

ERISA RIGHTS STATEMENT

The enclosed materials, officially called Summary Plan Descriptions for the University of Rochester Health Care Plans, Dental Plans, Flexible Spending Accounts (FSAs), Basic Group Life Insurance, Group Universal Life Insurance, Sick Leave Plan for Short-Term Disability, Paid-Time Off, Long-Term Disability Insurance, Travel-Accident Insurance, Retirement Program, Tuition Benefits, Vacation, Holidays, Severance Pay, Long-Term Care, and Employee Assistance Program (EAP) are part of the program launched by the Employee Retirement Income Security Act of 1974 (ERISA). ERISA was passed by Congress, following the discovery of abuses in a small number of pension and welfare plans, in order to protect all employees' retirement and welfare benefits. The University has not had any such abuses and does not expect to have any. However, if you have a question about any part of the plans, by all means contact any member of the Office of Total Rewards or the University Plan Administrator.

As a participant in the plans you are entitled to certain rights and protections under the Employee Retirement Income Security Act of 1974 (ERISA). ERISA provides that all plan participants shall be entitled to:

➤ Receive Information About Your Plan and Benefits

- Examine, without charge, at the Office of Total Rewards and at the University Plan

Administrator's office, all plan documents, including insurance contracts, collective bargaining agreements and a copy of the latest annual report (Form 5500 Series) filed by the plan with the U.S. Department of Labor.

- Obtain upon written request to the University Plan Administrator copies of documents governing the administration of the plan, including insurance contracts and collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and updated summary plan description. The Administrator may make a reasonable charge for the copies.

- Continue health care coverage for yourself, spouse or dependent if there is a loss of coverage under a health care plan as a result of a qualifying event. You or your dependents may have to pay for such coverage. Review the summary plan description and the documents governing the health care plan on the rules governing your COBRA continuation rights.

- Reduction or elimination of exclusionary periods of coverage for preexisting conditions under your group health plan, if you have creditable coverage from another plan. You should be provided a certificate of creditable coverage, free of charge, from your group health plan or health insurance issuer when you lose coverage under the plan, when you become entitled to elect COBRA continuation coverage, when your COBRA continuation coverage ceases, if you request it before losing coverage, or if you request it up to 24 months after losing coverage. Without evidence of creditable coverage, you may be subject to preexisting condition exclusion for 12 months (18 months for late enrollees) after your enrollment date in your coverage.

- Receive a summary of the plan's annual financial report.

administrator is required by law to furnish each participant with a copy of this summary annual report.

➤ *Prudent Action by Plan Fiduciaries*

In addition to creating rights for plan participants, ERISA imposes duties upon the people who are responsible for the operation of the plan. The people who operate your plan, called “fiduciaries” of the plan, have a duty to do so prudently and in the interest of you and other plan participants and beneficiaries. No one, including your employer, your union, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a welfare benefit or exercising your rights under ERISA.

➤ *Enforce Your Rights*

If your claim for a benefit is denied in whole or in part you must receive a written explanation of the reason for the denial. You have the right to have the plan review and reconsider your claim. Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request materials from the plan and do not receive them within 30 days, you may file suit in a federal court. In such a case, the court may require the plan administrator to provide the materials and pay you up to \$110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the administrator. If you have a claim for benefits which is denied or ignored, in whole or in part, you may file suit in a state or federal court. If it should happen that plan fiduciaries misuse the plan’s money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a federal court. The court will decide who should pay court costs and legal fees. If you are successful the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees, for example, if it finds your claim is frivolous.

➤ *Assistance with Your Questions*

If you have any questions about a plan, you should contact the Office of Total Rewards or the University Plan Administrator. If you have any questions about this statement or about your rights under ERISA, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, D.C. 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

Although this statement emphasizes your right to bring a lawsuit or to seek Labor Department assistance, it is highly unlikely that disputes will require such action. However, if a situation occurs that simply is not covered by a plan, the claims review procedure should be able to meet the needs of any employee. In extreme cases, if legal action seems necessary, the University Plan Administrator has been designated as the agent for service of legal process.