



RETIREE  
BENEFIT  
PROGRAMS  
SUMMARY PLAN DESCRIPTION

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# RETIREE BENEFIT PROGRAMS – SUMMARY PLAN DESCRIPTION 2024

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The current edition is a reprint of the previous year with no revisions made.

Effective January 2025

# RETIREE BENEFIT PROGRAMS – SUMMARY PLAN DESCRIPTION 2024

## Introduction

This document serves as the Summary Plan Description (SPD) for retiree benefit programs offered by Southwest Research Institute ("SwRI" or "the Institute"). Together with the insurance certificates and other official benefit descriptions for the benefit programs (available through the Employee Benefits website), this SPD contains important information regarding the benefit programs offered by the Institute to an eligible retiree, spouse, dependent child(ren), or survivor.

The information included in the SPD is not intended to interpret, extend, or change the following:

- Southwest Research Institute Employees' Insurance Programs Plan (Plan No. 501);
- Southwest Research Institute Employees' Health Care Expense Benefits Plan (Plan No. 502);
- Southwest Research Institute Long-Term Disability Income Benefits Plan (Plan No. 503);
- Southwest Research Institute Section 125 Plan (Plan No. 504);
- Southwest Research Institute Health Care Reimbursement Plan (Plan No. 505); or
- Southwest Research Institute Employee Assistance Program Plan (Plan No. 506).

The plans listed above collectively referred to as "the Plans".

Please Note: Neither this SPD, nor any of the benefit programs described herein, is to be considered an employment contract or a limit on the Institute's right to terminate the employment of any employee. The Institute intends to continue the Plans and the employee benefit programs included in the Plans but reserves the right, in its sole discretion, to modify, change, revise, amend or terminate the Plans or any individual employee benefit program at any time, for any reason, and without prior notice. If the Plans or any individual employee benefit program are terminated, covered persons will not have the right to any other benefits from the Plans or individual employee benefit program, other than for those claims incurred prior to the date of termination, or as otherwise provided under the Plans. In addition, if the Plans or any individual employee benefit program is amended, covered persons may be subject to altered coverage and benefits as of the effective date for which the Plans or individual employee benefit program is amended.

This SPD describes the health and welfare benefit plans provided by the Institute to eligible individuals and serves as the SPD required for benefits covered by the Employee Retirement Income Security Act of 1974, as amended ("ERISA"). Every effort has been made to report correct information. To the extent there are any differences between this SPD and the plan booklets or insurance contracts, certificates, and policies that govern the benefit programs, the terms of those plan booklets or insurance contracts, certificates, and policies will prevail. It is the intention of the Institute that certain benefits provided be excludable from taxable income of participating covered employees under the applicable sections of the Internal Revenue Code of 1986, as amended (the "Code"), including but not limited to sections 79, 105, 106 and 125. Moreover, the applicable benefit programs are intended to qualify as a cafeteria

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plan under section 125 of the Code and this SPD is intended to satisfy the Department of Treasury Regulation section 1.125-1(c).

Benefits subject to ERISA that are not Code section 125 benefits are described in this SPD for the purpose of satisfying the written instrument requirements of ERISA section 402 and shall not be considered part of the Code section 125 arrangement. Similarly, benefits that are Code section 125 benefits and are not subject to ERISA are described in this SPD solely for the purpose of satisfying the written instrument requirements of Code section 125 and shall not be considered subject to ERISA. The retiree benefits described in this SPD for Legal Services are not subject to either Code section 125 or ERISA and are included in this SPD solely as an administrative convenience to the Institute and shall not be considered as part of the Code section 125 cafeteria arrangement, or subject to ERISA, as the case may be.

The Institute has the right to amend, modify or terminate any and all benefits described herein at any time. No consent of any participant or beneficiary is required for the Institute to exercise its right to do so.

This SPD and the accompanying insurance certificates and other official benefit descriptions are provided electronically to eligible individuals through the Insurance & Benefits section of the Retirees' Bulletin Board at <https://retirees.swri.org/>. You may request a paper copy of the insurance certificates, other official benefit descriptions, or any part by calling Retiree Benefits at (210) 522-2232.

The Plan Administrator is the Institute's CFO and Vice President – Finance. The Plan Administrator has full authority to interpret all (including ambiguous) terms of the Plans with respect to eligibility and to conduct all other business regarding the Plans. The plan year extends from January 1 through December 31.

This SPD is designed to meet your information needs and the disclosure requirements of the Employee Retirement Income Security Act of 1974 (ERISA).

### Eligibility

Eligibility for retiree medical coverage applies to retiree status individuals whose employment date precedes January 1, 2000. Retiree status individuals formerly employed before January 1, 2000, who left and returned to employment with SwRI within 3 years, are eligible for subsidized medical care coverage if their break in service did not exceed their prior service and their subsequent service exceeded the break in service. Only employees enrolled in an Institute-sponsored medical plan at the time of their retirement shall be eligible for retiree medical.

Retiree status employees are eligible for a dental care program, a vision care program, and a legal services program.

Retiree-status shall apply to any employee who separates employment from SwRI and meets each of the following:

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1. Attained a minimum age of 58 on or before the date of termination,
2. Employed by SwRI as a regular employee for not less than 10 consecutive years immediately preceding the date of termination, and
3. Separate from SwRI in a regular employment or long-term disability status.

No retirement benefits eligibility will be granted in cases involving dismissal for misconduct or other cause, such as, for example, violation of SwRI employment agreement or violation of operating policies and procedures.

When an employee retires and is eligible for retiree benefits, the employee's spouse or any dependent child(ren) under the age of 26 enrolled in the applicable SwRI-sponsored medical, dental, vision, and/or legal program(s) at the time of the employee's retirement are eligible to be enrolled as a spouse or dependent of an eligible retiree in the same benefit program(s) that the eligible retiree chooses to enroll in. If an employee's spouse (and children under the age of 26) is covered under the spouse's employer medical plan or is enrolled in coverage through the health care insurance exchange at the time of an employee's retirement, the spouse (and children under the age of 26) may enroll in a SwRI-sponsored medical plan for retirees if their previous coverage ceases provided that they have not enrolled in a Medicare Advantage Plan or Medicare Supplement (Medigap) Plan that is not sponsored by SwRI.

An enrolled spouse or dependent child(ren) of a retiree enrolled in a medical care, dental care, vision care, and/or legal option at the time of a retiree's death may continue their enrollment as a survivor by signing the required enrollment forms and paying required premiums when due. Eligibility in these programs ceases when a survivor of a retiree remarries.

### Available Retiree Benefit Programs

#### Medical – Age 65 and Older

Retirees, and eligible spouses, age 65 and older who are eligible for subsidized medical care may enroll in either the Hartford Group Retiree Plan or the UnitedHealthcare Medicare Advantage PPO (MAPPO) Plan. Both plans include a prescription drug benefit plan under Medicare Part D. Contributions to these plans is in the form of retiree contributions and contributions from the plan sponsor.

#### Medical – Under Age 65

Retirees and/or eligible dependents under age 65 who are eligible for subsidized medical care coverage may enroll in the fully-insured UnitedHealthcare Texas Premier Choice Plan or UnitedHealthcare Texas Premier High-Deductible Health Plan (HDHP). Contributions to these plans is in the form of retiree contributions and contributions from the plan sponsor.

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### Other Benefit Programs.

A dental care program, a vision care program, and legal care program are available to retirees. Contributions to these plans is in the form of retiree contributions.

### Benefit Programs available under COBRA

Eligibility for and the terms of coverage for any benefit program(s) available to an eligible retiree, spouse, or dependent child(ren) under the Consolidated Omnibus Reconciliation Act of 1985 (COBRA) is described in a separate Summary Plan Description available on the Southwest Research Institute Employee Benefits Office website at <https://benefits.swri.org/> or by contacting the Retiree Benefits Office at (210) 522-2232.

## Enrollment

To enroll in available retiree benefit program(s), eligible retirees or survivors must sign the required paperwork and provide initial premium payment at the time of the employee's retirement or when coverage in another health care plan ends, such as when coverage ends due to the retirement of a retiree's spouse. For retirees already enrolled in a retiree benefit program, a change to modify an enrollment election(s) or to cancel coverage must be timely made during the annual Open Enrollment period for Retired Employees and Survivors or generally within 31 days of a qualifying family change or life change event, such as the retiree or spouse attaining age 65 or the spouse's retirement from their employer.

For an eligible retiree, spouse, or survivor aged 65 or older, enrollment in a SwRI retiree medical program available to individuals aged 65 or older is available only if the individual(s) is also enrolled in Medicare Parts A and B. Further information on the Medicare program is available at [www.medicare.gov](http://www.medicare.gov). Enrollment in Medicare is solely the responsibility of the retiree, spouse, or survivor. Information and necessary forms are available by contacting Retiree Benefits via email [retireebenefits@swri.org](mailto:retireebenefits@swri.org) or calling (210) 522-2232.

Because both medical plan options for retirees/spouses aged 65 and older include a Part D prescription drug plan, enrollment in any Part D plan not sponsored by Southwest Research Institute is not permitted.

## Participation Opt-Out

An eligible retiree and/or an eligible spouse or dependent child(ren) may elect to opt-out of participation and defer coverage in a SwRI-sponsored retiree medical plan provided that they are enrolled in another employer-sponsored medical plan or through the health care insurance exchange. When coverage ends for retirees and/or eligible dependents in another employer-sponsored medical plan or through the health care insurance exchange, retirees and/or eligible dependents must enroll in the SwRI-sponsored retiree medical plan, or they will be permanently discontinued from participation in subsidized medical care coverage.

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A retiree and/or an eligible spouse or dependent child(ren) who enrolls in a Medicare Advantage Plan or Medicare Supplement (Medigap) Plan not sponsored by SwRI is not eligible to re-enroll in a medical plan sponsored by SwRI. An exception applies in the case where a retiree's spouse attains age 65 prior to the retiree, and the spouse enrolls in an outside Medicare Advantage Plan or Medicare Supplement (Medigap) Plan. In such case, the retiree's spouse must enroll in one of the plan options available for individuals aged 65 and older when the retiree enrolls in SwRI-sponsored plan option for individuals aged 65 and older or they will no longer be eligible to enroll at a future date.

### Premium Payment

Eligible persons must pay the required premiums through monthly automatic withdrawal from a bank account ("ACH Payment") or by annual pre-payment by personal check or money order. Cash payments are not permitted. If an ACH Payment is returned for non-sufficient funds, the retiree must timely provide a replacement payment by personal check or money order. Enrollment in benefit program(s) will cease if premiums are greater than 90 days delinquent, and the retiree and any eligible spouse or dependent child(ren) will be permanently ineligible to re-enroll in a SwRI retiree benefit program(s) at a later date.

### Covered Benefits

Covered benefits for retiree benefit programs are provided in the form of an insurance contract with the respective insurer(s). Information on covered benefits, member costs, such as member copayments, coinsurance, etc., exclusions and limitations, the claims procedures for members when presenting a claim for benefits and the remedies available under the benefit programs when claims are denied, and other applicable benefit plan information is available in the following documents at the Insurance & Benefits section of the Retiree Bulletin Board at <https://retirees.swri.org/>:

Pre-65 Medical	UnitedHealthcare Texas Premier Choice Certificate of Coverage
Pre-65 Medical	UnitedHealthcare Texas Premier HDHP Certificate of Coverage
Medicare-Aged Medical	UnitedHealthcare Medicare Advantage PPO (MAPPO) Evidence of Coverage
Medicare-Aged Medical	Hartford Plan F Evidence of Coverage
Dental	Delta Dental Evidence of Coverage
Vision Care	Vision Service Plan (VSP) Evidence of Coverage

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Information on the Legal Care Plan is available within the documents available under the Legal heading of the Insurance & Benefits section of the Retiree Bulletin Board or by calling the benefit administrator, MetLife, at 800-821-6400.

Printed copies of the above information for covered benefits are available by calling Retiree Benefits at (210) 522-2232.

### Other Post-Employment Benefit Programs

Coverage in any additional benefit program not described above that an employee was enrolled in prior to their retirement date ceases at the date of an employee's retirement. This includes but is not limited to employee benefit programs related to group life, voluntary accidental death and dismemberment, supplemental life insurance, cancer and specified disease, critical illness, and accidental injury. Subject to policy limitations and exclusions, coverage in such programs may be eligible to be continued as individually issued, direct pay policies by submitting a written application to the insurer within the allowed time after the employee's retirement date.

Information on continuation of coverage is available by calling Retiree Benefits at (210) 522-2232 but the retiring employee and their spouse/dependent child(ren) are solely responsible for contacting the insurer(s) to ensure all required forms have been submitted as required by the insurer(s).

### Required ERISA Information

You are entitled to certain rights and protections under the Employee Retirement Income Security Act (ERISA) of 1974. You may examine, without charge, at the Plan Administrator's office, 6220 Culebra Road (Building 160), San Antonio, Texas, and at other specified locations as arranged by the Plan Administrator, all documents governing the plan, including the Plan document, related amendments, insurance contracts and certificates, and a copy of the latest annual report (Form 5500 Series) filed by the plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Pension and Welfare Benefit Administration.

You may obtain, upon written request to the Plan Administrator, copies of documents governing the operation of the plan, including the Summary Plan Description, insurance contracts and certificates, and copies of the latest annual report (Form 5500 Series). The administrator may make a reasonable charge for the copies.

You may receive a summary of the plan's summary annual financial report. The Plan Administrator is required by law to furnish each participant with a copy of this report on an annual basis.

In addition to creating rights for plan participants, ERISA imposes duties upon the people who are responsible for the operation of the employee benefit 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



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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 (pension, welfare) benefit or exercising your rights under ERISA.

If your claim for a welfare benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules.

Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of plan documents or the latest annual report 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. In addition, if you disagree with the plan's decision or lack thereof concerning the qualified status of a domestic relations order or a medical child support order, you may file suit in 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.

If you have any questions about your plan, you should contact the Plan Administrator. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the Plan Administrator, 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.

While ERISA requirements are established by Federal law and regulation, Southwest Research Institute has always attempted to provide its employees and retirees with welfare benefit plans that meet or exceed the same high standards imposed by the law.

### Required Notices

#### [Protected Health Information](#)

A federal law known as HIPAA (the Health Insurance Portability and Accountability Act) requires that Institute employees as well as those who administer health care plans take reasonable steps to ensure the privacy of personally identifiable health information (PHI). The term PHI

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includes all individually identifiable health information that is communicated orally, in writing, or in electronic form between a plan participant and those who provide health care services and who administer health care plans. PHI includes any combination of a member's name, address, date of birth, social security number, marital status, and sex when disclosed with the person's health history, medical records, or information about present or future health care. PHI should be disclosed only to health care providers for treatment, to third party administrators who make coverage determinations and payments, and to the people who administer the health care plan on behalf of the plan administrator.

The Southwest Research Institute Employee Benefits Office Notice of Privacy Practices required under HIPAA is available at <https://benefits.swri.org/>. You may request a printed copy by emailing [retireebenefits@swri.org](mailto:retireebenefits@swri.org) or calling Retiree Benefits at (210) 522-2232.

Texas Statute H.B. 300 makes all individuals responsible for safeguarding protected health information (PHI) in the same manner that covered entities (doctors, hospitals, pharmacies, health plans, medical clinics, etc.) are required to do under the federal HIPAA privacy rules. You should not disclose information about your personal health to anyone who does not need that information for a business reason. If you do so, the individual health information you disclosed is no longer protected. If you become aware of health information pertaining to someone that was not voluntarily provided to you by that person, you should not share that information without permission to do so. H.B.300 provides for both civil and criminal penalties when PHI is improperly disclosed. The privacy protection under Texas law exceeds the privacy protection extended under the federal HIPAA privacy rules and extends to information about your name, address, gender, social security number and banking information.

### [Notice about the Genetic Information Nondiscrimination Act \(GINA\)](#)

GINA is a federal law that basically prohibits health plans and insurers from requiring genetic tests for plan participation, from collecting genetic testing information and from adjusting plan premiums based on genetic information. Family history of disease information collected in connection with the Institute wellness evaluations is genetic information that is protected health information under HIPAA and GINA. This information, accordingly, is not shared with employees who administer the health plan except in the form of aggregate, desensitized data.

### [Notice Required by the Department of Labor](#)

Group health plans, including those described in this SPD, and health insurance issuers generally may not, under federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a normal vaginal delivery, or less than 96 hours following a cesarean section, or require that a provider obtain authorization from the plan or insurance issuers for prescribing a length of stay not in excess of the above periods.

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### Notice required under the Women’s Health and Cancer Rights Act of 1998

Group health plans, including those described in this SPD, in the past have provided coverage for mastectomies. This coverage generally includes procedures necessary to effect reconstruction of the breast on which the mastectomy was performed as well as the cost of prostheses (implants, special bras, etc.) and physical complications of all stages of a mastectomy, including lymphedemas, as recommended by the patient’s physician. Additionally, plans described in this guide provide coverage for any necessary surgery and reconstruction of the breast on which a mastectomy was not performed to produce a symmetrical appearance for any participant currently receiving plan benefits. This coverage is subject to the same co-insurance, deductibles, co-payments, and other limitations that apply to mastectomies under the plans’ current terms.

### Additional ERISA and Plan Information

<b>PLAN YEAR:</b>	January 1 through December 31
<b>PLAN SPONSOR:</b>	Southwest Research Institute
<b>EMPLOYER TAX ID NUMBER:</b>	74-1070544
<b>PLAN ADMINISTRATOR AND AGENT FOR SERVING OF LEGAL PROCESS:</b>	Mrs. Beth Ann Rafferty CFO and Vice President Southwest Research Institute 6220 Culebra Road San Antonio, Texas 78238-1566 210-684-5111
<b>SPONSOR’S FISCAL YEAR ENDS:</b>	Last Friday in September

BENEFIT PLAN	PLAN NAME, PLAN # and EFFECTIVE DATE OF PLAN:	TYPE OF PLAN/PROGRAM and FUNDING OF PLAN BENEFITS:	PLAN CLAIM PROCESSOR:	INSURER:
<b><i>Pre-65 Medical Plans</i></b>				
Texas Premier Choice Plan Texas Premier HDHP Plan	Southwest Research Institute Employees' Insurance Programs Plan, Plan No. 501, established May 31, 1980	Welfare: Health Care, Accident, Life, and other Insurance Programs  Benefits are funded through participant contributions and Plan Sponsor contributions made out of the general assets of the Plan Sponsor	UnitedHealthcare Insurance Company P. O. Box 30555 Salt Lake City, UT 84130-0555 877-370-0859	UnitedHealthcare Insurance Company P. O. Box 30555 Salt Lake City, UT 84130-0555 877-370-0859
<b><i>Medicare-Aged Medical Plans</i></b>				
Hartford Plan F (Medical Benefit)	Southwest Research Institute Employees' Insurance Programs Plan, Plan No. 501, established May 31, 1980	Welfare: Health Care, Accident, Life, and other Insurance Programs  Benefits are funded through participant contributions and Plan Sponsor contributions made out of the general assets of the Plan Sponsor	WebTPA P.O. Box 1928 Grapevine, TX 76099-1928 844-380-4556	Hartford Life and Accident One Hartford Plaza Hartford, CT 06155 866-868-1710

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BENEFIT PLAN	PLAN NAME, PLAN # and EFFECTIVE DATE OF PLAN:	TYPE OF PLAN/PROGRAM and FUNDING OF PLAN BENEFITS:	PLAN CLAIM PROCESSOR:	INSURER:
Hartford Plan F (Pharmacy Benefit)	Southwest Research Institute Employees' Insurance Programs Plan, Plan No. 501, established May 31, 1980	Welfare: Health Care, Accident, Life, and other Insurance Programs  Benefits are funded through participant contributions and Plan Sponsor contributions made out of the general assets of the Plan Sponsor	Express Scripts Inc. P.O. Box 66571 St. Louis, MO 63166-6571 888-345-2560	Express Scripts Inc. P.O. Box 66571 St. Louis, MO 63166-6571 888-345-2560
Medicare Advantage Group PPO Plan	Southwest Research Institute Employees' Insurance Programs Plan, Plan No. 501, established May 31, 1980	Welfare: Health Care, Accident, Life, and other Insurance Programs  Benefits are funded through participant contributions and Plan Sponsor contributions made out of the general assets of the Plan Sponsor	UnitedHealthcare P.O. Box 31385 Salt Lake City, UT 84131 800-457-8506	Sierra Health and Life Insurance Company Inc. 2716 North Tenaya Way Las Vegas, NV 89128 800-888-2264
<b><i>Dental Care Plan:</i></b>				
Delta Dental Retiree Plan	Southwest Research Institute Employees' Insurance Programs Plan, Plan No. 501, established May 31, 1980	Welfare: Dental benefits  Benefits are funded through participant contributions	Delta Dental Insurance Company 1130 Sanctuary Parkway, Suite 600 Alpharetta, GA 30009 (800) 521-2651	Delta Dental Insurance Company 1130 Sanctuary Parkway, Suite 600 Alpharetta, GA 30009 (800) 521-2651
<b><i>Vision Care Plan:</i></b>				
VSP	Southwest Research Institute Employees' Insurance Programs Plan, Plan No. 501, established May 31, 1980	Welfare: Health Care, Accident, Life, and other Insurance Programs  Benefits are funded through participant contributions	Vision Service Plan Insurance Company 3333 Quality Drive Rancho Cordova, CA 95670 800-877-7195	Vision Service Plan Insurance Company 3333 Quality Drive Rancho Cordova, CA 95670 800-877-7195
<b><i>Legal Services Plan:</i></b>				
MetLaw Legal Plan	n/a	Benefits are not subject to ERISA  Benefits are funded through participant contributions		