Wellcare

Health Plans

Agent Contract

APPOINTMENT REQUIREMENTS

Please complete, sign and date these forms; submit the following items to your Managing General Agent:

1. NYS License
2. Proof Errors and Omissions Insurance
3. W-9 Form
4. Follow the attached instructions for online contracting

NOTE:

All documentation must be completed *and signed* in order to proceed with the appointment process. **Submit your signed paperwork and all additional requirements to your Managing General Agent Not directly to the Company.**

You can mail your completed paperwork to:

Genesis Business Capital, Inc.

Agent Licensing

520 White Plains Road Suite 500

Tarrytown, NY 10591

OR

Tel: (914) 909-2548

Fax: (866) 548-1152

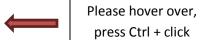**contracts@genesisbusinesscapital.net**

WellCare Health Plans, Inc. Online Contracting for New Agents

WellCare Health Plans, Inc. is excited to offer the ease of online contracting for new agents. In order for new agents to market WellCare Health Plans, the following is required:

1. Complete a 2014 broker contract thru our online contracting portal (link below).
2. Complete WellCare's Agent Certification Training (ACT) online and pass the final exam with a 90 or better. Agent has 3 attempts to pass.
3. 2014 AHIP is required with a passing score on the final exam of a 90 or better. Agent has 3 attempts to pass. After you receive your WellCare University ID, click HERE to submit your transcripts to WellCare.
4. WellCare will conduct a background & licensure check once training is complete & AHIP certification has been received.
5. Lastly, you will need to wait for an email from WellCare notifying you that you are certified to sell. The email will include your WellCare Producer ID.

Online contracting for agents is now available:

Click HERE to Contract with WellCare Health Plans

Please hover over, press Ctrl + click

If you are contracting under a Field Marketing Organization (FMO) or agency, please contact the FMO or agency to obtain their contracted name or Producer Number and ensure they are contracted with WellCare. During the contracting process, you will be asked to provide this information. Agents can only be contracted with one FMO. You will be assigned direct to WellCare if no information is provided.

Online contracting steps:

1) Enter Name and Email
2) Complete authorization
3) Agree to electronic contract
4) Complete the interview
5) Sign documents and submit
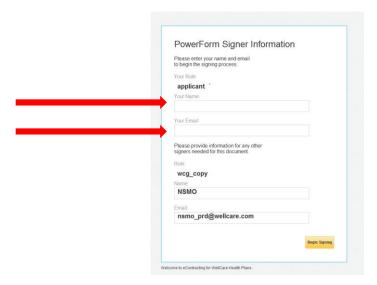6) Print or save the documents to your computer

Upon completing the online contracting, you will receive an email notification that your contract has been received. In 24-48 hours, you will receive an email from the WellCare Training Department with information on how to complete certification.

Should you have questions or need assistance, please reach out to your agency or Producer Services at email: ProducerServices@wellcare.com, phone: (866) 822-1339.
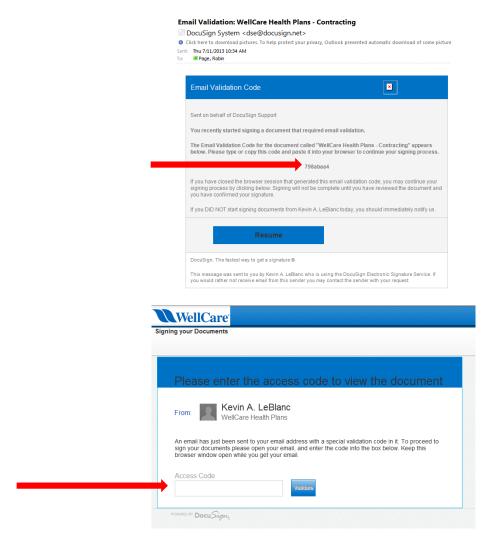
STEPS TO CONTRACTING WITH WELLCARE

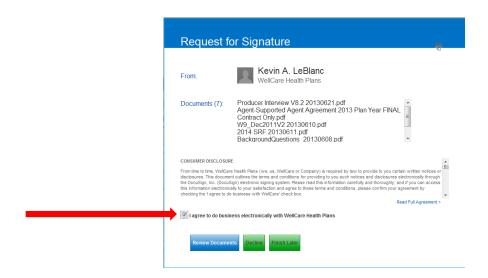[Click HERE to Contract with WellCare Health Plans](#)
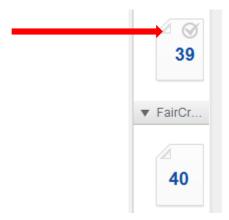
Begin by entering name and email address.

After entering name and email, the following will appear. Agent will need to get the code from their email box and enter it below.

Once the code is entered correctly and validated, agent needs to click the check box to continue.
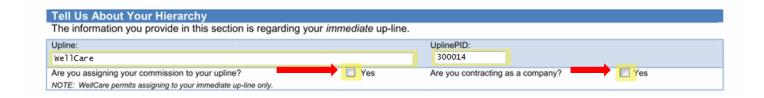

Agent will proceed with filling out all the required fields and sign where indicated. All fields are marked in RED. If a form has been completed correctly, the circle to the left of the document will fill with a check mark. If the document has not been filled out completely, the circle will remain empty.
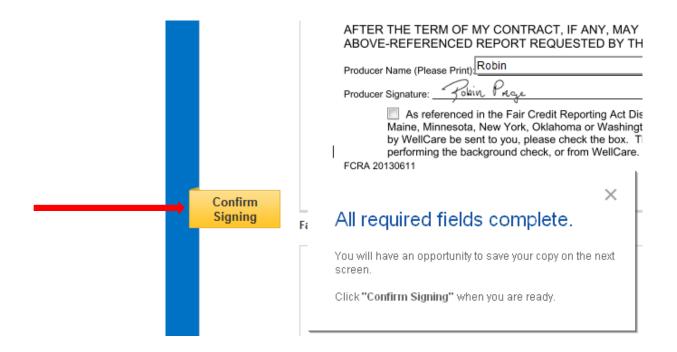

If agent wishes to contract as a corporation or assign commissions, check the appropriate box and information needed will be requested.

Please enter Upline name: GENESIS BUSINESS CAPITAL, INC. and Upline PID: 315866 .

Once everything has been completed, the box to the left will appear asking to confirm signing.

AFTER THE TERM OF MY CONTRACT, IF ANY, MAY
ABOVE-REFERENCED REPORT REQUESTED BY TH

Producer Name (Please Print): Robin

Producer Signature: Robin Page

☐ As referenced in the Fair Credit Reporting Act Dis
Maine, Minnesota, New York, Oklahoma or Washingt
by WellCare be sent to you, please check the box. T
performing the background check, or from WellCare.

FCRA 20130611

✕

Confirm Signing

All required fields complete.

You will have an opportunity to save your copy on the next screen.

Click "**Confirm Signing**" when you are ready.

This is the final box that appears. The documents can be viewed, downloaded or printed at this time. The agent can then click the X at the top right to close out.

Subject: WellCare Health Plans - Contracting

✕

You have completed your documents!

DS View Document

Cancel

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