

AGENCY GUIDE

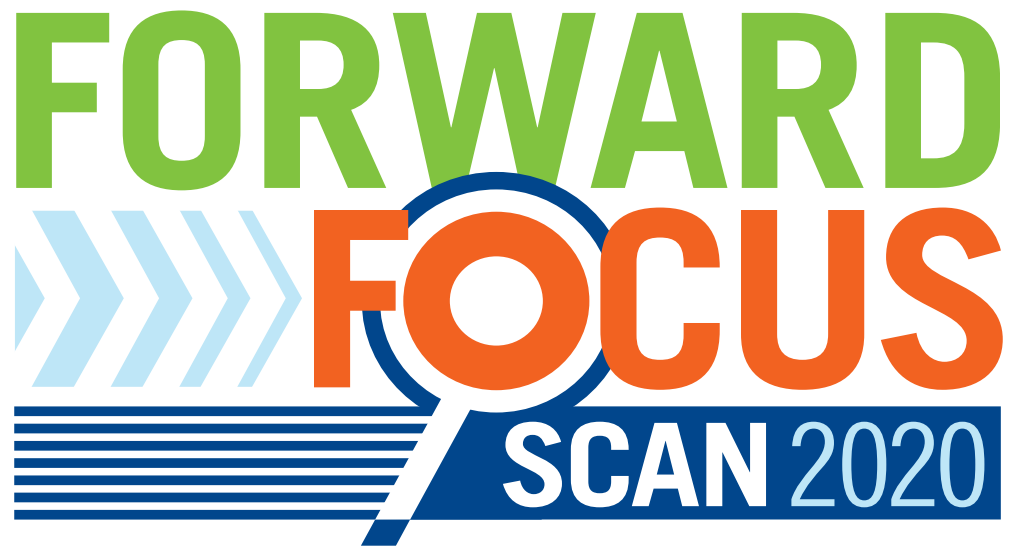


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The materials comprising this Agency Guide are provided by SCAN Health Plan as a service to our agency partners on an “as-is, as available” basis for informational purposes only. SCAN assumes no responsibility for any error or omissions in these materials. While SCAN endeavors to keep the information up-to-date and correct, SCAN makes no representations or warranties about the completeness, accuracy, or reliability of the information, policies, products or services contained in this Guide for any purpose.

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This Guide is intended for our agency partners use only.

The logo features the word "FORWARD" in green, "FOCUS" in orange with a magnifying glass over the "O", and "SCAN 2020" in white on a blue background. There are also blue arrows and horizontal lines on the left side.

FORWARD FOCUS SCAN 2020

TABLE OF CONTENTS

4	WELCOME
6	PARTNERING WITH SCAN IS A WIN-WIN-WIN FOR YOU, YOUR AGENTS AND FOR SCAN!
10	HOW TO GET STARTED
14	STAYING COMPLIANT WITH OUR PROCESSES
21	OVERSIGHT ACCOUNTABILITIES OF SCAN'S AGENCY PARTNERS: FMO, SGA, MGA & GA
32	COMMISSIONS/COMPENSATION
35	RESOURCES
36	SCAN OFFICES



WELCOME

On Behalf of our
Sales Leadership Team,
Welcome to SCAN!

Stanton Sasaki
Director -
Broker Sales

David Milligan
Sr. VP - Sales

Holly Ackman
VP - Sales

Edith Monge
Manager -
Employer Group

Julie Kiefer
Director -
Sales Systems

Chris Bond
VP - Sales

Michael Lucens
Director -
Sales Operations

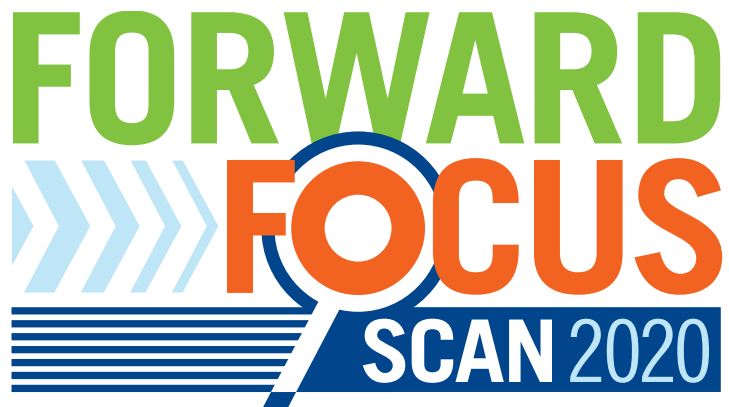
SCAN's Sales Operations Team has produced this Agency Guide as a handy reference for our agency partners. It contains "everything you need to know to contract and do business with SCAN". Our goal is to ensure that we are a good business partner for your agency - and it's our hope that you view us as one of the most agency-friendly MAPDs with whom you contract.

We are all well aware of the highly regulated environment in which Medicare Advantage plans operate. Abiding by all federal and state regulatory guidance is a cornerstone of how SCAN conducts business, and it is our expectation that our agency partners share this commitment. Providing you the "rules of the road" as it relates to our working relationship ensures that we will all operate in an environment based on our personal and business ethics.

And if we succeed in our expectations for compliant selling, we can be confident that we are well positioned for continued business success.

Thank you for partnering with SCAN!

Holly K. Ackman
VP, Sales Operations



SCAN MISSION

The SCAN mission is rooted in our past and continues to guide our organization

Keeping Seniors Healthy and Independent

OUR VISION

We work everyday to fulfill our Vision

SCAN Health Plan is the best choice for seniors

SCAN COMPANY VALUES

SCAN's values ensure we're embracing the all the opportunities presented in our changing industry and are designed to guide our behavior

We do right by our members and clients

We listen to them. We are here for them when they need us. We are with them.

We take pride in what we do

We will not settle for mediocrity.

We push beyond our boundaries

How it is today does not mean that is how it should be.

We express ourselves

We champion our beliefs. We listen to others. We debate firmly but respectfully.

We are agents of change

We are inspired by change. We find new ways to do what we do.

Partnering WITH SCAN is a WIN-WIN-WIN! for YOU, your AGENTS and SCAN!

Why should you partner with us?

As you will see as you read through this Guide, SCAN takes our partnership with you very seriously. We have designed our internal processes around input received from our agency partners, and we continue to ask for (and receive!) ideas from you on how we can best meet your needs. However, we also want you to know that there are some things about how we run our business that REGARDLESS of input, we will not change. One of these concepts is how we select our agency partners. We have very robust guidelines in place relative to our requirements for contracting and oversight. We only work with agencies and agents who share our commitment to CMS and state regulatory compliance – and that’s why we are looking to partner with YOU!

Why Sell Medicare Advantage?

There are 75 million Baby Boomers who were born between 1946 - 1964. The last of the Baby Boomers turn 65 in 2029. These folks will need your help! The pool of potential prospects is huge -- adding an MAPD plan to your book of business will increase your revenue and provide a robust prospect base for years to come.

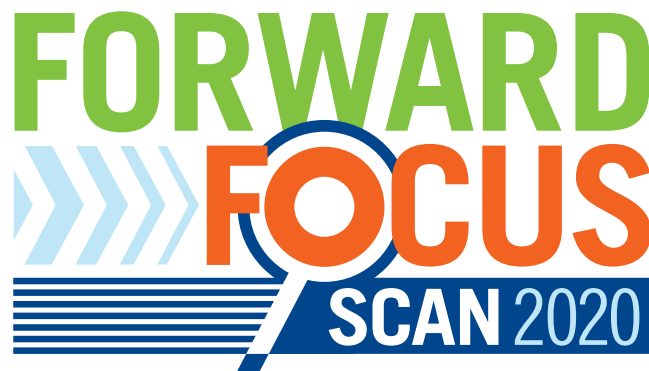
Why SCAN Health Plan?

As a not-for-profit health plan, SCAN offers you and your clients:

- 4.5 Star Rating in most California counties*
- 90% Member Satisfaction Rating**
- Low Disenrollment Rates
- “Best-in-class” Broker Support
- Extensive network of participating providers
- Member and broker service centers in Long Beach, CA.
- A portfolio of products you can sell all year long
- Access to marketing materials and tools
- Year-round training materials and tools
- Lifetime renewal commissions!

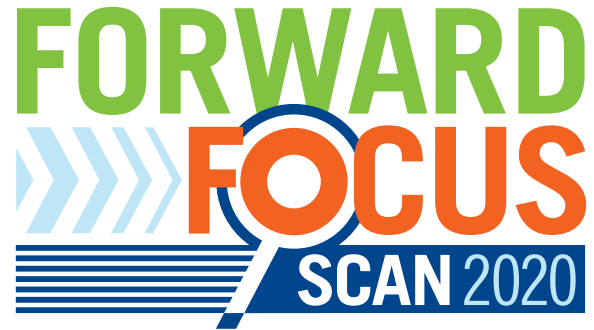
* 4.5 Star ratings applies to all 2019 plans offered by SCAN Health Plan in CA except Healthy at Home and VillageHealth

** 2018 Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey.



SCAN Health Plan is recognized as one of the fastest growing Medicare Advantage plans in California. For more than 40 years, SCAN has been dedicated to helping members stay healthy and independent.

Since 1977, SCAN Health Plan has focused exclusively on the unique needs of seniors and others on Medicare. Unlike most Medicare Advantage Plans, SCAN has no commercial members, which allows us to dedicate 100% of our energy and programs toward keeping seniors healthy and independent. Our focus is providing affordable, accessible, quality care and coverage to our over 204,000 members in California.



Let's take a step back in time and see how we got to this place...

We've told this story many times, but it's the crux of who we are: founded by seniors, for seniors. As history tells it, 12 seniors took the lead in petitioning the City of Long Beach to improve access to the variety of services they and others needed to age in place.

And Long Beach responded. The City Council paid for a study by the Andrus Gerontology Center of USC. After many months of research that included discussions with providers, community organizations, the city and those 12 seniors, USC recommended creating a hub of senior care and social activity. The mayor and the Office of Senior Services became advocates for this new model that put seniors at the center, surrounded by a continuum of support services.

Local leaders agreed the organization's original name, the Long Beach Geriatric Healthcare Council, Inc., was too passive and didn't reflect the energy behind the undertaking. The new system was introduced to the public in 1978 as the Senior Action Care Network, which was soon shortened to SCAN.

In the ensuing years, SCAN expanded its efforts beyond Long Beach, working first with county and state programs, then making the leap to the national stage in 1984, when we were one of just four organizations in the country selected for the Social Health Maintenance Organization (SHMO) demonstration project. The government paid SHMOs to provide home-based services not covered by regular Medicare to members at risk for being placed in a nursing facility. The SHMO is what really put SCAN Health Plan on the map, and we haven't looked back.

Although the SHMO was discontinued in 2004, those years of providing personalized, in-home services and benefits to seniors continues to drive us. It informs our decisions and shapes our direction. It's why our health plan membership grows year over year. And it's why we continue to grow our community services, expanding the reach of our mission beyond the health plan and into the many communities we now serve.

We are very pleased to have you join us on that journey!

Our Services Areas

SOUTHERN CALIFORNIA

LOS ANGELES

- SCAN Classic (HMO)
- SCAN Classic II (HMO/ UCLA Santa Monica Bay Physicians)
- SCAN Prime (HMO)
- SCAN Connections (D-SNP)
- SCAN Plus (HMO)
- SCAN Balance (C-SNP)

ORANGE

- SCAN Classic (HMO)
- SCAN Prime (HMO)
- SCAN Plus (HMO)
- SCAN Balance (C-SNP)
- Heart First (C-SNP)

RIVERSIDE AND SAN BERNARDINO

- SCAN Classic (HMO)
- SCAN Prime (HMO)
- SCAN Connections (D-SNP)
- SCAN Plus (HMO)
- Heart First (C-SNP)

VENTURA

- SCAN Classic (HMO)
- SCAN Plus (HMO)

SAN DIEGO

Offers Scripps Green Clinic/Hospital

- Scripps Classic offered by SCAN Health Plan (HMO)
- Scripps Signature offered by SCAN Health Plan (HMO)
- Scripps Plus offered by SCAN Health Plan (HMO)
- Scripps Heart First offered by SCAN Health Plan (C-SNP)

* SCAN Connections in Los Angeles, Riverside and San Bernardino counties requires special training and certifications.

NORTHERN CALIFORNIA

SAN FRANCISCO

- SCAN Classic (HMO)
- SCAN Plus (HMO)

NAPA AND SONOMA

- SCAN Classic (HMO)
- SCAN Balance (C-SNP)
- Heart First (C-SNP)
- ***NEW*** SCAN Compass (HMO)

SANTA CLARA

- SCAN Classic (HMO)
- ***NEW*** SCAN Plus (HMO)
- ***NEW*** SCAN Options (HMO)

NEW STANISLAUS

- SCAN Classic (HMO)
- SCAN Balance (C-SNP)
- SCAN Plus (HMO)



Your SCAN Support Teams!

Our Sales Training Team

Design tools and training that ensures your agents sell in a compliant manner. Whether we are delivering training online, through a virtual portal or face-to-face, you can be assured that the curriculum has been carefully designed to be relevant and FUN! We support your agents with job aides and tools that make their job easier - and keeps them compliant.

Our Sales Commissions Team

Ensures accurate and timely commission payments. We know that nothing is more important to you and your agents than making sure that commission payments are handled appropriately. Whether you contact them by phone or by e-mail - this group makes sure that you can get answers to any commission question you might have.

Our Broker Account Executives (BAE)

Are here to provide concierge services to our agencies. Just a phone call away, your assigned BAE is based in your market and is responsible for triaging any issues/concerns you may have. Additionally, they are your go-to contact for training. Just pick up the phone and let them know how they can help.

Our Sales Support Team

Available to take your calls Monday-Friday 8:00 a.m. - 6:00 p.m. The six members of this team are your subject matter experts! They provide answers to any question you or your agents may have. Their knowledge and responsiveness is stellar!

Our Sales Operations Team

Is designed to meet your needs. You are their most important customer! They strive every day to be responsive to any questions you might have about the contracting and onboarding process for both your agency and your agents.

Our Sales Communication Team

Communicates industry and company updates in a timely and effective manner. Whether through our Monthly "Sales Core" newsletter, our email blasts or our texts, that keep you updated on concepts critical for sales success, SCAN's website or our online training portal - we make sure that our communication vehicles have the most relevant information to keep you compliant and help you manage your MAPD business.



How to get started

SCAN contracts with various levels of broker agencies, not with individual independent agents. All of our contracted agents “roll up” under one of our agency partners. In the same way, SCAN has prerequisite requirements in place for how agencies are assigned a level in our hierarchy structure when they are onboarded.



All of SCAN's contracted agencies are organizations that meet or exceed SCAN's expectations and specifications for Agency Levels. Our agencies represent a group of agents that produce an agency minimum number of effective enrollments per year. These agencies may be directly contracted with SCAN as a General Agency (GA), Managing General Agency (MGA), Supervising General Agency (SGA), or a Field Marketing Organization (FMO).

Once all background and licensing information is received and verified, and certification is completed by an agency principal - you'll be all set!

New Agency?

Contact your local Broker Account Executive and ask how to start the contracting process. Your local BAE contact information is on the last page of this guide.



From Left to Right:
Stanton Sasaki - Director
Elsa Rapp - LA West & Ventura
Gale Gajardo - Orange
Robin Bartley - San Diego
Dan Rivera - San Bernardino/Riverside
Norma Woodside - LA East
Eric Nordseth - Northern California

Agency Contracting Requirements

SCAN Sales Operations team will provide you with an electronic version of the SCAN Agency Agreement (Contract) that is specific to the agency level at which you are being onboarded.

It is your responsibility to review and sign the contract, submit all required documents to SCAN, and complete SCAN certification training within 60 days of receiving the contract. Failure to complete all the requirements for onboarding in that time frame will require a resubmission of your paperwork.

Adding Agents

Send an email to:

SCANBrokerContracting@scanhealthplan.com

With the following information to request that an online contract to be sent to the agent:

- First and last name
- National Producer Number (NPN)
- State license number
- Current email for the agent
- Name of agency that agent will be contracting with

To be an authorized SCAN Agency:

Complete agency contracting and training certification requirements. Be a registered business entity in the United States and provide:

- A signed SCAN Agency Agreement (Contract)
- CA State Business Insurance License (Accident and Health)
- Errors & Omissions (E&O) insurance documents
- W9
- A signed Agency Specifications Addendum
- Hierarchy Form
- FDR Attestation Form
- Be a registered business entity in at least one state

Agency Certification Requirements

Have a valid CA business license and be a registered business entity in at least one state, be in good standing with CMS, and annually supply SCAN with a copy of the license. License must not expire within 45 days from contracting.

Have a signed agency agreement with SCAN as an FMO, SGA, MGA, or GA.

Agree to comply with all legal, compliance and regulatory guidance in accordance with applicable state and federal laws and SCAN policies.

Agree to receive continuing education relative to the current Medicare Advantage Sales and Marketing guidelines and comply with any changes that occur to this program.

Complete all levels of the SCAN agency certification/recertification training (Tiers 1, 2, and 3) and pass the required certification examination.

Attend informational meetings in order to stay informed of compliance and regulatory changes, procedural changes, network changes, etc., and make sure an agency principal is certified annually in all SCAN required trainings.

Have reasonable accessibility for receiving communications concerning immediate regulatory or network changes (i.e., phone, email, voicemail, etc.). A current email address is mandatory.

Agencies are required to have Error & Omissions (E&O) Insurance as follows:

- **FMO or Stand Alone Agencies** - Consistent with industry standards, but at no time less than \$1,000,000 per occurrence and \$1,000,000 aggregate limit, with a reasonable deductible. Shall provide evidence to SCAN that such coverage is in force prior to certification. Must notify SCAN immediately if such insurance is reduced, modified, canceled or terminated.
- **Subordinate Agencies** - FMO's must make sure that all agencies in their downline (subordinate agencies) maintain Errors and Omissions insurance in amounts consistent with industry standards, but at no time less than \$250,000 per occurrence and \$250,000 aggregate limit, with a reasonable deductible, and to provide evidence of such coverage upon request by SCAN.

After onboarding, agencies are required to review the SCAN Agency Guide and attest that they will comply with all expectations and guidelines which are in accordance with CMS and DHCS guidelines.



From Left to Right:
Taylor Wasko - Sales Trainer
Aymee Abreu - Sales Training Manager
Sherri Aguirre - Sales Trainer
Jared Pacheco - Sales Training Coordinator

Annual Required Certification Training

The Path to Certification for 2020 for New and Returning Agencies

Note: It is mandatory that a designated agency principal complete this process annually!

Notify SCANBrokerContracting@scanhealthplan.com with the name of that individual.

- 1**

New Agency	Complete all your contracting paperwork and then begin the certification process.
Returning Agency	Re-certify according to the instructions below.

- 2**

TO START Go to: <https://scan.cmpsystem.com>

FOR TIER 1, PASS THE AHIP EXAM FOR THESE ONLINE COURSES WITH A SCORE OF AT LEAST 90%.

 - Overview of Medicare Program Basics
 - Medicare Health Plans
 - Medicare Part D Prescription Drug Coverage
 - For New Agencies
 - For Returning Agencies
 - Marketing Medicare Advantage Part D Plans
 - Enrollment Guidance for Medicare Advantage & Part D Plans
 - Fraud, Waste and Abuse & General Compliance Training

- 3**

FOR TIER 2, COMPLETE THE TWO ONLINE COURSES BELOW TO GAIN ACCESS TO OUR TIER 3 TRAINING CALENDAR

 - Watch our online “Selling with Integrity” module
 - Attest to reviewing our Policies and Procedures (P&Ps) and Code of Conduct

- 4**

FOR TIER 3, SUCCESSFULLY COMPLETE OUR FACE-TO-FACE COURSE AND PASS THE EXAM WITH A SCORE OF AT LEAST 85%.

 - Sales Presentation requirements
 - Market-Specific Products

- 5**

ONCE YOU HAVE COMPLETED ALL CERTIFICATION REQUIREMENTS, WE’LL FOLLOW-UP WITH YOU!

You’ll receive SCAN’s “You are ready to sell” email. All new and returning agents will be notified via email that their annual recertification is complete. **DO NOT present SCAN plans prior to receiving your email.**

Enrollments submitted prior to the date on the email are not eligible for commission.

**Note: You will be terminated if you do not keep a current license and E&O and complete your annual training certification.*

**Note: Agents who sell SCAN without a current Certification will not be compensated!*

Staying Compliant With Our Processes

Hierarchy Changes

Requirements for Changing Hierarchies

Agents, or any agency entity, may change sales hierarchies once during a twelve-month cycle with written notice to SCAN (*exception: no hierarchy changes are allowed October - December*). Canceling a contract and re-contracting does not exempt an agent/agency from the one time hierarchy rule.

Any SCAN business and administration payments associated with the agent or other entity in the FMO Hierarchy will automatically move with the agent or other entity to their new sales hierarchy. Renewal overrides will be paid to the agency who was managing the agent at the time of the effective date of enrollments. Renewal commission will follow the writing agent unless the agent has an Assignment of Commission (AOC) document in place.

Agents must have a current “active status” to change agencies. “Active status” means that they have completed the contracting and training process, and their state license and E&O policy are current.

To initiate the request for a Hierarchy Change

Submit the following to: SCANBrokerContracting@scanhealthplan.com

- Name of Agent
- National Producer Number (NPN)
- New Agency
- State License Number
- Valid Email Address

Once submitted SCAN will send a pre-populated electronic form to the agent for signature.

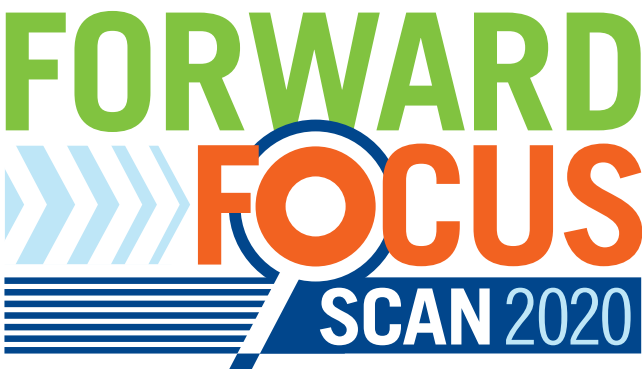
- Hierarchy transfers are processed once during a twelve month cycle, and only during the months of January through September. No transfers are allowed October through December.
- The last day to submit a hierarchy change is September 15th for an October 1st date.
- The first day to submit a hierarchy change is December 1st for a January 1st date.

Hierarchy transfer forms must be submitted by the 15th of the month for a first of the following month effective date. If received after the 15th of the month, the request will be processed 2 months out.

- If the form is received by Jan 1st-15th, the transfer will be effective Feb 1st.
- If the form is received by Jan 16th-Feb 15th, the transfer will be effective Mar 1st.

After SCAN has processed the hierarchy transfer,

- SCAN will send a notification to the current and the new agency notifying them of the transfer request.
- Agent will also receive an email confirmation once the transfer is complete.



The Sales Events Submission Process

You will designate one individual from your agency that will be responsible for submitting event requests. This individual will:

Complete the “SCAN Broker Sales Event Template”. contact SeminarSubmission@scanhealthplan.com for our template.

Submit requests 10 business days* in advance of the event or the event’s advertisement to: SeminarSubmission@scanhealthplan.com.

**not including SCAN observed holidays*

SCAN’s Sales Event Coordinator will respond within 2 business days of receipt of your request, except during AEP (responses can vary from 2 to 5 business days).



Wait for SCAN approval before marketing or conducting your sales event. We’ll send a confirmation email to your agency as soon as we approve your sales event.

Sales Event Changes & Cancellations

In the event that you need to change or cancel a scheduled sales event, notify SCAN immediately.

Communicate the change, using the original email sent to SCAN, no less than 48 hours prior to the scheduled date.

SCAN will send an email confirmation of the cancellation / modification.

A. If canceled within 48 hours of scheduled date:

- Post a sign stating that the event was canceled and include notice of alternate event opportunities.
- You must appear at the event at the scheduled time and stay 15 additional minutes, unless event was canceled due to weather.
- Advise attendees of the cancellation and possible alternate events .

B. If canceled more than 48 hours prior to the scheduled date:

- Notify beneficiaries in the same way you advertised the event (e.g., phone call, newspaper announcement)
- If unable to attest that you reached attendees, follow the method stated in A (above).

C. If canceled due to non-attendance, follow the method stated in A (above).

D. If beneficiary sent an RSVP, personally call them and advise of the canceled event.

E. Keep documentation of your cancellation. Include the list of beneficiary names, phone numbers, and the date and time you notified them.

Marketing Do's and Don'ts

Do's

Submit all sales events (where SCAN will be promoted) to SCAN for approval

Include appropriate disclaimers when requesting a prospect's information or promoting a sales event via your website. SCAN will provide disclaimers upon request

Submit any website updates to SCAN for prior approval if SCAN Health Plan is referenced

Submit all agency marketing materials that promote sales events to all plan carriers that are being presented, including SCAN

Distribute only approved materials at the sales event. Always have these materials available to prospects:

- SCAN Sales Kit (includes the Multi-Language insert which must be pointed out)
- Current Star Rating Sheet (a 2 page document - make sure to show both pages to stay compliant)

Don'ts

Do not imply that you or your agency is endorsed or represented by Medicare or any branch of the federal government

Do not use the SCAN name or logo on your website without prior, documented approval from the SCAN Marketing Department

Do not promote any sales event until you have received approval from SCAN

Do not conduct sales events and health screenings simultaneously or back-to-back in the same vicinity

Do not include downloadable enrollment forms or electronic enrollment portals on your website. CMS prohibits MAPD enrollment except on the plan's primary website (www.scan-healthplan.com)

Do not place SCAN plan materials (Evidence of Coverage, Summary of Benefits, Benefit Highlights, etc.) on your website.

Do not add any information to or change any SCAN Health Plan materials. Doing so is strictly prohibited by CMS and SCAN Health Plan.

Submission of Marketing Materials and Websites

Marketing materials are highly regulated. All materials that promote SCAN Health Plan products or use the SCAN logo, either in print or on your website, must be approved by SCAN's Marketing Department. Submit your requests to use the SCAN logo or SCAN Health Plan name and/or material drafts/examples to:

SCANMarketingSubmissions@scanhealthplan.com

We will reply within 2 business days with either an approval to use or a request for more information. In general, the time frame depends on the material content:

If the materials contain no benefit information or sales events, we will typically review and approve within 2 business days.

If the materials contain specific benefit and/or list of sales events, they must be filled with CMS. This typically requires five to ten days.



The materials cannot be used or distributed until you receive our email with your approval.



*From Left to Right:
Hang Pham - Sales Assistant, Terry Paine - Sales Operations Manager, Nichelle Brown - Sales Operations Coordinator, Jennifer Desamito - Sales Operations Supervisor, Brittany Perez - Sales Operations Coordinator, Christian Guerrero - Sales Operations Coordinator, Chany Sanchez - Sales Operations Specialist*

SCAN Training Website

<https://scan.cmpsystem.com>

Here you will find a list of all the resources available to help with your sales activities.

Contact Us

Contact our SCAN Sales Support Team at 888-445-2038



Sales Tools

Here are all the links that you will need to be a successful Broker with SCAN Health Plan.....



Click and Learn

Click here to see recorded webinars and additional trainings that will help you understand our additional benefits and plans...



Quick Links

In this link you will see all the websites that will benefit you in a sale, from our marketing your events to provider look-up. We have also added all the state and federal websites you need.



Commissions - API

Questions on Commissions? In this link you will find our Commission Guide, steps on using API and the link to the website...



Sales Tools:

- Everything you need to sell SCAN plan's
- Materials from our Tier 3 face-to-face training
- Enrollment Meeting Presentations
- Links to Provider Look up and Formulary
- How to submit Marketing Materials for approval
- How to link to the Storefront to order Sales Kits and other Sales Materials including creating your own fliers

Click & Learn - Trainings and Webinars

- Supplemental Benefits
- Plus Plan
- Low Income Subsidy (LIS)
- And more!

Quick Links - Links to government sites that you might need

Commissions - Link to the Commission website



Take a Look! You'll find all the sales resources you need when you access these portals!

www.scanhealthplan.com

To get the resources you need:

www.scanhealthplan.com/scan-resources/

Provider Look up:

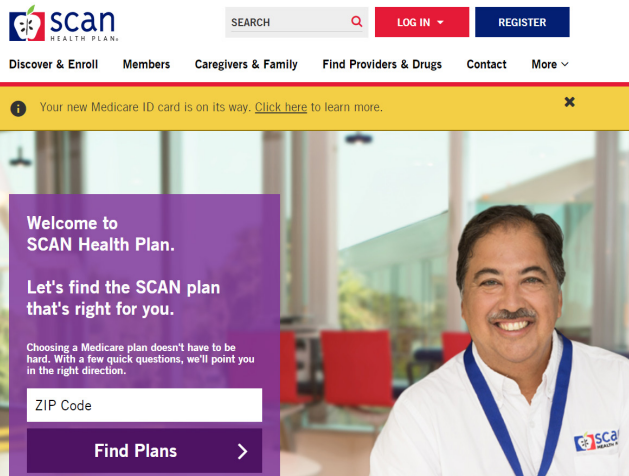
www.scanhealthplan.com/helpful-tools

Plan Comparison:

www.scanhealthplan.com/discover-and-enroll/scan-plans-and-coverage

Ready to Print Plan Materials:

www.scanhealthplan.com/scan-resources/plan-materials/



To order materials:

Access the Marketing Storefront Portal at

www.scanhealthplan.com/storefront

- Enrollment Sales Kits
- Benefit Highlights
- Brochures
- Fliers (Event and Non-Event)
- Provider Directories
- Formularies
- Dental Information
- Enrollment Forms
- Temporary ID Cards

Sales Tool Kit (include):

- Lead Card
- SCAN Balance Pre-Enrollment Qualification Assessment
- Heart First Pre-Enrollment Qualification Assessment
- Coordination of Services Form
- Permission to Send Health Information to SCAN Health Plan
- Scope of Appointment Form
- Plan Rating Sheets



Electronic Enrollment

We encourage all agents to submit their enrollments electronically. This ensures a timely submission and insures that the agent gets credit for the sale. All agents are issued an electronic **enrollment user name** in their “Welcome” email once on-boarding is complete. This information, along with a link to the electronic enrollment website, is emailed directly to the agent.*

Submitting Electronic Enrollments

Electronic Enrollments (EE) must be entered within 24 hours of signing of enrollment application.

<https://identity.agentcubed.com/account/login>

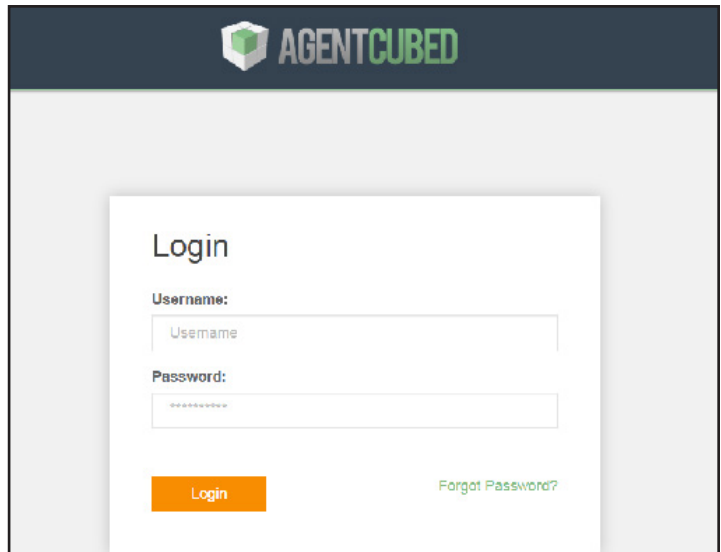
Per CMS, the time clock for Health Plan compliance starts from the moment an agent accepts the enrollment.

Therefore, if an enrollment is received on a weekend or holiday it must be entered electronically or sent by FedEx directly to the Enrollment and Reconciliation office.

Occasionally it is impossible for an agent to complete the electronic enrollment at the time of enrollment with the Medicare beneficiary. When a “real time” electronic enrollment cannot take place, agents may fill out a paper enrollment form and enter the electronic enrollment within 24 hours from acceptance of the paper enrollment form.

Original paper enrollment forms must be submitted to the Kilroy office by FEDEX, regular mail or drop-off. Please ensure that “EE DUP” is written on the first page at the top of the enrollment application.

Note: All AEP enrollments with an agent assigned that are received by mail prior to October 15 will be denied



To be processed for enrollment eligibility for the first of the following month, all applications must be received by the end of the previous month. Incomplete enrollment applications will be pended to obtain additional information. If complete information is not received, the application could be denied.

QUESTIONS?

Watch our recorded Webinar on “How to Use the EE Website” at

<http://scan.cmpsystem.com>

Oversight Accountabilities of SCAN's Agency Partners: FMO, SGA, MGA, & GA

Oversight Accountabilities

How you earn your over-rides! Your agency has been onboarded with your Agency Level Agreement based on criteria established by SCAN's Sales Leadership. All agencies in SCAN's hierarchy must be certified and licensed to sell Medicare products. Due to the high degree of compliance necessary and the fact that Medicare Advantage products are governed by state and federal regulations, SCAN's agencies must comply with all SCAN Health Plan (SCAN) Policies and Procedures (P&Ps). You reviewed and attested to those P&Ps as part of your Tier 2 online training.

Let's review some of the most critical aspects of what SCAN expects from our agency partners.

Starting with the highest level of agency partnership (FMO) and cascading down through all subordinate agency levels (SGA, MGA and GA), agencies must agree that they will comply with all SCAN policies and regulations. Additionally, HIPAA and MIPPA guidelines are included in all our Agency Agreements and the expectation is that all agencies will adhere to this guidance.

Agencies must ensure that any SCAN contracted agent affiliated with an agency abide by all SCAN P&Ps and regulations, including HIPAA and MIPPA requirements. Just like our agencies, our agents must attest that they have reviewed our P&Ps as part of the Tier 2 online training, and the HIPAA and MIPPA guidance is part of their agent contract.

FMO level agencies must have an appointed Compliance Officer and provide SCAN with the name and contact information for the individual who fills that role. The Compliance Officer is required to be certified and onboarded by SCAN in the same manner as contracted agents.

All levels of the agency hierarchy must be licensed by the California State Insurance Regulatory Agency as an Insurance Agency.



Darlene Black
Director, Regulatory Affairs

Oversight Accountabilities (cont.)

While SCAN is ultimately responsible for all activities of its agents and agencies, agencies are also accountable for all aspects of the oversight of their downline agents and agencies. This accountability includes the collection of all required contracting and reporting documentation, and the timely submission of all required documents to SCAN. SCAN believes that our agencies want to have a span of control over all contracting, reporting, compliance, commission payments / renewals and evaluation of their agency / agents. Placing this accountability with our agency partners, rather than with SCAN, makes excellent business sense.

Agencies are responsible for monitoring and ensuring that usage of SCAN's brand and logo by their agents is in compliance with CMS regulations and expectations. If an inappropriate use of the brand or logo is identified, usage must stop immediately. If an agency is found to be non-compliant, they may be subject to progressive discipline including corrective action and/or up to termination.

Agencies must submit their website to SCAN for approval prior to using SCAN's name, logo or product information. Websites must be compliant with Chapter 2, Chapter 17d and Chapter 3 of the Medicare Managed Care Manual.

If your agency conducts telephonic sales and marketing on behalf of SCAN, you are responsible for submitting telephonic sales scripts to SCAN for approval prior to implementation and annually before AEP (only when changes have been made). Additionally, your agency is responsible for submitting documentation and recordings to SCAN by the requested due dates. Remember, only SCAN certified agents are authorized to conduct telephonic sales and marketing activities.

As stated in your contract with SCAN, you must agree to keep complete and accurate records for 10 years of all transactions connected with your agency and make those records available for

examination when requested by a representative of SCAN.

Agencies must oversee their downline agencies and agents and ensure that they are using only approved marketing materials and use them only for their original intended purpose. Any self-created materials must be submitted to SCAN for review and approval prior to use.

Each agency is responsible for submitting all formal and informal educational or marketing/sales events to SCAN.

The following process must be adhered to at all times.

- Your local Broker Account Executive (BAE) will conduct quarterly agency reviews for SGAs and above.
- Twice a year, we'll sit with you and review production to make sure you are in alignment with your agency partnership agreement. We'll take a look at your production reports, agent production, agency ranking, year-to-date production and the status of your contracted agents.
- SCAN will annually evaluate your production to determine if the agency level you were assigned is still applicable.

Your sales agents are expected to conduct sales and marketing efforts in an ethical and compliant manner. This includes complying with established performance standards for selling SCAN to beneficiaries. The purpose of SCAN's sales training program is to ensure that agents know what constitutes acceptable sales activities and performance in accordance with governing federal, state, and SCAN requirements.

Remember - you'll need to continue to meet your production requirements to remain at your agency level. Missing your number may result in downgrade or even termination of your agency contract. However, exceeding the minimum requirements may result in your agency being upgraded.

SCAN's sales integrity standards for all agents include that following minimum performance levels:

1. Achieving less than a 10% rate of rapid disenrollment, denials, or withdrawals for new enrollees with the plan.
2. No late enrollment application submissions (submit applications to SCAN within 24 hours of beneficiary signature date).
3. No deficiencies identified in Sales Integrity field assessments.
4. No deficiencies identified in CMS Secret Shopper assessments of sales events.
5. Achieve 90% compliance with call scripts adherence (Telesales and telephonic brokers).
6. No outbound enrollment calls without permission to contact the beneficiary (Telesales and telephonic brokers).
7. No substantiated sales allegations.
8. No deficiencies identified in random broker enrollment audits.
9. No deficiencies identified in website reviews.
10. No deficiencies identified in broker advertisement reviews.
11. No deficiencies identified in Permission to Contact (PTC) & Scope of Appointment (SOA) audits.
12. No deficiencies identified in contracting, licensing, appointment, and certification status assessments.
13. Attend all sales events filed with SCAN ("approved sales event") unless there is a valid exception. An unexcused failure to attend an approved sales event will result in a written warning. The second time an unexcused failure to attend an approved sales event occurs in a 12-month time period will result in termination from being able to sell SCAN to beneficiaries through any sales channel.
14. 100% compliance with agency compensation audits (For applicable agencies only)

Failure to consistently meet SCAN sales compliance standards and expectations will result in disciplinary action. The impact to beneficiaries resulting from non-compliant sales practices as well as prior precedent will be taken into account in determining appropriate disciplinary action. SCAN's progressive disciplinary action includes counseling, performance coaching, additional training, written warning, corrective action, last and final warning, suspension, and termination.

Agencies are responsible for submitting to SCAN all completed Medicare Advantage Enrollment Applications within the required timeframe. SCAN has a number of effective enrollment tools and solutions for enrolling consumers. Electronic enrollment methods have been designed to create an excellent enrollment experience for your agents. You should encourage your agents to complete the enrollment process in this manner. All enrollment applications must be submitted promptly and within regulatory guidelines to SCAN.

It's important for our agency partners to remember that SCAN's electronic enrollment system, SCANcubed, references the agents National Producer Number (NPN) to assign credit to an agent for an enrollment.

All agencies are expected to comply with CMS regulations and guidelines, federal and state laws and SCAN business rules, policies and procedures - and to provide ongoing monitoring of their agents sales activities to ensure they abide by all applicable CMS regulations and guidelines.

Should an agency have any questions relative to what is permissible as part of the sales and marketing process, the 2020 Medicare Marketing Guidelines are posted at:

<https://www.cms.gov/Medicare/Health-Plans/ManagedCareMarketing/Downloads/2020-Medicare-Marketing-Guidelines-Updated.pdf>

How SCAN Monitors & Audits Our Agency Partners

Compliance Monitoring & Oversight of SCAN Agencies & Agents

SCAN has implemented a variety of compliance monitoring and reporting programs to ensure all agents and agencies are conducting sales, marketing and enrollment activity in accordance with federal, state and company regulations, rules and guidelines. The desired outcome of these monitoring activities is to use the information to consistently improve future behavior and outcomes - and increase the mutual success of the agent and the agency.

Sales and marketing complaints and allegations of agent misconduct can be received from a variety of sources, both external and internal to SCAN. All complaints that are received through CMS Compliance Tracking Module (CTM) or other regulatory agencies are investigated by Compliance.

For agencies where agents assign their commissions to their agency, SCAN conducts random quarterly audits to obtain proof of compliance with CMS compensation guidelines.

The overall goal of the oversight of agents and agencies is to ensure that SCAN agents are selling in a compliant fashion. To accomplish this, processes may be instituted to ensure that the disciplinary actions taken are timely, appropriate and effective to achieve our compliance goal.

SCAN's Compliance Monitoring & Oversight: First Tier Downstream Related Entity (FDR)

As a valued contracted agency that conducts sales/marketing efforts on behalf of SCAN, your agency is classified as a First Tier Downstream Related Entity (FDR) in accordance with CMS guidelines. As a result, SCAN initiated the Sales Monitoring & Oversight program that includes, but not limited to, an FDR Attestation process and a Monthly Random Enrollment Audit for all FDRs. With your help, the Sales Monitoring & Oversight

program will demonstrate to CMS that SCAN and its contracted agencies are compliant with CMS guidelines.

SCAN's Compliance Monitoring & Oversight:

Assessor Program - Secret Shopper - CMS monitors agent behavior in order to protect the interests of the Medicare consumer. This is a compliance program that identifies an agent's improper marketing and sales practices. The outcome of the secret shopper observations are shared with SCAN if the agent fails the review. SCAN will reach out to you and your agent immediately to discuss the findings, and we then must respond to CMS regarding the allegation within 48 hours. We look to our agency partners to make sure agents understand the importance of responding in a timely manner to any allegation that they receive.

SCAN also has a program to evaluate an agent's marketing and sales practices at reported marketing/sales events, and during one-on-one sales activities. The program uses both random and targeted sampling techniques to select agents to evaluate. The SCAN Monitoring & Oversight Assessor will be in attendance and introduce themselves 10 minutes before the presentation - so this program is not "secret". As a part of the oversight of marketing activities, the Sales Assessor Program ensures that contracted sales agents adhere to CMS and DHCS marketing guidelines while representing SCAN Health Plan in an accurate and compliant manner. Formal Events, Informal Events, and In-Home Appointments are evaluated by Monitoring & Oversight Assessors using an assessor tool derived from CMS Secret Shopper reports. Immediate coaching and feedback is provided to sales agents at the close of the marketing activity. The objective of this program is to detect, correct, and report identified deficiencies and provide immediate feedback to sales agents to prevent deficient activity in the future. This enables the agents who are assessed to feel confident that their prospects receive all of the required information in a compliant manner. Deficiencies will be tracked and trended in an effort to proactively alert the Sales Team and our agency partners to prevent potential future deficiencies.

Additional sources for monitoring agent behaviors and sales practices:

Internal Sources

- Member Services
- TeleSales/Field Sales
- Field Observation
- Monthly random enrollment audits (Sales Monitoring & Oversight)
- Grievance and Appeals
- Healthcare Services

External Sources

- Centers for Medicare & Medicaid Services (CMS)
- Secret Shopper/Field Evaluations
- State Departments of Insurance
- Departments of Health or Public Welfare
- SCAN Providers
- State or federal law enforcement
- Other State or Federal regulatory agencies (i.e., DHCS)



From Left to Right:
Judie Victor - Manager, South Region
Dan Stojkovic - Manager, West Region
Martha Covarubias - Manager, Telesales
Chris Bond - VP, Sales
Tricia Koterias - Manager, VillageHealth
Lou Melwani - Manager, East Region

Step-by-Step FDR Attestation Process

1 Complete Annual FDR Attestation

1. Please review, complete, and sign the document titled “Agency Attestation” on behalf of your agency prior to contracting with SCAN annually.
2. Return the signed Agency Attestation to Sales Monitoring & Oversight. The instructions are located on the Attestation form.
3. Note - For the sections “Off Shore” on the Attestation form, it is unlikely that your agency stores documents with protected health information (PHI) outside of the United States. Therefore, you will check off that your agency does not off shore PHI-related documents. However, if this is the case, you will need to complete Attachment A of the Attestation Form.

2 Demonstrate compliance with the Attestation

1. **Staff** - Prior to hiring and every month thereafter, your agency is required to conduct a screening for agency staff members to identify if they are on the federal-excluded individual list. You must conduct the search by using link (a) below. Be sure to save a screen print of the search results! If you identify a potential match during the screening, please contact your FDR Attestation process contact at SCAN noted below.

Contracted Organizations - Prior to contracting and every month thereafter, your agency is required to conduct a screening for all organizations that you contract with using link (b). Be sure to save a screen print of the search results!

a) Excluded Individuals screening:
<http://exclusions.oig.hhs.gov/>

b) Excluded Parties screening:
<http://www.sam.gov/portal/public/SAM/>
2. Ensure all applicable policies and procedures are in place as noted in the Attestation. If you do not have them, please notify Sales Monitoring & Oversight and we will provide a SCAN version to you for distribution to your applicable staff.
3. Ensure applicable staff* complete the training noted below:
 - General Compliance Training
 - Fraud Waste and Abuse Training
4. Ensure procedures are in place to effectively screen governing bodies and senior leadership for any conflict of interest issues
5. Ensure a process is in place to store proof of training for applicable staff* for 10 years**
6. Ensure applicable staff* review and sign the SCAN Code of Conduct or an equivalent Code of Conduct created by your agency

Applicable Staff* - All agency staff members that are NOT sales agents certified to sell SCAN.

Record Retention** - Business Associate shall maintain documentation sufficient to show that it has satisfied its obligations under the HITECH Act. 45 CFR §§ 164.530, 164.414(B). Records must be kept for at least ten (10) years, unless a longer period is required by law, and be made available to SCAN or the Secretary of the United States Department of Health and Human Services for inspection. 45 CFR §§ 164.530(J) (2), 160.310.

Quarterly Monitoring

3

On a quarterly basis, you will be required to provide documentation of the excluded persons/entities screening that was conducted for each of the three months prior.

Quarter	Documentation Due
1	April
2	July
3	October
4	February

Random Audits

4

Annual Random Audits - On an annual basis, SCAN will randomly select agencies and they will be asked to provide documentation of the items noted above in Steps 1 & 2 of “Demonstrate Compliance with the Attestation”. Notifications will be sent to the selected agencies in March and documentation will be due to SCAN in early April.

Monthly Random Enrollment Audit - If selected, SCAN will send an email notification to your agency alerting you that the enrollment Attestation Form has been dropped in your secure FTP site. Upon receiving the file(s) you will need to provide the supporting documentation listed below within five business days.

1. Complete Attestation Form
2. Scope of Appointment documentation
3. Permission to contact documentation
4. A copy of all promotional items created by your agency used to promote group events (Example: advertisements, fliers, etc)
5. Paper enrollment forms that are used to complete electronic enrollment submissions
6. For telephonic enrollments:
 - Recordings of the enrollment
 - CMS-approved telephonic script(s), if not previously provided

Sales Integrity Email:
SalesIntegrity@scanhealthplan.com

Compliance Reminders for Your Contracted Agents

Nominal Gifts - Must have a retail value of less than \$15.00 and may not be readily convertible into cash.

Marketing Through Unsolicited Contacts - No door-to-door solicitation, outbound marketing calls, calls to beneficiaries to confirm receipt of mailed information, calls to confirm acceptance of appointments made by third parties, approaching beneficiaries in common areas, or calls or visits to beneficiaries who attended a sales event and did not request a follow up contact.

Scope of Appointment - Must use SCAN approved "Sales Appointment Confirmation Form", prior to initiating any face-to-face appointment with a prospective enrollee. Sales Appointment Confirmation Forms and/or recordings of prospective enrollee's consent to the scope of appointment must be retained by the agent for a period of ten (10) years, or as otherwise required by MIPPA regulations and in accordance with SCAN policies and procedures. Agencies and agents must inform the beneficiary of all products that will be discussed prior to the in-home appointment. Enrollee must provide consent, which the agency/agent must document.

Cross-Selling - Agent agrees not to solicit, present or sell any non-healthcare related products such as annuities or life insurance to prospective enrollees during any Medicare Advantage or Part D sales activity or presentation, as this is considered Cross-Selling by CMS and is strictly prohibited under the MIPPA regulations.

Sales/Marketing in Healthcare Settings - Agent agrees not to conduct sales activities to prospective enrollees in any healthcare setting, except in common areas, as this is strictly prohibited under the MIPPA regulations. Common areas where marketing activities are allowed include areas such as hospital/facility cafeterias, community or recreational rooms and/or conference rooms.

Sales/Marketing at Educational Events - Agent agrees not to conduct sales activities to prospective enrollees at any events that are promoted as being Educational Events. An event is deemed to be an Educational Event if it is intended to provide general and objective information about Medicare Program, Medicare Advantage or Part D programs, or general health and wellness topics. Prohibited activities include the distribution of marketing materials, or the distribution or collection of plan applications.

Meals Prohibited - Agent agrees not to provide meals to prospective enrollees prior to, during or after a presentation. Light snacks as defined herein are allowed to be provided at sales presentations, events or meetings.

Corrective Action

If your agency does not demonstrate compliance during the quarterly monitoring, monthly or annual random audits, SCAN will work with you to develop a corrective action plan to assist your agency with becoming compliant. If subsequent monitoring/auditing efforts continue to reflect non-compliance, SCAN will be forced to end the contractual relationship due to non-compliance.

Disciplinary Actions

Should an agency be subject to disciplinary action for non-adherence to an applicable law, rule, guideline or instruction issued by SCAN Health Plan or any regulatory agency having authority over the activities or agencies as outlined in their contract, the following are a sampling of disciplinary actions that may occur.

- Retraining or re-education
- Recertification
- Ride-along
- Monitoring (Secret Shopping)
- Suspension of sales and marketing
- Termination
 - Both For-Cause and Not-for-Cause terminations may occur.
 - If terminated Not-for-Cause, no state or federal regulatory agencies are contacted.
 - If terminated For-Cause, applicable state and federal agencies may be contacted.

Agents and agencies are expected to conduct themselves in the manner required by CMS Chapter 3 Guidelines, other regulations, state and federal laws, and SCAN rules, policies and procedures and Code of Conduct. Complaints and allegations of misconduct against agents are considered serious matters that require prompt attention.

When complaints or allegations of agent misconduct require a response from an agent, both you and the agent will be notified immediately. Agencies are expected to ensure that their downline agencies and agents respond to the requests for additional information within the prescribed timeline.

Agency Suspension of Sales and Marketing

If at any time your performance or action as a SCAN-certified agency threatens to damage SCAN's reputation or does not meet our standards, SCAN can, at its discretion, initiate suspension of your sales and marketing activities.

A determination to suspend can also be based on the severity of the allegation(s), the number of pending complaints or investigations and other oversight criteria. In such cases, suspension is effective until the investigation is completed and a final disciplinary recommendation has been made.

Termination of Agents - SCAN is required to report the termination of any agent and the reason for the termination to the State. Therefore, Agency agrees to notify SCAN of any terminations of agents who are subordinate to Agency or Subordinate Agency including reason for such termination.

When a recommendation to suspend has been made, you will be contacted via email and a follow-up call will be placed to your agency. Your agency will not be permitted to market or sell SCAN products while on suspension status. New business written during the suspension period will not be eligible for commission. Renewals, however, will be paid while on a suspension status.

IT IS CRITICAL THAT YOU ADHERE TO THE PROCESS OUTLINED IN THE COMMUNICATIONS THAT YOU RECEIVE

Agency Termination of Sales & Marketing

Not-for-Cause and For-Cause

SCAN can terminate our contract with an agency immediately at the discretion of SCAN, in the event that the agency:

- Materially breaches the terms of their contract.
- Fails to comply with the annual recertification process.
- Fails to comply with CMS guidelines or SCAN P&Ps.
- Intentionally violates any compliance, regulatory or ethical provisions.
- Causes imminent harm to SCAN's reputation.
- Intentionally commits fraud or malfeasance.
- Ceases to be a qualified and licensed insurance agency.
- Fails to provide requested information within the specified timeframe.

SCAN's contract with our agencies may be ended by either SCAN or the agency providing at least sixty (60) days prior written notice to the other party. Any commission due to the agency will be paid within ninety (90) days after the effective date of the termination to allow for chargebacks, if due.

If the agency is contracted with SCAN directly and a termination is to occur, the agents will be offered the option to select a different agency through the Hierarchy Transfer form. If the agency has an upline, then the agents will have a choice to roll up to the next level in their hierarchy, or select a new SCAN contracted agency.

Terminations may be recommended by SCAN, an upline agency of the subordinate agency, a regulatory agency, state Department of Insurance, or an agency may request a voluntary termination or an alteration to the agency level hierarchy.

All contract terminations are classified in one of these two manners:

A **Not-for-Cause Termination** can be initiated by multiple stakeholders, including the agency themselves. Retirement, relocation, expired license, expired E&O insurance coverage or disciplinary actions are among the reasons for agency termination. Should termination be necessary, your agency will be emailed a termination notification letter that will identify the effective termination date as identified in your agency level contract. For terminations requested by SCAN, your entire downline is assigned to the next hierarchy level as of the termination effective date. If there is no upline the agents will be given the opportunity to submit a hierarchy transfer.

A **For-Cause Termination** can be initiated by SCAN or by an external regulatory agency. A For-Cause termination notification letter detailing the offense, effective termination date, and the appeal process is sent to the agency via an overnight delivery vendor, and all up and downline agencies are notified of the termination. Downline agents are reassigned to the next highest entity in the hierarchy as of the effective termination date. If there is no upline, the agents will be given the opportunity to submit a hierarchy transfer.

Agency Reporting Requirements

SCAN holds its agencies accountable for meeting numerous reporting requirements. If your agency reports to an upline in the hierarchy, the upline agency is responsible for collecting and submitting a number of reports on your behalf to SCAN. The following is a list of some of these reporting requirements:

1. Compliance Attestation process: For First Tier, Downstream or Related Entities (FDR). Your agency is an FDR and therefore required to provide this information. Program requirements apply to all employees of FDRs who provide health or administrative services annually SCAN's agencies receive the attestation form(s) from SCAN's Monitoring & Oversight team and the agency is required to triage the collection of the required information from each of their downline agencies and provide it back to the Monitoring & Oversight team and the agency is required to triage the collection of the required information from each of their down line agencies and provide it back to Monitoring & Oversight. This form must be completed upon contract execution (or earlier if required). SCAN issues a new request to the agencies each December and requires them to collect new attestation forms from their down line agencies and respond by February and annually thereafter. An agency's failure to provide this documentation may result in contract suspension or termination.

This form requires that our agency partners have Compliance Policies and Procedures and Standards of Conduct that meet CMS requirements. If they do not, FDRs must distribute SCAN's Standards of Conduct and Compliance Policies & Procedure's to their downline.

- Have written Compliance Policies and Procedures and Standards of Conduct that they can distribute to their company employees.
- Requires that all agency employees take annual Compliance and Fraud, Waste and Abuse training within 90 days of hire and annually thereafter.
- Attest that they have reviewed the DHHS OIG list of Excluded Individuals and Entities and

the GSA Excluded Parties Lists System prior to hiring or contracting of any new associate and that they have a process in place to monitor the entities with which it contracts to make sure they are in compliance with all applicable laws and regulations. SCAN is held accountable for collecting this information - and we take very seriously any delay in the provision of the required documentation.

What this means to your agency - if you are a GA, MGA or SGA, you are required to provide this attestation in a timely manner to your FMO or directly to SCAN, when it is requested. Failure to do so may result in contract suspension or termination.

In addition to the FDR reporting requirements, all SCAN agencies are responsible for collecting and submitting the following reports on behalf of their downline agencies.

2. Monthly OIG Screening documents: Agencies are expected to screen staff members and contracted organizations prior to contracting and monthly thereafter. Screen prints of search results must be saved in case of audit.

3. Quarterly OIG Attestation: A quarterly Exclusions List Verification Certification attestation form is sent to agencies and must be returned to SCAN.

4. Annual Random Audits: Annually, agencies will be selected at random to participate in the annual attestation audit. SCAN will ask for agencies to provide supporting documentation for items which the agency attested to in the FDR Attestation form.

Commission Compensation

Agency Administration Services

Compensation is defined by CMS as monetary or non-monetary remuneration of any kind relating to the sale or renewal of a policy including, but not limited to, commission, bonuses, gifts, prizes, awards and finder's fees.

Commission is a form of compensation given to an agent for new enrollments and membership renewals of consumers in the plan that best meets the consumers healthcare needs. Plan sponsors are not required to compensate agents for selling Medicare products. However, since SCAN does compensate its agents, the compensation to both agents and agencies complies with CMS and other regulatory guidance. Most agents are paid directly by SCAN. All aspects of how commissions are handled can be found in SCAN's Commission Guide.

Enrollments must be a result of the direct contact between an agent and the individual prospect. SCAN will pay a commission for each eligible individual that an agent enrolls in one of SCAN's Medicare Advantage Plans. Commissions are paid per the current commission schedule. The allocated portions of the administration fee payments will be paid directly to the agency during the normal commission payment schedule, as set forth by SCAN policy, unless otherwise agreed to by the affected parties.

Administrative Services are defined as those services provided by an agency that oversees the activities of agents who are marketing and selling SCAN plans. These services provided by SCAN's Agency partners include collecting and submitting contracts on behalf of agents; responses to members and prospect inquiries; coordinating operational meetings with SCAN to review agent administrative policies to ensure compliance, maintaining and implementing all MIPPA guidelines; adhering to SCAN training requirements and standards; and establishing policies and procedures that meet all SCAN and CMS requirements.

Compensation Overview

Change in Payee - When requesting changes to the payee name or Tax ID, you must complete a new electronic W9. Send a "payable to change request" to SCANBrokerContracting@scanhealthplan.com and an electronic W-9 will be sent to you. This will ensure that payments are issued accurately. The change will take effect in the next commission cycle provided that the request was submitted prior to the last day of the current month. This change will not affect renewal payments and agents will continue to be paid according to the initial payout. All new enrollments will be paid to the new payee. SCAN will not adjust renewal payments for payee or TAX ID Changes.

Address Updates - To ensure all payments are sent to the correct address, submit address change request to:

SCANBrokerContracting@scanhealthplan.com

The change will take effect in the next commission cycle provided that the request was submitted prior to the last day of the month.

Our agency and agent partners are paid in accordance with the rates and provisions on page 34. These provisions may be amended by SCAN in accordance with CMS regulations.

Agency Commission Rates

	Initial Year	Renewal
GA	\$100.00	\$50.00
MGA	\$125.00	\$63.00
SGA	\$150.00	\$75.00
FMO	\$200.00	\$100.00

If the new enrollee continues to be a member of SCAN, we will pay the agency a commission of one half the initial year rate and this will be paid as earned monthly.

For example, the GA is paid \$4.16 per month which equals \$50 for the year.

Chargebacks/Rapid Disenrollment - If an enrollee leaves the plan prior to month four (4), no compensation is earned and a one hundred percent (100%) chargeback is applied.

Any commission discrepancies must be submitted in writing to SCAN within 120 days of commission payment date

If you would like more information, please refer to the Commission Guide.



*From Left to Right:
Jessica Carlos - Sales System Coordinator
Daniel Montoya - Sales Systems Analyst
Yadira Flores-Duarte - Sales Broker Analyst*

Specifications for Agency Level Agreement

	FMO (Field Marketing Organization)	SGA (Supervising General Agency)	MGA (Managing General Agency)	GA (General Agency)
Production & Commissions				
Annual Production Requirements	1000	300	200	100
Minimum Number of Agents	50	30	20	10
Compliance and Training				
Compliance Officer	Required	Not Required	Not Required	Not Required
Established P&P's	Required	Not Required	Not Required	Not Required
Agent Training and Monitoring	Required	Required	Required	Required
Benefits to the Agency				
Orphan Agents	Yes	No	No	No
SCAN Leads	First priority as available	As available	As available	As available
Sub Agencies Permitted	Yes	Yes	Yes	No
FMO Advisory Council Membership	First priority as available	No	No	No

*Specifications subject to change by SCAN Sales Management

Resources

Sales Support Team
Monday through Friday
8 a.m. - 6 p.m. Pacific Time, Extended hours during AEP
(888) 445-2038

Commission Assistance
SalesCompensation@scanhealthplan.com
(562) 637-1220

Contracting
SCANBrokerContracting@scanhealthplan.com
(562) 989-5157

Event Submission
SeminarSubmission@scanhealthplan.com

Plus Plan Questions
PlusPlan@scanhealthplan.com

Marketing Materials
SCANMarketingSubmissions@scanhealthplan.com

Sales Materials
www.scanhealthplan.com/storefront

Training
SCANSalesTraining@scanhealthplan.com
<http://scan.cmpsystem.com>

Sales Integrity
SalesIntegrity@scanhealthplan.com

Accessing Your Dedicated Service Team

Got sales support questions?

For help with benefits, eligibility, enrollment, network, formulary, and more, contact the Sales Support Team.

Monday through Friday
8 a.m. - 6 p.m. Pacific Time
(Extended hours during AEP)
(888) 445-2038

Got general questions?

Reach out to your local Broker Account Executive (see last page of this guide). They are your Concierge Team. They're in your neighborhood and there to help.

The Sales Support Team is **HERE** in Long Beach. Here's a sample of the questions they are most frequently asked:

Q: Will the SST be able to answer my Commission questions?

A: *The SST can help you with commission pay dates. Any other commission questions should be directed to Sales Compensation by calling (562) 637-1220 or sending an email to salescompensation@scanhealth-plan.com. Your questions will be answered within 24 to 48 business hours.*

Q: Can the SST help with member issues?

A: *Unfortunately, no. The SST doesn't have access to members' files. The member should call a Member Services Advocate for assistance at (800) 559-3500.*

Q: My client is new and has not received his SCAN membership card. Can I order a card through the SST?

A: *The SST can't order a card. SST can connect agents to Member Services to place an ID card order for the member.*

Q: Will the SST be able to speak to my client on the phone?

A: *No. The SST is not allowed to speak directly to clients or members due to CMS regulations.*

Q: When will members receive their Delta Dental cards?

A: *Delta Dental sends out new ID cards with a Welcome letter to new members only. Additionally, we will send out Welcome letters when there is a change to the member's program (e.g., they changed from the Basic plan to the Enhanced plan on Dental). When a member changes dental offices, Delta will generate a letter confirming the dental office change and effective date of the change, but ID cards are not part of that letter.*

Q: My client is a SCAN member and I lost their phone contact information. Can the Sales Support Team give me the information?

A: *Per HIPAA guidelines the SST cannot give out any member's personal information.*

The Sales Support Team member who takes your call will be able to investigate and answer your questions on the spot - and even if they don't have an immediate answer, they will do the legwork and get back to you ASAP!

Yes! We can help with:

- Medicare verification - A&B effective dates
- Low Income Subsidy (LIS) status verification
- LIS/SEP last used date
- Medi-Cal verification - Aid Codes / Share of cost
- SCAN Benefits Verification
- Formulary Search
- Doctor Search (PCP/Specialist)
- Supplemental Provider Contact info: SilverSneakers, TruHearing, EyeMed, Delta Dental, MDLive, etc...
- Application Status
- CARA Status
- Verify Agent of Record
- Broker/Agent training look-up and scheduling assistance
- General Questions on: Contracting, Ordering of Sales materials, Commissions Issues

No! We cannot help with:

- Member Issues
- Prospects wanting to inquire or join the plan
- Ordering ID Cards - SST can provide instructions for Agent/Brokers to order

SST will advise Agent/Broker to have Member call Member Services for:

- PCP Changes
- Pharmacy issues - SST can give them BIN/GRP/PCN#
- Billing/Claim issues
- Disenrollment issues - member received a letter/call from SCAN
- National Med Trans for ride availability or scheduling



*From Left to Right,
Your Sales Support Team:*

*Larry Napier
Valeria Sherlock
Britney Jenkins (Lead)
MaryAnn Ortega
Susana Telleria
June Finley*

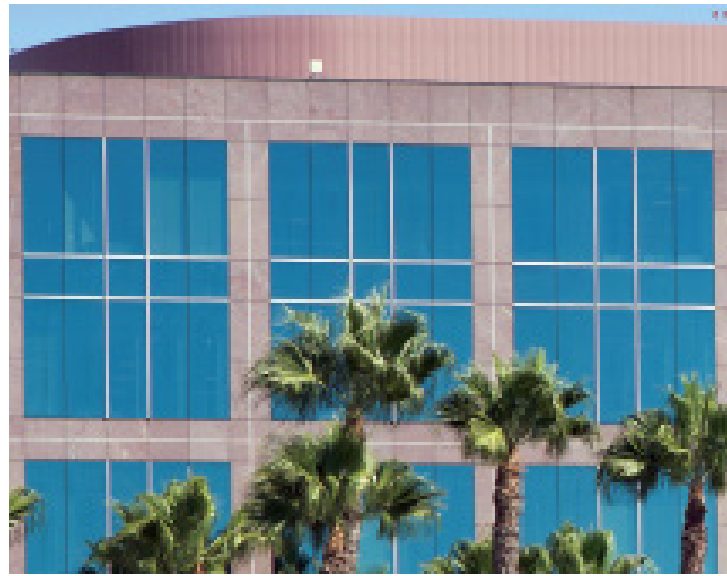
SCAN OFFICES

CORPORATE OFFICE

3800 Kilroy Airport Way, Suite 100
Long Beach, CA 90806
Main Line: (562) 989-5100



Director, Broker Sales
Stanton Sasaki
(310) 782-4020
ssasaki@scanhealthplan.com



REGIONAL OFFICE - CALIFORNIA

WEST

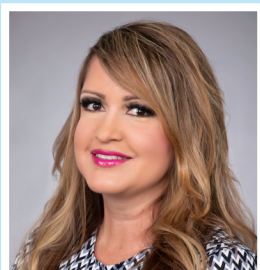
LOS ANGELES & VENTURA COUNTIES

GLENDALE REGIONAL OFFICE
450 North Brand Blvd., Ste. 600
Glendale, CA 91203

SALES COORDINATOR
Ana Martic
(562) 989-5100 ext. 4902



LA WEST & VENTURA
Broker Account Executive:
Elsa Rapp
(310) 489-3154
erapp@scanhealthplan.com



LA EAST
Broker Account Executive:
Norma Garcia
(310) 938-8521
ngarcia@scanhealthplan.com

EAST

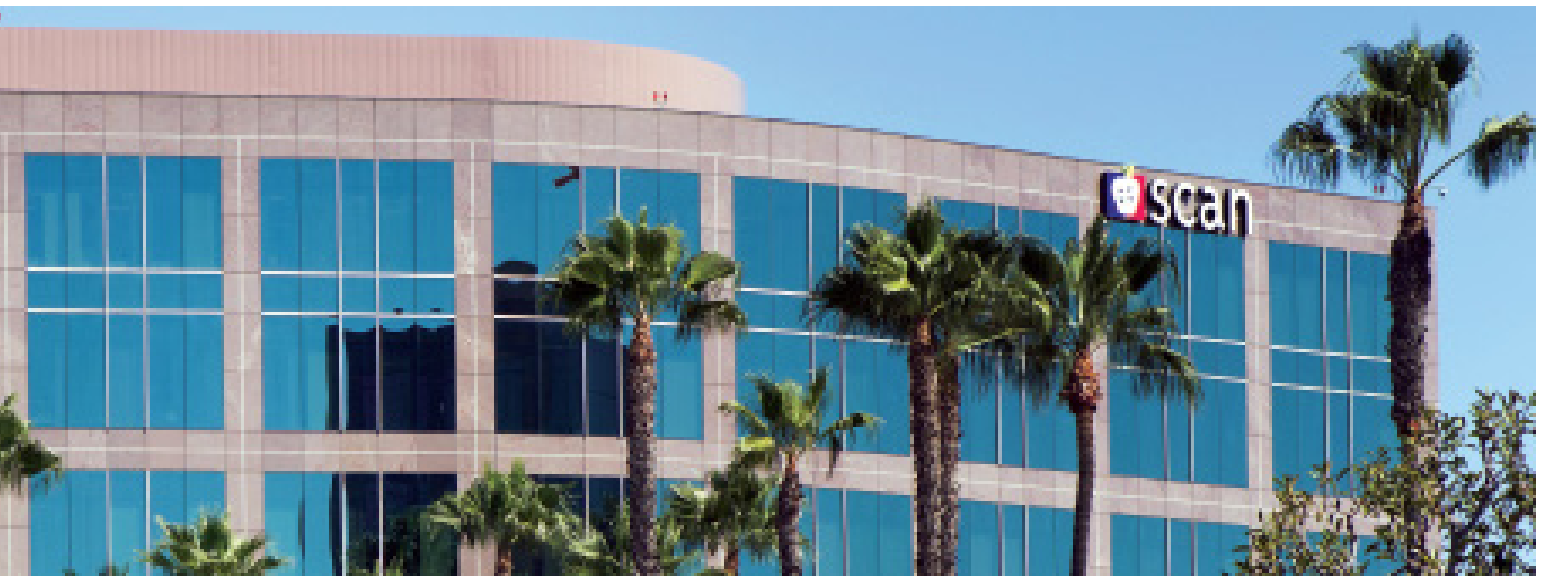
RIVERSIDE & SAN BERNARDINO COUNTIES

CORONA REGIONAL OFFICE
555 Queensland Circle, Ste. 101
Corona, CA 92879

SALES COORDINATOR
Serena Sanchez
(562) 989-8387



Broker Account Executive:
Dan Rivera
(949) 207-4214
drivera@scanhealthplan.com



SOUTH

ORANGE & SAN DIEGO COUNTIES

SAN DIEGO REGIONAL OFFICE

9655 Granite Ridge Dr, Ste. 200
San Diego, CA 92123

SALES COORDINATOR

Paula Villaseñor
(562) 308-5812



ORANGE COUNTY

**Broker Account
Executive:**

Gale Gajardo
(714) 698-3450
ggajardo@scanhealthplan.com



SAN DIEGO COUNTY

**Broker Account
Executive:**

Robin Bartley
(562) 310-9529
rbartley@scanhealthplan.com

NORTH

NAPA, SONOMA, SAN FRANCISCO & SANTA CLARA COUNTIES

NORTHERN CA REGIONAL OFFICE

1255 Treat Blvd., Ste. 300
Walnut Creek, CA 94597

SALES COORDINATOR

Hang Pham
(562) 308-2742



**Broker Account
Executive:**

Eric Nordseth
(562) 485-7556
enordseth@scanhealthplan.com

