



Regence BlueShield of Idaho is an Independent Licensee of the Blue Cross and Blue Shield Association

## Letter of Record - Employer Group

This is to certify that \_\_\_\_\_ has been appointed as agent of record for the company named below, for matters relating to group accident, health, dental and vision. This appointment is continuous until another agent is designated by this employer.

In its discretion, Regence BlueShield of Idaho shall accept the change and notify the prior agent of record, the account and the new agent of record. The effective date of the change will be the first of the month following the receipt of this document provided it is received in the Regence BlueShield of Idaho commissions department by the 25th of the month. This form must be signed by an official of the indicated employer group.

GROUP INFORMATION	
Group Number	Phone Number
Employer Group Name	
Address	
By (printed name)	Signature ▶
Title	Date
AGENT INFORMATION	
New Agent Name	New Agent Number
Former Agent Name	Former Agent Number
INTERNAL USE ONLY	
Date LOR confirmed with group	Date former agent notified of change
Date LOR sent to commissions department	Date CRM updated with new agent information
Current Account Executive	New Account Executive