

**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, 2021 and ending December 31, 2021. 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, telemedicine, short-term disability, severance, life insurance, and healthcare 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 contract years that ended during the 2021 plan year were \$5,065,096.

<b>Type of Benefit</b>	<b>Name of Insurer</b>	<b>Premiums Paid</b>
Legal Services	MetLife Legal Plans	\$69,819
Wellness Services, Core Services Employee Assistance Program	West Health Advocate Solutions, Inc.	\$142,063
Business Travel Accident	Life Insurance Company of North America	\$0
Dental (PPO)	Cigna Health and Life Insurance Company	\$2,269,439
Dental (DHMO)	Cigna Dental Health of California, Inc.	\$158
Dental (DHMO)	Cigna Dental Health of Delaware, Inc.	\$175
Dental (DHMO)	Cigna Dental Health of Florida, Inc.	\$18
Dental (DHMO)	Cigna Dental Health of Maryland, Inc.	\$281
Dental (DHMO)	Cigna Dental Health of New Jersey, Inc.	\$1,613
Dental (DHMO)	Cigna Dental Health of North Carolina, Inc.	\$53
Dental (DHMO)	Cigna Dental Health of Pennsylvania, Inc.	\$15,919
Dental (DHMO)	Cigna Dental Health of Texas, Inc.	\$316
Vision	Independence Blue Cross (Davis Vision)	\$270,213
Business Travel Accident (Foreign)	Insurance Company of the State of Pennsylvania	\$4,130
Life Insurance, Long-Term Disability Accidental Death & Dismemberment	Lincoln National Life Insurance Company	\$2,189,307
Life Insurance	Massachusetts Mutual Life Insurance Company	\$69,703
Accident Insurance, Critical Illness Cancer	American Heritage Life Insurance Company	\$31,889

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 the by the insurance carriers, is included in that report.

To obtain a copy of the full annual report, or any part thereof, write or call the office of Joyce Vuocolo, who is a representative of the plan administrator, Drexel University, c/o Human Resources, 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: Drexel University, c/o Human Resources, 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.

**Paperwork Reduction Act Statement**

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email [DOL\\_PRA\\_PUBLIC@dol.gov](mailto:DOL_PRA_PUBLIC@dol.gov) and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 07/31/2023)