

Guidelines for “Corporate List Bill Membership” Program

NAHU One Invoice System

Minimum Size to Participate	3 new or current members enrolled in program.
Dues Paid	All applicable national, state and local dues owed by each member; no discounts can be offered.
Billing Cycle	All members’ dues will be prorated to a uniform renewal date in first year; date to be determined by existing members’ renewal dates, in concert with sponsoring company’s wishes. Payment may also be made by bankdraft or credit card draft on the corporate account.
Invoicing Schedule	First consolidated invoice sent 60 days prior to renewal date. Groups over 50 members may pay in two installments, provided that final payment is made within 90 days of paid through date.
Contacts	NAHU Contact – Manager Corporate Relations, Dianne Sautkulis – dsautkulis@nahu.org Sponsoring Company – one contact, determined by company.
Changes to Roster	Sponsoring company may change members upon the transfer or termination of any members under the program. Additional members may be added at any time, with first year dues prorated to the uniform renewal date.
Ownership of Membership	While the sponsoring company may determine which of its producers or staff may participate in the program, the memberships attach to the individuals – the sponsoring company does not derive any benefits of membership as a result of its participation.
Enrollment Process	<ol style="list-style-type: none">1. Sponsoring company sends a list of prospective members, including name, address, phone, fax, email.2. NAHU staff reviews list, determines appropriate chapter affiliations and calculates prorated dues.3. Consolidated invoice is sent to sponsoring company.4. Memberships are activated upon receipt of payment from sponsoring company.
Recruiter Recognition	NAHU will provide a complimentary membership to the recruiter if his/her referral results in ten or more <u>new</u> members. Recruiter may use membership for self, or can give to his/her corporate contact.

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Company Name: _____

Your company should **designate one person to be the primary contact** for memberships.

Primary Contact: _____

Street Address: _____

Room/Suite Etc.: _____

City/Town: _____

State/Zip Code: _____

Telephone No.: _____ **Fax No.:** _____

EMAIL: _____

PAYMENT OPTIONS

_____ **Monthly Payments** _____ **Full Yearly Payment**

Authorization Signature: _____

Credit Card Information: _____ **exp.** _____

Bankdraft –

Account Number: _____ **Routing Number:** _____

Bank Name: _____

Direct Questions to:

Dianne Sautkulis – Manager of Corporate Relations
1212 New York Ave, NW, Suite 1100
Washington, DC 20005
202-595-7566
Fax – 202-747-6882
dsautkulis@nahu.org

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Member Name	Current Member Y/N	Chapter Selection	Dues
1.			
2.			
3.			
4.			
5.			
6.			
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20.			

NAHU... Your Voice, Your Organization

At a time when Congress and state legislatures are considering bills that could change, or even eliminate, your livelihood, NAHU is the one unwavering voice representing your interests. We know how important you are to the health and well-being of the people you serve, and we bring that message to your elected officials, clearly and forcefully, every day.

Won't you help us help you? By joining NAHU, you add your voice to those of over 20,000 of your peers and colleagues. You'll also enjoy the following benefits of membership:

- 1) Information Resource** – With our website (www.nahu.org), Health Insurance Underwriter (HIU) magazine, and several newsletters and broadcast emails at your fingertips, you'll always have the most current industry information.
- 2) Legislative Advocacy** – NAHU's legislative efforts strive to educate and inform elected leaders at the federal and state level. We've learned that most legislators simply do not understand the health care system and the agent's role in the system. Through our network of Key Contacts, we cultivate relationships that put us in position to clarify issues before bills are written or votes taken. We strengthen these relationships through activity by the Health Underwriters Political Action Committee (HUPAC).
- 3) Health Insurance Underwriter Magazine** – NAHU's monthly magazine will provide you with tips on selling, information on NAHU's activities on the national, regional, and local level, and updates on website content and other services that NAHU provides. Receiving HIU Magazine monthly is another great investment for your business.

4) Education and Networking – NAHU and our state and local chapters provide continuing education opportunities to keep you abreast of the trends, new products and policy changes in the industry. Many state and local chapters offer enough credits to fulfill all your state's CE requirements. These meetings will also give you time to network with your colleagues and make new acquaintances.

5) Member-Only Benefits – From an exclusive agreement with Marsh Affinity Group for Agent Preferred E&O insurance to discounts on shipping, conference calling, and credit cards, NAHU offers you opportunities to save money on the items you need to operate your business.

To protect your livelihood, and to begin enjoying these membership benefits, simply complete the application on the back of this sheet.

For more information about "your organization," log on to our website at www.nahu.org

You Should Join NAHU Because...

- 1) NAHU will protect your right to serve your clients needs.
- 2) You will obtain timely, informative news.
- 3) You can attend continuing education seminars on the hottest insurance topics.
- 4) You will share information with top producing insurance professionals.
- 5) You can participate in grassroots efforts that respond to local, state, and federal legislative issues.
- 6) You will benefit from a variety of member-only discount programs.
- 7) NAHU's Code of Ethics demonstrates to your clients your commitment to professionalism
- 8) You will play an active role in the future of the health insurance industry.
- 9) You will receive a subscription to HIU, the association's monthly magazine.
- 10) With NAHU following trends in Large and Small Group Managed Care Plans, Individual Health Plans, Long Term Care Insurance, Disability Insurance, and Medicare Supplements, you will benefit from membership no matter your specialty.

Please complete the application on the back of this page and send it to:
NAHU, 1212 New York Ave, NW, Suite 1100, Washington DC 20005
If you have any questions please contact Dianne Sautkulis,
Manager of Corporate Relations at (202) 595-7566.



NAHU Membership Application

Last Name	First Name	Designation	
Company	Title	Referral/Sponsor	
Mailing Street Address	City	State	Zip
Telephone	Fax	E-Mail Address	
Home Street Address (for legislative purposes)	City	State	Zip

Local Association (see other side of this application)

Form of Payment Enclosed: **Amount:** _____

- Monthly Draft (please select one) Checking Account Credit Card
 Check (payable to NAHU)
 Annual Credit Card (please select one & fill out above form)
 Visa MasterCard Am Ex Discover

Please Mark the Box or Boxes For The Areas of Your Practice:

<input type="checkbox"/> Long Term Care	<input type="checkbox"/> Disability	<input type="checkbox"/> Managed Care	<input type="checkbox"/> Retirement
<input type="checkbox"/> Individual	<input type="checkbox"/> Large Group	<input type="checkbox"/> Small Group	<input type="checkbox"/> Worksite Mktg.
<input type="checkbox"/> TPA	<input type="checkbox"/> Self Insured	<input type="checkbox"/> Medicare Supplement	<input type="checkbox"/> Dental

Mail To: NAHU, 1212 New York Ave, NW, Suite 1100, Washington DC 20005
Fax to: 202-747-6882

**If you have questions, please contact Dianne Sautkulis,
 NAHU Manager of Corporate Relations, at 202-595-7566**

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CONTACT

NAHU Manager of Corporate Relations

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www.nahu.org