

**\*Must be on Company letterhead**

**Universal Broker Change Letter  
(for broker to broker or direct to broker)**

Date

Dear Account Executive:

Please accept this letter as a formal request to name ***Broker Name*** of ***Agency Name*** as the exclusive broker for ***Company Name*** effective ***Date***. I understand that by requesting this change, ***Broker Name of Agency Name*** will begin to receive the in-force commission payments (if applicable) from Blue Cross Blue Shield of Massachusetts effective the 1<sup>st</sup> of the month following the date of this letter. I also understand that by designating ***Broker name of Agency Name***, I am approving the release of information regarding ***Company's name's*** Blue Cross Blue Shield of Massachusetts medical (***Group #***) and/or dental (***Group #***) coverage exclusively to ***Broker's Name of Agency Name*** unless otherwise stated via written communication.

This broker designation will remain in place until rescinded in writing by ***Company Name's*** designee.

Sincerely,

***Signature***

***Name of Company Officer***

***Company Officer Title***