**SUMMARY ANNUAL REPORT**

**For MAPFRE U.S.A. CORP. HEALTH AND WELFARE BENEFITS PLAN**

This is a summary of the annual report of the MAPFRE U.S.A. CORP. HEALTH AND

WELFARE BENEFITS PLAN, EIN 04-2599993, Plan No. 530, for period 01/01/2020

through 12/31/2020. The annual report has been filed with the Employee Benefits

Security Administration, U.S. Department of Labor, as required under the Employee

Retirement Income Security Act of 1974 (ERISA).

MAPFRE U.S.A. CORP. has committed itself to pay certain self-funded Short-term

Disability claims incurred under the terms of the plan.

**Insurance Information**

The plan has contracts with HPHC JOINT VENTURE UHG, THE GUARDIAN LIFE

INSURANCE COMPANY OF AMERICA, EYEMED VISION CARE ON BEHALF OF

COMBINED INSURANCE COMPANY OF AMERICA, and HARTFORD LIFE AND

ACCIDENT to pay Medical, Dental, Vision, Life Insurance, Long-term Disability,

Accidental Death and Dismemberment, Critical Illness, Hospital, and Accident claims

incurred under the terms of the plan. The total premiums paid for the plan year

ending 12/31/2020 were $32,261,480.

**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 office

of MAPFRE U.S.A. CORP. at 211 MAIN STREET, WEBSTER, MA, 01570 or by

telephone at 508-943-9000.

You also have the legally protected right to examine the annual report at the main

office of the plan (MAPFRE U.S.A. CORP., 211 MAIN STREET, WEBSTER, MA, 01570) 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 N1513,

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 and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 06/30/2022)