



<Date>

<Broker Name>

<Street Address>

<City, State, Zip>

Re: Notice of Termination of Participating Agent Agreement

Dear <Broker Name>,

The Broker Services Department of Coventry Health Care, Inc., has received a complaint regarding your activities in selling Coventry Medicare products. After a thorough investigation of this matter, Coventry has determined that you have materially violated CMS Marketing Guidelines. Consequently, in accordance with Section 7.3 of your Master Agent/Broker Agreement with Coventry Health and Life Insurance Company, we hereby provide notice of the immediate termination of your agreement to sell Coventry Medicare plans. The effective date of the termination is the date of this letter.

You are expected to immediately cease selling all Coventry Medicare plans. In addition, in accordance with the terms of the agreement, you will no longer receive commissions for any previously sold Coventry Medicare plans.

Sincerely,
Broker Services Department
Coventry Health Care, Inc.

cc: State DOI
DP
FMO
Immediate Upline
Medicare Distribution
Compliance
Legal
File