



2019 Certification Worksheet

United Healthcare/AARP

www.uhcjarvis.com (Producer Help Desk: 888 381 8581)

Log In. Click on <Knowledge Center> <Certifications> (Under **Training**)..This brings up “2018 Certification User Guide” and click <Launch Certifications>. This brings up the 2019 User Guide and the Launch Certifications info, which explains technical requirements and certification instructions. After reading the instructions, go to the Menu in the top left corner and click <Certifications>. Choose certifications to complete.

UHC does not require AHIP, but if you have it and provide them with it, you will not have to take all the certification modules.

USERNAME: _____

PASSWORD: _____

Date Completed: _____

Aetna/Coventry

<https://aetna.cmssystem.com/ext/ahip/login.php> (For help with training: 866 714 9301; Press 4 the Press 1)

Log In. Annual Certification and Other Required Medicare Training comes up; click on <2019 Aetna Individual Medicare Certification> This brings up a list of courses that you have to complete in order; if you try to click on the 2nd one, it will tell you that you must complete the 1st one prior to taking the 2nd one, etc. The 1st course is <AHIP Training>. When you click on it you get the question: “You are about to leave this site and be directed to AHIP to access training. Are you sure you want to do this? Yes or No”

USERNAME: (NPN or email) _____

PASSWORD: _____

Date Completed: _____

Anthem/CareMore

Anthem.cmssystem.com/ext/ahip/user/edit.php (Broker Support: 855 277 6067) (The Anthem Access code is: external-selfreg) <Welcome to the Anthem Medicare Certification Training Center> Log in (this will bring up your information – if you already have AHIP it will show that) <Certification Portal> and read/accept terms of service. This will take you to the certification links, which must be completed in order.

Humana

www.humana.com

Log in and go to <Vantage> <MarketPoint University> Log In <View> <Launch & Enroll> and this will bring up all 2019 Certs.

USERNAME: _____

PASSWORD: _____

Date Completed _____

SelectHealth

SelectHealth requires AHIP and that you physically attend one of their presentations in order to initially be contracted with them. Contracting for consecutive years may be done on line. Please see carothersinsurance.com for the upcoming SelectHealth presentation dates and locations.

Senior Care Plus/Hometown Health:

If you are NOT already contracted with Hometown Health:

Step #1: You will simply need to go to: hometownhealth.com <eQuote Quoting Engine> <Register> and enter 270-05-2045 when it asks for the EIN; this is required as it links you to Carothers and Hometown is not accepting new agents at this time. Enter your information <Create User>;

Step #2: Go back to the home page and click <New Broker Onboarding Information> <eQuote Set-Up Form for Writing Agent>, print and complete the form and email it to: jcurwen@hometownhealth.com with a copy to jack@carothersins.com.

Existing agents only need to complete Step #2.

If you already have a Hometown health Contract with us, please fill out this addendum and submit
jack@carothersins.com



Writing Agent Information

In order for you us to properly set you up as an approved agent with Hometown Health, we need to ensure you have an active and up-to-date eQuote account. Please complete the information below and Hometown Health will set up / update your eQuote account. Return the form to jcurwen@hometownhealth.com

First (legal) Name:
Middle Initial
Last (legal) Name
License #
NPN #
Date of Birth:
Email Address:
Username:
Password: 8 character minimum
In the event of an existing account, we will send a prompt to the email provided to reset your password
Security Question:
Security Answer:

Do you have an existing eQuote account? Yes ☐ No ☐ Not Sure ☐

If yes, provide the following:

Username: Type here.
Associated Email: Type here.

If you do not, provide the information below so we can set one up for you:

1. Are you an Independent Broker? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, do you use an "agency" name other than your own name?
Yes <input type="checkbox"/> No <input type="checkbox"/>
2. If yes, what is your "agency" name?
Type here.
3. Are you employed by an Agency? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide managing agency's name:
Type Here
4. Do you work with an assistant/Account manager? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please type their name below
Type Here

Please fill this out-in addition to above--if you do NOT have a Hometown Health Contract through us.



In order to properly set up your company up in VUE, we need to create a new, Managing Agency Account in eQuote. The Managing Agency Account will allow Principle Agents to view commission information in the Vue software portal. The Managing Agency Account will also be used to upload Principle Agent documentation. Commission Electronic Fund Transfers (EFT) will also be sent to the banking information contained in the Managing Agency Account. Please note, in order to keep commission information confidential, you may want to also have another eQuote account in your name that can be used by yourself and others for quoting purposes, but would not have access to commission information. Return the form to jcurwen@hometownhealth.com

Managing Agency Information

Please provide the information below as it appears on your W-9.

Agency Name:
Principle Agent Name:
Principle Agent DOB:
Principle Agent Email Address:
Username:
Password: 8 Character minimum
In the event of an existing account, we will send a prompt to the email provided to reset your password
Security Question:
Security Answer:
Principle Agent License #
NPN #
Corporate NPN#
Tax ID <input type="checkbox"/> or SSN # <input type="checkbox"/>
Address Line 1:
Address Line 2:
City, ST:
Zip Code:
Primary Phone #:
Fax #
Website:
Number of Employed Agents:
Number of Assistants: