

HealthPlan *Services*

Dear Producer:

The Humana*One* application process is outlined below. Should you have any questions please contact your HealthPlan Services representative. To ensure the application process runs efficiently, please be sure to follow the steps as outlined.

Important numbers:

HealthPlan Services Sales team	800-545-6441
Humana <i>One</i> Application team	800-552-0758
Agent Confirmation Sheet Fax	800-681-0054



The Application Process

Agent's Step-by-Step Instructions in Completing a Sale

1. Complete, sign and send your Humana*One* contracting paperwork to HealthPlan Services
2. Check client's eligibility (be sure to check the underwriting guidelines prior to submission)
3. Obtain quote via one of three ways:
 - www.healthplan.com/agent (call to get password)
 - IVR automated quote 1-800-545-6441
 - Call your HealthPlan Services representative at 800-545-6441
4. Provide Application Preparation Sheet to client
5. Client applies via one of two ways
 - Telephonically via the Humana*One* Application Team at 1-800-552-0758
 - Online using your personal Humana*One* online application web site
6. Fax agent confirmation sheet to HealthPlan Services (this can happen after the client has called Humana*One*)
7. When application is completed, the Application Team transfers client to an underwriter to continue process, or schedules a callback
8. Upon completion, the underwriter makes decision
 - If approved:
 - 1) Agent receives e-mail notification of status
 - 2) Agent should communicate to client
 - 3) Application is mailed and/or faxed by Humana to client or agent for signature and returned (can be faxed back)
 - 4) Funds are deducted, welcome letter and policy are sent with a copy of the welcome letter going to you
 - If declined:
 - 1) Notifies you of status via e-mail
 - 2) Client notified by mail
 - If not immediate approval, contacts you with status via e-mail

For more information, please refer to the Humana*One* Agent Sales Guide.



HumanaOne Applicant Preparation Sheet

Dear Valued Agent:

In order to better assure the application process goes smoothly for your customers, we strongly encourage you to prepare your clients for the call by asking them to have the following information available prior to placing the call.

PLEASE LEAVE THIS DOCUMENT WITH YOUR CLIENT.

Dear Applicant: Please have this sheet available when placing your call.

1. Agent of Record Name: Group Benefit Administrators-HPS-Agency #1280515 Agency Tax ID # 04.2492425

2. _____
Name of Agent Writing the Policy:

Agent's Business Telephone Number:

Requested Effective Date: Requested Medical Deductible:

Requested Prescription Deductible:

3. Which plan are you requesting? _____

Are you requesting any plan riders? YES NO

4. Please make sure the following information is available for each person applying for coverage:

Birthdate Social Security Number Height/Weight

Current/past prescription medications and their dosage

Medical history including diagnosis, treatment, dates of service and current status

Date of last office visit

Doctors names, addresses and phone numbers

Information on current and past insurance coverage. Including: Policy number, effective dates, termination dates and phone number

PAYMENT OPTIONS

For your convenience, the following payment options are accepted:

- For the initial payment, we accept Visa, MasterCard or Automatic Check Draft or debit card.
- After the initial payment, all payments need to be made either monthly through Automatic Check Draft or can be paid quarterly or semi-annually by direct bill or e-bill to you (\$10 administrative charge).*

Additional helpful hints for both agent and applicant:

- The Agent should answer benefit-related questions prior to the call.
- Application calls can take approximately 40 minutes. However, the call can go longer based on the number of people applying for coverage and medical history. To complete the application process, contact our Application Specialists at 1-800-552-0758.
- If applying for spousal coverage or dependent coverage for 18+ year old, it is necessary to have the primary applicant and their dependents available to authorize any requests for medical information from the Medical Information Bureau (when applicable).

*\$10 fee may vary by state. In MS the fee is \$6, in UT the fee is \$5 and there is no fee in KS.

**To Start the Application Process,
Call 1-800-552-0758**



AGENT CONFIRMATION FORM FOR INDIVIDUAL HEALTH INSURANCE

APPLICANT INSTRUCTIONS: Complete this form and fax to HealthPlan Services.

Send to HPS Attention: Fax to: 800-681-0054

Table with columns for PERSON(S) TO BE INSURED and DEPENDENT CHILDREN, including fields for Name, Sex, DOB, and SSN.

1) Resident Address: City: State: Zip:
2) Home Phone Number: Work: Cell:
3) E-mail address:

BILLING PREFERENCES
Payment Method - Check One
Billing Frequency - Check One
Send premium notices to:
Tobacco User - Primary/Spouse

Table with columns for Brand, Portrait, Autograph, Autograph HSA Qualified, and Monogram, detailing deductible and benefit options.

REQUESTED POLICY EFFECTIVE DATE QUOTED PREMIUM: \$

TO BE COMPLETED BY AGENT ONLY

SELECT MARKET SOURCE

HealthPlan Services
Writing Agent Name: Agent Social Security #:
Agency Name:
Address: City: State: Zip:
Agent Fax Number: Agent Phone Number:
Agent E-mail Address:
Agent Signature:
Agent of Record Name: Group Benefit Administrators-HPS-Agency #1280515 Agency Tax ID # 04.2492425

*\$10 fee may vary by state. In MS the fee is \$6, in UT the fee is \$5 and there is no fee in KS.

Fax completed form to 1-800-681-0054