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## GENERAL PLAN PROVISIONS

### Eligibility

As defined in Section 3359 of the Regulations of the University Board of Trustees, all full-time faculty, contract professionals and staff members are eligible to receive group insurance benefits.

### When Insurance is Effective

A full-time faculty, contract professional or staff member is eligible for insurance effective on the date of appointment or date of hire.

If the employee is absent from work on the day on which insurance would normally begin, insurance becomes effective the day the employee begins work or returns to active work.

### Who Are Eligible Dependents

If an employee is insured, eligible dependents may be:

- (1) spouse unless legally separated,
- (2) unmarried children under age 19, and children who are 19 years of age until the end of the month after reaching age 25 provided they are unmarried, dependent, full-time students.
  - (a) the term "spouse" refers to individuals who have contracted the legal status of a marital relationship through religious or civil solemnized marriages and complied with all the statutory requirements pursuant to applicable law; and shall not include common law marriages which may be otherwise recognized under Ohio law or other relationships between persons not legally capable of making a marriage contract under Ohio law.
  - (b) the term "children" includes stepchildren and foster children who are wholly dependent upon the employee for support and maintenance and live with the employee in a normal parent-child relationship.

- (c) if the child is mentally retarded or physically handicapped, insurance may be continued under the circumstances described in the group policy. Benefits Administration must be notified within 31 days before termination of the child's insurance to continue coverage.

### **When Dependent Insurance is Effective**

Each dependent will be insured beginning with the latter of:

- (1) the effective date of appointment or hire,
- (2) three months following the date of becoming an eligible dependent - in the case of a dependent child acquired other than by birth, legal adoption or marriage, or
- (3) the date of becoming an eligible dependent - in the case of any other dependent.

A dependent who is confined to a hospital on the date on which insurance would normally begin will become insured upon discharge from the hospital.

### **When Insurance Terminates**

Insurance terminates when the employee

- (1) leaves the University's employ,
- (2) is no longer eligible, or
- (3) when the group policy terminates.

A dependent's insurance terminates when the employee's insurance terminates or when the dependent is no longer considered eligible. In cases where a dependent student is required to drop classes due to the occurrence of a disabling condition coverage will be continued up to 12 months.

**Individual Termination** - all coverages terminate on the date of termination, except for group life insurance protection, which continues for 31 days.

**Temporary Layoff** - All coverages except for Long-Term Disability will be continued for up to four months.

**Permanent Layoff** - All coverages terminate on the last date of employment.

**Leave of Absence** - Any employee on an approved leave of absence continues benefits for up to one year.

**Military Leave of Absence** – Please refer to 3359-11-05 of University Rules.

**Total Disability** - All coverages except life insurance terminate at the earliest of the following, measured from the date of disability:

- (1) a period of time equal to prior service,
- (2) when the employee becomes eligible for Medicare or Ohio Retirement System benefits, or
- (3) two years.

**Surviving Spouse and Insured Dependents of Deceased Active Employees** - All coverages terminate on the last day of the second month following the month of death.

**Retired Employees** - Insurance coverage (except for life insurance) terminates for recipients of Ohio Retirement System benefits. For employees hired before January 1, 1992, comprehensive medical coverage for dependents of Ohio Retirement System retirees continues if:

- (1) the 9-month faculty retiree had ten consecutive academic years, contract professionals and staff had ten calendar years of full-time service with the University immediately prior to retirement, and
- (2) the dependent was eligible for insurance when the retiree's health insurance coverage terminated.

Arrangements may be made for continuation of coverage for the employee or eligible dependents under COBRA.

### **How to Appeal a Denied Claim**

The University wants to be sure that the employee and family always receive all benefits to which there is an entitlement under a plan. Therefore, each plan provides a procedure for appealing a claim which has been denied. Employees should contact the Office of Benefits Administration in any cases of claim denials.

## UA CHOICE

At the time of employment, employees are asked to select benefit areas that best meet the needs of self and family. Thereafter each year the University provides a pool of "Choice Dollars" to each eligible employee which may be used for the following benefit areas:

Medical	Dental
Employee Life Insurance	Long-Term Disability
Vision	Spending Accounts --
Short-Term Disability	Health Care
	Dependent Day Care

A number of options are available for benefit coverage in each area. In some areas, the employee can choose no coverage at all.

Each benefit option carries a price tag. The more coverage offered by the option, the higher the price tag. In some areas, price tags also reflect individual differences among employees based on the level of dependent coverage needed. After using all available choice dollars, an employee can keep adding to the benefit program by using dollars from earnings, which in some cases are excluded from taxable income. If choice dollars remain after selecting benefits, those leftover dollars are paid during the year as taxable income.

UA Choice benefits are in effect for a calendar year. Some benefit changes can be made during the year for "family status" changes. This plan permits an employee to revoke a benefit election during a coverage period and make a new election for the remainder of the period if there is a change in the employee's family status. In order to make a new election, a family status change must be reported and a new Personal Enrollment Form must be completed and returned to Benefits Administration within 31 days of the date of the qualifying event.

Examples of family status changes/qualifying event for which a benefit election change may be permitted include:

- (1) the employee's marriage or divorce\*
- (2) the death of the employee's spouse or dependent
- (3) the birth or adoption of a child of the employee

- (4) the termination or commencement of employment of the employee's spouse
- (5) changing from full-time to part-time status or vice versa of the employee or the employee's spouse, or
- (6) taking an unpaid leave of absence by the employee or the employee's spouse.

\*copy of marriage certificate or divorce decree required

Election changes are also permitted where there has been a significant change in the health coverage of the employee or the employee's spouse's attributable employment.

Upon appointment or hire, an employee's initial UA Choice enrollment is an "open enrollment", where any option may be selected in all benefit areas. Thereafter each fall employees re-enroll in UA Choice, making new benefit choices for the following plan year. There are rules on participation in many areas of coverage.

### UA CHOICE PROGRAM BENEFITS

The following information on medical, dental, and vision care is intended to provide a summary of benefits available. Detailed coverage information is provided by plan carriers during enrollment and should be retained for future reference.

#### Medical Plans Offered

There are five options available for medical coverage.

The Traditional Indemnity Plan,

The Preferred Provider Organization,

Three Health Maintenance Organizations, and

The option to decline medical coverage – with proof of other current coverage

The Traditional Indemnity Plan requires employee contributions which are taken on a pre-federal and state tax basis. Employee contributions, deductibles and out-of-pocket maximums are based on September 1 or date of hire/appointment annual contract salary/basic wage. The traditional indemnity plan reimburses at 80% of reasonable and customary charges. The following table indicates the employee deductibles, out of pocket maximums.

<b>Employee Traditional Indemnity Medical Plan Option</b>	
<b><i>Deductibles and Coinsurance Limits</i></b>	
Employee Only /Family Annual Deductibles	
Benefit Salary Range	
Less than \$25,000	\$125 / 250
25,000 to \$39,000	\$175 / 350
40,000 to \$54,000	\$250 / 500
55,000 to \$69,000	\$325 / 650
70,000 to \$84,000	\$400 / 800
85,000 and Higher	\$500 / 1,000
Employee Only/Family Annual Coinsurance Limits (Including deductibles)	
Benefit Salary Range	
Less than \$25,000	\$500 / 750
25,000 to \$39,000	\$700 / 1,050
40,000 to \$54,000	\$1,000 / 1,500
55,000 to \$69,000	\$1,300/ 1,950
70,000 to \$84,000	\$1,600 / 2,400
85,000 and Higher	\$2,000 / 3,000

The following tables indicates the employee contributions for plan years 2002-2003.

<u>Salary Level</u>	<u>Coverage Level</u>			
	<u>Employee Only</u>	<u>Employee &amp; Spouse</u>	<u>Employee &amp; Child(ren)</u>	<u>Employee Spouse &amp; Child(ren)</u>
LESS THAN \$25,000	\$ 132	\$ 288	\$ 264	\$ 420
\$25,000 - \$39,999	204	408	384	612
\$40,000 - \$54,999	300	600	564	888
\$55,000 – \$69,999	396	780	744	1,176
\$70,000 - \$84,999	480	972	924	1,452
\$85,000+	696	1,524	1,452	2,280

Please refer to the Comprehensive Plan certificate of coverage for details.

Plan administered by: Medical Mutual of Ohio/Medical Mutual Services

HEALTH MAINTENANCE ORGANIZATIONS – No employee contribution required

Three health maintenance organizations are offered as selections; SummaCare ,Kaiser Permanente and Hometown Health Care. Each health maintenance organization offers comprehensive health coverage including co-pays for office visits and a prescription drug plan.

Under these plan you must choose a primary care physician to manage your health care needs.

Please refer to carriers schedule of benefits for complete details of plan offered.

The Preferred Provider Option is provided without employee contributions.

The plan contains benefit levels for both in and out network providers. No primary care physician is required. When utilizing an in network provider certain co pays apply, no claim forms are required and charges incurred are not subject to reasonable and customary guidelines. The following table indicates the employee deductibles, out of pocket maximums.

<b>Preferred Provider Option</b>	
<i>Deductibles and Coinsurance Limits</i>	
Employee Only /Family Annual Deductibles	
Benefit Salary Range	
Less than \$25,000	\$125 / 250
25,000 to \$39,000	\$175 / 350
40,000 to \$54,000	\$250 / 500
55,000 to \$69,000	\$325 / 650
70,000 to \$84,000	\$400 / 800
85,000 and Higher	\$500 / 1,000
Employee Only/Family Annual Coinsurance Limits (Including deductibles)	
Benefit Salary Range	
Less than \$25,000	\$500 / 750
25,000 to \$39,000	\$700 / 1,050
40,000 to \$54,000	\$1,000 / 1,500
55,000 to \$69,000	\$1,300/ 1,950
70,000 to \$84,000	\$1,600 / 2,400
85,000 and Higher	\$2,000 / 3,000

Please refer to the Preferred Provider Plan certificate of coverage for details.

Plan administered by: Medical Mutual of Ohio/Medical Mutual Services

Dental

<u>Service</u>	<u>Benefit</u>
Deductible	\$ 50 per person/\$100 per family
Preventive	100%
General	50%
Major	50%
Oral Surgery	50%
Calendar Year Maximum	\$750
Orthodontia*	
Deductible	\$50
Coinsurance	50%
Lifetime Maximum	\$750
* available for dependent children only up to age 19	

ADMINISTERED BY: MetLife

**Vision Care**

**Panel Providers**

\$10 co-pay for exam  
\$15 co-pay for materials

**Non-Panel Providers**

See plan information for  
schedule of reimbursement.

CARRIER: Vision Service Plan

### **Long & Short Term Disability**

The University of Akron offers both long and short term disability plans, please see plan certificate for details of coverage.

CARRIER: Long-Term Disability - Liberty Mutual  
Short-Term Disability - Medical Life Insurance Company

## Life Insurance

### (A) Death Benefit.

Following an employee's death, benefits are payable to the designated beneficiary. An employee may change beneficiary at any time.

### (B) University-Provided Life Insurance.

- (1) Faculty and contract professionals employed on or prior to September 13, 1977 and staff employed on or prior to April 20, 1977 who elected the **1 1/2 x salary option** are covered by an amount equal to the employee's annual salary raised to the next higher \$1,000 multiplied by one and one half.
- (2) Faculty and contract professionals employed on or prior to September 13, 1977 and staff employed on or prior to April 20, 1977 who elected the **2 x salary option**, and faculty and contract professionals employed after September 13, 1977 and staff employed after April 20, 1977 are covered by an amount equal to the employee's annual salary raised to the next higher \$1,000, multiplied by two.
- (3) The following rules apply to both options:
  - (a) Only contract salary/basic wage is included in the life insurance determination.
  - (b) University provided life insurance shall not be an amount greater than \$100,000 or less than \$5,000.
  - (c) Insurance will not be reduced if the contract salary/basic wage reduces.
  - (d) Life insurance coverage is redetermined on January 1, and is based on the contract salary/wages on the latter of September 1 or the first day of fall semester following or coinciding with a change in contract salary/basic wage. If an employee is absent on that day, the change will be postponed until return to active work.
  - (e) If employment commences after age 64, the amount of insurance while in active employment status will be calculated in accordance with 2 x Salary Option and reduced according to the age reduction and retirement rules.

(4) Age Reduction and Retirement Rules.

(a) Age Reduction for Active Employees:

The total amount of University-provided life insurance, redetermined each year as described in (B) (3) (d) above, will be reduced on January 1, beginning with the January following the attainment of age 65 as follows:

<u>Age as of January 1</u>	<u>% Reduction</u>
65	8
66	16
67	24
68	32
69	40
70	50

The final reduction remains in effect until termination of employment.

(b) Age Reductions for Retired Employees:

(i) For retired faculty and staff who were employed before April 20, 1977 (staff) or September 13, 1977 (faculty) who had 10 or more consecutive years of full-time University service at the time of retirement and who elected the 1 1/2 x Salary Option, the University-provided life insurance in effect at the time of retirement is reduced according to the schedule in (B) (4) (a).

(ii) For retired faculty and staff who were employed before April 20, 1977 (staff) or September 13, 1977 (faculty), who had 10 or more consecutive years of full-time University service at the time of retirement and who elected the 2 x Salary Option, University-provided life insurance is reduced to the amount in effect April 20, 1977 (staff) or September 13, 1977 (faculty) on January 1 following the attainment of age 65 and further reduced according to the schedule in (B) (4) (a).

(iii) Life insurance for faculty employed after September 13, 1977 and staff employed after April 20, 1977 with more than 10 consecutive years of full-time University service is reduced to \$4,000 at the time of retirement.

(iv) Life insurance for faculty and staff with less than 10 consecutive years of full-time University service is reduced to \$1,000 at the time of retirement.

(5) Protection While Disabled.

If an insured employee becomes totally disabled by bodily injury or disease so as to prevent the employee from engaging in any occupation for compensation or profit before reaching age 60, group insurance protection may be continued at no cost as long as the employee remains totally disabled. Proof of continuing disability must be submitted to the insurance carrier three months prior to each anniversary of the date premium payments stopped.

(6) Leaving Employment.

Group life insurance protection continues for 31 days after leaving the University's employment. During this period, group life insurance may be converted to the insurance company's individual life insurance without medical examination.

(C) UA Choice Employee Life Insurance.

Employees have nine options available for employee life insurance as follows:

- 5 x annual benefits salary
- 4 x annual benefits salary
- 3 x annual benefits salary
- 2 x annual benefits salary
- 1 1/2 x annual benefits salary
- 1 x annual benefits salary
- \$50,000
- \$10,000
- no coverage

**Accidental Death & Dismemberment**

(A) Death and Dismemberment Benefits.

Accidental Death & Dismemberment Insurance will be provided to

employees in an amount equal to the University-provided life insurance. Under UA Choice, opting down on the amount of life insurance or selecting no life insurance will reduce or eliminate AD&D coverage.

The amount of Accidental Death & Dismemberment Insurance:

- (1) will not be reduced if contract salary/basic wage changes,
- (2) will be redetermined on September 1 or the first day of fall semester, following or coinciding with a change in contract salary/basic wage; if the employee is absent on that day, the change is postponed until the employee returns to active work,
- (3) is based on basic earnings, i.e., contract salary/basic wage.

If an employee suffers a loss as a result of accidental injury caused directly and exclusively by external, violent and purely accidental means and independently of all other causes, benefits are payable according to the following for the loss of:

- (1) life, or
- (2) sight of both eyes, or
- (3) both hands or feet, or
- (4) speech and hearing, or
- (5) one hand or foot and sight of one eye, or
- (6) one hand and one foot.

One half of the above amount is payable for loss of one hand or one foot or sight of one eye or speech or hearing. One quarter of the above amount is payable for loss of thumb and index finger of same hand.

Loss of hand or foot means loss by severance at or above the wrist or ankle joint, and loss of sight means total and irrecoverable loss of sight.

If an employee suffers more than one loss due to any one accident, payment will be made only for that loss for which the greatest benefit is payable.

Payment will be made for the specific loss resulting from the accident without considering any previous loss.

The accident must happen while insured and the loss must occur within 360 days after the date of the accident.

(B) Leaving Employment.

If an individual leaves the University's employment, Accidental Death and Dismemberment Insurance will cease at the termination of active service.

(C) Not Covered.

Losses resulting from, or caused directly or indirectly, wholly or partly by

- (1) intentionally self-inflicted injuries;
- (2) suicide, or any attempt thereat;
- (3) war or any act of war, declared or undeclared;
- (4) service in the armed forces of any country and in such event, the pro rata unearned premium will be returned;
- (5) illness, disease, bodily infirmity, or any bacterial infection other than bacterial infection occurring in consequence of an accidental cut or wound;
- (6) operating, learning to operate, or serving as a member of a crew of an aircraft or while in any aircraft operated by or under any military authority (except if it is a transport aircraft of the armed forces of a country), or while in any aircraft being used for a test or experimental purpose, or while in any aircraft owned or leased by or on the policyholder's behalf or on behalf of any of the policyholder's affiliates or subsidiaries;
- (7) participation in or in consequence of having participated in the committing of a felony.

## OTHER BENEFITS

### **Employee Assistance Program**

The Employee Assistance Program (EAP) is a service of Tri County Employee Assistance Program. The University has contracted with Tri County EAP to provide prompt and confidential professional counseling services to eligible persons. Each full-time employee, as well as covered dependents, is eligible for this service, which assists with concerns including depression, parent-child and marital conflicts, chemical and substance abuse, financial concerns, etc.

Up to seven counseling sessions are available at no charge to each eligible person. Should more than seven sessions be necessary, University health benefit coverage may be available, subject to health coverage contract provisions.

For further information, contact Tri County Employee Assistance Program.

### **Flexible Spending Accounts**

#### (A) Plan Provisions.

The University of Akron benefits program offers two flexible spending accounts (FSA):

- (1) Health Care Spending Account
- (2) Dependent Care Spending Account

These accounts were designed to help pay for certain covered expenses on a tax-free basis through a process called "salary redirection". This allows an employee to "redirect" a portion of salary into either of these accounts without paying federal or state taxes on such portion.

The employee will contribute to these accounts by payroll deduction and may use this contribution for reimbursement of medical and dependent care expenses. These Internal Revenue Service approved expenses include:

- (1) uninsured or otherwise non-covered medical expenses, and
- (2) child and dependent care services that are required in order for the employee or spouse to work.

Both spending accounts are administered on a calendar year basis. To be eligible for participation, an individual must be a full-time employee as of the December before the year in which participation occurs.

(B) Account Processing and Restrictions.

(1) Elections and Enrollment

Participation is voluntary, but the employee must enroll each year to participate in either or both spending accounts for the next plan year. All benefits elections made during the annual open enrollment will be effective for the next calendar year. Choices made cannot be changed unless there is a qualifying family status change. In order to make a new election, a family status change must be reported and a new Personal Enrollment Form must be completed and returned to Benefits Administration within 31 days of the date of the qualifying event.

(2) Employee Contributions

All contributions to these accounts are made through payroll deduction each pay period and must be made in whole dollar amounts. Contributions are not subject to federal or state taxes - either when the money goes into the account or when it is reimbursed. Contributions made to spending accounts do not earn interest.

(3) Filing a Claim

To receive reimbursement, the employee must complete the label provided by the administrator, affix to claim and submit with copies of receipts for proof of expense along with proof of insurance consideration. A check will be issued for eligible expenses up to the amount available in the appropriate account.

(4) Forfeiture of Account Balance

It is important to carefully consider all facets of these accounts, regulated by IRS guidelines, which require that money directed into the plan during the year may be used only for health and/or dependent care expenses incurred during that calendar year. Reimbursement must be requested before March 31 of the next calendar year. At that time, the IRS requires that all money remaining in the account be forfeited. Forfeited monies will be retained by the University.

(5) Affects on Other Benefits

While the spending accounts lower the income base for tax purposes, they do not affect other pay-related benefits such as life insurance, retirement, etc. All benefits are calculated before contributions are made to either spending account.

(6) Loss of Benefits

The employee may lose the opportunity to participate in spending accounts because of:

- (a) change to part-time employment status
- (b) termination of employment
- (c) termination of the Health Care Spending Account, or
- (d) termination of the Dependent Care Spending Account.

The employee may submit claims for any eligible expenses that were incurred before employment status changed or termination became effective. Claims must be for expenses incurred while eligible to contribute to the accounts and the amount of the claims cannot exceed the current balance in the respective spending account.

(C) Health Care Spending Account.

**Maximum contribution: \$2,500 per calendar year**

The Health Care Spending Account may be used for any IRS-approved expense including but not limited to:

- (1) medical and dental expenses, including hospital expenses, both room and board and special hospital services; surgical expenses; diagnostic x-rays; prenatal and maternity expenses; infant care in a hospital.
- (2) services of physicians, surgeons, chiropractors and other health care specialists, in or out of a hospital.
- (3) nursing care, in or out of a hospital.

- (4) rental of iron lung or other equipment for therapeutic use in or out of a hospital, including artificial limbs or other prosthetic appliances.
- (5) diagnostic laboratory procedures.
- (6) prescription drugs and medicines.
- (7) oxygen and anesthesia.
- (8) blood and plasma.
- (9) local professional ambulance services.
- (10) psychiatric and psychological care and treatment.
- (11) vision care, including eyeglasses, contact lenses, eye examinations, hearing examinations, and hearing aids.

Expenses **may not** be reimbursed:

- (1) for undocumented services, such as mileage on a private car.
  - (2) for premiums for current health coverage.
  - (3) for premiums or contributions to outside health plans, including COBRA coverage, individual health policies, Medicare or plans of another employer.
  - (4) until all applicable insurance coverages have been exhausted.
  - (5) for any charge deemed not eligible by the Internal Revenue Service.
- (D) Dependent Care Spending Account.

**Maximum contribution: \$5,000 per calendar year or \$2,500 if married but filing a separate tax return.**

The Dependent Care Spending Account may be used for child and dependent care expenses incurred in order for the employee or spouse to be able to work.

To participate, the employee must be single with eligible dependents or married with eligible dependents and a spouse who works for pay or is a full-time student at least five months during the year. Eligible dependents include:

- (1) a disabled child, spouse or parent who requires care in order for the employee or spouse to work, or
- (2) a dependent under age 13 who requires care in order for the employee or spouse to work.

Dependent care expenses which are eligible for reimbursement under this account include but are not limited to:

- (1) a dependent under age 13 who requires care in order for the employee or spouse to work.

Dependent care expenses which are eligible for reimbursement under this account include.

- (2) child care or dependent care facilities, including day care centers and nurseries.
- (3) housekeeping services in employee's home which include dependent care.
- (4) any other expenses which are deductible under the federal tax credit for child care.

This plan may not be used to pay for care provided by someone in the employee's immediate family.

### Dependent Life Insurance

Dependent life insurance is available for an eligible employee's spouse or dependent. Children between the ages of 14 days and 19 years, and unmarried, dependent full-time students up to age 25 are eligible dependents.

The amount of dependent life insurance chosen for a spouse is limited to 50% of the employee's amount of life insurance. An employee must participate in employee life

insurance to select the dependent life insurance option. If an employee's spouse or eligible dependent dies while covered under dependent life insurance, the employee is the beneficiary for the coverage amount.

Coverage Level  
Spouse/Child

\$10,000/\$5,000

\$5,000/\$2,500

no coverage

## CARRIERS

### Local & Mail Order Pharmacy (traditional Plan and preferred provider plan)

Merck Medco  
P O Box 182050  
Columbus, OH 43218-2050

### Vision Coverage

Vision Service Plan  
P. O. Box 2487  
Columbus, OH 43216-2487

### Long-Term Disability, Employee Life, Dependent Life and Accidental Death & Dismemberment

Liberty Mutual  
12 Federal Street, Suite 310  
Pittsburgh, PA 15212

### Health Maintenance Organizations

Summa Care  
400 West Market St.,  
Akron, Ohio 44309

HomeTown Health  
100 Lillian Gish Blvd.  
Massillon, OH 44647

Kaiser Permanente  
North Pointe Tower, Suite 1200 Lakeside Ave,  
Cleveland, OH 44114-1153

### Short Term Disability

Medical Life Insurance Company  
1220 Huron Rd.  
Cleveland, OH 44115-1700

### Traditional Indemnity Plan & PPO

#### Spending Account Administration

Mutual Medical Services  
P O Box 94601  
Cleveland, OH 44101-4601

### Dental Assistance Plan

MetLife  
P. O. Box 14093  
Lexington, KY 40512-14093