether or not you participate in a Watts medical plan.	Company-paid	Date of hire

DENTAL COVERAGE				
<b>Delta Dental PPO Plus Premier</b>	<ul style="list-style-type: none"> <li>Diagnostic/Preventive</li> <li>Deductible Individual/Family</li> <li>Basic Restorative</li> <li>Major Services</li> <li>Calendar year maximum</li> <li>Orthodontics (up to age 19)</li> <li>Lifetime Orthodontic</li> </ul>	<ul style="list-style-type: none"> <li>100%</li> <li>\$50/\$150</li> <li>80%</li> <li>50%</li> <li>\$1,500 per person</li> <li>50%</li> <li>\$1,500</li> </ul>	Employee contributions are determined by the level of coverage selected and are deducted on a pretax basis.	Date of hire

VISION CARE	FREQUENCY	COPAY		ELIGIBILITY DATE
<b>Vision Service Plan (VSP) Choice</b>	<ul style="list-style-type: none"> <li>Exam: every calendar year</li> <li>Lenses: every calendar year</li> <li>Frames: every other calendar year</li> <li>Contacts (instead of glasses): every calendar year</li> <li>Contact lens exam</li> </ul>	<ul style="list-style-type: none"> <li>\$15 copay</li> <li>\$30 copay</li> <li>\$130 allowance</li> <li>\$120 allowance</li> <li>Up to \$60 copay</li> </ul>	Employee contributions are determined by the level of coverage selected. <b>NOTE:</b> Certain vision benefits are also available from non-VSP providers.	Date of hire

EMPLOYEE BENEFIT	DESCRIPTION	COST	ELIGIBILITY DATE
<b>HEALTH AND DEPENDENT CARE FLEXIBLE SPENDING ACCOUNTS</b>			
<b>A) Health Care Fidelity</b>	Employees may contribute up to \$3,200 for reimbursement of eligible out-of-pocket health care expenses. Carryover up to \$660 into 2026, any balance above that is forfeited. "Use-it-or-Lose-it" account. Employees in an HSA plan cannot elect this benefit.	Employee contributions	Date of hire
<b>B) Dependent Care Fidelity</b>	Employee may contribute up to \$5,000 for reimbursement of eligible dependent care expenses. "Use-it-or-Lose-it" account.	Employee contributions	Date of hire
<b>DISABILITY PAY</b>			
<b>A) Short-Term Disability (STD) Reliance Standard</b>	Up to 26 weeks of disability benefits based on a % of base salary and length of service. Your benefits will begin on the 1 <sup>st</sup> day following a non-occupational accidental injury or the 8 <sup>th</sup> day following a non-occupational sickness. If you're hospital confined due to your non-occupational disability, benefits will begin on your first day of hospital confinement.	Company-paid	Date of hire
<b>B) Long-Term Disability (LTD) Reliance Standard</b>	If employee is enrolled in LTD and still disabled at end of 26 weeks, LTD pays a monthly benefit equal to 60% of base salary. Minimum: \$100 per month. Maximum: \$10,000 per month. Subject to pre-existing condition limitations.	Employees pay full premium; contribution is post-tax and based on age and salary.	Date of hire
<b>EMPLOYEE AND FAMILY LIFE AND ACCIDENT INSURANCE</b>			
<b>A) Basic Life and Accidental Death and Dismemberment (AD&amp;D) Reliance Standard</b>	Provides 2X your basic annual salary. \$1 million maximum.	Company-paid	Date of hire
<b>B) Optional Life Insurance Plan Reliance Standard</b>	Provides up to \$1 million in additional life insurance for employees (capped at 8X basic annual salary); up to \$250,000 for your spouse; up to \$10,000 for your dependent children. Guaranteed Issue when first eligible: Employee: lesser of 3X basic annual salary or \$250,000; Spouse: \$50,000.	Employee-paid. Rates vary by age and amount of coverage.	Date of hire
<b>C) Personal Accident Insurance Life Ins. of North America</b>	Additional AD&D coverage is available for employees and dependents in increments of \$10,000, up to \$500,000. Benefit amounts over \$150,000 cannot be greater than 10X basic annual salary.	<b>Employee-paid</b> Ind. Plan Family Plan	<b>Cost/ Month</b> \$.045/\$1,000 \$.065/\$1,000
<b>D) Business Travel Accident Plan AIG</b>	24/7 assistance services covering medical, travel, concierge assistance and more while traveling.	Company-paid	Date of hire
<b>RETIREMENT BENEFITS</b>			
<b>401(k) Savings Plan Fidelity</b>	Employees may contribute between 1% and 60% of pay, up to federal limits. Watts matches \$1.00 for every dollar you contribute up to 4% of your pay.  Watts makes an automatic contribution to your account equal to 2% of pay, <i>whether or not</i> you are making your own contributions.	N/A	First day of the month following three months of active employment
<b>LEGAL INSURANCE BENEFIT</b>			
<b>ARAG Legal Insurance</b>	Provides legal assistance with wills, divorce, traffic troubles, trusts and other covered legal matters. Coverage available in person or by phone.	Employee-paid \$18.78/month	Date of hire
<b>EDUCATION</b>			
<b>Educational Assistance</b>	Tuition and expenses for undergraduate and graduate-level courses may be approved for reimbursement of up to \$5,250 (IRS limit) per calendar year if the policy criteria is met.	Company-paid	90 days from date of hire; prior approval required
<b>TIME AWAY FROM WORK</b>			
<b>A) Holiday Schedule</b>	See the company or your location's calendar for the complete holiday schedule.	Company-paid	Date of hire
<b>B) PTO</b>	Varies according to length of service. PTO days are accrued on a per-pay-period basis. Please contact your HR Partner for more information about the PTO policy.	Company-paid	Date of hire
<b>C) Maternity/Parental Leave</b>	Up to 8 weeks of paid leave for birth or adoption of a child.	Company-paid	Date of hire
<b>FITNESS BENEFIT</b>			
Watts reimburses you up to \$250 per year in health/fitness facility membership dues, exercise class fees or virtual fitness class subscriptions after four consecutive months of membership in a calendar year.			
<b>EMPLOYEE DISCOUNT PROGRAMS</b>			
<b>Tickets at Work</b>	Achieve significant savings on a wide variety of goods and services.	No-cost membership	Date of hire
<b>Perks at Work</b>	In addition to significant savings on goods and services, you can take advantage of free, online classes (live and recorded) through the Community Online Academy (COA).	No-cost membership	Date of hire

This summary contains highlights only and is subject to change. In the event of any conflict between the information in this summary and the official plan document, the plan document will govern.  
**NOTE:** Benefits are reviewed and updated annually, typically in November of each year. Open Enrollment information and any changes to contributions are communicated at that time.