

# Pan American Life Contracting Guide

## The Guide at a Glance

**1** Request your contracts using the customized [AgentContract.com](#).

After you make your requests at [AgentContract.com](#), wait 48 business hours. Then:

**2** Medicare Health Benefits will send you an email regarding the contracting process.  
You will receive an additional email with contracting links. Click these to move to Step #3.

After Step #2, you can immediately complete Step #3.

Using the link from Step #2, you can register your account and begin the contracting application process.

**3** This process consists of 8 sections, including filling out your personal information, authorizing a background check, completing license and payment information, etc. Once your application is finished, you will click "**Submit to Contract**".

Once you submit your contract, wait up to 2 weeks. Step #4 will occur.

Pan American Life will process your contract over the next several days. After everything is processed, you will receive a welcome email.

**4** This welcome email will include your unique writing number, indicating that you are ready to sell!

*Continue reading the following pages for more details on the contracting process.*

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After you request to contract through AC.com, you will receive an email from the Medicare Health Benefits Contracting Team with further information on contracting.

## Email Example

From: "AgentContract.com Contracting" [contracting@seniormarketadvisors.com](mailto:contracting@seniormarketadvisors.com)

Hello Agent!

We are reaching out to you in regards to your request to contract with Pan American Life.

You will receive a unique e-contracting link from [contracting@seniormarketadvisors.com](mailto:contracting@seniormarketadvisors.com) within 24-48 hours. Once the link is completed, you will receive a welcome email within 5-7 business days.

If you have any questions or concerns, please email [contracting@seniormarketadvisors.com](mailto:contracting@seniormarketadvisors.com).

Thank you for contracting with Senior Market Advisors.

-Senior Market Advisors Contracting Team

You will also begin receiving contracting links specific to you for the carriers that you requested within 24-48 hrs. These links will be coming from a wide variety of email addresses, so please keep an eye out on your email.

## Email Example From: [notifications@insadminservices.com](mailto:notifications@insadminservices.com)



Dear Agent,

We appreciate your interest in contracting with Pan-American Life Insurance Company Medicare Supplement. We look forward to working with you. You may click on the [below link](#) to begin the contracting process. Please call me or email my office with any questions or needs.

<https://pan.admin-portal.org/agent-contract/000028D5-32858195-033E-4402-87F3-E7F63410D9D6.html>

Your commission levels:

1. Health: DL11

MEDICARE HEALTH BENEFITS INC  
(205) 639-2773  
[wmcqueen@seniormarketadvisors.com](mailto:wmcqueen@seniormarketadvisors.com)

**Note: The contracting link is unique to you and will be different than the link in the above example.**

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## The contracting process consists of 8 sections:

- The first section, Agent Contract Information, should already be completed.

-Complete the next 7 sections as thoroughly as possible.



[Home Page](#) [Create Account](#) [Contact Us](#) [About Us](#) [Privacy Policy](#)

## Agent Contract for Carla Woodward

Please input your information to complete the application.

### Agent Contract Information

Hiring Agent:	MEDICARE HEALTH BENEFITS INC	Contract Status:	<a href="#">Draft</a>
New Agent Name:	Carla Woodward	Agent Email:	snelson@seniormarketadvisors.com
Advancing:	Standard advancing		
Commission Levels*	• Health: DL11		

\* Commission levels are assigned by your direct upline agent and cannot be changed on the application.

### Third Party Completion

☐ Yes ☒ No Are you completing this contract on behalf of the agent? \*

### General Agent Information

#### Personal Information

First Name: *	Last Name:	Middle Initial:
<input type="text" value="Carla"/>	<input type="text" value="Woodward"/>	<input type="text"/>

Can only be changed by your upline

Optional

Birth Date: \*

In format MM/DD/YYYY

Social Security Number: \*

Tax ID:

Optional

#### Business Address

Address 1: *	Address 2:	City: *	State: *	Zip: *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value=""/>	<input type="text" value="37209"/>

County Name: \*

[Please click here to confirm the address](#)

#### Agent Contacts

Email Address: *	Business Phone Number: *	Cell Phone Number:	Fax Number:
<input type="text" value="snelson@seniormarketadvisors.com"/>	<input type="text" value="(205) 639-2773"/>	<input type="text"/>	<input type="text"/>

Will be used for agent portal account

#### Other Questions

How long have you been an agent or broker: \*

### Background Information

1. Do you have Errors & Omissions (E&O) coverage? \* ☐ Yes ☐ No

2. Have you ever been convicted of any crime, other than minor traffic offenses? \* ☐ Yes ☐ No



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3. Has any insurance company ever canceled any contract of employment or your agent's appointment for any reason other than non-production? \* ☐ Yes ☐ No
4. Does any insurer or agent claim that you are indebted to them under any agency contract or otherwise? \* ☐ Yes ☐ No
5. Have you ever been refused an original or renewal license or had a license suspended or revoked or terminated for any type of insurance license by any state? \* ☐ Yes ☐ No
6. Have you ever been fined or had disciplinary action taken against you with any Department of Insurance? \* ☐ Yes ☐ No
7. Are you currently involved in any litigation or are there any unsatisfied judgements or liens including state or federal tax liens against you? \* ☐ Yes ☐ No
8. Do you currently have a pending bankruptcy or have you ever declared bankruptcy? \* ☐ Yes ☐ No
9. Within the past 10 years, have you ever had a complaint filed against you that resulted in a fine, penalty, cease or desist order, censure or consent order? \* ☐ Yes ☐ No
10. Have you ever defaulted on a (a) promissory note, or (b) any other debt, including consumer or credit card debt? \* ☐ Yes ☐ No

License Information

What is Your Resident State: \*

Please select states you plan on marketing our products:

☐ Alabama

☐ Arizona

☐ Colorado

☐ Florida

☐ Georgia

☐ Illinois

☐ Indiana

☐ Iowa

☐ Kansas

☐ Kentucky

☐ Louisiana

☐ Maryland

☐ Michigan

☐ Mississippi

☐ Missouri

☐ Montana

☐ Nebraska

☐ Nevada

☐ New Jersey

☐ North Carolina

☐ Ohio

☐ Oklahoma

☐ Pennsylvania

☐ South Carolina

☐ Tennessee

☐ Texas

☐ Utah

☐ Virginia

☐ Wisconsin

Payment Information

Account Number: \*

Account Type: \*

Name on Bank Account: \*

Routing Number: \*

Financial Institution Name: \*

Include leading zeros

Based on routing number

Other Information

Here you can provide any document(s) or additional details that you think may help to process your application, this section is optional:

Document Type:

Attach File:

Choose File

No file chosen

Allowed types: .jpg, .tiff, .pdf, .png, .txt

Clear file name


Other Details:

Add More Files


- Be sure to upload any supporting documents for "yes" responses to background questions in the Other Information section.

Review and verify that all information you have inputted is correct and continue to the Form Acceptance Section.


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- Once all sections are completed, sign and date the contract. Then select Submit Contract.

[Contract / Certifications / Authorities](#)

Agent Contract

To view your contract draft please click here: [View Contract](#)

Agent Certifications & Signature

Certifications and Authorization to Obtain Information:

I certify, under penalty of perjury, that all answers and responses to questions and inquiries contained in this application are true, correct and complete. I further certify that I have read and am familiar with the sections of the insurance code for the state/s in which I am seeking appointment and that I am withholding no information which would affect my qualification for this appointment with Pan-American Life Insurance Company (PALIG). I acknowledge that PALIG has informed me that it may obtain consumer reports, reports of insurance department regulatory actions, and conduct investigative reports and background investigations on me or this agency for licensing purposes, initial and renewal state appointments, and at any other times PALIG, at its discretion, deems necessary. I expressly authorize PALIG to conduct these investigations and obtain consumer and credit reports and hereby authorize all persons and entities (including past and present employers) to provide PALIG all requested information. I authorize PALIG to use these reports and to provide them and any other pertinent information to all third parties where the third parties' legal interests and/or obligations are involved. I also authorize PALIG to distribute any financial, business, legal, tax or work performance history regarding me or this agency that it receives from third parties or which is generated by PALIG's data source that is not part of the investigative report, to all third parties including but not limited to agents or agencies that assume my debt balance responsibilities. By my signature below, I hereby release any individual or institution, including its officers, employees, or related personnel, both individually and collectively,

☐ I hereby confirm that I have read the agent / agency agreement

☐ I hereby confirm that I have read the business associate agreement

☐ I hereby confirm that I have read the fair credit reporting act consumer disclosure

☐ I hereby confirm that I have read and agree to the Anti-Money Laundering Policy

Type Your Full Name for Signature: \*

Type Todays Date: \*

I have read and agreed to the above terms and conditions

In format MM/DD/YYYY

Submit My Contract

Please review your contract information and submit for processing:

[Submit Contract](#)

Once you have submitted the contract, Pan American Life will start processing the contract. Once the contract is processed, you will receive a welcome email directly from Pan American Life, normally within 3-5 days.

The welcome email will include your unique writing number.

**Once you receive your writing number, you are Ready to Sell!**

**Note: It can take between 1-2 weeks to become appointed depending on the time of year.**