

Individual and Family Plans

Cigna Health and Life Insurance Company

ACKNOWLEDGMENT OF PRODUCER DESIGNATION

You've worked hard for every application you've submitted, so it's important to get credit for your efforts. Please complete this form for any Cigna Individual & Family Plans you've sold that don't designate you as the Producer of Record (POR). Please complete a separate form for each case. **Completed forms can be faxed to 877.484.5968.**

Case Number or Application ID and Original Coverage Effective Date

Customer/Primary Applicant Name (as submitted on application)

Customer/Primary Applicant Date of Birth

Customer/Primary Applicant Physical Address: Street, City, State, Zip Code

POR Change Effective Date Select one On Marketplace Off Marketplace

Agency Name or Independent Primary Producer Name

Cigna Producer Code NPN

Writing Agent Name (if different from above)

Cigna Producer Code NPN

Please provide a brief explanation that supports your Producer of Record update.

By signing below, I confirm I have assisted the aforementioned customer with their Cigna plan Enrollment and said customer agrees to have me listed as their Producer of Record to assist with enrollment, renewal, and/or account maintenance activities.

Producer Signature

Date

Together, all the way.®



Incomplete forms will not be processed. Cigna retains the right to reject POR requests per item K. 4. of the Producer Agreement.

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