



# PROHEALTH CARE

2520160350070

December 22, 2015

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

U.S. Department of Labor  
Employee Benefits Security Administration  
Top Hat Plan Exemption  
200 Constitution Avenue, NW, N-1513  
Washington, DC 20210

Re: Statement Pursuant to DOL Regulation §2520.104-23

Dear Sir or Madam:

In accordance with Department of Labor Regulation Section 2520.104-23, ProHealth Care, Inc. (“ProHealth”) hereby files the following statement:

<u>Name and Address:</u>	ProHealth Care, Inc. N17 W24100 Riverwood Dr. Suite 130 Waukesha, WI 53188
<u>Employer Identification Number:</u>	39-1486873

Declaration: ProHealth established the ProHealth Care, Inc. Executive Severance Benefit Plan (the “Plan”), effective as of January 1, 2014, for the purpose of providing severance pay and benefits to executive employees. The Plan is an unfunded nonqualified deferred compensation plan maintained for a select group of management or highly compensated employees. As of the date of this letter, ten individuals are eligible to participate in the Plan.

Please note that ProHealth also maintains the following unfunded nonqualified deferred compensation plans for a select group of management or highly compensated employees:

- Waukesha Health System, Inc. Group Deferred Compensation Plan, under which four individuals are eligible to participate;
- ProHealth Care Medical Associates, Inc. 457(b) Plan for Providers, under which 165 individuals are eligible to participate; and
- ProHealth Care, Inc. 457(b) Plan, under which 28 individuals are eligible to participate.

Each of the foregoing plans is maintained in accordance with a written plan document that will be provided to the Secretary of the Department of Labor upon request.

Sincerely,

Nicole Berlowski  
Manager, Total Rewards  
ProHealth Care, Inc.



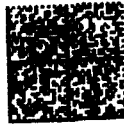
PROHEALTH CARE

N17 W24100  
Waukesha, WI

**CERTIFIED MAIL**



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