MEDICARE CONTRACTING REQUEST FORM HST-STL, LLC:

CONTRACTS WILL BE COMING FROM DIFFERENT PARTNERSHIP SOURCES VIA EMAIL. YOU MAY SEE SURANCEBAY, INSURANCE PHOENIX, JACK SCHROEDER & ASSOCIATES OR HST-STL IN YOUR EMAILS. THESE ARE ALL PARTNERS IN THE MEDICARE CONTRACTING PROCESS.

Agent Name: _____

Agent NPN: _____

Agent CHC Email: _____

Agent Phone: _____

Agent Address: _____

Agent DOB: _____

Compass Agent Upline: _____

***Agent Fee Acknowledgement: I have read the appointment fee chart and accept the fees** _____
Initial Here

PLEASE CHECK OFF THE CARRIERS AND APPOINTED STATES:

COMPASS HEALTH CONSULTANTS

- ☐ Aetna MA
- ☐ Aetna SSI
- ☐ Anthem
- ☐ BCBS
- ☐ BCBS AZ
- ☐ BCBS TN
- ☐ Cigna MA
- ☐ Cigna Med Supp
- ☐ Devoted
- ☐ Essence
- ☐ Florida Blue
- ☐ Freedom
- ☐ Gerber Life (Senior Life + Ancillary)
- ☐ Geo Blue (Travel)
- ☐ GTL (Hospital Indemnity)
- ☐ Gold Kidney
- ☐ Heartland National
- ☐ HCSC-BCBS
- ☐ Humana
- ☐ Medico/Wellabe (Med Supp + Ancillary)
- ☐ Molina
- ☐ Mutual of Omaha
- ☐ Optimum
- ☐ Physicians Mutual
- ☐ UHC
- ☐ United American
- ☐ Wellcare
- ☐ WPS

- ☐ Alabama
- ☐ Alaska
- ☐ Arizona
- ☐ Arkansas
- ☐ California
- ☐ Colorado
- ☐ Florida
- ☐ Georgia
- ☐ Hawaii
- ☐ Illinois
- ☐ Indiana
- ☐ Iowa
- ☐ Kansas
- ☐ Kentucky
- ☐ Louisiana
- ☐ Maine
- ☐ Maryland
- ☐ Massachusetts
- ☐ Michigan
- ☐ Minnesota
- ☐ Mississippi
- ☐ Missouri
- ☐ Montana
- ☐ Nebraska
- ☐ Nevada
- ☐ New Jersey
- ☐ New Mexico
- ☐ New York
- ☐ North Carolina
- ☐ North Dakota
- ☐ Ohio
- ☐ Oklahoma
- ☐ Oregon
- ☐ Pennsylvania
- ☐ Rhode Island
- ☐ South Carolina
- ☐ South Dakota
- ☐ Tennessee
- ☐ Texas
- ☐ Utah
- ☐ Virginia
- ☐ Washington
- ☐ West Virginia
- ☐ Wisconsin
- ☐ Wyoming

Email completed form to **medicare@chcquotes.com**