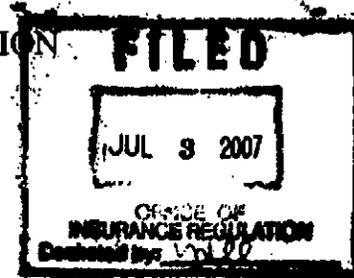




OFFICE OF INSURANCE REGULATION

KEVIN M. McCARTY
COMMISSIONER



IN THE MATTER OF:

TRUSTMARK INSURANCE COMPANY

CASE NO.: 85067-06-CO

Life and Health Market Investigation

CONSENT ORDER

THIS CAUSE came on for consideration as the result of an agreement between **TRUSTMARK INSURANCE COMPANY** (hereinafter referred to as "TRUSTMARK") and the **OFFICE OF INSURANCE REGULATION** (hereinafter referred to as the "OFFICE"). Following a complete review of the entire record, and upon consideration thereof, and being otherwise fully advised in the premises, the **OFFICE** hereby finds as follows:

1. The **OFFICE** has jurisdiction over the subject matter of, and parties to, this proceeding.
2. **TRUSTMARK** is a foreign life and health insurer authorized to transact insurance business in Florida, and is subject to the jurisdiction and regulation of the **OFFICE** pursuant to the Florida Insurance Code.
3. The **OFFICE** has conducted an investigation of **TRUSTMARK** pursuant to Section 624.318, Florida Statutes. As a result of such investigation, the **OFFICE** has determined that **TRUSTMARK** committed the following violation of the Florida Statutes:

a. Section 627.6699(5)(c)2., Florida Statutes – Failure to offer, in addition to basic and standard small employer health benefit plans, a high deductible plan that meets the requirements of a health savings account or health reimbursement account (as defined by federal law) to eligible small employers.

4. The **OFFICE** and **TRUSTMARK** expressly waive a hearing in this matter, the making of Findings of Fact and Conclusions of Law by the **OFFICE**, and all further and/or other proceedings to which the parties may be entitled, either by law or by rules of the **OFFICE**. **TRUSTMARK** hereby knowingly and voluntarily waives all rights to challenge or to contest this Order, in any forum now or in the future available to it, including the right to any administrative proceeding, circuit or federal court action, or any appeal.

5. **TRUSTMARK** agrees that failure to adhere to one or more of the terms and conditions of this Order shall constitute a violation of a lawful order of the **OFFICE**, and shall subject **TRUSTMARK** to such administrative action as the **OFFICE** may deem appropriate.

6. **TRUSTMARK** agrees that upon the execution of this Consent Order, it shall be subject to the following terms and conditions:

a. **TRUSTMARK** shall pay a penalty of Ten Thousand and No/100 Dollars (\$10,000.00) and administrative costs of Three Thousand and No/100 Dollars (\$3,000.00) on or before the thirtieth (30th) day after which this Consent Order is executed.

b. **TRUSTMARK** is hereby placed on notice of the requirements of the above-referenced sections of law and agrees that any future violations of these sections or the statutes named therein by **TRUSTMARK** may be deemed willful, subjecting **TRUSTMARK** to the appropriate penalties associated therewith.

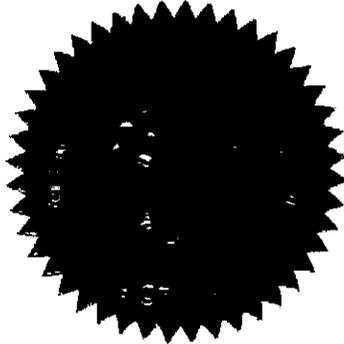
c. **TRUSTMARK** has provided written notification to the **OFFICE** that it intends to exit the small group market in Florida. **TRUSTMARK** shall honor all of its obligations and liabilities which have arisen or may arise from its small group operations in this State.

7. Except as noted above, each party to this action shall bear its own costs and attorney's fees.

THEREFORE, the agreement between **TRUSTMARK** and the **OFFICE**, the terms and conditions of which are set forth above, is approved.

FURTHER, all terms and conditions above are hereby **ORDERED**.

DONE AND ORDERED this 3rd day of July, 2007.



~~KEVIN M. McCARTY~~
Commissioner
Office of Insurance Regulation

By execution hereof TRUSTMARK INSURANCE COMPANY consents to entry of this Consent Order, agrees without reservation to all of the above terms and conditions, and shall be bound by all provisions herein. The undersigned represents, pursuant to Section 624.310, Florida Statutes, that he/she has the authority to bind TRUSTMARK INSURANCE COMPANY to the terms and conditions of this Consent Order.

TRUSTMARK INSURANCE COMPANY

Corporate Seal

By: [Signature]
Frank Lettera
Print or Type Name
Title: Vice President
Date: 6/19/07

STATE OF ILLINOIS

COUNTY OF Lake

The foregoing instrument was acknowledged before me this 19 day of June 2007,

by Frank Lettera as Vice President
(Name of person) (Type of authority.... e.g. officer, trustee, attorney in fact)

for Trustmark Insurance Co.
(Company name)

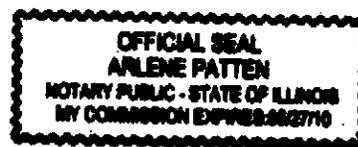
Personally Known or Produced Identification _____
Type of Identification Produced _____

[Signature]
(Signature of the Notary)

Arlene Patten
(Print, Type or Stamp Commissioned Name of Notary)

My Commission Expires: 6-27-10

[NOTARIAL SEAL]



COPIES FURNISHED TO:

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