

2024

SCAN **STRONG**

Building on **45+** years of strength and stability

2024
**Sales Agent
Guide**

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COMMISSIONS

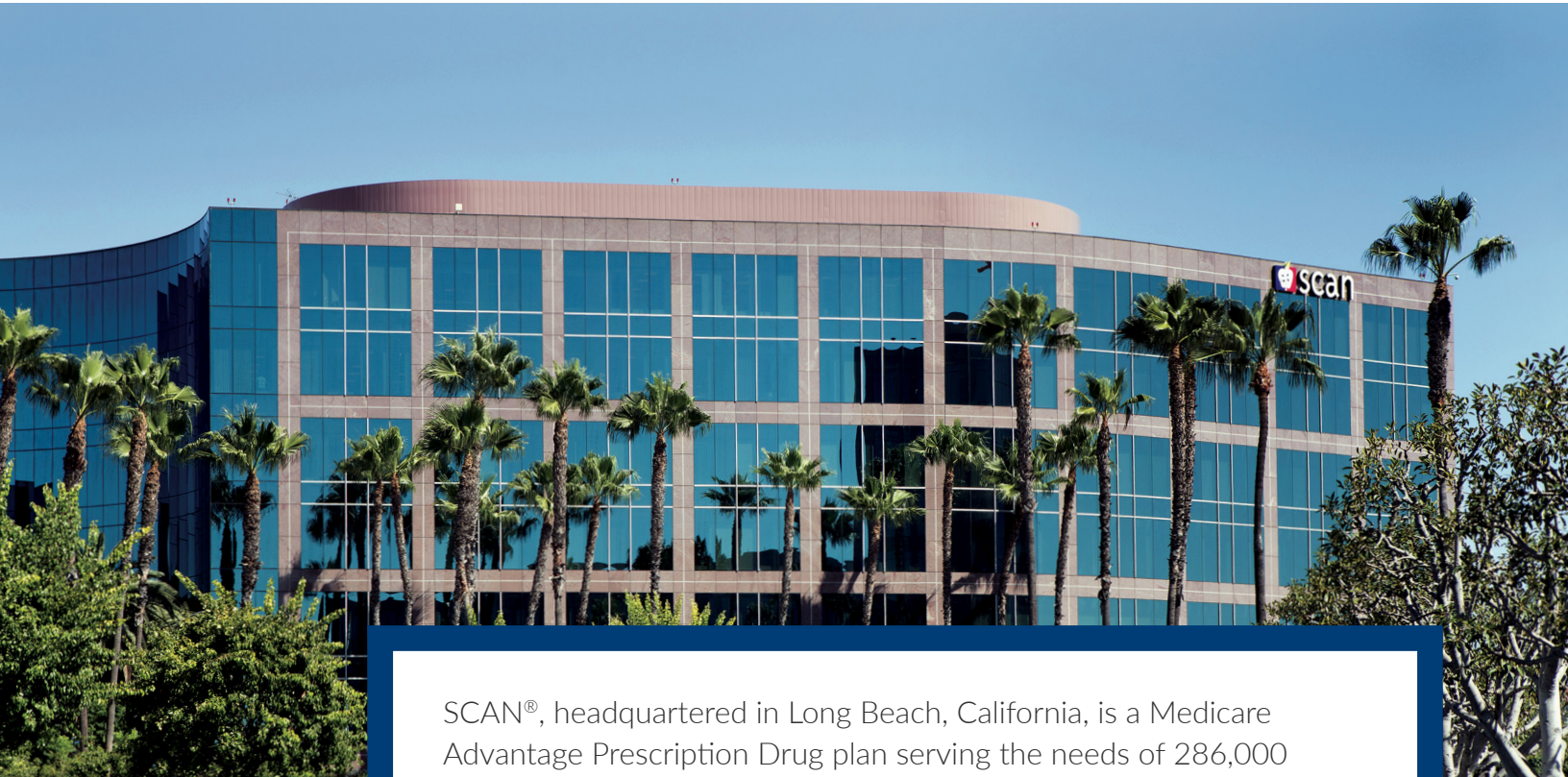
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OUR MISSION

Keeping Seniors Healthy and Independent



SCAN®, headquartered in Long Beach, California, is a Medicare Advantage Prescription Drug plan serving the needs of 286,000 members. Founded in 1977, SCAN employs over 1,400 employees who work diligently to help our members stay healthy and independent.

Today SCAN is the second largest not-for-profit Medicare Advantage plan in California. In 2024, after expanding to New Mexico and adding two new California counties, our service area has grown to include 13 counties in California, three counties in Arizona, two counties in Nevada, two counties in Texas, and two counties in New Mexico. See Page 14 for the entire list of counties that make up our service area.

2024 **SCAN STRONG**
Building on **45+** years of strength and stability

WHY SELL SCAN?

- > SCAN is the second largest not-for-profit MAPD plan in CA – also the third largest in the nation.
- > For over 47 years, we've only served people on Medicare.
- > We have expert Member Services Advocates dedicated to serving your local market. There are no call time limits, so they can spend as much time with your clients as is needed.
- > SCAN offers a broad portfolio of products for your eligible clients in selected markets.
- > We have competitive plans with rich benefits that can be sold year-round.
- > Our voluntary disenrollment rates are lower than average - that means that during AEP you can concentrate on new business, not retention.
- > Our Network Management team works to ensure that we have a full range of quality physicians and other respected providers to meet your clients' needs.
- > SCAN's Member Service team regularly receives National recognition for the excellent service they provide.

Star Ratings

When you put your clients in plans that are 4 Stars and above, you keep your members healthy, independent and HAPPY to refer you.

What you should know...

The Five-Star Quality Rating System for Medicare Advantage Plans is overseen by the Centers for Medicare and Medicaid Services (CMS). The rating was developed to help consumers understand how well each Medicare Advantage plan:

- > Helps members stay healthy via preventive services such as screenings and vaccines
- > Manages their members' chronic conditions
- > Is rated for plan responsiveness and care
- > Handles complaints, appeals, and voluntary disenrollment
- > Provides telephone customer service

You can have a direct impact on Stars by...

- > Accurately explaining plan benefits
- > Increasing SCAN member satisfaction by being professional and setting expectations at the time of enrollment
- > Educating your clients about SCAN's ancillary benefits and how to access them.

Data to support these star ratings come from surveys, observation, administrative (claims) data, and medical records. Based on criteria established by CMS, each plan's rates and scores are calculated and stars are awarded and published annually prior to the Annual Enrollment Period (AEP).



Improve your member's health care and SCAN Star measures at the same time...

- Educate your client at time of enrollment
- Perform follow-up calls 30, 60 and 90 days after enrollment
- Ensure smooth member on-boarding
- Remind your client about:
 - PCP ASAP--within 90 days
 - Medication Adherence / 3-month supply = 100 days
 - Flu Shots and Medical Screenings

Welcome to SCAN Agent Portal

A One-Stop-Shop for all your SCAN Sales Needs

SCAN
AGENT
PORTAL

Training

Enrollment

Marketing

Commissions

Resources

Welcome to your SCAN Agent Portal

Your one-stop-shop for conducting business with SCAN Health Plan.

Log-in to access to all your favorite SCAN websites

Agent Log In



Get Contracted with SCAN Now



Check out how easy it is to use our SCAN Agent Portal

To get access to SCANAgentPortal.com, you'll need to first contract with SCAN. And once you do, you'll have access to everything you need. (If you are not yet contracted with us, just click "Get Contracted with SCAN Now" found on the Home Page of the website.)

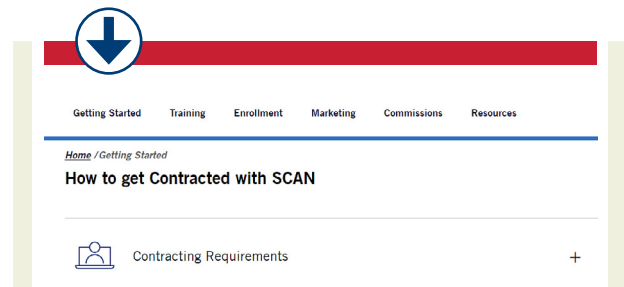
Each section of the SCAN Agent Portal is filled with tools, resources and information designed to help you manage and grow your book of business. Depending on our relationship with your agency, you may have access to some, if not all of the following features:

- Access Training Tools and sign up for an upcoming class
- Complete an Electronic Enrollment on SCANCubed
- Order materials on the Marketing Portal
- View statements and sign up for direct deposit on the Commission website
- View or print the SCAN Sales Agent Guide
- Find Provider, Specialty and Formulary lookup tools all in one place
- Access our Health Risk Assessment (HRA) form
- Use our Electronic Scope of Appointment (SOA)

Here's a closer look at the tools you'll find on SCANAgentPortal.com

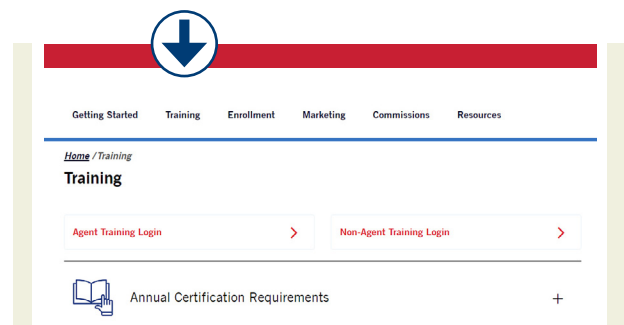
GETTING STARTED

Getting Started is the perfect place to begin for new agents interested in selling SCAN. Here you'll find SCAN's contracting and training requirements, along with email links to each department. We've even provided a list of SCAN-contracted Field Marketing Organizations (FMO's) to help you select an agency with which to align.



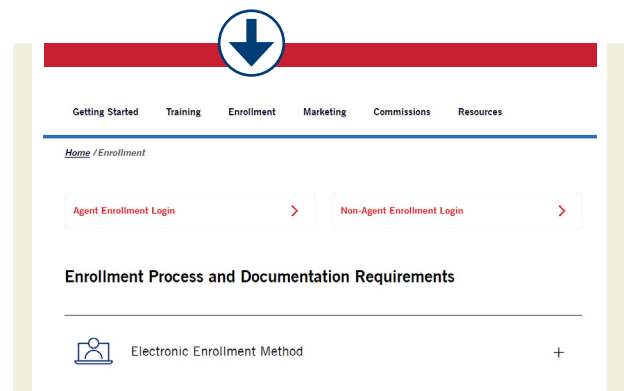
TRAINING

SCAN's training website contains a wealth of training resources including a list of upcoming classes and webinars that will help you "Sell More and Sell Smarter!" It also contains links to handouts, job aids and sales tools.



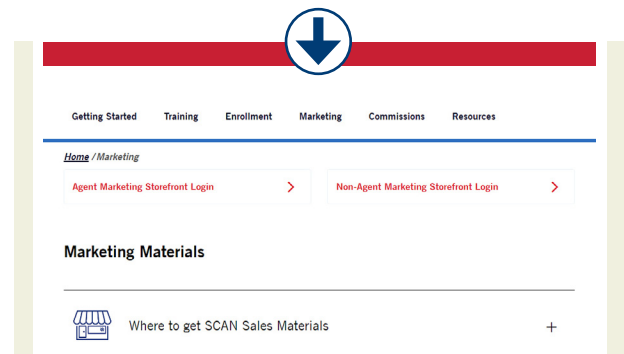
ENROLLMENT

The Enrollment tab provides direct access to SCANCubed, our Enrollment website. This tab also details each of the available methods for submitting your enrollment applications to SCAN. Additionally, you'll find SCAN resources such as the list of ancillary documentation required to accompany your submissions, our Electronic Scope of Appointment (SOA), HRA Form, and a series of video recordings that demonstrate how to use SCANCubed.



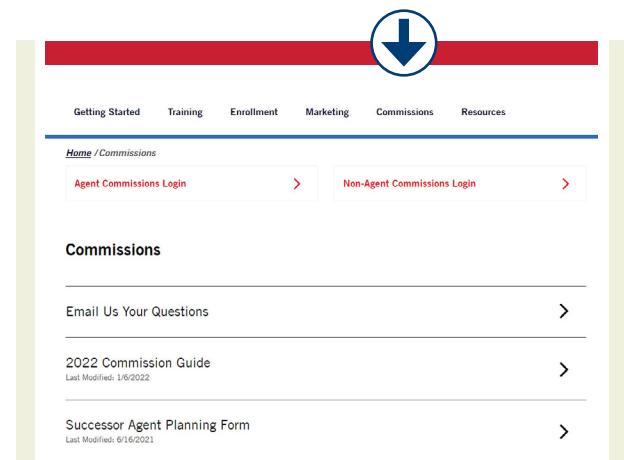
MARKETING

Select the Marketing tab to gain access to SCAN Marketing Storefront where you'll find all you need to know about your sales and marketing materials; how to order them, how to create your own personalized versions, and how to stay SCAN-compliant when conducting sales events.



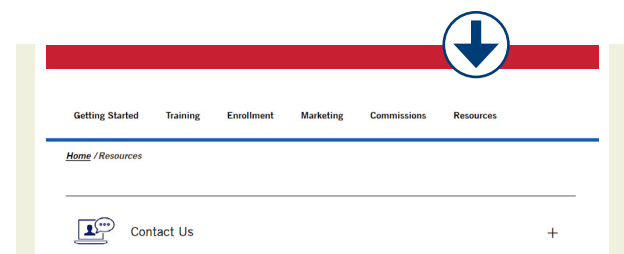
COMMISSIONS

Here's where you'll access the website for your commission statements and, if you haven't already done so, sign up for direct deposit. You can also click Commission Guide to check out the Frequently Asked Questions (FAQ) section which will answer many of your payment-related questions. Print the Successor Agent Planning form to determine if you meet the minimum requirements that qualify you for our Successor Agent Program.



RESOURCES

Click on the Resources tab to access the SCAN Plan Finder and the Provider, Formulary, and Hospital Lookups all in one convenient spot. Importantly, in Contact Us, we provide a list of email addresses and phone numbers for each team member here at SCAN. We're committed to do all we can to support you and your success.



We hope you'll agree that our convenient SCAN Agent Portal is just one more reason you'll love to work with SCAN.

FOR NEW SCAN AGENTS

Becoming a SCAN Certified Agent

You can become a certified SCAN agent in just a few simple steps. Here's all you need to do!

1. Obtain a New Agent Contract

To be authorized to sell SCAN products, you must be fully certified for the products you wish to sell, and affiliated with an Agency that contracts with SCAN.

To request a contract with SCAN, go to ScanAgentPortal.com and click "Get Contracted with SCAN Now." Complete the SCAN Agent Contract Request form.

If you would like to know who SCAN's contracted agencies are, email us at SCANBrokerContracting@SCANHealthPlan.com

Contracting paperwork includes:

- > Agent Contact Form
- > Agent Agreement
- > Current State Insurance License Numbers
- > Signed W-9
- > Agent Appointment Form

✓ **Licensing** - To sell SCAN plans, you must have current Accident & Health licenses that will not expire within 45 days of contracting.

✓ **Errors & Omissions (E&O)** - Agents must sign the Errors and Omissions Attestation of Coverage (must not expire within 45 days of contracting). Your minimum E&O policy must be written for \$1,000,000 per occurrence and \$1,000,000 aggregate limit. After onboarding, agents are required to continue to maintain active E&O coverage. Evidence of coverage MUST be available upon request.



2. Next, Complete your Training

You can begin your training once all contracting paperwork has been received.

If you are a new agent, you will receive an activation email to set up your new account.

GET STARTED

- Go to SCANAgentPortal.com
- Click “Agent Log In.” Then after logging in, select the SCAN Sales Training website from your website options.
- Complete trainings below

STEP 1:

AHIP *(Required)* *

- ▶ Training curriculum includes modules on Medicare Marketing and Fraud, Waste and Abuse
- ▶ Completing this training also satisfies the CMS requirement for General Compliance training
- ▶ You must complete AHIP with a passing score of 90%

STEP 2:

Online Certification Video & Exam *(Required)*

- ▶ Watch the ENTIRE online training video
- ▶ Attest to reading SCAN’s P&Ps, Code of Conduct and Sales Agent Guide
- ▶ Complete the exam with a minimum passing score of 85%

STEP 3:

BENEFIT ROLLOUT TRAINING *(Strongly recommended)*

- ▶ Attend one of the offered trainings for an in-depth understanding of our rich plans
 - Live Webinar Training
 - Face-to-Face Training

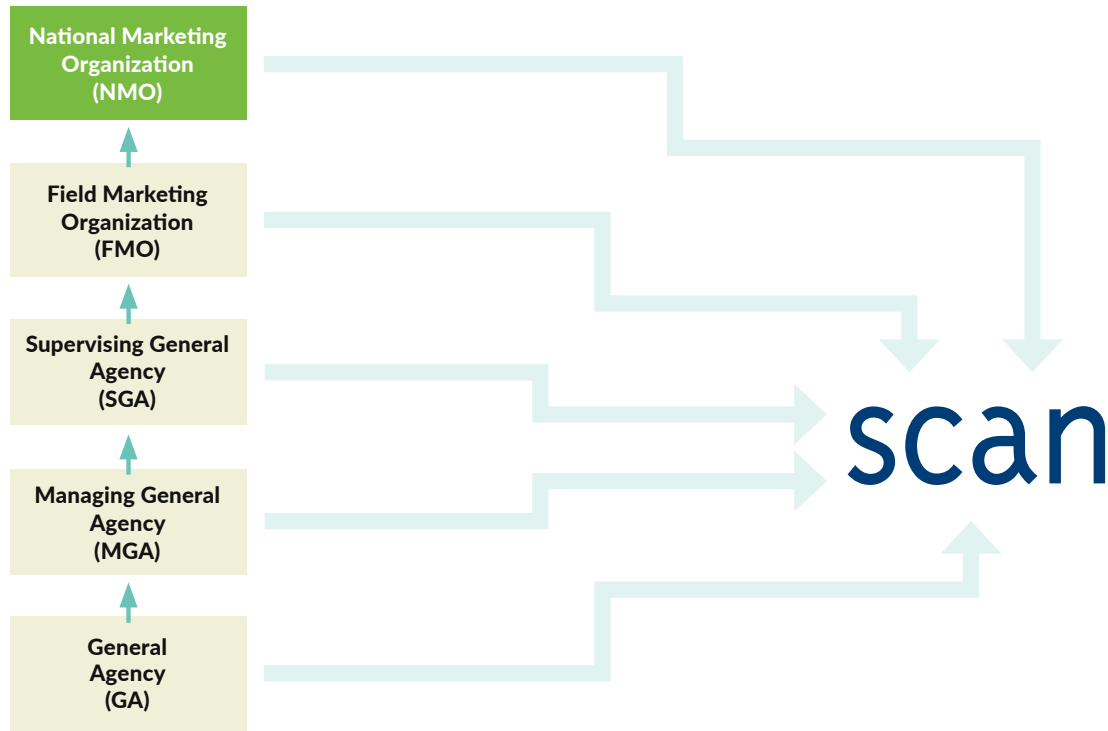
* **SAVE \$50 off your AHIP Certification Fee**

Agents are encouraged to access and complete their AHIP training using SCAN’s Training Portal.

The AHIP certification fee through SCAN is \$125 and payment is conveniently made through our Portal.

Agency/Agent Hierarchy

SCAN contracts numerous “levels” of agencies as part of our agency hierarchy. Field Marketing Organizations (FMO’s) are at the top of our hierarchy tiers and are responsible for the oversight of the various types of agencies in their downline.



Hierarchy Transfer Requests

SCAN allows agents with a current active status to change their agency hierarchy once a calendar year; however, **no hierarchy changes are permitted between September 16 and November 30**. “Active status” means that you have completed the contracting and training process, and your state license and Errors and Omission policy is current.

If you terminate your agent contract after September 15th, you will not be able to re-contract until the following calendar year.

To initiate the request, email SCANBrokerContracting@SCANHealthPlan.com and you will electronically receive:

- > Hierarchy Transfer Form (NOTE: Forms must be signed and submitted by agent.)
- > New W-9 Form

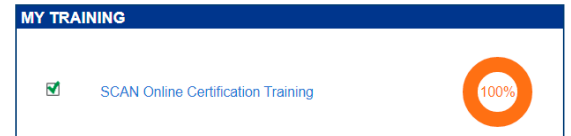
Both forms must be signed and returned no later than the 15th of the month for the transfer to be effective on the 1st of the following month.

Learn About Training with SCAN

Select the Training tab on SCANAgentPortal.com to connect to the SCAN Training Website. There you can enroll in required training classes, view recorded sales trainings and more.

Certification Trainings

- > **Annual SCAN Certification Training**
- > **One-time Connections Certification Training** (*ONLY available in LA, Riverside, San Bernardino and San Diego, CALIFORNIA*)



To be eligible to sell the Connections plan, agents must:

1. First complete the **one-time** Connections certification mandated by California and SCAN with a passing score of at least 85%.
2. Complete the Annual SCAN Certification Training **every year**.

NOTE: Once Broker Contracting informs you that your Connections certification is complete, have your Connections Certified Agent badge available whenever you discuss and/or present this plan.

Click and Learn

Grab some popcorn and watch your fill of these Pre-recorded Trainings ...

- > Electronic Enrollment
- > Duals SEP Training
- > Building a Referral-Based Business
- > Dental Enrollment Training
- > Helping Your Clients Enroll in Part B
- > And many more
- > Educational Community Presentations (*CMS presentations to use with Prospects*)
 - Medicare Basics (*English and Spanish*)
 - Making the Most of Your Doctor Visits
 - Preventing Falls
 - Tests You Want to Take
 - Healthy Eating on a Budget
 - Evaluating Your Doctor and Health Plan (*English and Spanish*)
 - Tips for Making Good Healthcare Better
 - Stay Active (*English and Spanish*)
 - Computer Basics
 - Protect Yourself from Identity Theft and Financial Fraud
 - Taking Medications the Right Way

Sales Tools

...or peruse these Sales Tools over coffee

- > Sales Enrollment Presentation
- > Materials from our trainings

Quick Links

And there's a handy list of links to government sites—just click the Quick Links button on the right side of the screen!

SCAN's Pharmacy Overview

Understanding Part D Stages

Stage 1 Yearly Deductible

Most SCAN Plans do not have a Yearly Deductible.

Stage 2 Initial Coverage

This stage begins when members fill their first prescription of the year. Members will pay the applicable copayments or a coinsurance for each prescription. SCAN pays the rest.

SCAN members stay in this stage until the "Total Drug Costs" reach \$5,030 for the year. When this happens, members move into Coverage Gap.

SCAN cost + Member's cost = TOTAL DRUG COST \$5,030

Stage 3 Coverage Gap (*aka Donut Hole*)

The member may continue paying copayments (flat amount) for some drugs and/or 25% of the price for generic and brand-name drugs. This is in addition to what SCAN covers.

Members stay in this stage until their "Out-of-pocket costs" for the year reach \$8,000. When this happens, they will move into Catastrophic Coverage.

OUT-OF-POCKET COSTS \$8,000

Stage 4 Catastrophic Coverage

In this stage, members pay \$0 for the remainder of the year.

SCAN PAYS ALL THE REST

To search for a prescription drug – Select the "Find a Formulary Drug" search tool at

<https://www.SCANHealthPlan.com/helpful-tools/formulary-search>

Want a printed copy of the Formulary mailed to your home? – Just fill out the Formulary request form at

<https://www.scanhealthplan.com/contact-us/benefit-material-request-for-prospects>











ENROLLMENT

SCAN'S 2024 Health Plans by County

SCAN offers its Classic Plans and Chronic Special Needs Plans all year long to Age-Ins, Move-Ins, and those with other types of Special Elections Periods (SEPs). For any enrollment outside of AEP, always check the SEP's requirements.

To locate the available plans in your area, please reach out to your local BAE or go to <https://www.SCANHealthPlan.com/scan-resources/plan-materials/benefit-highlights>

To access SCAN's Supplemental benefits, refer to the Benefit Highlights or go to <https://www.SCANHealthPlan.com/supplemental-benefits>

 medicare advantage					
CA	SoCAL Los Angeles San Bernardino Orange San Diego Riverside Ventura	NorCAL San Mateo Stanislaus Madera* Alameda Santa Clara San Francisco Fresno*			
	NV	Clark Nye Pima			
TX	Bexar Harris				
 medicare advantage <small>SCAN DESERT HEALTH PLAN</small>		 medicare advantage <small>SCAN HEALTH PLAN NEW MEXICO</small>			
AZ	Maricopa Pinal Pima		NM	Bernalillo* Sandoval*	

***NEW in 2024**

Client Eligibility

Is your client eligible? They are if they:

- > Are entitled to Medicare Part A, and enrolled in Part B.
- > Live in SCAN's service area.
- > Are a U.S. citizen or lawfully present in the United States.
- > Understand that they must continue to pay Part B premiums (if not paid for by Medicare or another third party).

Enrollment Periods

For those just turning 65

Three months before, the month of, and three months after their 65th birthday.



For all others

Annual Enrollment Period (AEP)

October 15 - December 7

Special Enrollment Period (SEP)

All year round

Other important dates

Open Enrollment Period (MA-OEP)

January 1 - March 31

Enrollment Lock-in Period

April 1 - December 31

MA-OEP Between January 1 and March 31

Beneficiaries have one allowable switch from their MAPD Plan and can either:

- Return to Original Fee-For-Service Medicare plus a Prescription Drug Plan, or
- Select a new MAPD plan.

After March 31:

- > No further plan switching is permitted unless they qualify for a Special Enrollment Period (SEP).

New to Medicare

For new Medicare beneficiaries who enrolled in an MA/MAPD plan during their ICEP:

During the month of entitlement to Part A and Part B through the last day of the third month of entitlement, they have one allowable switch from their MA/MAPD plan. They can either:

- Return to Original Fee-For-Service Medicare plus a Prescription Drug Plan, or
- Select a new MAPD plan.

Beginning October 15 (and ending December 7):

- > Switch to any plan they wish. Their new plan will go into effect on January 1.

WITH SCAN, YOU CAN EVEN SELL DURING LOCK-IN! In addition to Special Enrollment periods, (which may allow applicants to join, switch or drop an MA plan outside the AEP or MA-OEP), we also have products you can sell during lock-in.

Special Enrollment Periods (SEP)

Beneficiaries may enroll other times during the year if they:

- > Move out of their existing plan's service area
- > Are institutionalized
- > Have limited income and resources, and qualify for Extra Help
- > Are dually eligible for Medicare and Medicaid and qualify for a Low Income Subsidy (LIS)
- > Many other SEP's may be available. For information on additional election periods please go to [Medicare.gov](https://www.Medicare.gov)

Whenever they enroll in a new Medicare Advantage plan, they are automatically disenrolled from their previous plan.



Eligibility for Special Enrollment Periods (SEP)*

CATEGORY	WHO CAN I SELL TO?	WHEN CAN I SELL IT?	INFORMATION NEEDED
Age-In's & Disability	Anyone turning 65	From 3 months before birth month to 3 months after (7 months total)	Restrictions apply if they delay Part B Medicare Card is proof they recently received Medicare A & B entitlement
	MA-OEP for Age-ins	From birth month to 2 months after (3 months total). One switch after MA/MAPD plan is chosen.	
	Disabled Medicare Recipient turning 65	From 3 months before birth month to 3 months after (7 months total)	
	24th month of Disability	From 3 months before to 3 months after their 24th month of disability benefits	
Move-In's	Moved and now outside plan's service area or new plan options are available	From 1 month before to 2 months following the month of move	Member Verbal Attestation
	Returned to U.S.	2 months following return	
	Moved to or from a Long-Term Care facility	From the 1st day in the facility & up to 2 months after discharged	Date of Discharge & Name of Long Term Care Facility
Low Income Subsidy (LIS/Extra Help)	Status change in Dual Eligible (Full/Partial) or Part D Subsidy	Within 60 days from status change effective date	Medicaid # or Award Letter
	Maintained status in Dual Eligible (Full/Partial) or Part D Subsidy	One allowable switch in Quarters 1, 2 & 3 (not during AEP) based on application received date	SSA Award Letter
	State Pharmacy Assistance Program	From 1st day enrolled in program up to 2 months after month of losing coverage	Application or Award Letter
Chronic SNP	Qualifies for SNP due to Diabetic diagnosis or Congestive Heart Failure (CHF)/ Cardiovascular Disease (CVD) diagnosis	Year-round	Permission to send Health Information form and Pre-Enrollment Qualification Assessment Tool
Losing Coverage	Part D Subsidy (LIS) terminated	Within 3 months of any change or notification of change	SSA, Medicaid or SPAP letter
	PACE Disenrollment	Up to 2 months after the effective disenrollment date	Disenrollment letter
	Loss of Creditable Drug Coverage	From the month notified to 60 days after coverage loss	Loss of Coverage letter
	Employer Group Coverage Termination	Up to 2 months after the month that coverage ends	Term Letter from Group - w/proof of Creditable Coverage
	Medicare Ending Contract	Oct 15 - Feb 28 or Specific Dates on Term Letter	Term Letter from MA Plan
	Loss of CSNP Criteria	Up to 3 months after the month that coverage ends	Term Letter from CSNP Plan
	Dual Eligible loss of status	Within 3 months after loss of eligibility	State Notice
Administrative Delay	Entitlement determination is not made timely by SSA and/or received by individual in a timely manner	From date notified and continues for 2 months	SSA Notice of Administrative Delay Letter
FEMA/State/Local-Declared Emergency or Major Disaster	Beneficiary (or decision maker) who resides in, or resided in an area FEMA has declared an emergency or major disaster, and hasn't made an election during that valid election period	Start of the incident and for 2 full calendar months thereafter	Proof of residence

*CMS may grant SEP's to individuals or groups in certain exceptional conditions. Contact us for additional details.

Application Enrollment Process

Before You Enroll the Client

- **COLLECT** a signed SCOPE OF APPOINTMENT (SOA) PRIOR to presenting any SCAN plan. Keep the SOA in your records for 10 years. For more information regarding SOA rules, refer to Page 20.
- **CONDUCT** a thorough needs analysis to choose the right plan for their health care needs.
- **COMPLETE** a compliant Sales Presentation on your client's plan choice using SCAN Benefit Highlights and the SCAN Sales kit.

NOTE: 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.

Important Rules and Requirements

You're ready to submit the enrollment for your client. Before you do, double-check the information we've provided here to make sure your submission goes smoothly.

Additional Documentation Checklist

Please complete and submit these required documents:

Required Forms for All Plans

- ✓ Scope of Appointment
- ✓ Coordination of Care
- ✓ Dental Provider Selection (for plans with embedded Dental coverage)
- ✓ Dental Enrollment (for optional Dental coverage)

Required Forms for SCAN C-SNPs

- ✓ Chronic SNP Pre-Enrollment Qualification Assessment
- ✓ Permission to Send Health Information

Required Documents to Leave with the Beneficiary

Always provide the beneficiary with:

- A Sales kit which contains:
 - a) Summary of Benefits
 - b) Drug Listing
 - c) Multi-language insert
- The Plan Star Rating document

Things to Remember

- ▶ Obtain a Scope of Appointment prior to presenting a plan
- ▶ Any changes or errors must be initialed by the enrollee
- ▶ Just one plan name should be checked
- ▶ If a plan has a premium or the prospect owes a Part D late enrollment penalty – a payment option must be chosen
- ▶ Include the SCAN-contracted Primary Care Physician's name and Medical Group ID number
- ▶ Have the member or Authorized Legal Representative (aka Power of Attorney) sign and date the Enrollment form
- ▶ Make certain your enrollment form is legible
- ▶ If enrolling electronically, complete the Receipt of Enrollment form and leave with your client as proof of enrollment

NEW During the enrollment process, agents must clearly communicate the impact of a client's enrollment decision on their existing coverage



Rules for Scope of Appointment and Consent to Contact

SCAN Certified Agents have access to Scope of Appointment (SOA) and Consent to Contact (C2C) forms on the SCAN Marketing Storefront. SOA is also available electronically on SCANAgentPortal.com under the Enrollment tab.

SCOPE OF APPOINTMENT (SOA) forms are valid 12 months from the date they were signed by the beneficiary. For example, an SOA signed on March 2nd allows you to contact prospects until March 1st of the following year. It's possible that you may need to get more than one SOA form signed prior to completing the client's enrollment application.

NEW You are required to wait 48 hours between the signed Scope of Appointment (SOA) and your meeting with beneficiary.

NEW **CONSENT TO CONTACT (C2C)** forms and **BUSINESS REPLY CARDS (BRCs)**, also known as **Lead Cards**, are valid for 12 months from the date the beneficiary signed it or requested additional information. For example, a C2C or BRC signed on March 2nd allows you to contact prospects until March 1st of the following year.

NOTE: Brokers and Agencies must keep SOA/C2C records for 10 yrs. SCAN may request proof of SOA/C2C at any time for audit purposes. Do not send to SCAN unless requested.

Ways to Enroll Your Client

Paper Enrollment

When you're Face-to-Face with your client using a SCAN Sales Kit with paper enrollment forms

Complete the paper enrollment forms and have your client sign and date them to confirm their enrollment. Then give them the Receipt of Application form (found in the Sales kit). **Be sure to capture your client's email address and have them opt in for text messages. This is the best way to keep them informed.**

Ensure that:

- The Medicare Beneficiary Identifier (MBI) is in the correct format and doesn't include the letters "S, L, O, I, B, or Z"
- Any address that includes Apt, Unit, Spc, etc. should be included on "Address Line 2" to ensure members receive their ID cards within a timely manner
- Any changes or errors were initialed by the enrollee
- Just one plan name is checked
- A payment option is chosen if a plan has a premium, or the prospect owes a Part D late enrollment penalty

Ensure that: (continued):

- The Primary Care Physician’s name and Medical Group ID number is included and exactly matches what appears in [SCANHealthPlan.com](https://scanhealthplan.com)
 - If a Preferred Provider isn’t chosen, select the Auto Assign PCP checkbox
 - For those plans with embedded dental, complete the dental provider portion
- The member (or Authorized Representative) signs and dates the Enrollment form, and that you submit the paper enrollment within 24 hours following signature
- Your enrollment form is legible
- **You get paid – include your name and National Producer Number (NPN)**

Health Risk Assessment (HRA)

Follow this process for submitting the HRA with a paper enrollment.

1. Go to <https://agentportal.scanhealthplan.com/>
2. Click the “Enrollment” tile
3. Click the “plus” icon next to “Health Risk Assessment (HRA) Incentive Program”
4. Select either English or Spanish
5. Complete the HRA and click Submit
6. That’s it! The HRA will automatically be sent to BrokerHRA@scanhealthplan.com.

Now You’re Ready to Submit

SCAN offers a variety of methods for submitting your applications. Please check with your agency for specific guidelines.

Submit all paper applications to SCAN within 24 hours of the beneficiary’s signature date. On Page 18, in the **Additional Documentation Checklist** section, you’ll find the checklist of forms that you’ll need to include with your enrollment submission. Choose one of these ways to submit your paper application:

Overnight to:

SCAN Headquarters Enrollment, Reconciliation & Premium Billing Department
3800 Kilroy Airport Way, Suite 100 , Long Beach, CA 90806

FAX to (any of these numbers)

(562) 989-5243 (562) 308-3626
(866) 951-0815 (866) 951-0712

More Delivery Options

See the **Converting Paper Enrollment to Electronic Enrollment** section on Page 24.

Electronic Enrollment

When you're Face-to-Face with your client using SCANCubed, SCAN's Electronic Enrollment tool.

1. Login to SCANAgentPortal.com and select the Enrollment tab to access SCANCubed.

2. Once SCANCubed has loaded, select **Quote** in the upper left corner.

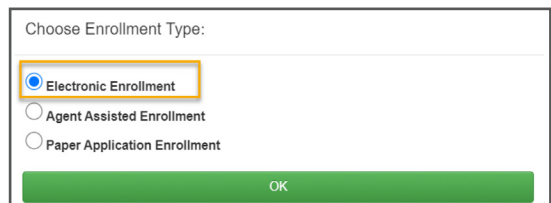
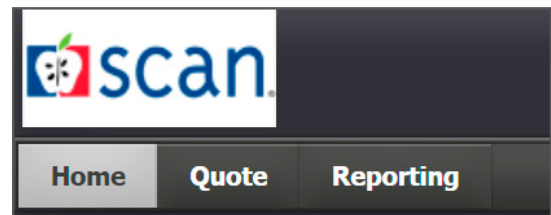
NOTE: Pop-up blocker must be turned off.

3. Then select **Electronic Enrollment** and click **OK**.

4. Enter your **Primary Applicant information** and select **Continue**.

5. Select the SCAN plan your client has chosen and **Add to Cart**. Select **Shopping Cart** to review and continue.

6. While reviewing your shopping cart, enter your client's Medicare Beneficiary Identifier (MBI) and Part A & B effective dates. Once entered select **Enroll Now** to begin the enrollment application. (Part A & B effective date is not a required field.)



Electronic Enrollment

Instructions:
To generate a quote, please complete the information below for the accurate costing coverage.

Primary Applicant Info

First Name:

Last Name:

Email:

Phone:

Zip Code:

County:

Covered Members

Include	Member Type	First Name	Last Name	Gender	Birth Date
<input type="checkbox"/>	Subscriber	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

[Add Spouse](#) [Add Dependent](#)

Product Type:
 Medicare

Effective Date:

[Continue](#)



Applying Member:

Medicare Product Information
Medicare quoting is available to those over the age of 65 or are legally disabled and can only include one individual per a quote. To quote a different household member, select the individual from the dropdown menu.

SCAN Classic (HMO) (H5425-007-0)

Plan Rating	4.5
Deductible	No Ded
Maximum Annual Copay	\$499
Long Term Care - Rct	\$7
Monthly Premium	\$0
Office Visits Primary	\$0
Office Visits Specialist	\$0

\$0.00 est

[View Similar Plans](#)

[Plan Details](#)

[Compare](#)

[Add to Cart](#)

7. Be sure to enter your client's email address and have them opt in to receive text messages. This is the best way to keep them informed.

NOTE: Make certain this information is accurate as it will auto-populate your enrollment application.

8. Remember to fill out the Health Risk Assessment (HRA) and submit through Electronic Enrollment or the Agent Portal.

9. Immediately submit the Electronic Enrollment to SCAN while still with the client.

10. Then provide your client with the Receipt of Application form (found in the Sales kit) after entering the Confirmation Number generated by SCANCubed.

Before You Leave Your Client

Submit the Electronic Enrollment to SCAN immediately, while you are with the client. Give them the:

- Receipt of Application (found in the Sales Kit) with the Confirmation Number generated by SCANCubed
- Sales Kit which contains the Summary of Benefits, Formulary, Multi-language insert and Plan Star Rating document

Converting Paper Enrollment to Electronic Enrollment

After a day of completing Face-to-Face applications with your clients, you may choose to use SCANCubed for faster processing.

Complete the paper enrollment forms and have your client sign and date to confirm their enrollment.

IMPORTANT: You must enter the paper enrollment into SCANCubed within 24 hours.
(Follow your agency protocol and keep your paper application for 10 years.)

1. Login to SCANAgentPortal.com and select the Enrollment tab to access SCANCubed.
2. Select **Quote**. Choose **Electronic Enrollment**. Then click **OK**.
3. Enter the entire contents of the paper application into our SCANCubed Electronic Enrollment system within 24 hours of your client's signature date on the paper enrollment form.
4. As an authorized representative, sales agent should check the first option which states you are "helping to complete" the enrollment form. The second option is for Power of Attorney use only.
5. You are asked at the end of the application, "How was this application completed?" Select **PAPER ENROLLMENT**.

Choose Enrollment Type:

Electronic Enrollment

Agent Assisted Enrollment

Paper Application Enrollment

OK

Authorized Representative Information

If you have been authorized to fill out this form on behalf of another individual, under the laws of the State where that individual resides, you must provide the following information. Upon request, you must be able to present SCAN Health Plan and/or Medicare with documentation of your authority to represent the individual listed on this application.

Please select the statement that best describes your relationship to the person with Medicare listed on this enrollment form:

* Required

I am the person listed on this enrollment form or I am simply helping to complete this enrollment form.

I am the person authorized to act on behalf of the individual listed on this enrollment form under the laws of the State where the individual resides.

How was this application completed?

* Required

Telephonic Enrollment (TeleSales agent with CMS approved script only)

Paper Enrollment (includes Telephonic Confirmation of Intent to Enroll)

Electronic Enrollment

Agent-Assisted Electronic Enrollment

When you're not able to meet with your client Face-to-Face, BUT they do have access to email.

The SCANCubed Agent-Assisted Electronic Enrollment feature allows you to complete a telephone application and then send your client a link to review and sign it. Once complete, the enrollment will automatically be submitted to SCAN.

1. Login to SCANAgentPortal.com and select the Enrollment tab to access SCANCubed.
2. Select **Quote**. Choose **Agent-Assisted Enrollment**. Then click **OK**.

Choose Enrollment Type:

Electronic Enrollment

Agent Assisted Enrollment

Paper Application Enrollment

OK

3. After selecting **Enroll Now**, enter your **CLIENT'S email address** (twice) and click **Register**.

NOTE: To use this method, your client *must have an email address*. You should not use your own email address.

4. Complete the application with your client over the phone, then click **Submit**.

5. Once you submit the application, you will receive an online confirmation page. Keep the confirmation number for your records. You'll notice that the application status says, "Pending Signature."

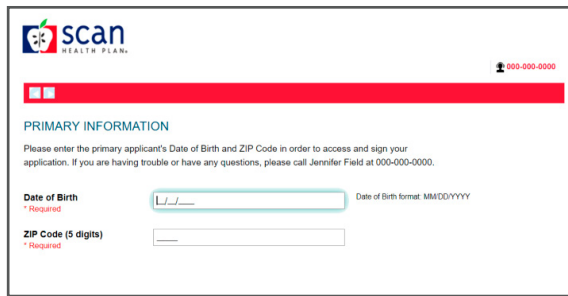
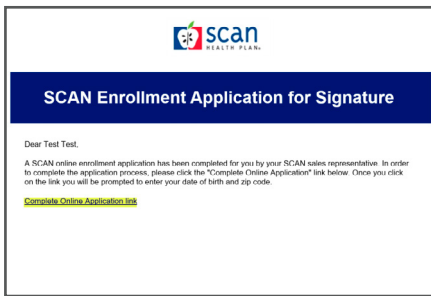
Created On	Effective Date	Product Type	Insurance Co.	Primary Applicant	Family Type
6/20/2019	7/1/2019	Medicare Advantage	SCAN Health Plan	Test Test	Individual

6. Your client will receive an email with the link to sign the application.

7. Instructions for your client

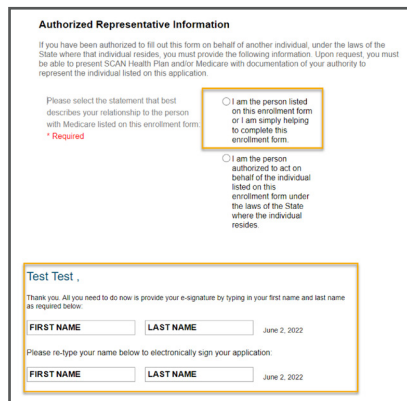
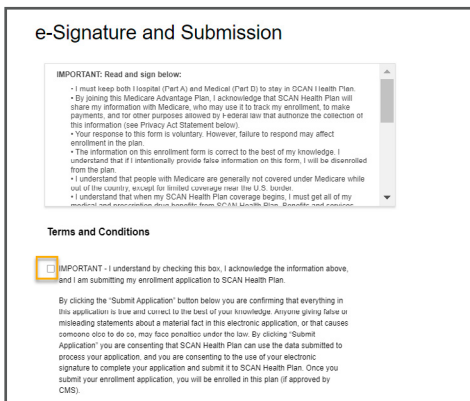
Accessing the application

- a) Open the email from **donotreply@enroll.SCANHealthPlan.com**
- b) Click on the link that says **Complete Online Application Link**
(This link is active for ONLY 48 hours.)
- c) Enter Date of Birth and Zip Code for security purposes
- d) This information must match the application you submitted for your client to continue
- e) Click **Submit**



Completing the e-Signature page

- a) Agree to the terms and conditions
- b) Select **“I am the person listed on this enrollment form”**
- c) Type in name twice, EXACTLY as it appears in the above section
- d) Click **Submit Application**



You and your client will receive a confirmation email with the enrollment confirmation number once the process is complete!

Telephonic Confirmation of Intent to Enroll

When you're not able to meet with your client face-to-face, and they don't have access to email, we still have an option for you!

What is Telephonic Confirmation of Intent to Enroll? It's a 3-way phone interview that agents and applicants must complete together so that SCAN can process the enrollment application while making sure the submitting agent gets credit for the application.

Call SCAN's Telephonic Confirmation Representatives at (855) 662-7226 Monday–Friday from 7:00 am – 6:00 pm PST . All calls are recorded.

Overview of Process

- The agent conducts a compliant sales presentation and completes a paper enrollment over the phone
- When the prospect consents to finalizing enrollment, the agent initiates a 3-way call with SCAN and the agent stays on the line
- The Telephonic Confirmation representative validates the prospect's intent to enroll by asking both agent and prospect a series of questions.
- The representative then provides a confirmation code to the agent. Enter this code on the Enrollee Signature line of the Enrollment form.
- The agent enters the code on the enrollee signature line of the enrollment form in lieu of a "wet" signature
- Agents must retain the completed application themselves for 10 years and be able to provide the paper application if CMS requests it at a later date.

Resolving Enrollment Issues

PLEASE UNDERSTAND THAT IT CAN TAKE 7 DAYS TO PROCESS AN APPLICATION AFTER SCAN RECEIVES IT.

Incomplete Enrollments

If you are notified that you submitted an incomplete enrollment, correct and resubmit that enrollment within 21 days of the application date. If you miss that deadline, you will need to submit a new application.

Incomplete Enrollments Based Upon a Special Election Period (SEP)

You need to resolve this enrollment issue within seven days or a new application must be submitted.

What You Need to Know about C-SNP's

Pre-Enrollment

- > When enrolling a new member into the SCAN Balance or Heart First plans, complete both the Pre-Qualification Assessment Tool and the Permission to Send Health Information form. Submit with enrollment forms as usual.
- > Provide the extra Permission to Send Health Information form to the enrollee. Encourage scheduling an appointment with their new PCP during the first month of enrollment so that we can receive the PCP's diagnosis quickly.

MONTH 1

DAYS 1-31

SCAN verifies diagnosis by contacting the member's previous or new PCP.

If we discover this month that the required diagnosis doesn't exist, then your Broker Account Executive (BAE) will advise (via phone or a report) that you need to find another SCAN product that is appropriate.

NOTE: *Members are still active, so no additional Permission to Contact is required.*

MONTH 2

DAYS 1-30

If SCAN is unable to verify the diagnosis, we'll send out a Disenrollment Letter (Day 2-7) but we'll still continue to attempt verification during the rest of the month. If we can subsequently confirm the diagnosis, then we may stop the disenrollment process and send a notification letter to the member stating that they continue to be eligible for the plan.

DAYS 15-30

Your BAE will let you know if you need to contact your member to urge them to get an appointment with their new PCP to verify the diagnosis. (Provide another Permission to Send Health Information form, as needed.) You should not call the physician or SCAN.

NOTE: *Member is still ACTIVE, so no additional Permission to Contact is required.*

MONTH 3

SCAN sends out the disenrollment letter within the first 10 days of this month if a member remains on the "unable to verify" report. This letter indicates the member is now disenrolled and explains the Special Election Period.

- > You cannot contact your disenrolled members.
- > If you receive a call from any of these disenrolled members, obtain a new Permission to Contact. Then you can work with client to determine which alternative SCAN plan works best for them.

NOTE: *SEP is open through the two calendar months following the disenrollment date.*

If your client had a loss of C-SNP status, resolve within 30 days of enrollment or client will be disenrolled. If they no longer qualify for the C-SNP and want to enroll in another plan, they can call Member Services to complete a telephonic agreement rather than a long enrollment form.

What's Next for Your New Member

After your member's enrollment form is approved, here's what they'll receive:

- > Verification letter
- > Approval letter
- > SCAN member ID card
- > Quick Start Guide
- > Transportation card*
- > Welcome call
- > SCAN Club newsletter
- > An emailed invitation to "Go Green" and receive SCAN materials electronically



Under certain circumstances, they will also get a:

- > Letter informing them how to get help with Medicare premiums (if they qualify)
- > Health questionnaire
- > Dental letter indicating assigned dentist and OTC catalog*
- > Call to arrange for health services (if you filled out the Coordination of Care form when you enrolled the client)

* Check your specific plan benefits.

Tools to Help You Sell

Materials You Can Order Online

SCAN has all the sales materials you'll need to successfully sell our plans. And they are available for you to order online or download digitally.

To get the following materials, go to the Marketing Storefront at SCANAgentPortal.com.

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

Sales Tool Kit includes:

- ▶ Lead Card
- ▶ SCAN Balance Pre-Enroll Qualification Assessment
- ▶ Heart First Pre-Enroll Qualification Assessment
- ▶ Coordination of Care Form
- ▶ C-SNP Permission to Send Health Information form
- ▶ Scope of Appointment Form
- ▶ Plan Rating Sheets

Access to SCAN's Sales and Marketing Tools

There are 3 ways to get SCAN materials

1. Contact your Agency. They should have a supply on site.
2. If you don't have access to a local Agency, order from the Marketing Storefront at: SCANAgentPortal.com
3. Contact your local BAE (phone numbers on Page 48) to make pick-up arrangements in advance.

Marketing Storefront Instructions

1. Select the State, County, and the materials you wish to order.
2. Select **"Place Order,"** review your materials and quantities, and confirm the shipping address. Click on **"Click here to Complete Order."**
3. An email confirmation will be sent after your order is placed, and a UPS tracking number will be sent when the materials ship. Allow two business days for processing and two to three business days for delivery.
4. Once your order is placed, you'll have access to your Digital Garage where you can download copies of the SCAN materials you ordered. You'll also have access to SCAN website searchable tools.

SCAN Sales Material Quantity Limits for Individual Agents

(per 30 day period*)

Plan Benefit Highlights	200
Sales Kit Enrollment Books	50
Provider Directories	30
Plan Brochures	300
Postcards	100
Event & Non-Event Flyers	1000

*Quantity limits are subject to change according to State certification.



Submitting Marketing Materials for Approval

The SCAN name, logo and MA promotional materials may only be used with express written consent.

If you would like to use the SCAN logo or any materials that promote SCAN products in print or on your website, you must submit a request to SCAN for our review prior to your use.

1. If the materials contain no benefit information or sales events, they will typically be reviewed and approved within two business days.
2. If your materials contain specific benefits and/or a list of sales events, they must be filed with CMS which typically requires five to seven days.

NOTE: You may not manipulate or alter any PDF's or artwork provided by SCAN. Also, you may not allow outside designers or distributors to edit SCAN materials.

Send your request to use the SCAN logo and materials to: SCANMarketingSubmissions@SCANHealthPlan.com. We will reply within two business days with our approval, a request for additional information or the time frame for CMS approval (which is dependent on your material's content).

Do not use or distribute these materials until you have received an approval email from SCAN. Websites must not state that you represent Medicare or any branch of the federal government.

To order customized flyers from the Marketing Storefront

1. For Non-event flyers, select the State and County. Then select the preferred flyer.
2. For Event flyers, you must register your events with SCAN first. Once registered, events will be listed on the left side of the flyer preview screen. You may select between two to eight events per flyer depending on the flyer type.
3. Use the "Update Preview" button on the site to review and correct your customized flyer prior to ordering. Ensure that your license number is populated on the flyer preview.
4. Add a quantity to your cart, continue ordering or select "Place Order." Finally review materials and quantities, confirm shipping address, and click "Click here to Complete Order."
5. An email confirmation will be sent to you after your order is placed; a UPS tracking number will be sent to you once shipment is mailed.

SCAN Health Plan®: A Medicare Advantage plan that gives you more.

SCAN is a Medicare Advantage plan for people with Medicare. We give you the comprehensive coverage you need, plus extra benefits you might not expect—but we deliver all this with the exceptional service you deserve. Join us at a sales event in your area to find out what makes SCAN Health Plan a better Medicare experience.

2020 SCAN Classic (HMO) Benefits for Los Angeles County include:

- \$0 Monthly plan premium
- \$0 Primary care physician/Specialist office visits
- \$0 Copay for Tier 1 Preferred Generic drugs!
- \$0 Routine eye exam (1 per year) and allowances for glasses, frames and contacts
- \$0 Routine hearing exams and hearing aid evaluation
- \$899 Maximum Out of Pocket (MOOP)
- \$0 Transportation services (24 one-way trips/75-mile limit each way)
- \$0 SilverSneakers® health club membership
- \$0 24/7 "Virtual doctor" telehealth care
- Over-the-Counter coverage for items such as pain relievers, vitamins, first aid supplies, and many more!
- Supplemental Dental coverage included
- Acupuncture and Routine Chiropractic services
- SCAN Travel Assurance

Plus many more!

Join us at an event near you:

**Wednesday
November 20
9:00 am
PIH HOSPITAL
12401 Washington Boulevard
ROOM A
Whittier, CA**

Mary Malone
Phone # (310) 555-1234
Calling this number will connect you to a licensed insurance agent/broker.
License #

*\$0 copay for Tier 1 Preferred Generic drugs at Preferred pharmacies and with mail-order only. *Maximum \$30 per quarter, no rollover. Must be fulfilled online or through catalogue. No more than two shipments per quarter. *Benefits listed are for SCAN Classic (HMO) in Los Angeles County only. Other SCAN plan options are available in this county and plan benefits may differ from those listed here. SCAN Health Plan is an HMO Plan with a Medicare contract. Enrollment in SCAN Health Plan depends on contract renewal. For accommodation of persons with special needs at meetings, call 1-800-547-0899 (TTY Users: 711). This information is not a complete description of benefits. Call 1-800-547-0899 (TTY Users: 711) for more information. VISN/SCAN_11/2020_2019_M 08/20/19 3/93 08/19

Visit us online at www.scanhealthplan.com.

Marketing Storefront FAQ's

Why can't I access the Storefront?

There may be several reasons. Perhaps you are not yet entered into the system as a new Agent. Typically, it takes two to four days to gain access to the Storefront once you've become active to sell SCAN. Or you may be trying to access the site with an email address that is different from the one you registered with SCAN. Contact the SCAN Sales Support Team for help at (888) 445-2038.

How do I add sales events to a flyer?

Your sales events must first be submitted by your agency contact to SCAN Seminar Submissions at **SeminarSubmission@SCANHealthPlan.com**. Events must be submitted at least ten business days in advance of the event. Once approved, the events will be uploaded to the Storefront for you to include on any event flyer layout.

PLEASE NOTE: Under no circumstances are you allowed to add events on blank flyer shells that have not been previously submitted to SCAN. You also may not manipulate or add any information to the flyers after they have been customized in the Storefront and delivered to you. Any changes that were not approved by CMS may result in your termination.

My information (name, mailing address, or phone) is incorrect and needs to be changed. How can I update or change my personal information?

Here are two ways:

1. You can update your information on the Storefront by clicking on the "Edit Profile" on the upper right-hand corner of the home page.
2. Contact the SCAN Sales Support Team and provide them with the correct information. It can be corrected in the system typically the same day or sooner.

Can I add my photo or more than one phone number to materials/flyers?

Yes, you may add your photo to your materials--just go to your Storefront account and edit your profile to include your photo. At this time, only one phone number is allowed per Storefront account.

What if I'm trying to order an item on the Storefront and it's out of stock or not available?

Please contact SCAN's Sales Support Team and let them know about the item you wish to order. They will contact SCAN Marketing and provide you with an estimate of when the item will be back in stock. We appreciate your patience.

Questions?

Contact the SCAN Sales Support Team for help at (888) 445-2038.

You may also contact your SCAN Broker Account Executive for questions or assistance.

Guidelines for Planning and Working an Event

ALL sales events must be submitted to SCAN. Our process requires that you work through your contracted broker agency who will submit events on your behalf.

	EDUCATIONAL EVENTS	FORMAL & INFORMAL MARKETING & SALES (M&S) EVENTS
Definition	Any event that is advertised as Educational and does NOT include a sales presentation or other M&S activities.	ANY event that includes a sales presentation or M&S activities.
What are M&S Activities?	Giving any type of sales presentation. Handing out or mentioning plan-specific benefits info and advertising materials. Discussing premiums or copay amounts. Handing out or collecting applications.	
Report to SCAN?	Not required. CMS may secret shop these events.	YES. CMS secret shops these events. All events must be submitted on the approved CMS template to SCAN (SeminarSubmission@SCANHealthPlan.com) for broker agents.
Important to Note	Advertisements must display this disclaimer: "This event is only for educational purposes and no plan-specific benefits or details will be shared."	All products to be discussed must be announced at the start of any formal presentation.
Meals & Gifts?	Both are permitted: Up to a total of \$15 per attendee (retail value). Promo items may have SCAN's name, website & toll-free number. All advertising and explanatory material promoting free gifts must include "There is no obligation to enroll" verbiage.	Light snacks only and no-obligation gifts permitted up to a total of \$15 per attendee (retail value). Promo items may have SCAN's name, website & toll-free number. All advertising and explanatory material promoting free gifts must include "There is no obligation to enroll" verbiage.
Hand-Outs?	Any defined by CMS as Educational, but no plan-specific info or bias toward one plan type over another.	All plan brochures and pre-enrollment advertising materials including enrollment forms, Business Reply Cards, and lead cards. Scope of Appointment forms are required if subsequent meeting is requested. Additionally, a CMS-approved sales presentation is available for use at scan.cmpsystem.com
Business Cards?	Permitted ONLY on request. May not be attached to educational materials.	Permitted.

Your Sales Event Submission Process

Make sure you have exact information on the location of your event! SCAN Compliance Assessors must be able to locate you.

Work directly with your agency’s designated coordinator who will process your Event Submission request. They will complete the “SCAN Broker Sales Event Template” and submit your request to SeminarSubmission@SCANHealthPlan.com 10 business days in advance of the event or the event’s advertisement. NOTE: We are closed weekends and holidays.

Wait for SCAN’s approval before marketing or conducting your sales event. Sales Operations will respond within two business days of receipt of your request. If accepted, you will receive a confirmation email. If rejected, your agency will be asked to make corrections and resubmit.

Now you are ready to advertise and/or conduct your sales event!

	EDUCATIONAL EVENTS	FORMAL & INFORMAL MARKETING & SALES (M&S) EVENTS
What CAN I Do?	<ul style="list-style-type: none"> Host in a public venue. Include communication activities and distribute communication materials. Answer beneficiary-initiated questions. Hand out business cards and contact information to beneficiaries. Display a banner with SCAN's name and logo. 	<ul style="list-style-type: none"> Accept applications, enroll beneficiaries, set up one-on-one sales appointments (requires an SOA), and request permission to call the attendee. Compare SCAN plans to other Plan/Part D sponsors (using statistical data). Use sign-in sheets that must be clearly labeled as “optional.” If the event is informal, you must wait to be approached before discussing our products.
What CAN'T I Do?	<ul style="list-style-type: none"> Include marketing or sales activities. Distribute marketing materials or enrollment forms. Discuss or distribute plan-specific benefits or materials. Set up a future marketing appointment. NEW Distribute or collect an SOA NEW Directly follow educational events with sales events unless they take place 12 hours after, or, on the same day but at a different location. 	<ul style="list-style-type: none"> Conduct “cherry-picking” activities such as health screenings. Require attendees to provide contact information before or during the event. Use contact information collected for a raffle/drawing for ANY other purpose. Serve meals or provide gifts that may be turned into cash. Solicit enrollment prior to the start of AEP (October 15 - December 7).

Sales Event Modifications and Cancellations

In the event that you need to modify or cancel a scheduled sales event, notify your agency coordinator immediately.

To Cancel or Modify Your Submission

Communicate all cancellations and modifications to your agency coordinator no less than 72 hours prior to the scheduled date. SCAN will send an email confirmation of the cancellation/modification to your agency coordinator.

A. If cancelled within 48 hours of scheduled date:

- ▶ Post a sign stating that the event was cancelled and include notice of alternate event opportunities
- ▶ You must appear at the site at the scheduled time and stay 15 additional minutes, unless event was cancelled due to weather
- ▶ Advise attendees of the cancellation and possible alternate events
- ▶ Event cancellations must also be submitted to SCAN

B. If cancelled 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

C. If cancelled due to non-attendance, follow the method stated in A.

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

- ▶ Ensure you have permission to call (PTC)

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

COMPLIANCE

How to Stay Compliant

Follow SCAN's Code of Conduct

You are expected to:

- ▶ Represent SCAN honestly and accurately
- ▶ Act with integrity
- ▶ Treat others with respect
- ▶ Commit to report issues that could prevent or jeopardize SCAN's ability to be compliant or to otherwise do the right thing. SCAN maintains a strict policy of non-intimidation and non-retaliation for good faith actions.

Safeguard Plan and Member Information

It is our responsibility to maintain the security of both company and member information. SCAN's confidential and proprietary information, like our plans and strategies, is nonpublic. Our members' Protected Health Information (PHI) and Personal Information (PI) are highly sensitive and we have an obligation to protect it. Examples of this information: Member name, Social Security number, SCAN ID number, Telephone/Fax number, Addresses (including email) and Birth Date.

Report Fraud, Waste & Abuse (FWA)

Use the EthicsPoint website to anonymously report FWA or issues related to non-compliant, unethical or illegal activities. EthicsPoint Hotline: (877) 863-3362 or www.ethicspoint.com

When Reporting Online:

- ▶ Enter "SCAN" in the organization name field and click "Submit"
- ▶ Follow instructions to submit a report or to check the status of a previously filed issue

NEW Medicare Name and Logo

You are prohibited from using the Medicare name, CMS logo, products or information issued by the Federal Government (including the Medicare card) in a misleading manner. CMS acknowledges that reasons may exist for using the Medicare card image, but it must be authorized by them.

NEW CMS Telephonic Requirements

All agents must now record telephonic and web-based marketing or enrollment calls made to beneficiaries. Also, you need to read the following Third Party Marketing Organizations (TPMOs) Disclaimer in the first minute of the conversation. Keep in mind that all recordings must be made available upon request. (Service calls are not required.)

"We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area which are plans offered by [number of MA organizations]. Please contact Medicare.gov, 1-800-MEDICARE, or your local State Health Insurance Program to get information on all of your options."

Be Prepared for Performance Audits by SCAN Sales Integrity

As a SCAN sales agent, you are expected to conduct your 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 you know what constitutes acceptable sales activities and performance in accordance with governing federal and state laws, and SCAN requirements.

SCAN's Sales Integrity Standards for all Agents and Brokers Include the Following Minimum Performance Levels:

- ▶ Achieving less than a 10% rate of rapid disenrollments, denials, or withdrawals for new enrollees with the plan
- ▶ No late enrollment application submissions (submit applications to SCAN within 24 hours of beneficiary signature date)
- ▶ No deficiencies identified in Sales Integrity field assessments
- ▶ No deficiencies identified in CMS Secret Shopper assessments of sales events
- ▶ No outbound enrollment calls without documented permission to contact (Telesales and telephonic brokers)
- ▶ Achieve 90% compliance with call script adherence (Telesales and telephonic brokers)
- ▶ No substantiated sales allegations
- ▶ No deficiencies identified in random broker enrollment audit
- ▶ No deficiencies identified in website reviews
- ▶ No deficiencies identified in broker advertisement reviews
- ▶ No deficiencies identified in Permission to Contact (POC) & Scope of Appointment (SOA) audits
- ▶ No deficiencies identified in contracting, licensing, appointment, and certification status assessments
- ▶ Attend all sales events filed with SCAN ("approved sales event") unless there is a valid exception
- ▶ All telephonic recordings are made available upon request

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 may result in termination from being able to sell SCAN to beneficiaries through any sales channel.

Failure to consistently meet SCAN's 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 written warning, suspension, and termination.

Here are the components of a compliant Sales Presentation. If you do them all, you will be rewarded with a SCAN Sales Assessor score of 100%.

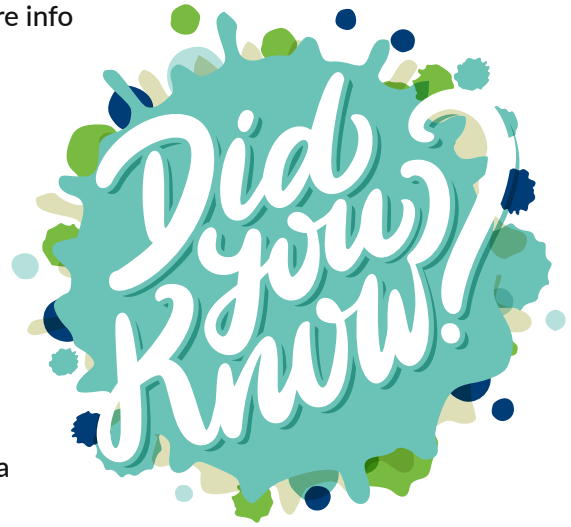
Things You Should ALWAYS Do	✓	Show up on time and be where you said you would be
	✓	Clearly identify any sales event venue with signage
	✓	If a sign-in sheet is used at a sales event, it must clearly state "Optional"
	✓	State that you don't represent Medicare or any branch of the Federal Government
	✓	Have Scope of Appointment (SOA) signed prior to beginning presentation (you must keep these forms for 10 years and provide a copy if requested). See that the beneficiary initials the box. (NO check marks)
	✓	Discuss ONLY the products identified on the SOA
	✓	Hand out only CMS-approved materials (carries a CMS code)
	✓	Schedule appointments in Long Term Care facilities (upon beneficiaries request only)
	✓	Conduct sales in common areas like cafeterias, conference or recreational rooms, and pharmacies (but away from counter and waiting areas)
Things You Should NEVER Do	✗	Not show up to your scheduled sales event that was filed with SCAN
	✗	Approach beneficiaries in common areas
	✗	Conduct door-to-door solicitation, including leaving information such as a leaflet or flyer at a residence or car
	✗	Conduct unsolicited telephonic or electronic solicitation, including leaving electronic voicemail messages or text messaging
	✗	Discuss any product NOT identified on the SOA
	✗	Serve meals – snacks are OK
	✗	Give gifts over \$15 retail value
	✗	Require attendees to provide contact information
	✗	Use personal contact information obtained to notify individuals of raffle or drawing winnings for any other purpose
	✗	Have a sign-in sheet that does not state "Optional" and/or insist that sales event attendees sign your sign-in sheet
	✗	Insist that sales event attendees sign your sign-in sheet
	✗	Make any absolute statements ("We are the best!")
	✗	Use high-pressure tactics
	✗	Make inaccurate statements
	✗	Make disparaging remarks about the Federal Government or another MA organization
	✗	Market or discuss the coming year's plans prior to October 1 or enroll a prospect before October 15th*
	✗	Conduct any sales activities whatsoever in hospital patient rooms, waiting rooms, dialysis treatment areas, or at pharmacy counters
	NEW	✗
NEW	✗	Tell potential enrollees how much they could save by listing costs that Medicare beneficiaries haven't actually had to pay, or by comparing their costs to those of people who don't have insurance or haven't paid their medical bills.

*Compensation will not be paid and disciplinary action may occur for January 1st effectives, if SCAN receives the enrollment prior to October 15th with your Rep Code.

Find all the new 2024 CMS Final Rule requirements at: <https://public-inspection.federalregister.gov/2023-07115.pdf>

Things You Should Always Explain

- ▶ The Plan Star Rating and refer to www.medicare.gov for more info
- ▶ Where to find the Multi-Language insert
- ▶ Eligibility requirements
- ▶ Enrollment, disenrollment and lock-in periods
- ▶ Requirement to continue to pay Part B
- ▶ The Late Enrollment Penalty (LEP)
- ▶ Plan premiums, co-insurance & co-pays
- ▶ Possible higher costs or non-payment if a non-network provider is used
- ▶ SNP's, eligibility, and the loss of coverage (disenrollment) criteria
- ▶ Where to find covered prescription drugs (formulary)
- ▶ The cost of covered prescription drugs
- ▶ That members must use network pharmacies
- ▶ The "coverage gap"
- ▶ Prior authorization/step therapy/exception/transition process and quantity limits
- ▶ How drug coverage works with SNP's
- ▶ The Referral Process



Things Health Care Providers May – and May Not – Do

Health Care Providers must remain neutral in MA enrollment decisions but may engage in discussion if asked for advice.

PROVIDERS ARE PERMITTED TO

- 😊 Provide plan names and marketing materials, as long as they do so for ALL their contracted plans
- 😊 Display posters and flyers in waiting rooms
- 😊 Provide information on LIS
- 😊 Offer information sources such as Plan marketing reps, Medicaid & Social Security office info, CMS website and Medicare 800 number
- 😊 Include materials in admissions packets (for Long-Term Care facilities) that advise of their plan contractual relationships

PROVIDERS ARE NOT PERMITTED TO

- 😞 Offer Scope of Appointments or accept enrollment forms
- 😞 Distribute plan materials or applications
- 😞 Mail marketing materials on behalf of plan
- 😞 Make phone calls or offer anything of value to persuade patients to enroll in a specific plan
- 😞 Accept compensation directly or indirectly from plan for enrollments
- 😞 Conduct health screenings as a marketing activity
- 😞 Provide patient information (i.e., patient lists)

COMMISSIONS

Sales Agent Compensation

Compensation Policies and Procedures

To be eligible for payment, you must maintain a current state insurance license and complete your annual training certification. Please refer to the section “**COMMISSION ELIGIBILITY**” in the SCAN Broker Commission Guide for further details.

SCAN pays commissions:

- ▶ Only if an enrollment is completed by a broker who was already certified at the time of the enrollment. Additionally, the License and Contract Signature page for each individual state is required
- ▶ At the CMS maximum allowable rate based on the Medicare Advantage Prescription Drug (MARx) cycle year data.
- ▶ Twice a month so you get paid sooner!
 - When SCAN receives your CMS-approved NEW Enrollments
 - By the 4th of the month, we'll issue payment on the 17th
 - By the 19th of the month, we'll issue payment on the 2nd of the following month
 - Renewals for Prior Year Enrollments are always issued by the 2nd of the following month
- ▶ On Lifetime Renewals if you maintain a current state insurance license and complete your annual training certification. Your eligibility for receiving renewals is dictated by the product and rules of the plan.
- ▶ On a monthly basis for renewals (not upfront for the year). Renewal memberships start in January of the following year.
- ▶ In a lump sum at the CMS maximum allowable rate for members who are new to Medicare.
- ▶ At the CMS maximum allowable pro-rated amount for members who move from an existing MAPD or PDP plan.

NOTE: Direct Deposit can be set up once you receive your first paper check.

If an adjustment to compensation is necessary due to changes to MARx data, over/under payments are corrected when the member data is received from CMS.

If an agency fails to recertify annually, commission payments will stop to both the agency and their up-line.

Termed Agents and Agencies must recertify by 12/16/2023 to continue to receive renewals.

National Producer Number (NPN) Questions?

Contact us at:

SalesCompensation@SCANHealthPlan.com

or call (562) 637-1220

Change in Payee

When requesting changes to the payee name or Tax ID, you must complete a new electronic W-9. Send your "Payable to" change request to SCANBrokerContracting@SCANHealthPlan.com and an electronic W9 will be sent to you via email.

This will ensure the payments are issued accurately. The change will take effect on the first of the following month, provided that the request was submitted prior to the 15th 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.

Updating your Contact Information

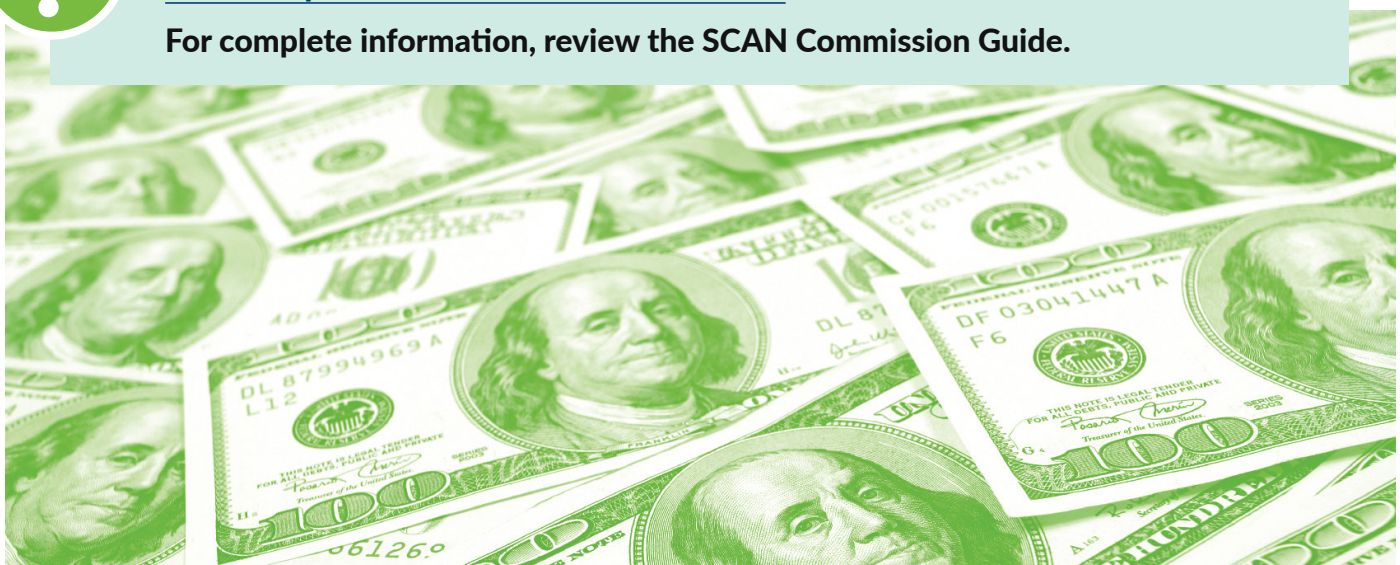
- ✓ Name
- ✓ Address
- ✓ Phone Number
- ✓ Email Address

To update your contact profile, send an email with the revised information to SCANBrokerContracting@SCANHealthPlan.com



Questions about commissions? For any issues, email us at SalesCompensation@SCANHealthPlan.com

For complete information, review the SCAN Commission Guide.



SCAN Agent Successor Program

Good news for you as you plan for the future! SCAN has an Agent Successor program that provides you with the ability to transfer your book of business to another SCAN contracted agent. ***Your intent to transfer your business upon your passing must be prearranged as part of your financial plan. Heirs may not institute the process.*** (Agents on assignment of commissions are not eligible for either the succession plan or selling their book of business.)

What is an Agent Successor?

An agent successor is a qualified agent (one who receives commission payments from SCAN) who will service your transferred book of business in exchange for renewal commissions.

When does an Agent Successor agreement make sense?

Exiting the business (e.g., retirement, illness, or sale)

Requirements:

- > Agents transferring and receiving book of business must be in good standing according to SCAN's contracting requirements and certified to receive renewal commissions with SCAN
- > Original Agent transferring book of business must be paid directly by SCAN
- > Agents must complete an Agent Successor Transfer Form found at <https://AgentPortal.SCANHealthPlan.com/Commissions>

Death of an agent

Requirements:

- > Agents transferring and receiving book of business must be in good standing according to SCAN's contracting requirements and certified to receive renewal commissions with SCAN
- > Original Agent transferring book of business must be paid directly by SCAN
- > Agents must complete an Agent Successor Transfer Form

Questions? Reach out to your local Broker Account Executive (BAE) or email SalesCompensation@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 (SST).

Monday through Friday

7:00 am – 6:00 pm PST / (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 (SST) is HERE in Long Beach

When an SST member takes your call, they 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 you with:

- Medicare verification - A&B effective dates
- LIS/SEP last used date
- SCAN benefits verification
- Broker/Agent training look-up and assistance with scheduling
- Doctor search (PCP/Specialist)
- CARA status
- General questions on: Contracting, ordering sales materials, commissions issues
- Low Income Subsidy (LIS) status verification
- Medi-Cal verification - Aid Codes/Share of cost (CA Only)
- Formulary search
- Supplemental provider contact info: Gym Membership, Hearing, Vision, Dental, etc.
- Application status
- Verify agent of record

No! We cannot help you with:

- Member issues
- Prospects wanting to inquire about or join the plan
- Medicaid verification in other states at this time

SST advises that you have the member call Member Services for:

- Address Changes
- 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

Here's a sample of the questions SST is 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@SCANHealthPlan.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 member records. The member should call a Member Services Advocate for assistance at (800) 559-3500.*

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 packet 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: *Yes, the Sales Support team is able to provide ALL member information to current Agents of Record. Information includes, **but is not limited to the Member's:** ID number, Address, Phone number, PCP/MG, Plan name, Medi-cal Number and MBI Number.*

Resources and Contact List

Member Services: 8:00 a.m. – 8:00 p.m. Local time

April 1 - September 30

Monday through Friday

October 1- March 31

Monday through Sunday

SCAN Health Plan

California (800) 559-3500

Nevada (855) 827-7226

Texas (855) 844-7226

SCAN Desert Health Plan

Arizona (855) 650-7226

SCAN Health Plan New Mexico

New Mexico (855) 826-7226

(As of Jan 1, 2024)

Best time to call?

Wednesday, Thursday, and Friday afternoons

Sales Support Team (SST)

Monday through Friday

7:00 a.m. – 6:00 p.m. PST / Extended hours during AEP

(888) 445-2038

For non-urgent requests, email us at:

SalesSupportTeam@SCANHealthPlan.com

Korean Member Services

Monday through Friday

8:00 a.m. to 5:00 p.m. PST

(855) KOR-SCAN or (855) 567-7226

SCAN Agent Portal

SCANAgentPortal.com

Commission Assistance

SalesCompensation@SCANHealthPlan.com

Sales Training

ScanSalesTraining@SCANHealthPlan.com

(562) 637-1220

Contracting Department

SCANBrokerContracting@SCANHealthPlan.com

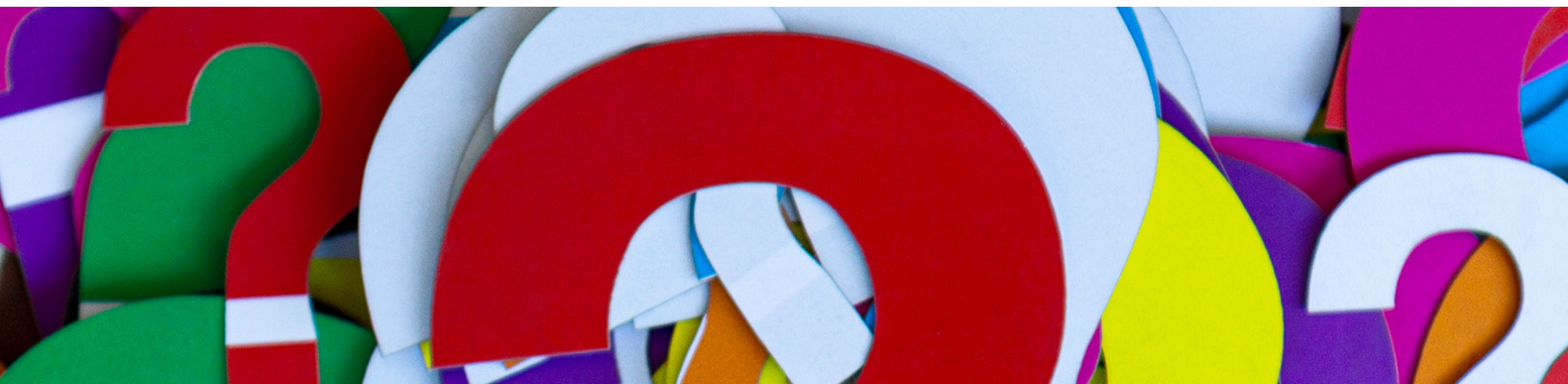
7:00 a.m. – 6:00 p.m. PST

(562) 989-5157

Telephonic Intent to Enroll

6:00 a.m. – 6:00 p.m. PST

(855) 662-7226



SCAN Offices

Your SCAN Broker Account Executives (BAEs) are your local go-to team for all questions regarding your relationship with SCAN.

They can provide you with:

- ▶ Agent and Agency Recruitment and Oversight
- ▶ One-on-one instruction on topics ranging from Medicare basics to enhanced Selling Skills
- ▶ Product and Benefit trainings delivered in your local county
- ▶ Face-to-Face field support for all your selling needs

**And their number one job is Service.
Expect them to provide you with lots and lots of it!**

CORPORATE OFFICE

3800 Kilroy Airport Way, Suite 100
Long Beach, CA 90806

Main Line:
(562) 989-5100



Chief Growth Officer:
MICHAEL BLEA
(562) 989-8370
m.blea@scanhealthplan.com



Vice President, Broker Sales:
STANTON SASAKI
(310) 782-4020
s.sasaki@scanhealthplan.com



**Business Development
Manager, Asian Communities:**
TIM YOON
(310) 384-0783
tyoon@SCANHealthPlan.com

REGIONAL OFFICES

Glendale Regional Office

450 North Brand Blvd., Ste. 600
Glendale, CA 91203

Sales Coordinator:

Juliet Prado
(562) 989-8386

Corona Regional Office

555 Queensland Circle, Ste. 101
Corona, CA 92879

Sales Coordinator:

Serena Sanchez
(562) 989-8387

New Mexico Regional Office

100 Sun Ave. NE, Ste. 650
Albuquerque, NM 87109

Arizona Regional Office

4600 E. Washington St., Ste. 300
Phoenix, AZ 85034

Nevada Regional Office

1980 Festival Plaza Dr., Office 300
Las Vegas, Nevada 81935

Houston Regional Office

6575 West Loop South, Suite 527
Bellaire, TX 77401

Broker Account Executives

Orange County



GALE GAJARDO
 (714) 698-3450
ggajardo@SCANHealthPlan.com

Los Angeles East



RUBY DE LA TORRE
 (310) 913-7446
rdelatorre@SCANHealthPlan.com

Los Angeles West & Ventura Counties



ELSA HARO RAPP
 (310) 489-3154
erapp@SCANHealthPlan.com

Arizona

Nevada



ALEX RUBIO
 (480) 740-6523
arubio@SCANHealthPlan.com

Inland Empire



ROBIN BARTLEY
 (562) 310-9529
rbartley@SCANHealthPlan.com

Texas



ERIKA GOMEZ
 (210) 897-6882
e.gomez@scanhealthplan.com

San Diego County



ANTONIO (TONY) BARRETO
 (619) 895-1670
a.barreto@scanhealthplan.com

New Mexico

Call the Sales Support Team at (888) 445-2038

Alameda, Fresno, Madera,
 San Francisco, San Mateo,
 Santa Clara & Stanislaus Counties

Call the Sales Support Team at (888) 445-2038

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