

BENEFITS OVERVIEW

2015

Midwest Trust Company is committed to providing a comprehensive benefits package to our employees. Benefits are effective the first of the month after hire, unless otherwise noted. Eligible employees are those regularly scheduled to work 30 or more hours per week. Below is an overview of our benefits **effective January 1, 2015.** Complete information is available in the official plan documents. If there is a discrepancy or conflict between the plan documents and the information presented here, the plan documents will prevail. Contact Human Resources at hr@midwesttrust.com for more information.

Medical Insurance

CIGNA, Plan Feature	POS Copay Plan, In-Network	HDHP w/ HRA, In-Network	HDHP w/ HSA, In-Network	
Deductible, Single / Family	\$750 / \$1,500	\$2,500 / \$5,000	\$2,500 / \$5,000	
Coinsurance After Deductible	10%	0%	0%	
Out-of-Pocket Max, S / F	\$3,500 / \$7,000	\$2,500 / \$5,000	\$2,500 / \$5,000	
Annual Max-Essential Benefits, Lifetime Max	Unlimited	Unlimited	Unlimited	
Office Visits	\$25 / \$50 specialist	0% after deductible	0% after deductible	
Preventive Care	0% (100% covered)	0% (100% covered)	0% (100% covered)	
Inpatient Facility/Surgical	\$250 + deductible + 10%	0% after deductible	0% after deductible	
Outpatient Facility/Surgical	\$125 + deductible + 10%	0% after deductible	0% after deductible	
Urgent Care	\$75, no charge after deductible	0% after deductible	0% after deductible	
Emergency Room	\$300, no charge after deductible	0% after deductible	0% after deductible	
Prescription Drugs, Retail	\$20 / \$35 / \$50	0% after deductible	0% after deductible	
Prescription Drugs, Mail	\$40 / \$70 / \$100	0% after deductible	0% after deductible	
Health Reimbursement Account (HRA) / Health Savings Account (HSA) Annual Employer Contributions				
Single	none	\$1,250	\$1,250 (made monthly)	
Family	none	\$2,500	\$2,500 (made monthly)	
Pre-Tax Employee Deductions per Semi-Monthly Pay Period*				
Employee Only	\$0	\$0	\$0	
Employee + Spouse	\$33.32	\$29.45	\$29.16	
Employee + Child(ren)	\$28.78	\$25.43	\$25.19	
Family	\$62.10	\$54.88	\$54.35	

^{*}All deductions assume wellness program participation. Non-wellness premiums are an additional \$25 per period.

Dental Insurance

Delta Dental of Kansas, Plan Feature			In-Network	
Annual Benefit Maximum			\$1,500	
Deductible			\$50 individual, \$150 family	
Diagnostic and Preventive Services: Oral exams/cleanings covered every 6 months		Plan pays 100%, no deductible		
Basic Services: Extractions, restorations, root canal, periodontics			Plan pays 80% after deductible	
Major Services: Crowns, bridges, partial and complete dentures			Plan pays 50% after deductible	
Orthodontia (For dependents to age 19)			Plan pays 50% after deductible	
Orthodontic Lifetime Benefit			\$1,000	
Pre-Tax Employee Deductions per Semi-Monthly Pay Period				
Employee Only	Employee + Spouse	Employee + Child(ren)	Family	
\$ O	\$14.67	\$22.70	\$43.10	

Voluntary Vision Insurance

VSP, Plan Feature		In-Network		
Eye exam		12 months; \$10 copay		
Lenses or contact lenses		12 months		
Single vision, bifocal, trifocal lenses		\$25 copay		
Progressive: standard/premium/custom		\$55 / \$95-\$105 / \$150-175		
Contact lenses		Up to \$60 copay for fitting and evaluation; \$150 allowance		
Frames		24 months; \$150 allowance, then \$25 copay + 20% off		
Additional pairs of glasses		20% off additional glasses and prescription sunglasses		
Laser vision correction		Average 15% off regular price or 5% off promotional price		
Pre-Tax Employee Deductions per Semi-Monthly Pay Period				
Employee Only	Employee + One	Employee + Child(ren)	Family	
\$4.61	\$7.37	\$7.53	\$12.14	

Flexible Spending Accounts (FSA)

Redirect a portion of gross pay to a pre-tax FSA administered by First Trust of MidAmerica to pay for unreimbursed medical, dental, vision and dependent care expenses. A debit card is available.

- Medical Flexible Spending Account, maximum contribution of \$2,500
- Dependent Care Spending Account, maximum contribution of \$5,000 if single or married filing jointly

Life Insurance

Basic group life and accidental death and dismemberment (AD&D) insurance in the amount of \$100,000 is provided through UNUM at no cost to the employee. Additional insurance may be purchased on a voluntary basis.

Disability

Disability benefits provide income replacement if you are unable to work due to a serious health condition, non-work-related injury, or disability.

- Short-term disability leave of absence provides up to six weeks of leave at 80% of pay after a two-week elimination period; no cost to employee
- Voluntary long-term disability insurance provides 60% of salary (maximum of \$6,000 per month) until age 65 after a 90-day elimination period; semi-monthly deduction is \$.44 per \$100 of semi-monthly base salary

Other Voluntary Benefits

Additional benefits are available on January 1 or July 1 after hire:

- Voluntary long-term care insurance through United of Omaha
- Voluntary accident and cancer insurance through Aflac

401(k) Profit Sharing Plan

All employees age 21 or older are eligible to participate in the 401(k) plan immediately upon hire regardless of scheduled hours per week.

- Employer match: 100% of the employee's first 3%, then 50% of the employee's next 2%; immediate 100% vesting
- Profit sharing eligibility: 1st of the quarter after one year of service

Time Off

• Vacation is earned each pay period beginning at hire

Length of Service on 1/1	Annual Vacation-Vice President & Up	Annual Vacation–All Others
Up to 3 years	3 weeks (pro-rated for new hires)	2 weeks (pro-rated for new hires)
3 years but less than 7 years	4 weeks	3 weeks
7 or more years	4 weeks	4 weeks

- Sick time accrues at a rate of 3 hours per pay period beginning at hire; may accumulate up to 240 hours
- Holidays, jury duty, bereavement