



# Profile page

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Level: \_\_\_\_\_

## Agency Information

Agency Name \_\_\_\_\_ EIN \_\_\_\_\_

## Principals Information

Selling Principal  Non Selling Principal

**Person in the Principal's organization who will process this request (if different then above)**

First name \_\_\_\_\_ Last Name \_\_\_\_\_

Email \_\_\_\_\_

## Requested Appointed States

Please only select states where the agents/agency will be actively soliciting and selling Medicare business on behalf of Cigna- HealthSpring.

- |  |                                   |   |   |
|--|-----------------------------------|---|---|
| <input type="checkbox"/> Alabama                 | <input type="checkbox"/> Florida  | <input type="checkbox"/> Maryland       | <input type="checkbox"/> Pennsylvania   |
| <input type="checkbox"/> Arizona                 | <input type="checkbox"/> Georgia  | <input type="checkbox"/> Missouri       | <input type="checkbox"/> South Carolina |
| <input type="checkbox"/> Arkansas                | <input type="checkbox"/> Illinois | <input type="checkbox"/> Mississippi    | <input type="checkbox"/> Tennessee      |
| <input type="checkbox"/> Delaware                | <input type="checkbox"/> Indiana  | <input type="checkbox"/> North Carolina | <input type="checkbox"/> Texas          |
| <input type="checkbox"/> District of<br>Columbia | <input type="checkbox"/> Kansas   |   |   |



**Guidelines:**

- 1) A selling principal must be contracted, licensed and annually certified.
- 2) A non- selling principal is not required to be onboarded/appointed.
- 3) If the principal is the lead agent, he/she may need to be appointed in order to meet state regulations for the agency license. In this case, it is immaterial whether the agent is selling or non-selling. A principal is required to be onboarded annually certified to remain appointed.
- 4) Agencies will need to be licensed and appointed in all states in which downlines intend to sell.

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Signature

Print Name

Date