



### Agent of Record Change Request

This form allows my new insurance agent to get information about my Medicare Advantage plan from PacificSource Medicare. I know the agent’s commission will be paid out of my monthly premium payments.

Member Information		
Member Name: (First, M.I., Last)		Date of Birth:
Member ID:	Plan Effective Date:	Phone:
Authorization of Agent of Record Change		
I choose this new agent to help me with my PacificSource Medicare Advantage plan. I am aware the new agent is not employed by Pacific Source Medicare. I know this new agent will replace my prior agent. This change will remain until I let the plan know of a new change in writing.		
Signature		
Member Signature:		Date:
Agent Information		
Former Agent Name: (First, Last)		
New Agent Name: (First, Last)		Agent PM#
Company Name:		Phone:

Please complete and sign this form, and return to PacificSource Medicare by:

- Email: [medicareagentcoordinator@pacificsource.com](mailto:medicareagentcoordinator@pacificsource.com)
- Fax: (541) 382-3407 or (208) 395-2682
- Mail: PacificSource Medicare, 2965 NE Conners Ave, Bend, OR 97701

Internal Use Only			
Policy Effective Date:		Policy Type:	
Prior Agent Name & PM#:		Prior Commission:	
AOR Receipt Date:		New Agent Effective Date:	
Updates/Notes Made in Facets _____ OnBase _____		New Agent Commission:	
NOTES:			

PacificSource Community Health Plans is an HMO/PPO plan with a Medicare contract. Enrollment in PacificSource Medicare depends on contract renewal.

PacificSource Community Health Plans complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. PacificSource Community Health Plans does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

**SPANISH**

ATENCIÓN: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (888) 863-3637 (TTY: 711).

**CHINESE**

小贴士：如果您说普通话，欢迎使用免费语言协助服务。请拨(888) 863-3637 (TTY: 711)。