March 23, 2010

[[Contact:26]]

[[Company:25]]

[[Address 1:27]]

[[Address 2:28]]

[[Address 3:29]]

[[City:30]], [[State:31]] [[Zip:32]]

Re: July 1, 2009 Request for Proposal for Morehouse School of Medicine

Dear [[Salutation:40]]:

Please use the information below and the enclosures to provide a quote for:

Company:

Morehouse School of Medicine

Industry:

Colleges & Universities (SIC 82 21)

Headquarters:

Atlanta, GA 30310

Effective Date:

July 1, 2010 Medical

Products: Commission:

Net

Due Date:

Wednesday April 21st, 2010

Morehouse School of Medicine currently offers their employees dual option medical benefits though a United Healthcare self funded arrangement. They would like to look at alternate carriers to the stop-loss portion of their policy to see if there is more of a cost efficient competitor.

The census, plan designs, experience, and current stop loss contract are all included for your review.

• Although we are not doing a formal disclosure at this point, we wanted to provide data on the largest claim.

The claimant for \$416,283 is a baby that was born premature in August 2009 and has only \$2,000 of those claims occurred after November 2009.

The current monthly contributions (medical, dental and vision combined) are as follows:

	Low	High
Employee	\$45.00	\$50.00
Employee + Souse	\$180.00	\$230.00
Employee + Child(ren)	\$140.00	\$185.00
Family	\$290.00	\$375.00

Please provide a quote similar to that of the inforce or as close as your product will allow.

If you have any questions or need any further information, please feel free to call me at (212) 603-0322 or Kevin Lynch at (212) 603-0329. Thank you.

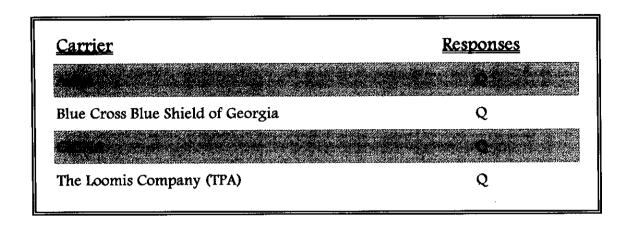
Sincerely,

Kurt Knight

Vice President, Group Financial Services

Enclosure

Morehouse School of Medicine May 4, 2010 Group Medical Review - Responses from Carriers



Q ~ Quoted and included in this analysis

NC ~ Quoted but not financially competitive and not included in this analysis

DTQ ~ Declined to quote

NA ~ Does not underwrite particular line of coverage

Pending ~ Quote not completed at time of presentation

Proposed Effective Date:	July 1, 2010				
Reinsurer	Inforce	Renewal	This	Alternatives	(95.300) (6.430) January (204)
Specific Stop Loss Contract Basis	Paid w/ Terminal Pre-Paid	Paid w/ Terminal Pre-Paid	24/12	24/12	24/12
Deductible Reimbursement Maximum Covered Benefits	\$135,000 \$2,000,000 Lifetime Medical & Rx	\$135,000 \$2,000,000 Lifetime Medical <u>& Rx</u>	\$135,000 \$1,865,000 Lifetime Medical <u>& Rx</u>	\$135,000 \$1,865,000 Lifetime Medical <u>& Rx</u>	\$135,000 \$1,865,000 Lifetime Medical & Rx
Broker Commission Claimant Provisions ("Lasers") Premium Rates # of EE's	15% None	15% Pending Review	15% Pending Review	15% Pending Review	15% Pending Review
Single 441 Family 428	\$58.29 \$58.29	\$70.94 \$70.94	\$33.47 \$100.62	\$56.07 \$118.32	\$63.97 \$63.97
Total Specific Premium	\$607,848	\$ 739,762	\$ 693 ,908	\$904,405	\$667,079
Contract Basis Claim Risk Corridor Reimbursement Maximum Covered Benefits Broker Commission Premium Rates # of EE's	Paid w/ Terminal Pre-Paid 25% \$1,000,000 Medical & Rx 15%	Paid w/ Terminal Pre-Paid 25% \$1,000,000 Medical & Rx 15%	24/12 25% \$1,000,000 Medical & Rx 15%	24/12 25% \$1,000,000 Medical & Rx 15%	24/12 25% \$1,000,000 Medical & Rx 15%
All Employees 869	\$3.79	\$4.29	\$3.84	\$5.84	\$3.42
Total Aggregate Premium	\$39,522	\$44,736	\$40,044	\$60,850	\$35,664
Total Annual Stop Loss Premium	\$647,370	\$784,498	\$733,951	\$965,255	\$702,743
	n Cost Change (vs. Inforce / Renewal) um % Change (vs. Inforce / Renewal)		\$86,581 / (\$50,547) 13.4% / -6.4%	\$317,885 / \$180,787 48.1% / 23.0%	\$86,375 / (\$81,786) 8.6% / 10.4%
Aggregate Factors Claim Factors # of EE's					
Single 441 Family 428	\$631.81 \$631.81	\$855.34 \$855,34	\$598.92 \$1,227.11	\$500.49 \$1,301,27	\$855.28 \$855.28
Aggregate Claim Liability	\$6,588,515	\$8,919,486	\$9,471,922	\$9,331,916	\$8,918,860
	ability Change (vs. Inforce / Renewal) ility % Change (vs. Inforce / Renewal)		\$2,883,407 / \$552,436 43.8% / 6.2%	\$2,743,401 / \$412,430 41.6% / 4.6%	\$2,330,345 / (\$626) 38.4% / 0.0%
Additional Stop Loss Caveats			United Healthcare requires an additional \$1.00 PEPM fee for independent stop loss administration (about \$10,500 annually).	United Healthcare requires an additional \$1.00 FEPM fee for independent stop loss administration (about \$10,500 annually).	United Healthcare requires an additional \$1.00 FEPM fee for independent stop loss administration (about \$10,500 annually).

The renewal and all proposals are pending review of disclosure information with paid claims through the end of the year and may adjust their proposals based on their final interpretation of the information.

* ING and Vista provided uncompetitive proposals.

T&H BENEFITS, LLC Page 1