

Broker of Record Form

For Medicare Advantage Plans

Email completed form to hf-brokers@plusoscar.com

*All BOR changes will not take effect till January 1 of the following year

*Submit one form per member

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_____

Medicare Members: For more information, call Customer Service toll-free at 1.800.716.7737 (TTY/TDD relay: 1.800.955.8771) weekdays from 8 a.m. to 8 p.m. and Saturdays from 8 a.m. to noon. From October 1 to March 31, we're available seven days a week from 8 a.m. to 8 p.m.

By law, we must remind you that privacy and security is not assured when sending information over unsecured email. Health First Health Plans is an HMO plan with a Medicare contract. Enrollment in Health First Health Plans depends on contract renewal.