

### III. Agent Onboarding Steps

- a. The agent will login with credentials provided on the email:

**From:** [REDACTED]  
**Date:** June 23, 2021 at 4:12:50 PM EDT  
**To:** [REDACTED]  
**Subject:** [REDACTED]: Agent Contracting Registration

Dear [REDACTED],

We're delighted to inform you that Highmark has authorized the submission of your contract with Evolve to market our Medicare Plans. If you have any questions, please contact your recruiting agency.

To facilitate your contracting process, please use the URL and login below to provide the information needed to initiate your request:

URL: [https://secure-web.cisco.com/1fMSRl1UTMF7aUxqZe0nEus8qMzQLaU--QiEnGviGIH6ulmyCYyr6G2bJneGu5pNMIAa04coKFZheALiVXNvtuXntZDOXQV3hATUFEI-XqY2TIEVR46u2cA3vzpxZ8cR-qn9Y6lrnnsaZPiikmK1yFFVeqDtrtaFzugsyxLCKqgUIPN455awldgpaJGG1-dRvuD\\_oTJLf0-L5DbTKdRIWXib83qa4S5XaOltfDZBSjSyyLFponcYW4fPmLuu8l3MyA2Ho\\_8Lw5OzvWRW\\_WHLiAIR9RAEKz4BzWqbNBB5rYbGw2mq65qzOowLmY65w0IPNuTgL7vtd5JyoE13A%2F%2Fhmicsb.med-adv360.com%2Flogin.htm](https://secure-web.cisco.com/1fMSRl1UTMF7aUxqZe0nEus8qMzQLaU--QiEnGviGIH6ulmyCYyr6G2bJneGu5pNMIAa04coKFZheALiVXNvtuXntZDOXQV3hATUFEI-XqY2TIEVR46u2cA3vzpxZ8cR-qn9Y6lrnnsaZPiikmK1yFFVeqDtrtaFzugsyxLCKqgUIPN455awldgpaJGG1-dRvuD_oTJLf0-L5DbTKdRIWXib83qa4S5XaOltfDZBSjSyyLFponcYW4fPmLuu8l3MyA2Ho_8Lw5OzvWRW_WHLiAIR9RAEKz4BzWqbNBB5rYbGw2mq65qzOowLmY65w0IPNuTgL7vtd5JyoE13A%2F%2Fhmicsb.med-adv360.com%2Flogin.htm)

Login email address: [REDACTED]  
Password: B83287C8C575

If you are unable to access the registration website or have any questions regarding the process, please contact your recruiting agency, e-mail [REDACTED] or call us at [REDACTED]

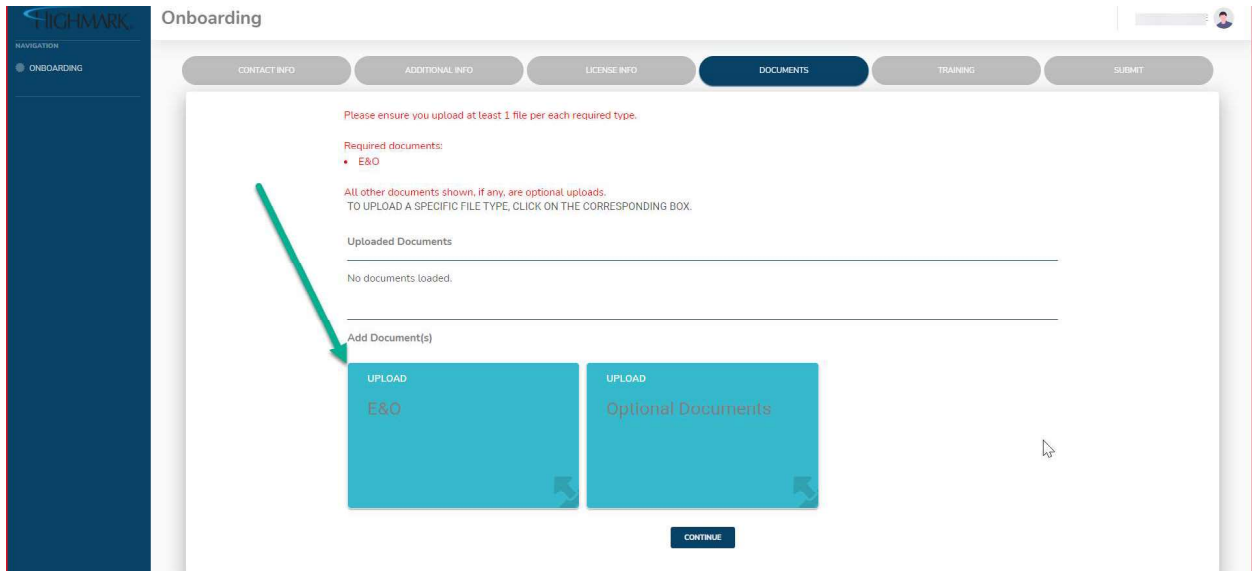
Thank you,  
Agent Contracting Department

- b. They will then click start on the onboarding case assigned to them:

Name	LOB	Year	Type	NPN	States	Upline Level	Affiliated Agency/Team	Submitted By	Creation Date	Status
START: test case	Medicare Advantage & Medi Gap	2022	Initial	1111111111	PA	Agent			07/22/2021	Created - New

- c. Agent will complete the Contact Info Page:

- i. First Name
  - ii. Last Name
  - iii. Social Security Number
  - iv. National Producer Number
  - v. Date of Birth
  - vi. Telephone Number
  - vii. Address 1
  - viii. Address 2
  - ix. City
  - x. State
  - xi. Zip Code
  - xii. Select: **Continue**
- d. Agent will complete the Background Questions
- e. Agent will validate their insurance license is valid
- f. E&O Submission:
- i. Select Upload E&O:



- ii. Complete the information regarding your Errors and Omissions coverage and upload a copy (preferably PDF) of your E&O:

The image shows a web form titled "Upload Document" with a close button (X) in the top right corner. The form contains the following fields and buttons:

- Type: E&O
- Carrier Name\* (required)
- Start Date\* (required)
- End Date\* (required)
- Coverage Amount
- Description
- File\* (required) with a "BROWSE" button next to it
- An "UPLOAD" button at the bottom center

- iii. Once successful, the box will show up as green and will look like this. (Be sure to scroll down to the **Continue** button to move on.)

## Onboarding

Required documents:

- E&O

All other documents shown, if any, are optional uploads.  
TO UPLOAD A SPECIFIC FILE TYPE, CLICK ON THE CORRESPONDING BOX.

Uploaded Documents

File Name	File Type	Description	Delete
pdf	E&O		

Add Document(s)

UPLOAD E&O ✓

UPLOAD Optional Documents

CONTINUE

- g. Agent will complete the 2022 Highmark Medicare Training (does not apply to Medigap only agents.)
- h. Agent will complete the Highmark Producer Appointment Agreement
  - i. You will need to scroll down through both the contract and the page:

Submit Onboarding

Individual\_Producer\_Appointment\_Document.pdf 1 / 2 94%

HIGHMARK

HIGHMARK PRODUCER APPOINTMENT AGREEMENT  
(Individual Medicare Producer)

This Appointment Agreement ("Agreement") is made effective as of the date this agreement is electronically signed by and among Highmark Inc. ("Highmark"), and its affiliated companies herein, ("the Highmark Companies") at their principal offices at Fifth Avenue Place, 120 Fifth Avenue, Pittsburgh, PA 15222 and the Individual Medicare Producer applying for Appointment with Highmark ("Producer").

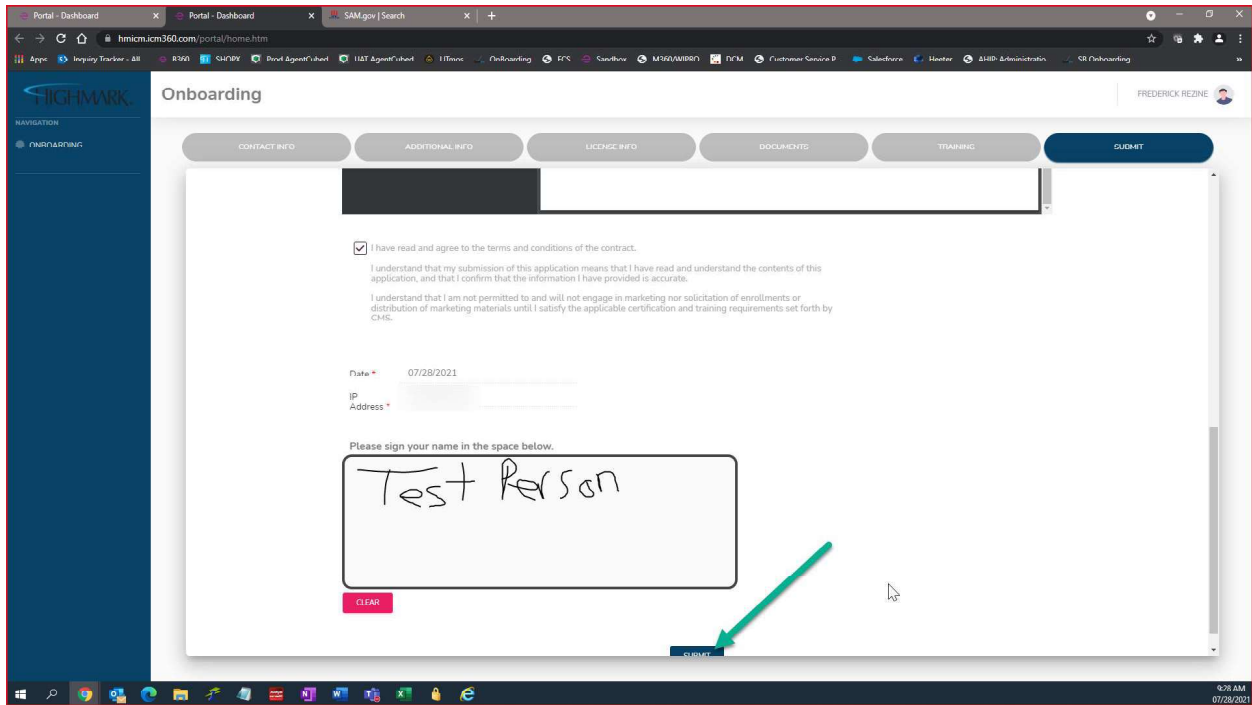
WHEREAS, Producer has been issued a Producer License by the Commonwealth of Pennsylvania Insurance Department ("Department"); and

WHEREAS, Producer has requested one or more of the Highmark Companies to appoint him/her as a producer to sell Highmark Companies' products;

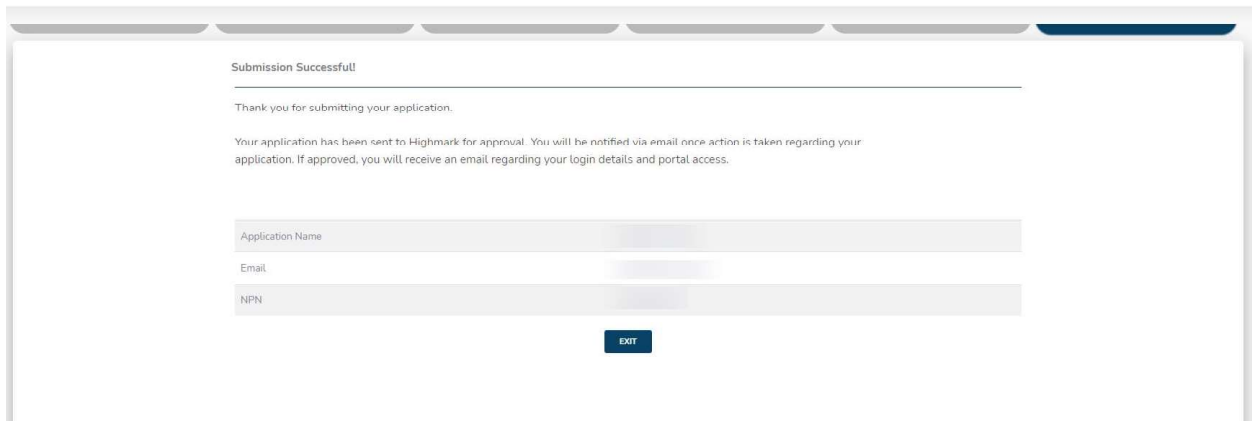
NOW, THEREFORE, intending to be legally bound, the parties to this Agreement agree as follows:

1. Producer warrants that he/she has been issued a valid producer license by the Department and that the license is in full force and effect. Producer further warrants that his/her license reflects lines of authority for the kinds of insurance that Producer intends to sell on behalf of the Highmark Companies.
2. Producer has completed the Producer Appointment Information Form ("Information Form"), attached to this Agreement and made a part of this Agreement, prior to the execution of this Agreement. Producer hereby warrants to the Highmark Companies that the information contained on the Information Form is true and correct as of the date Producer executes this Agreement.
3. The Highmark Companies each hereby appoint Producer to act as each of their representatives in the sale and service of products that each company shall specify from time to time.

- ii. Agent will have to check that they have read and agree to the terms and conditions of the contract.
- iii. Agent will have to use their mouse (by holding down the left button) and sign in the box.
- iv. Agent will click **Submit**



i. Agent will then see **Submission Successful:**



j. Highmark Senior Markets will then reach out with any further information needed/the agent will receive confirmation once their appointment has been approved and finalized (along with their credentials for the Highmark Senior Markets Producer Portal (<https://medicare.highmark.com/producer/login.>))

#### IV. Contacts

- a. Email: [HIGHMARKSENIORMARKETS@HIGHMARK.COM](mailto:HIGHMARKSENIORMARKETS@HIGHMARK.COM)
- b. Phone: (Monday-Friday, 8 AM to 4 PM (EST))  
**1-800-652-9459**, option 1, and then option 2.