

AN INTEGRITY X COMPANY

2024



Agent Name:



## **AGENT NAME:**

## 

<b>∀</b> aetna™	Name of Client: Effective Date:
Anthem.	Name of Client: Effective Date:
ESSENCE HEALTHCARE TO	Name of Client: Effective Date:
Humana	Name of Client: Effective Date:
UnitedHealthcare	Name of Client: Effective Date:

## \* MSUPS ALSO APPLY.

In order to be eligible, you must be contracted under Hovis & Associates for all five carriers AND submit one MA application from all five carriers within a calendar year.

Upon receipt of our 2024 E&O Certificate, your receipt, and approval of the applications, Hovis & Associates will reimburse up to \$500.00 towards E&O Insurance Coverage to the agent listed.