



2815 Camino Del Rio South 255  
San Diego, CA 92108  
Ph: 1-800-558-2520 Fx: (619) 294-7101

## **AGENT APPOINTMENT CONTRACTING**

1. Log on to [www.hcslife.com](http://www.hcslife.com)
2. Click on **Contracting** tab at top of page
3. Click on **Efficient Forms**
4. First time users click on **Agent Registration** at bottom of page
5. Fill in required fields and create a user id, password and pin number that you will remember (write this information down for future reference).
  
6. Efficient forms will walk you through a series of questions which the various insurance companies require for appointment. You can select the companies you would like to become appointed with all at one time or you may want to come back at a later date and become appointed with more companies.
  - A. If you would to save the information you've entered and complete it at another time: Under the Continue Questions tab Click on Save and Continue Questions Later.
    1. When you log back in Click on **"Submit New Contract Requirements"**
  
7. Many companies require the agents to submit an application before becoming appointed. If you select all the companies initially through efficient forms this will speed up processing any submitted applications should you sell one of their products for in the future.
  
8. The Department of Insurance requires you to complete the online class for Anti Money Laundering (AML) certification. When completing your contracting you will be asked who you took the course through and usually it is LIMRA. If you need to complete the course, go to our website [www.HCSlife.com](http://www.HCSlife.com) , select contracting, select AML and you will be given instructions on how to complete the certification online.
  
9. After you have answered all the required carrier contracting questions, you will be assigned a secure fax number to send any required documentation to the Confidential Efficient Forms Representative assigned to your case.
  
10. Required documentation to be faxed:
  - A. Signature Page
  - B. All State Insurance Licenses (individual and/or corporate)
    1. If you are appointed in numerous states only submit licenses for the states you would like to sell insurance in
  - C. Errors and Omissions: Certificate of Insurance
  - D. Direct Deposit with voided check (submit if you would like to have commissions deposited directly into your bank account)
  - E. Legal/Other required documentation

**If you have any questions or concerns contact Andy or Linda**



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## How to run Term Life quotes through HealthCare Solutions



**Step 1:** Go to [www.HcsLife.com](http://www.HcsLife.com)

**Step 2:** Go to *Instant Quotes* on the right hand side and choose *Term Life*. You may also run a *Guaranteed UL* simply by clicking on *Guaranteed UL* under “*Desired Length*”.

**Step 3:** Enter the information for each section: Client name, Birthday/Age, Gender, etc.

**Step 4:** Click on *View All Quotes*

**Step 5:** Check desired boxes to compare Companies.

**Step 6:** You may edit your original quote by clicking *Edit Quote* at the top. To go back to all companies click *View All Quotes*.

**Step 7:** If you would like to save the quotes and come back to them later you can click *Print Quotes* and save as a pdf.

**Step 8:** Click *Email Quotes* or *Print Quotes*. You may email or print a comparison with your selected companies.



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## HealthCare Solutions Life Processing

### Step 1: Getting Contracted

Contact: Linda Nunes @ 619-294-7100  
[lnunes@hcslife.com](mailto:lnunes@hcslife.com)



#### Appropriate Paperwork:

- 1) Carrier Contracting Forms (different for each carrier)
- 2) Current copy of License
- 3) Current copy of E&O coverage

#### ONLINE PROCESS:

See attached sheet for Efficient Forms.

Fax paperwork to: 619-294-7101. Attn: Linda Nunes

May also mail paperwork to: HealthCare Solutions  
2815 Camino Del Rio S. #255  
San Diego, CA 92108  
Attn: Linda Nunes

**\*\*Be sure to talk to Michael Dysart or Linda Nunes regarding commissions**

## **Step 2: Submitting your first piece of business**

Contact: James Morris – Case Manager

[jmorris@hcslife.com](mailto:jmorris@hcslife.com)



If no check is submitted with application  
(i.e. credit card or EFT Authorization):  
Fax to 619-294-7121. Attn: James Morris

If check submitted with application:

Mail to: HealthCare Solutions

2815 Camino Del Rio S. #255

San Diego, CA 92108

Attn: James Morris

### **SPEED UP THE PROCESS!!!**

May fax copy of check with new application initially, but will still have to mail original to the address above as soon as possible.

**Also, please see attached checklist to ensure faster processing!**

### **\*\*Note\*\***

When dealing with American General Life Insurance Company, contracting paperwork must be submitted with new business to get assigned an agent number.

## **Step 3: Supplies & Forms**



### **For short-term supplies:**

Please call 800-558-2520 for help with ordering supplies.

We will send out limited amounts of life insurance forms, brochures and rate guides to agents. Or come to the office. We will provide you with whatever you require.

### **For bulk-orders: (recommended):**

For orders of 10 or more, please call 800-558-2520 and we will help set you up to order supplies online through the different carriers.

### **For PDF copies of Forms:**

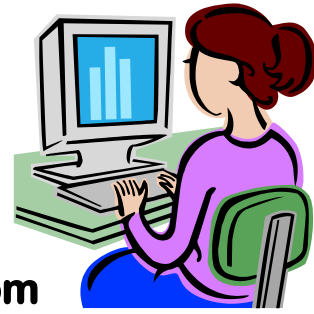


Go to [www.hcslife.com](http://www.hcslife.com) and click “Forms” under the “Life Insurance” Tab. Select your state and insurance carrier to get started.

You can also call 800-558-2520 or email [jmorris@hcslife.com](mailto:jmorris@hcslife.com) and we will email you the appropriate forms you need.

## **Step 4: Websites/Quotes**

[www.hcslife.com](http://www.hcslife.com)



Quotes: May email or call Cameron Greenlaw  
@ 800-558-2520 or [cgreenlaw@hcslife.com](mailto:cgreenlaw@hcslife.com)

Quoting on the website: Click **\*\*\*INSTANT QUOTES\*\*\*** to get started  
!!!

For help running quotes, please contact Andy or Cameron 800-558-2520

For in-depth proposals: Call Cameron or Andy for illustration software support, or email [cgreenlaw@hcslife.com](mailto:cgreenlaw@hcslife.com).

**REGISTER FOR WINFLEX WEB ON OUR WEBSITE TO RUN YOUR OWN ILLUSTRATIONS!!!!** See attached sheet.

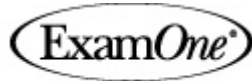
For hard-to-place cases, we will find the right carrier for you!!  
We will shop smokers, tobacco users (including smokeless), diabetes, and other medical conditions!

## **Step 5: Parameds**

Contact: James Morris – Case Manager

[jmorris@hcslife.com](mailto:jmorris@hcslife.com) ; 619-294-7100

We utilize:



A Quest Diagnostics Company



**SUPERIOR**  
Mobile Medics

Please let case manager know if you will order your own parameds. Otherwise, case manager will order for you and keep you updated.

We can also speed up the paramed process by ordering in advance of submission of your application.

**See attached Paramed Checklist to ensure optimum processing!**

For information about the Paramedical Process,

Contact James Morris @ 800-558-2520 or email [jmorris@hcslife.com](mailto:jmorris@hcslife.com)



## Sample Cover Letter

### NAILBA Life Insurance Cover Letter Sample

The purpose of the cover letter is to provide a “face” to the case that will help give the underwriter a better mental picture of the applicant’s situation. Below you will find a sample cover letter for your use.

ABC Life Insurance  
1515 State Street  
Anywhere, ST 05501

To Whom It May Concern:

The purpose of this letter is to provide a summary of the attached application for **Joe Client** who is applying for **PLAN UL** for **\$1,000,000**.

Joe Client is a partner in Company Name, LLC. The LLC is applying for Key Person insurance for \$1,000,000. The estate of the insured is the beneficiary, as the death benefit will provide to the client’s family the amount relative to the insured’s ownership in the LLC. Enclosed is a copy of the pertinent pages of the Partnership Agreement. **(Background/Financial Need)**

Joe had a heart attack about 15 years ago. Although he does not have any current side effects from this heart attack, he does take several medications. The medications prescribed are listed on the application and non-medical attached. Joe also has significant family history, which has precluded him from obtaining the “best” possible offer from other insurance carriers. Beside the heart attack 15 years ago, Joe has stayed in very good health, and because of the family history and the old MI, Joe is very conscientious about his health and takes time to exercise 3 times a week. You should note that his last exam, lab work, and EKG with his primary care doctor were within normal limits. A recent cardiologist work-up was also negative, which I have included as well. We are looking for preferred coverage, and hope that based on his healthy lifestyle you can accommodate this. **(Health Summary)**

Enclosed find application, non-medical, copy of his recent cardiologist work-up, and the Partnership Agreement. I have ordered the exam and new labs for Joe, which are scheduled for next week. **(Attachments)**

If you have any questions about this application for **Joe Client**, please call me at 505-555-5555.

Respectfully,

### Is Your Business Profitable?

Using placement ratio, carriers are looking at agents as either profitable or not profitable parts of their field force. Brokerage General Agencies (BGAs) also look at their business to see if it's profitable, as agents do as well. Cases that are not placed are not profitable for anyone, and carriers are now starting to charge BGAs with low placement ratios by dropping commissions, or worse, terminating contracts with brokerage agencies and agents. The industry average of not placed cases is between 25 and 35 percent. The hardest part of an agent's job is getting the sale. The next major hurdle is getting the formal application completed and mailed to the BGA; after that, most of the work of getting a policy issued will be done by the BGA and carrier.

- How many prospecting calls do you have to make to get just ONE appointment?
- From the appointments you obtain, how many turn to follow-up appointments?
- How much of your time is spent on determining need and adjusting products?
- How many follow-up visits do you make?

A lot goes into getting that **one** application! Finally, when you are done and ready to send this application to your BGA, most of your work is completed.

What if you don't place that case? This is lost time, money, and effort for you, the BGA, and the carrier. Medical records have been paid for, underwriting requirements have been obtained, underwriters and doctors have reviewed the case. Everyone involved has made an investment in the case for no return.

Use this guide, ask the right questions, complete ALL questions on the application, and set realistic expectations up-front for your client.

All of this can make the difference between an expedited paid case and a failed opportunity.

### **It's not how many cases you submit. It is how many are paid!**

"What's all this worth?"

If you can reduce your case cycle time by 8 to 10 days, then you could see a dramatic increase in your placement percentage.

If you spent an extra five minutes per case, you could increase your placement ratio by 5 percent, and your gross income would increase by approximately \$12,000 per year! This is based on 100 cases per year with an average gross profit of \$2,300. This means spending another 8 hours or so each year and earning an additional \$1,500 for each hour spent.

Think of how much better you feel when your time prospecting results in more sales.

**Completion of a Forms Checklist will accelerate the underwriting process as much as 10 to 15 days.**  
**Application (Part 1)**

- Signed by Agent, Proposed Insured, and Owner.
- When applicant is a child, the parent must sign as the Proposed Insured on all forms.
- When a business is the Owner, an officer other than the client **MUST** sign the application as Owner. Include his/her title when signing for the business.
- When the Owner is a Trust, the application **MUST** be dated after the Trust date. Also, be sure to include tax ID#. All trustees should sign the application.
- If a corporation is the owner, make sure to include tax ID#.

**Non-Medical (Part 2)**

- At most, complete all doctor information and impairments; these two items will shorten the underwriting process.

**HIV Consent**

- Your General Agent will have correct form numbers for the resident state of the applicant.

**HIPAA Authorization**

- Signed HIPAA Authorization Form

**Replacement Form(s)**

- Your General Agent can verify proper forms for the state in which this application is being signed and delivered.

**Questionnaires**

- Special questionnaires may be required for some activities. Your General Agent can assist you with the correct form.

**1035 Forms**

- Please submit originals.

**State-Specific Forms**

- Proper forms for the state in which this application is being signed and delivered can be verified with your General Agent.

**Financial Information**

- When a business is the Owner, please include business financial statements to include Balance Sheets, Income Statements, and Cash Flow Statements (if available) for at least the last two years to demonstrate a track record for the company.

**Cash with Application**

- Checks need to be made payable to the Insurance Carrier.
- Ensure your client's coverage is bound by verifying with your General Agent the specific rules for each Carrier.
- Completed Limited Insurance Agreement when submitting cash with application.

**Underwriting Requirements:**

- Schedule the paramed, labs, EKG, and all medical requirements.

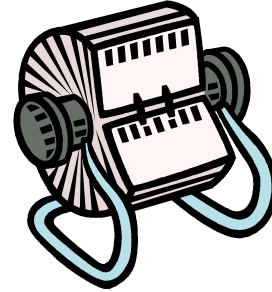
**Universal Life Cases:**

**Certification of Non-Illustration or Acknowledgment of Non-Illustration**

- NAIC regulations require the illustration to be dated on or prior to the application signed date.
- If a signed illustration is not collected at time of application, a Certification of Non-Illustration or Acknowledgment of Non-Illustration must be completed.

# HealthCare Solutions Contact Directory

2815 Camino Del Rio S, Suite 255  
San Diego, CA 92108  
Ph: 619-294-7100 / 800-558-2520  
Fax: 619-294-7101 / 7121  
[www.hcslife.com](http://www.hcslife.com)



Life Sales Manager/President.....Michael Dysart  
Michael\_Dysart@hcslife.com

Contracting/Commissions.....Linda Nunes  
Lnunes@hcslife.com

Agent Development / Life, LTC.....Andy Dysart  
adysart@hcslife.com

Life Processing / Support.....James Morris  
jmorris@hcslife.com

Health Sales Support.....Kelley Bayne  
kbayne@hcslife.com

Agent Support.....Cameron Greenlaw  
cgreenlaw@hcslife.com

Reception/Contracting.....Cheryl Maraia  
cmaria@hcslife.com

*We look forward to working with you!!!*

# *Ensure Faster Paramed Processing!!*

Examination Checklist to save you time and to obtain the best possible results for your clients.  
Please have them follow these helpful suggestions:

- Blood Pressure and pulse can be artificially raised by stress, alcohol, caffeine and tobacco.
- Get a good night's sleep the night before the examination
- Abstain from alcoholic beverages for at least eight hours prior to exam
- Do not smoke or chew tobacco for at least one hour prior to exam
- Avoid drinking coffee, tea or caffeinated soft drinks at least one hour before exam
- Limit salt intake and high cholesterol foods 24 hours before exam
- You should not engage in strenuous physical activities 24 hours before exam
- Advise Paramed Examiner of any medications you are taking, even if non-prescription
- Have available physician's names, addresses, dates of past visits, names of any prescribed medications and information regarding injury and major illness during the past 5 years
- If you belong to Kaiser or any other prepaid medical plan, have your medical record number available
- Drink a glass of water an hour or so before your appointment. This will help in obtaining a urine specimen.

For AGENTS: Your client may wish to pre-set an appointment date when they would like to be seen.

Please let your case manager know at least 3 days in advance of the date to ensure proper placement.

Date: \_\_\_\_\_ Time: \_\_\_\_\_

# *Ensure Faster Application Processing!!*

Here is a list of commonly missed items on applications:

- Place of Birth
- If not a US Citizen – VISA/GREEN CARD INFO REQUIRED – COPY OF VISA/CARD IS PREFERRED. Resident Supplemental form may be needed. Call case manager to confirm.
- Gender
- Tobacco use – If yes, include date of use, type and quantity
- Driver's License # and state
- Occupation. Household Income & Annual personal income
- Rate Class Quoted (Preferred non-tobacco, standard, etc.)
- Modal \$: the premium the client was quoted
- Premium method of payment
- Existing Coverage: Does the primary proposed insured have any existing or pending annuities or life insurance policies? Will need to be checked in any case. Appropriate Replacement Forms will be needed if replacing. Call Case Manager to confirm.
- City and State where application was signed
- Limited Temporary Life Insurance Agreement Receipt (American General cases only). 1 page copy to be returned with application signed and dated. Even if no money is collected (put \$0 in "modal amount received")



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## **WINFLEX WEB UNIVERSAL LIFE QUOTING REGISTRATION**

- 1. Log on to [www.hcslife.com](http://www.hcslife.com)**
- 2. On the top right highlight tab INSTANT QUOTES**
- 3. Click on UL, which will open log in and registration for *WinFlex Web***
- 4. Scroll to bottom of page and click on REGISTER NOW**
- 5. Fill in all required fields and create a *User ID* that you will remember (write this information down for future reference). The internet connection speed is not real important so don't worry if you are not sure what speed you are using and arrow down to select dial up.**
- 6. In the Broker Field type *Health Care Solutions***
- 7. Check the boxes for the companies you are interested in quoting**
- 8. Click on COMPLETE REGISTRATION at bottom of page**
- 9. An email will be sent to Andrew at Health Care Solutions as well as to each individual company for approval. If you are not already appointed with a company you select they may deny your request and will notify you via email. Some may approve your request based on your association with Health Care Solutions.**
- 10. Once approved by Health Care Solutions you will receive an email with your temporary password you may change this once you log back in.**
- 11. Over the course of the next few days you will receive emails approving or denying your request by the various companies. If you are already appointed with a company that denies you, reply via email with your agent number and they should approve your ability to quote through *WinFlex Web*.**

**If you have any questions or concerns contact Andrew**



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## **I GO FORMS ACCOUNT REGISTRATION**

- 1. Log on to [www.hcslife.com](http://www.hcslife.com)**
- 2. Click on TOOLS tab at top of page**
- 3. Highlight and click on I GO FORMS**
- 4. On right hand side, click on SIGN UP FOR A NEW ACCOUNT**
- 5. Enter First Name, Last Name and Email Address**
- 6. Answer all 3 security questions and write them down for future reference**
- 7. You will receive an email with a link and instructions on how to set up account.**
- 8. Repeat steps 1. 2. 3. to log in with you user id and password**

**The “I Go Forms” system will allow you to fill in life insurance applications on the computer as well as submit them directly to our case managers. You should always review and print a copy out for your own records before sending applications electronically.**

**If you have any questions or concerns contact Andy or James**



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## Anti-Money Laundering Certification Course

1. Go to our website at <http://www.hcslife.com>
2. Click on Contracting Tab
3. Click on AML
4. The Screen below will pull up
5. Click on "I am a New User"
6. Read and Follow instructions

## The LIMRA/NAILBA AML Training Program

Welcome to LIMRA's Anti-Money Laundering Training — brought to the industry through the joint cooperation of many insurance carriers, NAIFA, NAILBA, and NAILBA member agencies. Please choose one of the following to enter the site. Thank you.

I am a new user.

I am an existing user.

**Federal law requires insurance agents and brokers to complete Anti-Money Laundering Training.**

**Each agent or broker MUST create their own account and log-in to the AML Training System, and MUST complete the training on their own. It is unlawful to have someone complete the training FOR you.**

**Having someone complete the training for you or using another individual's account to access the training system constitutes fraud and may be punishable under federal law.**

