Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2010

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2010 or fiscal plan year beginning 10/07/2010 and ending 12/31/2010

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [X] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
MEDIMPACT HEALTHCARE SYSTEMS, INC. 401(K) SALARY SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 06/01/1995

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
MEDIMPACT HEALTHCARE SYSTEMS, INC.

10181 SCRIPPS GATEWAY CT
SAN DIEGO, CA 92131

10181 SCRIPPS GATEWAY CT
SAN DIEGO, CA 92131

2b Employer Identification Number (EIN) 33-0567651

2c Sponsor's telephone number 858-566-2727

2d Business code (see instructions) 541990

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2011	JENNIFER WOODS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
MEDIMPACT HEALTHCARE SYSTEMS, INC.

10181 SCRIPPS GATEWAY CT
SAN DIEGO, CA 92131

3b Administrator's EIN
33-0567651

3c Administrator's telephone number
858-566-2727

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	995
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	774
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	361
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	1135
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	3
f	Total. Add lines **6d** and **6e**	**6f**	1138
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	1048
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	46
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
2E 2F 2G 2J 2K 2T 3D 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)

(1)	X	Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)	X	Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

(1)	X	**R** (Retirement Plan Information)
(2)		**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
(3)		**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1)	X		**H** (Financial Information)
(2)			**I** (Financial Information – Small Plan)
(3)	X	1	**A** (Insurance Information)
(4)	X		**C** (Service Provider Information)
(5)	X		**D** (DFE/Participating Plan Information)
(6)			**G** (Financial Transaction Schedules)

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2010

This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 10/07/2010 and ending 12/31/2010

A Name of plan
MEDIMPACT HEALTHCARE SYSTEMS, INC. 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500.
MEDIMPACT HEALTHCARE SYSTEMS, INC.

D Employer Identification Number (EIN)
33-0567651

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
NATIONWIDE LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
31-4156830	66869	GAP-BO-WM06	1132	01/01/2010	12/31/2010

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in item 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
SAGEPOINT FINANCIAL INC
121 N BUCHANAN ST
BREMEN, GA 30110

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3156	789		

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
ROBERT GORELICK
SUITE 100 1971 E 4TH STREET
SANTA ANA, CA 92705

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	0		

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	0
5	Current value of plan's interest under this contract in separate accounts at year end	5	0

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☒ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			7b	1313996
c	Additions: (1) Contributions deposited during the year	7c(1)	273142		
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)	4615		
	(4) Transferred from separate account	7c(4)	40997		
	(5) Other (specify below)	7c(5)	122173		
	▶ LOAN REPAYMENT - PRINCIPAL, TRANSFER FROM OUTSIDE NW-PRINCIPAL				
	(6) Total additions			7c(6)	440927
d	Total of balance and additions (add **b** and **c(6)**)			7d	1754923
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	81379		
	(2) Administration charge made by carrier	7e(2)	1169		
	(3) Transferred to separate account	7e(3)	1656708		
	(4) Other (specify below)	7e(4)	15667		
	▶ FORFEITURE, LOAN WITHDRAWAL, REALLOCATION FROM FORT ACCT				
	(5) Total deductions			7e(5)	1754923
f	Balance at the end of the current year (subtract **e(5)** from **d**)			7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance
e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug
i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	0
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	0
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in **c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.			**10b**	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☐ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2010** **This Form is Open to Public Inspection.**

For calendar plan year 2010 or fiscal plan year beginning 10/07/2010 and ending 12/31/2010

A Name of plan
MEDIMPACT HEALTHCARE SYSTEMS, INC. 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
MEDIMPACT HEALTHCARE SYSTEMS, INC.

D Employer Identification Number (EIN)
33-0567651

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

FID.INV.INST.OPS.CO.

04-2647786

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64 37 65 60	RECORDKEEPER	1863	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ABF LG CAP VAL INV - BOSTON FINANCI 04-2526037	0.40%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AF AMER MUTUAL R4 - AMERICAN FUNDS 95-2566717	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AF EUROPAC GRTH R4 - AMERICAN FUNDS 95-2566717	0.35%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ALLNZ RCM TECHN INST - BOSTON FINAN 04-2526037	0.10%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
COL SM CAP IDX Z - COLUMBIA MGT INV P.O. BOX 8081 BOSTON, MA 02266	0.10%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
FBR SM CAP FINL INV - JPMORGAN CHAS 13-3379014	0.40%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
GS SM CAP VALUE INST - GOLDMAN SAC 13-5108880	0.10%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS FORTY S - JANUS SERVICES LLC 43-1804048	0.50%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS OVERSEAS T - JANUS SERVICES L 43-1804048	0.34%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JPM MIDCAP VALUE IS - BOSTON FINANC 04-2526037	0.15%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
M&N PROBLND CONSERV - MANNING NAP 16-0995736	0.40%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
M N PROBLND EXTENDED - MANNING & NA 16-0995736	0.40%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
M N PROBLND MAXIMUM - MANNING & NAP 16-0995736	0.40%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
M N PROBLND MODERATE - MANNING & NA 16-0995736	0.40%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MFS VALUE R3 - MFS SERVICE CENTER I 04-2865649	0.50%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
NUVEEN REAL ESTATE A - US BANCORP F 39-0281260	0.40%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OAKMARK EQ INC I - BOSTON FINANCI 04-2526037	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OPPHMR DEV MKTS Y - OPPENHEIMERFUND P.O. BOX 5270 DENVER, CO 80217	0.20%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PRU J MID CAP GR A - PRUDENTIAL MUT 22-3703799	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TMPL GLOBAL BOND A - FRANKLIN TEMPL 94-3167260	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TOCQUEVILLE GOLD - US BANCORP FUND 39-0281260	0.40%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TRP NEW HORIZONS - T ROWE PRICE INV 52-1184650	0.15%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III **Termination Information on Accountants and Enrolled Actuaries (see instructions)**
(complete as many entries as needed)

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN;
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN;
c	Position:	
d	Address:	**e** Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2010

This Form is Open to Public Inspection.

For calendar plan year 2010 or fiscal plan year beginning 10/07/2010 and ending 12/31/2010

A Name of plan
MEDIMPACT HEALTHCARE SYSTEMS, INC. 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
MEDIMPACT HEALTHCARE SYSTEMS, INC.

D Employer Identification Number (EIN)
33-0567651

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: FID MGD INC PORT

b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
04-3022712-024	C	2126912

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

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b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2010

This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 10/07/2010 and ending 12/31/2010

A Name of plan
MEDIMPACT HEALTHCARE SYSTEMS, INC. 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
MEDIMPACT HEALTHCARE SYSTEMS, INC.

D Employer Identification Number (EIN)
33-0567651

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2059695	1805422
(2) Participant contributions	1b(2)	119458	138660
(3) Other	1b(3)	5562	6402
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	65
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	457334	553729
(9) Value of interest in common/collective trusts	1c(9)	0	2126912
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	29657921	37670648
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	1313996	0
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	33613966	42301838
Liabilities			
g Benefit claims payable	1g	0	31332
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	0	16169
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	47501
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	33613966	42254337

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	1805422	
(B) Participants	2a(1)(B)	5200399	
(C) Others (including rollovers)	2a(1)(C)	310829	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		7316650
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	24838	
(F) Other	2b(1)(F)	4615	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		29453
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	770986	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		770986
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		24307
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		3594980
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		11736376
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2910967	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		2910967
f Corrective distributions (see instructions)	2f		16169
g Certain deemed distributions of participant loans (see instructions)	2g		65560
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	103309	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		103309
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		3096005
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		8640371
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [ ] Unqualified (2) [ ] Qualified (3) [X] Disclaimer (4) [ ] Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: HUTCHINSON AND BLOODGOOD, LLP (2) EIN: 95-0858589

d The opinion of an independent qualified public accountant is **not attached** because:

(1) [ ] This form is filed for a CCT, PSA, or MTIA. (2) [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		5000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year ☐ **Yes** ☒ **No** **Amount:**

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2010

This Form is Open to Public Inspection.

For calendar plan year 2010 or fiscal plan year beginning 10/07/2010 and ending 12/31/2010

A Name of plan
MEDIMPACT HEALTHCARE SYSTEMS, INC. 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
MEDIMPACT HEALTHCARE SYSTEMS, INC.

D Employer Identification Number (EIN)
33-0567651

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 04-6568107 31-1592130

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan

Financial Statements With Supplemental Information

Years Ended December 31, 2010 and 2009

With Independent Auditors' Report

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan
Years Ended December 31, 2010 and 2009
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HUTCHINSON and BLOODGOOD LLP
CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

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Independent Auditors' Report

To the Plan Administrator of
MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan
San Diego, California

We were engaged to audit the statements of net assets available for benefits of MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan ("the Plan") as of December 31, 2010 and 2009 and the related statements of changes in net assets available for benefits for the years then ended, and the supplemental schedule as of December 31, 2010, as listed in the accompanying table of contents. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by Section 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified to by Nationwide Trust Company, the Custodian of the Plan from January 1, 2009 through October 6, 2010 and Fidelity Management Trust Company, the Trustee of the Plan from October 7, 2010 through December 31, 2010, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the Plan administrator that the Custodian or the Trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the Custodian or Trustee as of and for the years ended December 31, 2010 and 2009, that the information provided to the Plan administrator by the Custodian or Trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedules taken as a whole. The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the Custodian or Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Hutchinson and Bloodgood LLP

October 12, 2011
San Diego, California

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan
Statements of Net Assets Available for Benefits

December 31,	**2010**	2009
Assets		
Investments, at fair value:		
Mutual funds	**$ 37,670,713**	$ 29,657,921
Collective investment trust	**2,126,912**	-
Guaranteed investment	**-**	1,313,996
Total investments	**39,797,625**	30,971,917
Receivables:		
Employer contributions receivable	**1,805,422**	2,059,695
Participant contributions receivable	**145,062**	125,020
Notes receivable from participants	**522,397**	457,334
Total receivables	**2,472,881**	2,642,049
Total assets	**42,270,506**	33,613,966
Liabilities		
Excess contributions	**16,765**	-
Total liabilities	**16,765**	-
Net assets available for benefits at fair value	**42,253,741**	33,613,966
Adjustment from fair value to contract value for fully benefit responsive investment contract	**(17,294)**	-
Net assets available for benefits	**$ 42,236,447**	$ 33,613,966

See Independent Auditors' Report and notes to the financial statements

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan
Statements of Changes in Net Assets Available for Benefits

Years Ended December 31,	**2010**	2009
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	**$ 3,606,608**	$ 6,185,162
Dividend and interest income	**770,986**	454,075
Net investment income	**4,377,594**	6,639,237
Interest income on notes receivable from participants	**24,838**	22,101
Contributions:		
Participant contributions	**5,200,399**	5,033,253
Employer contributions	**1,805,422**	2,059,695
Rollover contributions	**310,829**	210,112
Total contributions	**7,316,650**	7,303,060
Total additions	**11,719,082**	13,964,398
Deductions from net assets attributed to:		
Benefits paid to participants	**2,871,024**	672,530
Deemed distributions of participant loans	**105,503**	7,554
Administrative expenses	**103,309**	95,549
Corrective distributions	**16,765**	-
Total deductions	**3,096,601**	775,633
Net increase	**8,622,481**	13,188,765
Net assets available for plan benefits:		
Beginning of year	**33,613,966**	20,425,201
End of year	**$ 42,236,447**	$ 33,613,966

See Independent Auditors' Report and notes to the financial statements

Note 1. Description of Plan

The following description of the MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan (the Plan) is provided for general information purposes only. More complete information regarding the Plan's provisions may be found in the plan document.

General

The Plan is a defined contribution plan covering substantially all employees of MedImpact Healthcare Systems, Inc. (the Company). Effective October 7, 2010, employees are eligible to participate in the Plan after two months of service and are age twenty-one or older. Prior to October 7, 2010, employees were eligible after completing at least one hour of service during three consecutive months and were age twenty-one or older.

During 2010, the Plan was amended to allow employees of related companies to participate in the Plan under the same eligibility requirements as previously mentioned. The following are the related entities and the effective date of adopting the Plan.

Catfish Ventures, LLC	January 1, 2010
Shared Solutions, LLC	January 1, 2010
Sanctuary Retreat Properties, LLC	January 1, 2010
MyTeleHealth Solutions, LLC	January 1, 2010
Shared Data Services, LLC	April 27, 2010
eHealth Strategy Group, LLC	July 13, 2010

The Plan provides participants with a salary deferral option pursuant to Section 401(k) of the Internal Revenue Code. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Eligible employees may elect to defer a percentage of their pre-tax annual compensation as defined in the Plan. Participants may also make contributions to the Plan on an after-tax basis by designating deferrals as Roth deferrals. The Plan includes an automatic enrollment provision whereby, eligible employees will automatically have 3% of their compensation withheld as an employee contribution unless they complete a salary reduction agreement and elect a different percentage or elect not to participate at all. The maximum employee contribution permitted by the Internal Revenue Service for calendar year 2010 and 2009 was $16,500. However, participants who had attained age 50 by year-end could also make catch-up contributions of $5,500 for calendar year 2010 and 2009.

Note 1. Description of Plan (Continued)

Contributions (continued)

The Company may make a discretionary matching contribution that equals a percentage of participants' 401(k) salary deferrals. For 2010 and 2009, the Company match was 100% of the participants' elective contributions, up to a maximum of 3% of the participant's eligible compensation. Participants who are employed on December 31 and who complete at least 1,000 hours of service during the plan year will receive an allocation of the Company's matching contribution.

The Company may make a qualified non-elective contribution (QNEC) on behalf of non-highly compensated employees, to the extent necessary to satisfy the non-discrimination tests. For the years ended December 31, 2010 and 2009, the Company's qualified non-elective contribution was $0.

Participant Accounts

Each participant's interest in the Plan is maintained in three sub-accounts within one main account. These sub-accounts are: an employee deferral for the participant's own contributions including qualified non-elective contributions (QNEC), an employer match for the Company's matching contributions, and rollover contributions from an employee's previous plan(s). The sub-accounts are credited with the appropriate contributions and any earnings or losses resulting from the investment of those contributions are credited on the valuation date. Participants may select investment accounts in which contributions made by them or on their behalf by the Employer will be invested.

Vesting

Participants are 100% vested in their salary reduction and qualified non-elective contributions account plus actual earnings thereon. Vesting in the Employer's discretionary matching and other non-elective contributions portion of their account plus actual earnings thereon is based on years of continuous service. Years of service for vesting purposes shall be based upon the completion of 1,000 hours of service within the Plan year. Participant vesting is as follows:

Years of Service	Vested Percentage
1 but less than 2	25%
2 but less than 3	50%
3 but less than 4	75%
4 or more	100%

Notwithstanding the above, if a participant (1) attains the age of 65, (2) dies or (3) terminates employment by reason of permanent disability, the employer match amounts become 100% vested without regard to years of service.

Note 1. Description of Plan (Continued)

Investment Options

Upon enrollment in the Plan, a participant may direct contributions to any combination of the following investment options:

- **Collective Investment Trust** - Investment contracts issued by insurance companies and other financial institutions seeking to preserve the principal while earning interest income.

- **Mutual Funds**
  - **International Funds** - Investments are in equity securities with non-U.S. Companies seeking long term growth of capital.
  - **Balanced Funds** - Investments are in a diversified portfolio of equity and fixed-income securities to provide high current income and preserve capital.
  - **Asset Allocation Funds** - Investments primarily in common stocks and fixed income securities with emphasis on growth and preservation of capital.
  - **Domestic Equity Funds** - Investments in equity securities of U.S. Companies seeking long term capital growth.
  - **Growth Funds** - Investments are in equity securities with U.S. Companies seeking current income and capital appreciation of large capitalization companies.
  - **Bond Funds** - Investments are in all types of bonds with an average portfolio duration of three to six years seeking to provide maximum total return, and preservation of capital.
  - **Index Funds** - Investments are in common stock of companies included in the S&P 500 Index or the Dow Jones Industrial Average seeking long term capital growth.
  - **Mid-Cap Funds** - Investments are in equity securities with U.S. Companies seeking current income and capital appreciation of medium capitalization companies.
  - **Aggressive Funds** - Investments are in equity securities with U.S. Companies seeking current income and capital appreciation of small capitalization companies.
  - **Income Funds** - Investments primarily in debt securities, including lower-quality debt seeking to provide a high level of current income and capital appreciation.
  - **Specialty Funds** - Investments are in debt and equity securities tailored to a specific industry designated by the fund.
  - **Lifecycle Funds** - Investments are in common stocks and fixed income securities with focus on maturities of 7 to 20 years seeking growth of capital.

Note 1. Description of Plan (Continued)

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Forfeitures

Participants who are not 100% vested will forfeit the nonvested portion of the Employer discretionary matching and non-elective contributions upon termination of employment. On each annual valuation date, any portion of the Forfeiture Account which has not been used to pay administrative expenses of the Plan will be used as follows: (a) Forfeitures which are attributable to matching contributions will first be used to reduce any qualified matching contributions and then to reduce any matching contributions for the current plan year or a future plan year; (b) Forfeitures attributable to non-elective contributions will first be used to reduce any qualified non-elective contributions and then to reduce any non-elective contributions for the current plan year or a future plan year.

Forfeitures reserved and applied against the employer's matching contributions receivable at December 31, 2010 and 2009 amounted to $78,663 and $45,475, respectively. The remaining forfeiture balance was $24,426 and $19,596 at December 31, 2010 and 2009, respectively.

Payments of Benefits

Upon termination of service, if the participant's vested account does not exceed $1,000, distribution shall be made in a lump sum. If the participant's vested account is greater than $1,000 but less than $5,000, a participant may elect to receive a lump sum by submitting a request for payment. If the Company does not receive a request for payment, the participant's account will automatically be rolled over to an individual retirement account (IRA) selected by the Company. If the participant's vested account exceeds $5,000, the participant may elect to defer the receipt of payments according to Plan provisions.

Pre-retirement distributions are allowed upon experiencing a financial hardship as defined by the Internal Revenue Code. Such withdrawals are subject to applicable excise and income taxes, and may only be made with the approval of the Plan administrator.

Excess Contributions

The Plan is required to return contributions received during the plan year in excess of the Internal Revenue Code ("IRC") limits and to satisfy the nondiscrimination provisions of the Plan.

Note 1. Description of Plan (Continued)

Administrative Expenses

The Plan incurs certain expenses including charges associated with distribution and loan processing, investment management and advisory fees and other contract administration fees. In addition, the Company incurs certain expenses in administering the Plan, which are not passed on as expenses of the Plan.

Note 2. Summary of Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Payments of Benefits

Benefits are recorded when paid.

Accounting for Fully Benefit-Responsive Investments

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Statements of Net Assets Available for Benefits presents the fair value of the investment as well as the adjustment for the investment from fair value to contract value relating to the investment contracts. Adjustments as of December 31, 2010 and 2009 are $(17,294) and $0, respectively. The Statements of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value.

Note 2. Summary of Accounting Policies (Continued)

Investment Valuation and Income Recognition (continued)

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation in the fair value of investments consists of the net realized gains or losses and the net unrealized appreciation or depreciation on investments.

New Accounting Standard Adopted

A new accounting standard was effective for the Plan for annual periods ending after December 15, 2010. It requires that participant loans be classified as notes receivable and measured at the unpaid principal balance plus accrued but unpaid interest. Previously, these participant loans were classified as Plan investments and were subject to fair value measurement and disclosure requirements. Adoption of the new standard eliminated the need to calculate and disclose fair values for these loans. The prior years financials have been revised to conform to the current year presentation.

Reclassifications and Changes in Presentation

Certain accounts in the prior year financial statements have been reclassified for comparative purposes to conform to the presentation in the current year financial statements.

Subsequent Events Evaluation

The Company's management has evaluated subsequent events through October 12, 2011, the date of issuance of the financial statements.

Effective February 22, 2011, the Plan was amended to allow employees of related Companies, Herae, LLC and MedImpact International, LLC to participate in the MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan.

Note 3. Information Prepared and Certified by the Custodian or Trustee

The Custodian and the Trustee of the Plan certified certain information and that information was not audited in accordance with the Plan administrator's instructions and as permitted by Section 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Information included in the accompanying financial statements and supplementary schedule, certified to by the Custodian or Trustee, consists of the following:

December 31,	**2010**	2009
Investments at fair value:		
Mutual funds	**$ 37,670,713**	$ 29,657,921
Collective investment trust	**2,126,912**	-
Guaranteed investment	**-**	1,313,996
Investment income	**4,377,594**	6,639,237

Note 4. Investments

The individual investments that represent 5% or more of the Plan's net assets at fair value value are as follows:

December 31,	**2010**	2009
Mutual Funds:		
Oakmark Equity and Income Fund	**$ 5,670,945**	n/a
Oppenheimer Developing Markets Fund Y	**4,251,316**	n/a
Fidelity Contrafund	**3,508,338**	n/a
Manning & Napier Fund, Inc. Pro-Blend Moderate Term	**3,081,916**	n/a
PIMCO Total Return Fund	**3,012,033**	n/a
Janus Forty Fund	**2,604,302**	n/a
American Funds EuroPacific Growth Fund	**2,295,390**	n/a
Spartan 500 Index Fund	**2,047,972**	n/a
Growth Fund of America	n/a	$ 2,822,332
Oppenheimer Developing Markets Fund A	n/a	2,669,848
Nationwide Inv Destination Moderate Fund	n/a	2,018,846
Janus Twenty Fund	n/a	1,908,565
AdvisorOne Amerigo Fund N	n/a	1,892,120
Gartmore S&P 500 Index	n/a	1,835,176
Collective Investment Trust	**$ 2,126,912**	n/a

Note 4. Investments (Continued)

The Plan provides for various investment options in mutual funds and other securities. Investment securities are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in those factors in the near term would materially affect participants' account balances and the amount reported in the statements of net assets available for benefits and the statement of changes in net assets available for benefits.

During the years ended December 31, 2010 and 2009, the Plan's investments (including realized gains and losses on investments that were both bought and sold during the year) appreciated in value by $3,606,608 and by $6,185,162, respectively. A summary of the total net appreciation by investment category is as follows:

Years ended December 31,	**2010**	2009
Investments at fair value as determined by quoted market prices:		
Mutual Funds	**$ 3,594,980**	$ 6,179,337
Investments at estimated fair value:		
Collective investment trust	**7,013**	-
Guaranteed investment	**4,615**	5,825
Net change in fair value	**$ 3,606,608**	$ 6,185,162

Note 5. Fair Value Measurements

The fair value measurement topic of the Financial Accounting Standards Board (FASB) Accounting Standards Codification establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described below:

- Level 1. Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

- Level 2. Inputs to the valuation methodology include: quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability

- Level 3. Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Note 5. Fair Value Measurements (Continued)

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2010 and 2009.

- Mutual funds are valued at quoted market prices which represent the net asset value of shares held by the Plan at year end.

- The Indexed Fixed Contract ("the Guaranteed Investment") is recorded at fair value which equals contract value. The fund is fully benefit responsive, therefore, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the Fund. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. There are no reserves against the Fund value for credit risk of the Fund issuer or otherwise.

- The collective investment trust fund is valued at the net asset value of units held by the plan and is based on the market value of the underlying investments comprising the fund. The underlying investments include cash equivalents and synthetic investment contracts comprised of both underlying investment and contractual components which have observable level 1 and level 2 pricing inputs, including quoted prices for similar assets in active or non-active markets

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan Administrator believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Note 5. Fair Value Measurements (Continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2010 and 2009:

	Assets at fair value as of December 31, 2010			
	Level 1	Level 2	Level 3	Total
Mutual funds				
International growth	$ 6,810,316	$ -	$ -	$ 6,810,316
Balanced	5,741,402	-	-	5,741,402
Asset allocation	4,683,247	-	-	4,683,247
Domestic equity	4,638,267	-	-	4,638,267
Capital growth	4,250,944	-	-	4,250,944
Bonds	3,012,033	-	-	3,012,033
Index	2,360,999	-	-	2,360,999
Mid-cap value	1,916,548	-	-	1,916,548
Aggressive growth	1,497,242	-	-	1,497,242
Income appreciation	1,253,910	-	-	1,253,910
Specialty	847,910	-	-	847,910
Lifecycle	657,895	-	-	657,895
Collective investment trust	-	2,126,912	-	2,126,912
	$ 37,670,713	$ 2,126,912	$ -	$ 39,797,625

Note 5. Fair Value Measurements (Continued)

	Assets at fair value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Mutual funds				
International growth	$ 5,481,632	$ -	$ -	$ 5,481,632
Balanced	592,052	-	-	592,052
Asset allocation	3,761,433	-	-	3,761,433
Domestic equity	3,758,378	-	-	3,758,378
Capital growth	6,112,469	-	-	6,112,469
Bonds	2,106,660	-	-	2,106,660
Index	1,878,720	-	-	1,878,720
Mid-cap value	1,560,301	-	-	1,560,301
Aggressive growth	868,754	-	-	868,754
Income appreciation	1,222,018	-	-	1,222,018
Specialty	988,803	-	-	988,803
Lifecycle	529,000	-	-	529,000
Other	797,701	-	-	797,701
Guaranteed investment	-	-	1,313,996	1,313,996
	$ 29,657,921	$ -	$ 1,313,996	$ 30,971,917

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the years ended December 31, 2010 and 2009:

	Guaranteed investment	
December 31	**2010**	2009
Balance, beginning of year	**$ 1,313,996**	$ 1,113,748
Realized gains	**4,615**	5,825
Purchases, sales, issuances and settlements (net)	**(1,318,611)**	194,423
Balance, end of year	**$ -**	1,313,996

Note 6. Investment Contract with Insurance Company

During 2010 and 2009, the Plan participated in an unallocated insurance contract with Nationwide Life Insurance and Annuity Company by investing in the Nationwide Indexed Fixed Contract. As discussed in Note 2, the Indexed Fixed Contract is included in the statements of net assets available for benefits at contract value which equals fair value.

The issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan. The crediting interest rate is based upon the three-year Treasury Note yield. There is no minimum interest crediting rate; however, in no event is the crediting rate less than 0%. Such interest rates are reviewed on a quarterly basis for resetting. The crediting interest rate is most impacted by the yield on the three-year Treasury Note index changes.

The average yield on the contract (the "Indexed Fixed Contract") was:

Years ended December 31,	**2010**	2009
Based on actual earnings	**0.5%**	0.5%
Based on interest rate credited to participants	**0.5%**	0.5%

Effective October 7, 2010, the Plan changed asset custodians to Fidelity Investments and is no longer participating in the insurance contract with Nationwide Life Insurance and Annuity Company.

Note 7. Notes Receivable from Participants

A participant may borrow from his or her account a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. Loan terms range from one to five years. The loans are secured by the balance in the participant's account and bear interest at 1% above the prime rate in effect when the loan is made. Periodic principal and interest payments are required to be made via payroll deductions.

Note 8. Federal Income Tax Status

As part of the change in asset custodians to Fidelity Investments effective October 7, 2010, the Plan adopted a Prototype Standardized Plan which received a favorable opinion letter from the Internal Revenue Service on March 31, 2008 stating that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code.

Prior to this date, the Plan adopted a Prototype Standardized Plan which also received a favorable opinion letter from the Internal Revenue Service on March 31, 2008. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the taxing authority. The plan administrator has analyzed the tax positions taken by the plan and has concluded that as of December 31, 2010, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The plan is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2007.

Note 9. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become fully vested in their accounts.

Note 10. Party-In-Interest Transactions

The Plan's investments in the Gartmore Family of Funds are managed by Gartmore SA Capital Trust and Gartmore Mutual Fund Capital Trust, affiliates of the trustee for which such affiliates derive investment management fees. These transactions qualify as party-in-interest transactions for which statutory exemption exists.

Effective October 7, 2010, the Plan is no longer participating in these investments.

Note 11. Participant Withdrawals and Distributions

At December 31, 2010 and 2009, there were no unpaid distributions on accounts of participants who have elected to withdraw from participation in the Plan.

Note 12. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2010, and 2009 to Form 5500:

December 31,	**2010**	2009
Per the financial statements	**$ 42,236,447**	$ 33,613,966
Adjustment from contract value to fair value	**17,294**	-
Earnings on corrective distribution to participants	**596**	-
Per Form 5500	**$ 42,254,337**	$ 33,613,966

The following is a reconciliation of changes in net assets available for benefits per the financial statements for the years ended December 31, 2010 and 2009 to Form 5500:

Year ended December 31,	**2010**	2009
Net increase per the financial statements	**$ 8,622,481**	$ 13,188,765
Change in adjustment from fair value to contract value	**17,294**	-
Earnings on corrective distribution to participants	**596**	-
Net increase per the Form 5500	**$ 8,640,371**	$ 13,188,765

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan

Supplemental Information

December 31, 2010

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	OAKMARK EQ & INC I	Mutual Fund	**	$ 5,670,946
	OPPHMR DEV MKTS	Mutual Fund	**	4,251,316
*	FID CONTRAFUND	Mutual Fund	**	3,508,338
	M&N PROBLND MODERATE	Mutual Fund	**	3,081,916
	PIM TOTAL RT INST	Mutual Fund	**	3,012,033
	JANUST FORTY S	Mutual Fund	**	2,604,302
	AF EUROPAC GRTH	Mutual Fund	**	2,295,390
	SPTN 500 INDEX INV	Mutual Fund	**	2,047,972
	JPM MIDCAP VALUE IS	Mutual Fund	**	1,916,548
	ABF LG CAP VAL INV	Mutual Fund	**	1,670,209
	TRP NEW HORIZONS	Mutual Fund	**	1,497,242
	M&N PROBLND CONSERV	Mutual Fund	**	1,121,346
*	FID STRATEGIC INV	Mutual Fund	**	1,106,774
	TOCQUEVILLE GOLD	Mutual Fund	**	665,504
	M&N PROBLND EXTENDED	Mutual Fund	**	657,895
	M&N PROBLND MAXIMUM	Mutual Fund	**	479,985
*	FID SEL MATERIALS	Mutual Fund	**	370,205
	SPTN EXT MKT IDX INV	Mutual Fund	**	313,026
	JANUS OVERSEAS	Mutual Fund	**	263,610
	COL SM CAP IDX	Mutual Fund	**	249,449
*	FID BLUE CHIP GR	Mutual Fund	**	196,463
	NUVEEN REAL ESTATE	Mutual Fund	**	182,409
	TMPL GLOBAL BOND A	Mutual Fund	**	147,135
	ALLNZ RCM TECHN INST	Mutual Fund	**	142,249
	AF AMER MUTUAL R4	Mutual Fund	**	70,455
	MFS VALUE R3	Mutual Fund	**	34,790
*	FID SEL PHARMACEUTCL	Mutual Fund	**	33,624
	GS SM CAP VALUE INST	Mutual Fund	**	32,092
	PRU/J MID CAP GR	Mutual Fund	**	24,040
	FBR SM CAP FINL INV	Mutual Fund	**	23,385
*	FID RETIRE MMKT	Mutual Fund	**	65
		Total Mutual Funds		37,670,713
*	FID MGD INC PORT	Common Collective Trust	**	2,126,912
		Total Investments		39,797,625
*	Participant Loans	Interest ranging from 4.25%-9.25%, maturities 2011 through 2024	-0-	522,397
		Total Investments and Participant Loans		**$ 40,320,022**

* Represents a party interest.

** Cost omitted in accordance with Department of Labor reporting requirements for participant-directed accounts.

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan

Financial Statements With Supplemental Information

Years Ended December 31, 2010 and 2009

With Independent Auditors' Report

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan
Years Ended December 31, 2010 and 2009
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Independent Auditors' Report

To the Plan Administrator of
MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan
San Diego, California

We were engaged to audit the statements of net assets available for benefits of MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan ("the Plan") as of December 31, 2010 and 2009 and the related statements of changes in net assets available for benefits for the years then ended, and the supplemental schedule as of December 31, 2010, as listed in the accompanying table of contents. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by Section 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified to by Nationwide Trust Company, the Custodian of the Plan from January 1, 2009 through October 6, 2010 and Fidelity Management Trust Company, the Trustee of the Plan from October 7, 2010 through December 31, 2010, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the Plan administrator that the Custodian or the Trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the Custodian or Trustee as of and for the years ended December 31, 2010 and 2009, that the information provided to the Plan administrator by the Custodian or Trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedules taken as a whole. The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the Custodian or Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Hutchinson and Bloodgood LLP

October 12, 2011
San Diego, California

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan
Statements of Net Assets Available for Benefits

December 31,	**2010**	2009
Assets		
Investments, at fair value:		
Mutual funds	**$ 37,670,713**	$ 29,657,921
Collective investment trust	**2,126,912**	-
Guaranteed investment	**-**	1,313,996
Total investments	**39,797,625**	30,971,917
Receivables:		
Employer contributions receivable	**1,805,422**	2,059,695
Participant contributions receivable	**145,062**	125,020
Notes receivable from participants	**522,397**	457,334
Total receivables	**2,472,881**	2,642,049
Total assets	**42,270,506**	33,613,966
Liabilities		
Excess contributions	**16,765**	-
Total liabilities	**16,765**	-
Net assets available for benefits at fair value	**42,253,741**	33,613,966
Adjustment from fair value to contract value for fully benefit responsive investment contract	**(17,294)**	-
Net assets available for benefits	**$ 42,236,447**	$ 33,613,966

See Independent Auditors' Report and notes to the financial statements

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan
Statements of Changes in Net Assets Available for Benefits

Years Ended December 31,	**2010**	2009
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	**$ 3,606,608**	$ 6,185,162
Dividend and interest income	**770,986**	454,075
Net investment income	**4,377,594**	6,639,237
Interest income on notes receivable from participants	**24,838**	22,101
Contributions:		
Participant contributions	**5,200,399**	5,033,253
Employer contributions	**1,805,422**	2,059,695
Rollover contributions	**310,829**	210,112
Total contributions	**7,316,650**	7,303,060
Total additions	**11,719,082**	13,964,398
Deductions from net assets attributed to:		
Benefits paid to participants	**2,871,024**	672,530
Deemed distributions of participant loans	**105,503**	7,554
Administrative expenses	**103,309**	95,549
Corrective distributions	**16,765**	-
Total deductions	**3,096,601**	775,633
Net increase	**8,622,481**	13,188,765
Net assets available for plan benefits:		
Beginning of year	**33,613,966**	20,425,201
End of year	**$ 42,236,447**	$ 33,613,966

See Independent Auditors' Report and notes to the financial statements

Note 1. Description of Plan

The following description of the MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan (the Plan) is provided for general information purposes only. More complete information regarding the Plan's provisions may be found in the plan document.

General

The Plan is a defined contribution plan covering substantially all employees of MedImpact Healthcare Systems, Inc. (the Company). Effective October 7, 2010, employees are eligible to participate in the Plan after two months of service and are age twenty-one or older. Prior to October 7, 2010, employees were eligible after completing at least one hour of service during three consecutive months and were age twenty-one or older.

During 2010, the Plan was amended to allow employees of related companies to participate in the Plan under the same eligibility requirements as previously mentioned. The following are the related entities and the effective date of adopting the Plan.

Catfish Ventures, LLC	January 1, 2010
Shared Solutions, LLC	January 1, 2010
Sanctuary Retreat Properties, LLC	January 1, 2010
MyTeleHealth Solutions, LLC	January 1, 2010
Shared Data Services, LLC	April 27, 2010
eHealth Strategy Group, LLC	July 13, 2010

The Plan provides participants with a salary deferral option pursuant to Section 401(k) of the Internal Revenue Code. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Eligible employees may elect to defer a percentage of their pre-tax annual compensation as defined in the Plan. Participants may also make contributions to the Plan on an after-tax basis by designating deferrals as Roth deferrals. The Plan includes an automatic enrollment provision whereby, eligible employees will automatically have 3% of their compensation withheld as an employee contribution unless they complete a salary reduction agreement and elect a different percentage or elect not to participate at all. The maximum employee contribution permitted by the Internal Revenue Service for calendar year 2010 and 2009 was $16,500. However, participants who had attained age 50 by year-end could also make catch-up contributions of $5,500 for calendar year 2010 and 2009.

Note 1. Description of Plan (Continued)

Contributions (continued)

The Company may make a discretionary matching contribution that equals a percentage of participants' 401(k) salary deferrals. For 2010 and 2009, the Company match was 100% of the participants' elective contributions, up to a maximum of 3% of the participant's eligible compensation. Participants who are employed on December 31 and who complete at least 1,000 hours of service during the plan year will receive an allocation of the Company's matching contribution.

The Company may make a qualified non-elective contribution (QNEC) on behalf of non-highly compensated employees, to the extent necessary to satisfy the non-discrimination tests. For the years ended December 31, 2010 and 2009, the Company's qualified non-elective contribution was $0.

Participant Accounts

Each participant's interest in the Plan is maintained in three sub-accounts within one main account. These sub-accounts are: an employee deferral for the participant's own contributions including qualified non-elective contributions (QNEC), an employer match for the Company's matching contributions, and rollover contributions from an employee's previous plan(s). The sub-accounts are credited with the appropriate contributions and any earnings or losses resulting from the investment of those contributions are credited on the valuation date. Participants may select investment accounts in which contributions made by them or on their behalf by the Employer will be invested.

Vesting

Participants are 100% vested in their salary reduction and qualified non-elective contributions account plus actual earnings thereon. Vesting in the Employer's discretionary matching and other non-elective contributions portion of their account plus actual earnings thereon is based on years of continuous service. Years of service for vesting purposes shall be based upon the completion of 1,000 hours of service within the Plan year. Participant vesting is as follows:

Years of Service	Vested Percentage
1 but less than 2	25%
2 but less than 3	50%
3 but less than 4	75%
4 or more	100%

Notwithstanding the above, if a participant (1) attains the age of 65, (2) dies or (3) terminates employment by reason of permanent disability, the employer match amounts become 100% vested without regard to years of service.

Note 1. Description of Plan (Continued)

Investment Options

Upon enrollment in the Plan, a participant may direct contributions to any combination of the following investment options:

- **Collective Investment Trust** - Investment contracts issued by insurance companies and other financial institutions seeking to preserve the principal while earning interest income.

- **Mutual Funds**
  - **International Funds** - Investments are in equity securities with non-U.S. Companies seeking long term growth of capital.
  - **Balanced Funds** - Investments are in a diversified portfolio of equity and fixed-income securities to provide high current income and preserve capital.
  - **Asset Allocation Funds** - Investments primarily in common stocks and fixed income securities with emphasis on growth and preservation of capital.
  - **Domestic Equity Funds** - Investments in equity securities of U.S. Companies seeking long term capital growth.
  - **Growth Funds** - Investments are in equity securities with U.S. Companies seeking current income and capital appreciation of large capitalization companies.
  - **Bond Funds** - Investments are in all types of bonds with an average portfolio duration of three to six years seeking to provide maximum total return, and preservation of capital.
  - **Index Funds** - Investments are in common stock of companies included in the S&P 500 Index or the Dow Jones Industrial Average seeking long term capital growth.
  - **Mid-Cap Funds** - Investments are in equity securities with U.S. Companies seeking current income and capital appreciation of medium capitalization companies.
  - **Aggressive Funds** - Investments are in equity securities with U.S. Companies seeking current income and capital appreciation of small capitalization companies.
  - **Income Funds** - Investments primarily in debt securities, including lower-quality debt seeking to provide a high level of current income and capital appreciation.
  - **Specialty Funds** - Investments are in debt and equity securities tailored to a specific industry designated by the fund.
  - **Lifecycle Funds** - Investments are in common stocks and fixed income securities with focus on maturities of 7 to 20 years seeking growth of capital.

Note 1. Description of Plan (Continued)

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Forfeitures

Participants who are not 100% vested will forfeit the nonvested portion of the Employer discretionary matching and non-elective contributions upon termination of employment. On each annual valuation date, any portion of the Forfeiture Account which has not been used to pay administrative expenses of the Plan will be used as follows: (a) Forfeitures which are attributable to matching contributions will first be used to reduce any qualified matching contributions and then to reduce any matching contributions for the current plan year or a future plan year; (b) Forfeitures attributable to non-elective contributions will first be used to reduce any qualified non-elective contributions and then to reduce any non-elective contributions for the current plan year or a future plan year.

Forfeitures reserved and applied against the employer's matching contributions receivable at December 31, 2010 and 2009 amounted to $78,663 and $45,475, respectively. The remaining forfeiture balance was $24,426 and $19,596 at December 31, 2010 and 2009, respectively.

Payments of Benefits

Upon termination of service, if the participant's vested account does not exceed $1,000, distribution shall be made in a lump sum. If the participant's vested account is greater than $1,000 but less than $5,000, a participant may elect to receive a lump sum by submitting a request for payment. If the Company does not receive a request for payment, the participant's account will automatically be rolled over to an individual retirement account (IRA) selected by the Company. If the participant's vested account exceeds $5,000, the participant may elect to defer the receipt of payments according to Plan provisions.

Pre-retirement distributions are allowed upon experiencing a financial hardship as defined by the Internal Revenue Code. Such withdrawals are subject to applicable excise and income taxes, and may only be made with the approval of the Plan administrator.

Excess Contributions

The Plan is required to return contributions received during the plan year in excess of the Internal Revenue Code ("IRC") limits and to satisfy the nondiscrimination provisions of the Plan.

Note 1. Description of Plan (Continued)

Administrative Expenses

The Plan incurs certain expenses including charges associated with distribution and loan processing, investment management and advisory fees and other contract administration fees. In addition, the Company incurs certain expenses in administering the Plan, which are not passed on as expenses of the Plan.

Note 2. Summary of Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Payments of Benefits

Benefits are recorded when paid.

Accounting for Fully Benefit-Responsive Investments

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Statements of Net Assets Available for Benefits presents the fair value of the investment as well as the adjustment for the investment from fair value to contract value relating to the investment contracts. Adjustments as of December 31, 2010 and 2009 are $(17,294) and $0, respectively. The Statements of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value.

Note 2. Summary of Accounting Policies (Continued)

Investment Valuation and Income Recognition (continued)

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation in the fair value of investments consists of the net realized gains or losses and the net unrealized appreciation or depreciation on investments.

New Accounting Standard Adopted

A new accounting standard was effective for the Plan for annual periods ending after December 15, 2010. It requires that participant loans be classified as notes receivable and measured at the unpaid principal balance plus accrued but unpaid interest. Previously, these participant loans were classified as Plan investments and were subject to fair value measurement and disclosure requirements. Adoption of the new standard eliminated the need to calculate and disclose fair values for these loans. The prior years financials have been revised to conform to the current year presentation.

Reclassifications and Changes in Presentation

Certain accounts in the prior year financial statements have been reclassified for comparative purposes to conform to the presentation in the current year financial statements.

Subsequent Events Evaluation

The Company's management has evaluated subsequent events through October 12, 2011, the date of issuance of the financial statements.

Effective February 22, 2011, the Plan was amended to allow employees of related Companies, Herae, LLC and MedImpact International, LLC to participate in the MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan.

Note 3. Information Prepared and Certified by the Custodian or Trustee

The Custodian and the Trustee of the Plan certified certain information and that information was not audited in accordance with the Plan administrator's instructions and as permitted by Section 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Information included in the accompanying financial statements and supplementary schedule, certified to by the Custodian or Trustee, consists of the following:

December 31,	**2010**	2009
Investments at fair value:		
Mutual funds	**$ 37,670,713**	$ 29,657,921
Collective investment trust	**2,126,912**	-
Guaranteed investment	**-**	1,313,996
Investment income	**4,377,594**	6,639,237

Note 4. Investments

The individual investments that represent 5% or more of the Plan's net assets at fair value value are as follows:

December 31,	**2010**	2009
Mutual Funds:		
Oakmark Equity and Income Fund	**$ 5,670,945**	n/a
Oppenheimer Developing Markets Fund Y	**4,251,316**	n/a
Fidelity Contrafund	**3,508,338**	n/a
Manning & Napier Fund, Inc. Pro-Blend Moderate Term	**3,081,916**	n/a
PIMCO Total Return Fund	**3,012,033**	n/a
Janus Forty Fund	**2,604,302**	n/a
American Funds EuroPacific Growth Fund	**2,295,390**	n/a
Spartan 500 Index Fund	**2,047,972**	n/a
Growth Fund of America	n/a	$ 2,822,332
Oppenheimer Developing Markets Fund A	n/a	2,669,848
Nationwide Inv Destination Moderate Fund	n/a	2,018,846
Janus Twenty Fund	n/a	1,908,565
AdvisorOne Amerigo Fund N	n/a	1,892,120
Gartmore S&P 500 Index	n/a	1,835,176
Collective Investment Trust	**$ 2,126,912**	n/a

Note 4. Investments (Continued)

The Plan provides for various investment options in mutual funds and other securities. Investment securities are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in those factors in the near term would materially affect participants' account balances and the amount reported in the statements of net assets available for benefits and the statement of changes in net assets available for benefits.

During the years ended December 31, 2010 and 2009, the Plan's investments (including realized gains and losses on investments that were both bought and sold during the year) appreciated in value by $3,606,608 and by $6,185,162, respectively. A summary of the total net appreciation by investment category is as follows:

Years ended December 31,	**2010**	2009
Investments at fair value as determined by quoted market prices:		
Mutual Funds	**$ 3,594,980**	$ 6,179,337
Investments at estimated fair value:		
Collective investment trust	**7,013**	-
Guaranteed investment	**4,615**	5,825
Net change in fair value	**$ 3,606,608**	$ 6,185,162

Note 5. Fair Value Measurements

The fair value measurement topic of the Financial Accounting Standards Board (FASB) Accounting Standards Codification establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described below:

- Level 1. Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

- Level 2. Inputs to the valuation methodology include: quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability

- Level 3. Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Note 5. Fair Value Measurements (Continued)

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2010 and 2009.

- Mutual funds are valued at quoted market prices which represent the net asset value of shares held by the Plan at year end.

- The Indexed Fixed Contract ("the Guaranteed Investment") is recorded at fair value which equals contract value. The fund is fully benefit responsive, therefore, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the Fund. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. There are no reserves against the Fund value for credit risk of the Fund issuer or otherwise.

- The collective investment trust fund is valued at the net asset value of units held by the plan and is based on the market value of the underlying investments comprising the fund. The underlying investments include cash equivalents and synthetic investment contracts comprised of both underlying investment and contractual components which have observable level 1 and level 2 pricing inputs, including quoted prices for similar assets in active or non-active markets

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan Administrator believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Note 5. Fair Value Measurements (Continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2010 and 2009:

	Assets at fair value as of December 31, 2010			
	Level 1	Level 2	Level 3	Total
Mutual funds				
International growth	$ 6,810,316	$ -	$ -	$ 6,810,316
Balanced	5,741,402	-	-	5,741,402
Asset allocation	4,683,247	-	-	4,683,247
Domestic equity	4,638,267	-	-	4,638,267
Capital growth	4,250,944	-	-	4,250,944
Bonds	3,012,033	-	-	3,012,033
Index	2,360,999	-	-	2,360,999
Mid-cap value	1,916,548	-	-	1,916,548
Aggressive growth	1,497,242	-	-	1,497,242
Income appreciation	1,253,910	-	-	1,253,910
Specialty	847,910	-	-	847,910
Lifecycle	657,895	-	-	657,895
Collective investment trust	-	2,126,912	-	2,126,912
	$ 37,670,713	$ 2,126,912	$ -	$ 39,797,625

Note 5. Fair Value Measurements (Continued)

	Assets at fair value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Mutual funds				
International growth	$ 5,481,632	$ -	$ -	$ 5,481,632
Balanced	592,052	-	-	592,052
Asset allocation	3,761,433	-	-	3,761,433
Domestic equity	3,758,378	-	-	3,758,378
Capital growth	6,112,469	-	-	6,112,469
Bonds	2,106,660	-	-	2,106,660
Index	1,878,720	-	-	1,878,720
Mid-cap value	1,560,301	-	-	1,560,301
Aggressive growth	868,754	-	-	868,754
Income appreciation	1,222,018	-	-	1,222,018
Specialty	988,803	-	-	988,803
Lifecycle	529,000	-	-	529,000
Other	797,701	-	-	797,701
Guaranteed investment	-	-	1,313,996	1,313,996
	$ 29,657,921	$ -	$ 1,313,996	$ 30,971,917

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the years ended December 31, 2010 and 2009:

	Guaranteed investment	
December 31	**2010**	2009
Balance, beginning of year	**$ 1,313,996**	$ 1,113,748
Realized gains	**4,615**	5,825
Purchases, sales, issuances and settlements (net)	**(1,318,611)**	194,423
Balance, end of year	**$ -**	1,313,996

Note 6. Investment Contract with Insurance Company

During 2010 and 2009, the Plan participated in an unallocated insurance contract with Nationwide Life Insurance and Annuity Company by investing in the Nationwide Indexed Fixed Contract. As discussed in Note 2, the Indexed Fixed Contract is included in the statements of net assets available for benefits at contract value which equals fair value.

The issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan. The crediting interest rate is based upon the three-year Treasury Note yield. There is no minimum interest crediting rate; however, in no event is the crediting rate less than 0%. Such interest rates are reviewed on a quarterly basis for resetting. The crediting interest rate is most impacted by the yield on the three-year Treasury Note index changes.

The average yield on the contract (the "Indexed Fixed Contract") was:

Years ended December 31,	**2010**	2009
Based on actual earnings	**0.5%**	0.5%
Based on interest rate credited to participants	**0.5%**	0.5%

Effective October 7, 2010, the Plan changed asset custodians to Fidelity Investments and is no longer participating in the insurance contract with Nationwide Life Insurance and Annuity Company.

Note 7. Notes Receivable from Participants

A participant may borrow from his or her account a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. Loan terms range from one to five years. The loans are secured by the balance in the participant's account and bear interest at 1% above the prime rate in effect when the loan is made. Periodic principal and interest payments are required to be made via payroll deductions.

Note 8. Federal Income Tax Status

As part of the change in asset custodians to Fidelity Investments effective October 7, 2010, the Plan adopted a Prototype Standardized Plan which received a favorable opinion letter from the Internal Revenue Service on March 31, 2008 stating that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code.

Prior to this date, the Plan adopted a Prototype Standardized Plan which also received a favorable opinion letter from the Internal Revenue Service on March 31, 2008. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the taxing authority. The plan administrator has analyzed the tax positions taken by the plan and has concluded that as of December 31, 2010, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The plan is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2007.

Note 9. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become fully vested in their accounts.

Note 10. Party-In-Interest Transactions

The Plan's investments in the Gartmore Family of Funds are managed by Gartmore SA Capital Trust and Gartmore Mutual Fund Capital Trust, affiliates of the trustee for which such affiliates derive investment management fees. These transactions qualify as party-in-interest transactions for which statutory exemption exists.

Effective October 7, 2010, the Plan is no longer participating in these investments.

Note 11. Participant Withdrawals and Distributions

At December 31, 2010 and 2009, there were no unpaid distributions on accounts of participants who have elected to withdraw from participation in the Plan.

Note 12. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2010, and 2009 to Form 5500:

December 31,	**2010**	2009
Per the financial statements	**$ 42,236,447**	$ 33,613,966
Adjustment from contract value to fair value	**17,294**	-
Earnings on corrective distribution to participants	**596**	-
Per Form 5500	**$ 42,254,337**	$ 33,613,966

The following is a reconciliation of changes in net assets available for benefits per the financial statements for the years ended December 31, 2010 and 2009 to Form 5500:

Year ended December 31,	**2010**	2009
Net increase per the financial statements	**$ 8,622,481**	$ 13,188,765
Change in adjustment from fair value to contract value	**17,294**	-
Earnings on corrective distribution to participants	**596**	-
Net increase per the Form 5500	**$ 8,640,371**	$ 13,188,765

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan

Supplemental Information

December 31, 2010

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	OAKMARK EQ & INC I	Mutual Fund	**	$ 5,670,946
	OPPHMR DEV MKTS	Mutual Fund	**	4,251,316
*	FID CONTRAFUND	Mutual Fund	**	3,508,338
	M&N PROBLND MODERATE	Mutual Fund	**	3,081,916
	PIM TOTAL RT INST	Mutual Fund	**	3,012,033
	JANUST FORTY S	Mutual Fund	**	2,604,302
	AF EUROPAC GRTH	Mutual Fund	**	2,295,390
	SPTN 500 INDEX INV	Mutual Fund	**	2,047,972
	JPM MIDCAP VALUE IS	Mutual Fund	**	1,916,548
	ABF LG CAP VAL INV	Mutual Fund	**	1,670,209
	TRP NEW HORIZONS	Mutual Fund	**	1,497,242
	M&N PROBLND CONSERV	Mutual Fund	**	1,121,346
*	FID STRATEGIC INV	Mutual Fund	**	1,106,774
	TOCQUEVILLE GOLD	Mutual Fund	**	665,504
	M&N PROBLND EXTENDED	Mutual Fund	**	657,895
	M&N PROBLND MAXIMUM	Mutual Fund	**	479,985
*	FID SEL MATERIALS	Mutual Fund	**	370,205
	SPTN EXT MKT IDX INV	Mutual Fund	**	313,026
	JANUS OVERSEAS	Mutual Fund	**	263,610
	COL SM CAP IDX	Mutual Fund	**	249,449
*	FID BLUE CHIP GR	Mutual Fund	**	196,463
	NUVEEN REAL ESTATE	Mutual Fund	**	182,409
	TMPL GLOBAL BOND A	Mutual Fund	**	147,135
	ALLNZ RCM TECHN INST	Mutual Fund	**	142,249
	AF AMER MUTUAL R4	Mutual Fund	**	70,455
	MFS VALUE R3	Mutual Fund	**	34,790
*	FID SEL PHARMACEUTCL	Mutual Fund	**	33,624
	GS SM CAP VALUE INST	Mutual Fund	**	32,092
	PRU/J MID CAP GR	Mutual Fund	**	24,040
	FBR SM CAP FINL INV	Mutual Fund	**	23,385
*	FID RETIRE MMKT	Mutual Fund	**	65
		Total Mutual Funds		37,670,713
*	FID MGD INC PORT	Common Collective Trust	**	2,126,912
		Total Investments		39,797,625
*	Participant Loans	Interest ranging from 4.25%-9.25%, maturities 2011 through 2024	-0-	522,397
		Total Investments and Participant Loans		**$ 40,320,022**

* Represents a party interest.

** Cost omitted in accordance with Department of Labor reporting requirements for participant-directed accounts.

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan

Financial Statements With Supplemental Information

Years Ended December 31, 2010 and 2009

With Independent Auditors' Report

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan
Years Ended December 31, 2010 and 2009
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Independent Auditors' Report

To the Plan Administrator of
MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan
San Diego, California

We were engaged to audit the statements of net assets available for benefits of MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan ("the Plan") as of December 31, 2010 and 2009 and the related statements of changes in net assets available for benefits for the years then ended, and the supplemental schedule as of December 31, 2010, as listed in the accompanying table of contents. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by Section 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified to by Nationwide Trust Company, the Custodian of the Plan from January 1, 2009 through October 6, 2010 and Fidelity Management Trust Company, the Trustee of the Plan from October 7, 2010 through December 31, 2010, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the Plan administrator that the Custodian or the Trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the Custodian or Trustee as of and for the years ended December 31, 2010 and 2009, that the information provided to the Plan administrator by the Custodian or Trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedules taken as a whole. The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the Custodian or Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Hutchinson and Bloodgood LLP

October 12, 2011
San Diego, California

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan
Statements of Net Assets Available for Benefits

December 31,	**2010**	2009
Assets		
Investments, at fair value:		
Mutual funds	**$ 37,670,713**	$ 29,657,921
Collective investment trust	**2,126,912**	-
Guaranteed investment	**-**	1,313,996
Total investments	**39,797,625**	30,971,917
Receivables:		
Employer contributions receivable	**1,805,422**	2,059,695
Participant contributions receivable	**145,062**	125,020
Notes receivable from participants	**522,397**	457,334
Total receivables	**2,472,881**	2,642,049
Total assets	**42,270,506**	33,613,966
Liabilities		
Excess contributions	**16,765**	-
Total liabilities	**16,765**	-
Net assets available for benefits at fair value	**42,253,741**	33,613,966
Adjustment from fair value to contract value for fully benefit responsive investment contract	**(17,294)**	-
Net assets available for benefits	**$ 42,236,447**	$ 33,613,966

See Independent Auditors' Report and notes to the financial statements

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan
Statements of Changes in Net Assets Available for Benefits

Years Ended December 31,	**2010**	2009
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	**$ 3,606,608**	$ 6,185,162
Dividend and interest income	**770,986**	454,075
Net investment income	**4,377,594**	6,639,237
Interest income on notes receivable from participants	**24,838**	22,101
Contributions:		
Participant contributions	**5,200,399**	5,033,253
Employer contributions	**1,805,422**	2,059,695
Rollover contributions	**310,829**	210,112
Total contributions	**7,316,650**	7,303,060
Total additions	**11,719,082**	13,964,398
Deductions from net assets attributed to:		
Benefits paid to participants	**2,871,024**	672,530
Deemed distributions of participant loans	**105,503**	7,554
Administrative expenses	**103,309**	95,549
Corrective distributions	**16,765**	-
Total deductions	**3,096,601**	775,633
Net increase	**8,622,481**	13,188,765
Net assets available for plan benefits:		
Beginning of year	**33,613,966**	20,425,201
End of year	**$ 42,236,447**	$ 33,613,966

See Independent Auditors' Report and notes to the financial statements

Note 1. Description of Plan

The following description of the MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan (the Plan) is provided for general information purposes only. More complete information regarding the Plan's provisions may be found in the plan document.

General

The Plan is a defined contribution plan covering substantially all employees of MedImpact Healthcare Systems, Inc. (the Company). Effective October 7, 2010, employees are eligible to participate in the Plan after two months of service and are age twenty-one or older. Prior to October 7, 2010, employees were eligible after completing at least one hour of service during three consecutive months and were age twenty-one or older.

During 2010, the Plan was amended to allow employees of related companies to participate in the Plan under the same eligibility requirements as previously mentioned. The following are the related entities and the effective date of adopting the Plan.

Catfish Ventures, LLC	January 1, 2010
Shared Solutions, LLC	January 1, 2010
Sanctuary Retreat Properties, LLC	January 1, 2010
MyTeleHealth Solutions, LLC	January 1, 2010
Shared Data Services, LLC	April 27, 2010
eHealth Strategy Group, LLC	July 13, 2010

The Plan provides participants with a salary deferral option pursuant to Section 401(k) of the Internal Revenue Code. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Eligible employees may elect to defer a percentage of their pre-tax annual compensation as defined in the Plan. Participants may also make contributions to the Plan on an after-tax basis by designating deferrals as Roth deferrals. The Plan includes an automatic enrollment provision whereby, eligible employees will automatically have 3% of their compensation withheld as an employee contribution unless they complete a salary reduction agreement and elect a different percentage or elect not to participate at all. The maximum employee contribution permitted by the Internal Revenue Service for calendar year 2010 and 2009 was $16,500. However, participants who had attained age 50 by year-end could also make catch-up contributions of $5,500 for calendar year 2010 and 2009.

Note 1. Description of Plan (Continued)

Contributions (continued)

The Company may make a discretionary matching contribution that equals a percentage of participants' 401(k) salary deferrals. For 2010 and 2009, the Company match was 100% of the participants' elective contributions, up to a maximum of 3% of the participant's eligible compensation. Participants who are employed on December 31 and who complete at least 1,000 hours of service during the plan year will receive an allocation of the Company's matching contribution.

The Company may make a qualified non-elective contribution (QNEC) on behalf of non-highly compensated employees, to the extent necessary to satisfy the non-discrimination tests. For the years ended December 31, 2010 and 2009, the Company's qualified non-elective contribution was $0.

Participant Accounts

Each participant's interest in the Plan is maintained in three sub-accounts within one main account. These sub-accounts are: an employee deferral for the participant's own contributions including qualified non-elective contributions (QNEC), an employer match for the Company's matching contributions, and rollover contributions from an employee's previous plan(s). The sub-accounts are credited with the appropriate contributions and any earnings or losses resulting from the investment of those contributions are credited on the valuation date. Participants may select investment accounts in which contributions made by them or on their behalf by the Employer will be invested.

Vesting

Participants are 100% vested in their salary reduction and qualified non-elective contributions account plus actual earnings thereon. Vesting in the Employer's discretionary matching and other non-elective contributions portion of their account plus actual earnings thereon is based on years of continuous service. Years of service for vesting purposes shall be based upon the completion of 1,000 hours of service within the Plan year. Participant vesting is as follows:

Years of Service	Vested Percentage
1 but less than 2	25%
2 but less than 3	50%
3 but less than 4	75%
4 or more	100%

Notwithstanding the above, if a participant (1) attains the age of 65, (2) dies or (3) terminates employment by reason of permanent disability, the employer match amounts become 100% vested without regard to years of service.

Note 1. Description of Plan (Continued)

Investment Options

Upon enrollment in the Plan, a participant may direct contributions to any combination of the following investment options:

- **Collective Investment Trust** - Investment contracts issued by insurance companies and other financial institutions seeking to preserve the principal while earning interest income.

- **Mutual Funds**
  - **International Funds** - Investments are in equity securities with non-U.S. Companies seeking long term growth of capital.
  - **Balanced Funds** - Investments are in a diversified portfolio of equity and fixed-income securities to provide high current income and preserve capital.
  - **Asset Allocation Funds** - Investments primarily in common stocks and fixed income securities with emphasis on growth and preservation of capital.
  - **Domestic Equity Funds** - Investments in equity securities of U.S. Companies seeking long term capital growth.
  - **Growth Funds** - Investments are in equity securities with U.S. Companies seeking current income and capital appreciation of large capitalization companies.
  - **Bond Funds** - Investments are in all types of bonds with an average portfolio duration of three to six years seeking to provide maximum total return, and preservation of capital.
  - **Index Funds** - Investments are in common stock of companies included in the S&P 500 Index or the Dow Jones Industrial Average seeking long term capital growth.
  - **Mid-Cap Funds** - Investments are in equity securities with U.S. Companies seeking current income and capital appreciation of medium capitalization companies.
  - **Aggressive Funds** - Investments are in equity securities with U.S. Companies seeking current income and capital appreciation of small capitalization companies.
  - **Income Funds** - Investments primarily in debt securities, including lower-quality debt seeking to provide a high level of current income and capital appreciation.
  - **Specialty Funds** - Investments are in debt and equity securities tailored to a specific industry designated by the fund.
  - **Lifecycle Funds** - Investments are in common stocks and fixed income securities with focus on maturities of 7 to 20 years seeking growth of capital.

Note 1. Description of Plan (Continued)

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Forfeitures

Participants who are not 100% vested will forfeit the nonvested portion of the Employer discretionary matching and non-elective contributions upon termination of employment. On each annual valuation date, any portion of the Forfeiture Account which has not been used to pay administrative expenses of the Plan will be used as follows: (a) Forfeitures which are attributable to matching contributions will first be used to reduce any qualified matching contributions and then to reduce any matching contributions for the current plan year or a future plan year; (b) Forfeitures attributable to non-elective contributions will first be used to reduce any qualified non-elective contributions and then to reduce any non-elective contributions for the current plan year or a future plan year.

Forfeitures reserved and applied against the employer's matching contributions receivable at December 31, 2010 and 2009 amounted to $78,663 and $45,475, respectively. The remaining forfeiture balance was $24,426 and $19,596 at December 31, 2010 and 2009, respectively.

Payments of Benefits

Upon termination of service, if the participant's vested account does not exceed $1,000, distribution shall be made in a lump sum. If the participant's vested account is greater than $1,000 but less than $5,000, a participant may elect to receive a lump sum by submitting a request for payment. If the Company does not receive a request for payment, the participant's account will automatically be rolled over to an individual retirement account (IRA) selected by the Company. If the participant's vested account exceeds $5,000, the participant may elect to defer the receipt of payments according to Plan provisions.

Pre-retirement distributions are allowed upon experiencing a financial hardship as defined by the Internal Revenue Code. Such withdrawals are subject to applicable excise and income taxes, and may only be made with the approval of the Plan administrator.

Excess Contributions

The Plan is required to return contributions received during the plan year in excess of the Internal Revenue Code ("IRC") limits and to satisfy the nondiscrimination provisions of the Plan.

Note 1. Description of Plan (Continued)

Administrative Expenses

The Plan incurs certain expenses including charges associated with distribution and loan processing, investment management and advisory fees and other contract administration fees. In addition, the Company incurs certain expenses in administering the Plan, which are not passed on as expenses of the Plan.

Note 2. Summary of Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Payments of Benefits

Benefits are recorded when paid.

Accounting for Fully Benefit-Responsive Investments

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Statements of Net Assets Available for Benefits presents the fair value of the investment as well as the adjustment for the investment from fair value to contract value relating to the investment contracts. Adjustments as of December 31, 2010 and 2009 are $(17,294) and $0, respectively. The Statements of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value.

Note 2. Summary of Accounting Policies (Continued)

Investment Valuation and Income Recognition (continued)

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation in the fair value of investments consists of the net realized gains or losses and the net unrealized appreciation or depreciation on investments.

New Accounting Standard Adopted

A new accounting standard was effective for the Plan for annual periods ending after December 15, 2010. It requires that participant loans be classified as notes receivable and measured at the unpaid principal balance plus accrued but unpaid interest. Previously, these participant loans were classified as Plan investments and were subject to fair value measurement and disclosure requirements. Adoption of the new standard eliminated the need to calculate and disclose fair values for these loans. The prior years financials have been revised to conform to the current year presentation.

Reclassifications and Changes in Presentation

Certain accounts in the prior year financial statements have been reclassified for comparative purposes to conform to the presentation in the current year financial statements.

Subsequent Events Evaluation

The Company's management has evaluated subsequent events through October 12, 2011, the date of issuance of the financial statements.

Effective February 22, 2011, the Plan was amended to allow employees of related Companies, Herae, LLC and MedImpact International, LLC to participate in the MedImpact Healthcare Systems, Inc. 401(k) Salary Savings Plan.

Note 3. Information Prepared and Certified by the Custodian or Trustee

The Custodian and the Trustee of the Plan certified certain information and that information was not audited in accordance with the Plan administrator's instructions and as permitted by Section 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Information included in the accompanying financial statements and supplementary schedule, certified to by the Custodian or Trustee, consists of the following:

December 31,	**2010**	2009
Investments at fair value:		
Mutual funds	**$ 37,670,713**	$ 29,657,921
Collective investment trust	**2,126,912**	-
Guaranteed investment	**-**	1,313,996
Investment income	**4,377,594**	6,639,237

Note 4. Investments

The individual investments that represent 5% or more of the Plan's net assets at fair value value are as follows:

December 31,	**2010**	2009
Mutual Funds:		
Oakmark Equity and Income Fund	**$ 5,670,945**	n/a
Oppenheimer Developing Markets Fund Y	**4,251,316**	n/a
Fidelity Contrafund	**3,508,338**	n/a
Manning & Napier Fund, Inc. Pro-Blend Moderate Term	**3,081,916**	n/a
PIMCO Total Return Fund	**3,012,033**	n/a
Janus Forty Fund	**2,604,302**	n/a
American Funds EuroPacific Growth Fund	**2,295,390**	n/a
Spartan 500 Index Fund	**2,047,972**	n/a
Growth Fund of America	n/a	$ 2,822,332
Oppenheimer Developing Markets Fund A	n/a	2,669,848
Nationwide Inv Destination Moderate Fund	n/a	2,018,846
Janus Twenty Fund	n/a	1,908,565
AdvisorOne Amerigo Fund N	n/a	1,892,120
Gartmore S&P 500 Index	n/a	1,835,176
Collective Investment Trust	**$ 2,126,912**	n/a

Note 4. Investments (Continued)

The Plan provides for various investment options in mutual funds and other securities. Investment securities are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in those factors in the near term would materially affect participants' account balances and the amount reported in the statements of net assets available for benefits and the statement of changes in net assets available for benefits.

During the years ended December 31, 2010 and 2009, the Plan's investments (including realized gains and losses on investments that were both bought and sold during the year) appreciated in value by $3,606,608 and by $6,185,162, respectively. A summary of the total net appreciation by investment category is as follows:

Years ended December 31,	**2010**	2009
Investments at fair value as determined by quoted market prices:		
Mutual Funds	**$ 3,594,980**	$ 6,179,337
Investments at estimated fair value:		
Collective investment trust	**7,013**	-
Guaranteed investment	**4,615**	5,825
Net change in fair value	**$ 3,606,608**	$ 6,185,162

Note 5. Fair Value Measurements

The fair value measurement topic of the Financial Accounting Standards Board (FASB) Accounting Standards Codification establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described below:

- Level 1. Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

- Level 2. Inputs to the valuation methodology include: quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability

- Level 3. Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Note 5. Fair Value Measurements (Continued)

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2010 and 2009.

- Mutual funds are valued at quoted market prices which represent the net asset value of shares held by the Plan at year end.

- The Indexed Fixed Contract ("the Guaranteed Investment") is recorded at fair value which equals contract value. The fund is fully benefit responsive, therefore, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the Fund. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. There are no reserves against the Fund value for credit risk of the Fund issuer or otherwise.

- The collective investment trust fund is valued at the net asset value of units held by the plan and is based on the market value of the underlying investments comprising the fund. The underlying investments include cash equivalents and synthetic investment contracts comprised of both underlying investment and contractual components which have observable level 1 and level 2 pricing inputs, including quoted prices for similar assets in active or non-active markets

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan Administrator believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Note 5. Fair Value Measurements (Continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2010 and 2009:

	Assets at fair value as of December 31, 2010			
	Level 1	Level 2	Level 3	Total
Mutual funds				
International growth	$ 6,810,316	$ -	$ -	$ 6,810,316
Balanced	5,741,402	-	-	5,741,402
Asset allocation	4,683,247	-	-	4,683,247
Domestic equity	4,638,267	-	-	4,638,267
Capital growth	4,250,944	-	-	4,250,944
Bonds	3,012,033	-	-	3,012,033
Index	2,360,999	-	-	2,360,999
Mid-cap value	1,916,548	-	-	1,916,548
Aggressive growth	1,497,242	-	-	1,497,242
Income appreciation	1,253,910	-	-	1,253,910
Specialty	847,910	-	-	847,910
Lifecycle	657,895	-	-	657,895
Collective investment trust	-	2,126,912	-	2,126,912
	$ 37,670,713	$ 2,126,912	$ -	$ 39,797,625

Note 5. Fair Value Measurements (Continued)

	Assets at fair value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Mutual funds				
International growth	$ 5,481,632	$ -	$ -	$ 5,481,632
Balanced	592,052	-	-	592,052
Asset allocation	3,761,433	-	-	3,761,433
Domestic equity	3,758,378	-	-	3,758,378
Capital growth	6,112,469	-	-	6,112,469
Bonds	2,106,660	-	-	2,106,660
Index	1,878,720	-	-	1,878,720
Mid-cap value	1,560,301	-	-	1,560,301
Aggressive growth	868,754	-	-	868,754
Income appreciation	1,222,018	-	-	1,222,018
Specialty	988,803	-	-	988,803
Lifecycle	529,000	-	-	529,000
Other	797,701	-	-	797,701
Guaranteed investment	-	-	1,313,996	1,313,996
	$ 29,657,921	$ -	$ 1,313,996	$ 30,971,917

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the years ended December 31, 2010 and 2009:

	Guaranteed investment	
December 31	**2010**	2009
Balance, beginning of year	**$ 1,313,996**	$ 1,113,748
Realized gains	**4,615**	5,825
Purchases, sales, issuances and settlements (net)	**(1,318,611)**	194,423
Balance, end of year	**$ -**	1,313,996

Note 6. Investment Contract with Insurance Company

During 2010 and 2009, the Plan participated in an unallocated insurance contract with Nationwide Life Insurance and Annuity Company by investing in the Nationwide Indexed Fixed Contract. As discussed in Note 2, the Indexed Fixed Contract is included in the statements of net assets available for benefits at contract value which equals fair value.

The issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan. The crediting interest rate is based upon the three-year Treasury Note yield. There is no minimum interest crediting rate; however, in no event is the crediting rate less than 0%. Such interest rates are reviewed on a quarterly basis for resetting. The crediting interest rate is most impacted by the yield on the three-year Treasury Note index changes.

The average yield on the contract (the "Indexed Fixed Contract") was:

Years ended December 31,	**2010**	2009
Based on actual earnings	**0.5%**	0.5%
Based on interest rate credited to participants	**0.5%**	0.5%

Effective October 7, 2010, the Plan changed asset custodians to Fidelity Investments and is no longer participating in the insurance contract with Nationwide Life Insurance and Annuity Company.

Note 7. Notes Receivable from Participants

A participant may borrow from his or her account a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. Loan terms range from one to five years. The loans are secured by the balance in the participant's account and bear interest at 1% above the prime rate in effect when the loan is made. Periodic principal and interest payments are required to be made via payroll deductions.

Note 8. Federal Income Tax Status

As part of the change in asset custodians to Fidelity Investments effective October 7, 2010, the Plan adopted a Prototype Standardized Plan which received a favorable opinion letter from the Internal Revenue Service on March 31, 2008 stating that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code.

Prior to this date, the Plan adopted a Prototype Standardized Plan which also received a favorable opinion letter from the Internal Revenue Service on March 31, 2008. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the taxing authority. The plan administrator has analyzed the tax positions taken by the plan and has concluded that as of December 31, 2010, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The plan is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2007.

Note 9. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become fully vested in their accounts.

Note 10. Party-In-Interest Transactions

The Plan's investments in the Gartmore Family of Funds are managed by Gartmore SA Capital Trust and Gartmore Mutual Fund Capital Trust, affiliates of the trustee for which such affiliates derive investment management fees. These transactions qualify as party-in-interest transactions for which statutory exemption exists.

Effective October 7, 2010, the Plan is no longer participating in these investments.

Note 11. Participant Withdrawals and Distributions

At December 31, 2010 and 2009, there were no unpaid distributions on accounts of participants who have elected to withdraw from participation in the Plan.

Note 12. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2010, and 2009 to Form 5500:

December 31,	**2010**	2009
Per the financial statements	**$ 42,236,447**	$ 33,613,966
Adjustment from contract value to fair value	**17,294**	-
Earnings on corrective distribution to participants	**596**	-
Per Form 5500	**$ 42,254,337**	$ 33,613,966

The following is a reconciliation of changes in net assets available for benefits per the financial statements for the years ended December 31, 2010 and 2009 to Form 5500:

Year ended December 31,	**2010**	2009
Net increase per the financial statements	**$ 8,622,481**	$ 13,188,765
Change in adjustment from fair value to contract value	**17,294**	-
Earnings on corrective distribution to participants	**596**	-
Net increase per the Form 5500	**$ 8,640,371**	$ 13,188,765

MedImpact Healthcare Systems, Inc.
401(k) Salary Savings Plan

Supplemental Information

December 31, 2010

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	OAKMARK EQ & INC I	Mutual Fund	**	$ 5,670,946
	OPPHMR DEV MKTS	Mutual Fund	**	4,251,316
*	FID CONTRAFUND	Mutual Fund	**	3,508,338
	M&N PROBLND MODERATE	Mutual Fund	**	3,081,916
	PIM TOTAL RT INST	Mutual Fund	**	3,012,033
	JANUST FORTY S	Mutual Fund	**	2,604,302
	AF EUROPAC GRTH	Mutual Fund	**	2,295,390
	SPTN 500 INDEX INV	Mutual Fund	**	2,047,972
	JPM MIDCAP VALUE IS	Mutual Fund	**	1,916,548
	ABF LG CAP VAL INV	Mutual Fund	**	1,670,209
	TRP NEW HORIZONS	Mutual Fund	**	1,497,242
	M&N PROBLND CONSERV	Mutual Fund	**	1,121,346
*	FID STRATEGIC INV	Mutual Fund	**	1,106,774
	TOCQUEVILLE GOLD	Mutual Fund	**	665,504
	M&N PROBLND EXTENDED	Mutual Fund	**	657,895
	M&N PROBLND MAXIMUM	Mutual Fund	**	479,985
*	FID SEL MATERIALS	Mutual Fund	**	370,205
	SPTN EXT MKT IDX INV	Mutual Fund	**	313,026
	JANUS OVERSEAS	Mutual Fund	**	263,610
	COL SM CAP IDX	Mutual Fund	**	249,449
*	FID BLUE CHIP GR	Mutual Fund	**	196,463
	NUVEEN REAL ESTATE	Mutual Fund	**	182,409
	TMPL GLOBAL BOND A	Mutual Fund	**	147,135
	ALLNZ RCM TECHN INST	Mutual Fund	**	142,249
	AF AMER MUTUAL R4	Mutual Fund	**	70,455
	MFS VALUE R3	Mutual Fund	**	34,790
*	FID SEL PHARMACEUTCL	Mutual Fund	**	33,624
	GS SM CAP VALUE INST	Mutual Fund	**	32,092
	PRU/J MID CAP GR	Mutual Fund	**	24,040
	FBR SM CAP FINL INV	Mutual Fund	**	23,385
*	FID RETIRE MMKT	Mutual Fund	**	65
		Total Mutual Funds		37,670,713
*	FID MGD INC PORT	Common Collective Trust	**	2,126,912
		Total Investments		39,797,625
*	Participant Loans	Interest ranging from 4.25%-9.25%, maturities 2011 through 2024	-0-	522,397
		Total Investments and Participant Loans		**$ 40,320,022**

* Represents a party interest.

** Cost omitted in accordance with Department of Labor reporting requirements for participant-directed accounts.