

AGENT OF RECORD CHANGE NOTIFICATION

Bright Health plan will accept requests to change the Agent of Record on a policy provided that the following form is sent via email to: brokers@brighthealthplan.com. Agent of Record changes will go into effect on the next billing cycle.

Date	New Broker Name
Member Name	New Broker/Agency License Number
Policy Number	New Agency
	New Agency License Number

Dear Bright Health,

I would like to appoint the above broker/agent as the exclusive agent for my health insurance plan. I understand that the appointment of the above broker/agent rescinds and supersedes all previous appointments and shall remain in force until canceled in writing. I understand that Bright Health will make this appointment effective on the first of the month following receipt of this letter, and that once effective, all commissions and other compensation payable from that date forward will be paid to the broker/agent appointed in this letter.

Sincerely,

Member Signature

Member Phone

Member Email

HAVE QUESTIONS? WE HAVE ANSWERS.

Broker Service Unit:
brokers@brighthealthplan.com
(888) 325-1747

Web: brighthealthplan.com
Broker portal & appointment: brighthealthbroker.com
Broker resources: brighthealthplan.com/broker