

**SUMMARY ANNUAL REPORT FOR
ALL NON-UNION EMPLOYEES SHORT TERM DISABILITY INSURANCE**

This is a summary of the annual report of the Crouse Hospital ALL NON-UNION EMPLOYEES SHORT TERM DISABILITY INSURANCE Plan, a temporary disability plan (Employer Identification Number 16-0960470, Plan Number 510), for the plan year 01/01/2017 through 12/31/2017. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

CROUSE HOSPITAL has committed itself to pay certain claims incurred under the terms of the plan.

Insurance Information

The plan has an insurance contract with THE PRUDENTIAL INSURANCE COMPANY OF AMERICA to pay certain Temporary disability claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2017 were \$203,131.

Your Rights to Additional Information

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the office of John Bergemann, who is a representative of the plan administrator, at 736 IRVING AVENUE, SYRACUSE, NY 13210 and phone number, 315-470-7726. The charge to cover copying costs will be \$5.00 for the full annual report, or \$0.25 per page for any part thereof.

You also have the legally protected right to examine the annual report at the main office of the plan: 736 IRVING AVENUE, SYRACUSE, NY 13210, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.