

**SUMMARY ANNUAL REPORT  
FOR THE  
HAVERFORD COLLEGE HEALTH & WELFARE PLAN**

This is a summary of the annual report of the Haverford Health & Welfare Plan, Employer Identification Number 23-6002304, Plan Number 504, for the plan year January 1, 2017 through December 31, 2017. The annual report has been filed with the U.S. Department of Labor's Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

**UNINSURED COMPONENTS**

The plan sponsor, Haverford College, has committed to pay all medical claims, including flexible spending account expenses, and all dental and employee assistance program claims incurred under the terms of the Plan.

**INSURED INFORMATION**

The plan has contracts with Federal Security Life Insurance Company to pay business travel accident claims, Independence Blue Cross to pay vision claims and Unum Life Insurance Company of America to pay life insurance, accidental death and dismemberment and long-term disability claims incurred under the terms of the plan. The total amount of premium paid for the contract year that ended on December 31, 2017 was \$83,873.

**YOUR RIGHTS TO ADDITIONAL INFORMATION**

You have the right to receive a copy of the full annual report, or any part thereof, upon request. The insurance information, including sales commission paid by insurance carriers, is included in that report.

To obtain a copy of the full annual report, or any part thereof, write or call Haverford College at 370 Lancaster Avenue, Haverford, PA 19041 (610) 896-1219. The charge to cover copying costs will be no more than \$.25 per page.

You also have the legally protected right to examine the annual report at the main office of the plan (Haverford College, 370 Lancaster Avenue, Haverford, PA 19041), at any other location where the report is available for examination, 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 cost. Requests to the Department should be addressed to: Public Disclosure Room, N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W. Washington, D.C. 20210.