

Broker of Record Form**For Individual Plans**Email completed form to hf-brokers@plusoscar.com

This form will be accepted under the following circumstances:

- Open Enrollment Reconciliation
- Special Election Period Reconciliation (60 days after SEP)
- Within 60 days after an agent is released from an FMO

Subscriber/Policy Information—to be completed by the Subscriber (policy holder)

Subscriber name	Contract ID (policy) number	
Subscriber phone #	Subscriber email	
I would like to transfer assignment of my policy to this new insurance agent:*		
Agent name	NPN	
Agency Name	Effective Date	Special Election Period Date

Subscriber Authorization

I hereby authorize Health First Health Plans to change the Broker of Record on my policy from my current broker to the new broker listed above. I understand the Broker of Record may receive copies of my quoting information, renewal rates and monthly billing information.

Subscriber Signature _____ Date _____

New Agent Acceptance

I accept appointment as Broker of Record for the above policy and agree to service this Subscriber.

New Broker Signature _____ Date _____

Individual Members: For more information, call Customer Service toll-free at **1.855.443.4735** (TTY/TDD relay: 1.800.955.8771) Monday through Friday from 8 a.m. to 6 p.m.

- Please allow 60 days for processing and payment to show on your statements. Payment will be made as of the effective date of the contract.
- Forms must be submitted within 120 days of the effective date of the contract to be accepted.
- All existing business will pay at the renewal rate.

By law, we must remind you that Privacy & Security is not assured when sending information over unsecured email. Health First Commercial Plans Inc. is doing business under the name of Health First Health Plans. Health First Health Plans does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation or health status in the administration of the plan, including enrollment and benefit determinations.