

Attached you will find a WA HEALTH BENEFIT EXCHANGE – USER ACCESS AGREEMENT for you to sign and return to our office. By signing the attached form you comply with all policies and procedures of the Washington Health Benefit Exchange (“The Exchange”).

There are five steps to return the User Access Agreement document to our office:

- **Step 1** Print the UA attached to this form.
- **Step 2** Sign WA HEALTH BENEFIT EXCHANGE – USER ACCESS AGREEMENT with **blue ink.**
- **Step 3** Scan the signed document to your email.
- **Step 4** Email the attached document to navigator.lms@wahbexchange.org with the subject line stating “WA User Access Agreement”.
- **Step 5** Within 5 business days return original signed WA User Access Agreement to:

Navigator Program
Washington Health Benefit Exchange
PO Box 657
Olympia, WA 98507

Certification Number is for WAHBE Use only, leave that field blank.

If you have an existing account in the HPF you will have immediate access to your account. If you DO NOT have an account in the HPF, you will receive your username and password to the Healthplanfinder within 7 business days after emailing us the User Agreement. Please contact your Lead Organization if you have any questions.

Welcome to the Washington Health Benefit Exchange!