SUMMARY ANNUAL REPORT

FOR: Crouse Hospital Welfare Benefit Plan

This is a summary of the annual report of the Crouse Hospital Welfare Benefit Plan Employer Identification Number 16-0960470, Plan Numbers 504, 508, 510 and 511 for the period January 1, 2018 to December 31, 2018. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information

The plan has contracts with:

Insurance Carrier	Coverage Type	Group Number	Premium Paid for Plan Year Ending December 31, 2018
Reliastar Life Insurance Company	Life, Supplemental Life, Accidental Death and Dismemberment, Supplemental	68184-9	\$464,257
	Accidental Death and Dismemberment		
The Prudential Insurance Company of America	Short Term Disability	52765	\$200,185
The Prudential Insurance Company of America	Basic Life, Optional / Dependent Life Long-Term Disability, Basic and Optional Accidental Death & Dismemberment	52765	\$163,066
HM Life Insurance Company (Davis Vision)	Vision	CHL-ALL SUBS	\$226,386
Excellus Blue Cross Blue Shield	Stop Loss	00113160	\$254,809

Your Rights to Additional Information

You have the right to receive a copy of the full annual report, or any part thereof, on request, including insurance information, sales commissions paid by insurance carriers and claims paid on self-insured benefit programs.

To obtain a copy of the full annual report, or any part thereof, write the office of John Bergemann who is the Human Resources Director and serves as the Plan Administrator at Crouse Hospital 736 Irving Avenue, Syracuse, NY 13210-1687 (315-470-7726). You will not be charged copying costs for the full annual report.

You also have the legally protected right to examine the annual report at the main office of the plan at Crouse Hospital 736 Irving Avenue, Syracuse, NY 13210-1687 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 N1513
Employee Benefits Security Administration
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, D.C. 20210