SecurityHealth Plan℠

Promises kept, plain and simple.®

1515 North Saint Joseph Avenue
P.O. Box 8000
Marshfield, WI 54449-8000

(800) 622-7790 | (715) 221-9700
TTY: 711
Fax: (715) 221-9456

www.securityhealth.org

Security Health Plan Connect

Agency Access Request

Agency name		Phone	
Agency street address	City	State	ZIP code

All listed brokers will have access to Security Health Plan Connect to view **their own** book of business only, Agent eNews, materials and more. All brokers will be set up automatically after their listing.

We would like you to designate an **account administrator** for your agency. The account administrator will have access to create, terminate and modify access to Security Health Plan Connect. Please designate this person below:

Name	Title	Email
Name	Title	Email

If any **principals/managers/customer service representatives** should have access to Security Health Plan Connect (if not already listed as a broker) and have access to specific brokers, list the names of the brokers to whom they should have online access. You may enter "all" if they should have access to every broker within your agency:

Name	Title	Email
Brokers		

Name	Title	Email
Brokers		

Name	Title	Email
Brokers		

Commission statements are accessible through Security Health Plan Connect monthly. Statements are not mailed with commission checks. Specify who in your agency should have access to the monthly commission statements:

Name	Title	Email
Name	Title	Email

I acknowledge that the users listed on this request will use Security Health Plan Connect only as permitted by an agency agreement with Security Health Plan, listed agents Terms of Use and applicable federal and state privacy laws.

Print name of authorized representative

Signature of authorized representative

Date (m/d/y)

Mail, fax or email completed form to:

Security Health Plan
Sales Department
1515 North Saint Joseph Avenue
P.O. Box 8000
Marshfield, WI 54449-8000

Fax: (715) 221-9456

Email: brokeradminservices@securityhealth.org

HP-00257 (02/26)
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