Georgia Health Coverage

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Items listed below are needed for a Market Analysis for your company health plan:

- **Census Information**
- **Group Medical Questionnaire**
- **Current Plan Benefit Booklet if available**
- **Current Premium Invoice if available**
- **Renewal Rate Information if available**
- **Decription Ideal - (Client needs statement)**

Please FAX back to 404.795.0486 or mail in the envelope provided.