## SUMMARY ANNUAL REPORT FOR PACIFIC LUTHERAN UNIVERSITY HEALTH & WELFARE BENEFIT PLAN

This is a summary of the annual report of the Pacific Lutheran University Health & Welfare Benefit Plan (Employer Identification Number 91-0565571, Plan Number 513) for the plan year 01/01/2024 through 12/31/2024. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Pacific Lutheran University has committed itself to pay certain healthcare FSA (medical, dental and vision) claims incurred under the terms of the plan.

## **Insurance Information**

The plan has insurance contracts with Delta Dental of Washington, First Choice Health, Kaiser Foundation Health Plan of Washington, Kaiser Foundation Health Plan of Washington Options, Inc., Unum Life Insurance Company of America, Willamette Dental of Washington, Inc. and Zurich American Insurance Company to pay certain medical, prescription drug, life, accidental death and dismemberment, dental, vision, temporary disability, long-term disability, business travel accident and employee assistance program claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2024 were \$5,984,016.

Because they are so called "experience-rated" contracts, the premium costs are affected by, among other things, the number and size of claims. Of the total insurance premiums paid for the plan year ending 12/31/2024, the premiums paid under such "experience-rated" contracts were \$453,867 and the total of all benefit claims paid under these experience-rated contracts during the plan year was \$390,650.

## 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:

• Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the plan administrator, at 12180 Park Avenue S., Tacoma, WA 98447-0001 and phone number, 253-535-7185.

You also have the legally protected right to examine the annual report at the main office of the plan: 12180 Park Avenue S., Tacoma, WA 98447-0001, 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. The annual report is also available online at the Department of Labor website www.efast.dol.gov.