

**SUMMARY ANNUAL REPORT FOR  
STOUGHTON HOSPITAL ASSOCIATION GROUP HEALTH AND WELFARE WRAP PLAN**

This is a summary of the annual report of the STOUGHTON HOSPITAL ASSOCIATION GROUP HEALTH AND WELFARE WRAP PLAN, a health, life insurance, dental, temporary disability and long-term disability plan (Employer Identification Number 39-0832914, Plan Number 510), for the plan year 01/01/2023 through 12/31/2023. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

**Insurance Information**

The plan has insurance contracts with DEAN HEALTH PLAN INC, Quartz Health Benefit Plans Corporation, Delta Dental Of Wisconsin, United of Omaha Life Insurance Company, Mutual of Omaha Insurance Company and UNITED OF OMAHA LIFE INSURANCE COMPANY to pay certain Health, Prescription drug, HMO contract, Dental, Life insurance, Accidental Death and Dismemberment, Temporary disability, Long-term disability, AD&D VOLUNTARY STAND ALONE , Voluntary Long-Term Disability , TERM LIFE-VOLUNTARY claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2023 were \$3,581,033.

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 12/31/2023, the premiums paid under such "experience-rated" contracts were \$197,773 and the total of all benefit claims paid under these experience-rated contracts during the plan year was \$162,721.

**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:

1. 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 office of Michelle Abey , who is a representative of the plan administrator, at 900 RIDGE STREET, STOUGHTON, WI 53589 and phone number, 608-873-2267.

You also have the legally protected right to examine the annual report at the main office of the plan: 900 RIDGE STREET, STOUGHTON, WI 53589, 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](http://www.efast.dol.gov).