

Advantra Freedom Enrollment Department  
 2222 Ewing Road  
 Moon Township, PA 15143  
 1-866-714-9301 – BSU Phone  
**(866) 906-1204 - Fax**



# Fax

To:	Advantra Freedom Enrollment Department	From (Agent Name):	
Fax:	<b>(866) 906-1204 (PFFS/MAPD Only)</b>	Company Affiliation:	
Fax Number Confirmed: <input type="checkbox"/>		Broker ID: (Please list if known)	
Phone:	1-866-714-9301	Payee ID: (Please list if known)	
# of Pages:		Agent Phone #	
Beneficiary Name		Beneficiary Phone # (Please list if known)	

New Enrollment                       Change to current enrollment                       Combo Sale (PDP and PFFS Sale)

**Please Limit Communication to One (1) Application Per Fax Transmission**

**REMARKS:**

Fax Confidentiality Notice: The information contained in this transmission is confidential, proprietary or privileged and may be subject to protection under the law, including the Health Insurance Portability and Accountability Act (HIPAA). The message is intended for the sole use of the individual or entity to whom it is addressed. If you are not the intended recipient, you are notified that any use, distribution or copying of the attached material is strictly prohibited and may subject you to criminal or civil penalties. If you received this transmission in error please notify us immediately by telephone at 1-866-714-9301.



# Fax

To:	Advantra Freedom Enrollment Department	From (Agent Name):	
Fax:	<b>(866) 415-2232 (PDP Only)</b>	Company Affiliation:	
Fax Number Confirmed: <input type="checkbox"/>		Broker ID: (Please list if known)	
Phone:	1-866-256-9872	Payee ID: (Please list if known)	
# of Pages:		Agent Phone #	
Member Name		Member Phone # (Please list if known)	

New Enrollment

Change to current enrollment

Combo Sale (PDP and PFFS Sale)

**Please Limit Communication to One (1) PDP Application Per Fax Transmission**

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