SUMMARY ANNUAL REPORT FOR THE DREXEL UNIVERSITY HEALTH AND WELFARE PLAN

This is a summary of the annual report of the Drexel University Health and Welfare Plan, Plan Number 519, Employer Identification Number 23-1352630, for the plan year period beginning January 1, 2012 and ending December 31, 2012. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

UNINSURED COMPONENTS

The plan sponsor, Drexel University, has committed itself to pay certain medical, prescription drug, severance and health flexible spending account claims under the terms of the plan.

INSURED COMPONENTS - INSURANCE INFORMATION

The plan had contracts with insurance carriers to pay certain claims incurred under the terms of the plan. The type of benefit provided, name of the insurer, and premiums paid for each component are set forth in the table below. The total amount of premiums paid for contracts that ended during the 2012 plan year were \$5,993,638.

Type of Benefit	Name of Insurer	Premiums Paid
Medical	Aetna Health, Inc.	\$2,010,185
Medical	Western Health Advantage	\$140,333
Vision	EyeMed Vision Care	\$278,639
Dental	Connecticut General Life Insurance Company	\$1,631,101
Life Insurance		
Short Term Disability, Long Term Disability		
Accidental Death and Dismemberment	Hartford Life and Accident	\$1,783,286
Employee Assistance Program	Health Advocate	\$79,896
Legal Services	Hyatt Legal Plans, Inc.	\$67,950
Business Travel Accident	Life Insurance Company of North America	\$2,248

Because all components of the plan are unfunded and insured, the plan did not have any reportable plan assets and did not earn any income during the plan year.

YOUR RIGHTS TO ADDITIONAL INFORMATION

You have the right to receive a copy of the full annual report, or any part thereof, on request. Insurance information, including sales commissions paid by insurance carrier, is included in that report.

To obtain a copy of the full annual report, or any part thereof, write or call the office of Drexel University, c/o HR, 3201 Arch Street, Suite 430, Philadelphia, PA 19104, 215-895-2850. The charge to cover copying costs will be \$.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: of Drexel University, c/o HR, 3201 Arch Street, Suite 430, Philadelphia, PA 19104 (or 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 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.