This is a summary of the annual report of the WESTERN UNIVERSITY OF HEALTH SCIENCES EMPLOYEE WELFARE BENEFIT PLAN, EIN 95-3127273, Plan No. 501, for period January 1, 2017 through December 31, 2017. 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).

Western University of Health Sciences has committed itself to pay vision claims incurred under the terms of the plan.

Insurance Information

The plan has contracts with Kaiser Foundation Health Plan Inc., Kaiser Foundation Health Plan of the Northwest, Unum Life Insurance Company of America, Metropolitan Life Insurance Company, Safeguard Health Plans, Inc., A California Corporation, U.S. Behavioral Health Plan, California DBA Optum and Blue Shield of California to pay Health, Prescription drug, HMO Contract, PPO Contract, Dental, Vision, Life Insurance, Long-term Disability, Accidental Death & Dismemberment, Group Long Term Care and Employee Assistance Program claims incurred under the terms of the plan. The total premiums paid for the plan year ending December 31, 2017 were $10,921,088.

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 WESTERN UNIVERSITY OF HEALTH SCIENCES, 309 EAST SECOND STREET, POMONA, CA 91766, (909) 469-5371.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of that report.

You also have the legally protected right to examine the annual report at the main office of the plan (WESTERN UNIVERSITY OF HEALTH SCIENCES, 309 EAST SECOND STREET, POMONA, CA 91766) 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.