# FORWARD FOCUS SCAN 2020

# COMMISSION GUIDE

# FORWARD FOCUS

## SCAN 2020

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# 2020 COMMISSION RATE

***INITIAL YEAR ENROLLMENTS*** **$636**

***RENEWAL COMMISSIONS*** **$318**

**Commission Calculation Examples**

SCAN performs various types of commission calculations, which include but not limited to the following:

| Plan Year | Cycle Year | Prior Plan Status | Payment |
|---|---|---|---|
| 1 | 1 | None | 100% of CMS Initial Year Rate of $636 |
| 1 | 1 | MAPD or PDP | CMS Initial Year Rate, prorated based on the number of months from the effective date through the end of the enrollment calendar year.<br><br>Example:<br>Mr. Jones is effective July 1st<br>July to December = 6 months<br>Initial Year Rate= $636.00, Monthly Rate= $636.00/12=$53.00<br>Prorated Payment = $53.00 x 6 (months) = $318.00 |
| 1 | 2+ | MAPD | CMS Annual Renewal Rate (1/2 of initial year rate), prorated based on the number of months from the effective date through the end of the enrollment calendar year.<br><br>Example:<br>Mr. Jones is effective July 1st<br>July to December = 6 months<br>Initial Year Rate= $318.00, Monthly Rate= $318.00/12=$26.50<br>Prorated Payment = $26.50 x 6 (months) = $159.00 |
| 2 | 2+ | MAPD | 1/12 of the applicable Annual Renewal Rate for each month the member remains with SCAN.<br><br>Example: Monthly Rate = $318.00/12 = $26.50 |

*Note: The dollar amounts in all the examples above are representative of maximum CMS rates paid to brokers in the State of California during the 2020 calendar year. CMS rates vary by geographic region and may change during a calendar year, at the discretion of CMS. SCAN performs commission calculations using the allowable CMS rates. Commission payments issued to a broker may vary if the broker and agency enter into an assignment of commission arrangement. Please refer to your signed contract to determine your compensation arrangement or contact your Broker Account Executive.*

*Disclaimer: This information is based on the CMS guidelines at the time it was published. Any future CMS guidance may not be reflected in this guide.*

# QUICK FAQs

**Q** When will I be paid for the application I submitted?

**A** Initial enrollment applications are paid in the member's effective month. Renewals for prior year enrollments are paid monthly on the same statement as the initial enrollments.

**Q** When will I receive my commission check?

**A** Commission checks are usually issued the last week of the month.

**Q** How can I view my statement?

**A** Log into the API Portal to download your statements at http://www3.apiclient.com/SHP

**Q** What if I have questions about my commission?

**A** You may call the Sales Compensation Voice-mail Hot-line at (562) 637-1220, or send a secure email to

SalesCompensation@scanhealthplan.com

Commission questions must be submitted within **120 days** of the effective date of the member.

**Q** How do renewals get paid?

**A** Renewals are paid starting in January of the year following the enrollment and are paid monthly as long as the member is active and you are SCAN certified for the year (must have license and training completed).

**Q** How do I request a 1099?

**A** 1099 are now available in API.

For any questions, Please call (800) 247 5091 ext. 3038 for our voicemail hotline - handled in the order the call was received.

**Q** How do I get paid if I signed and AOC (Assignment of Commission.)?

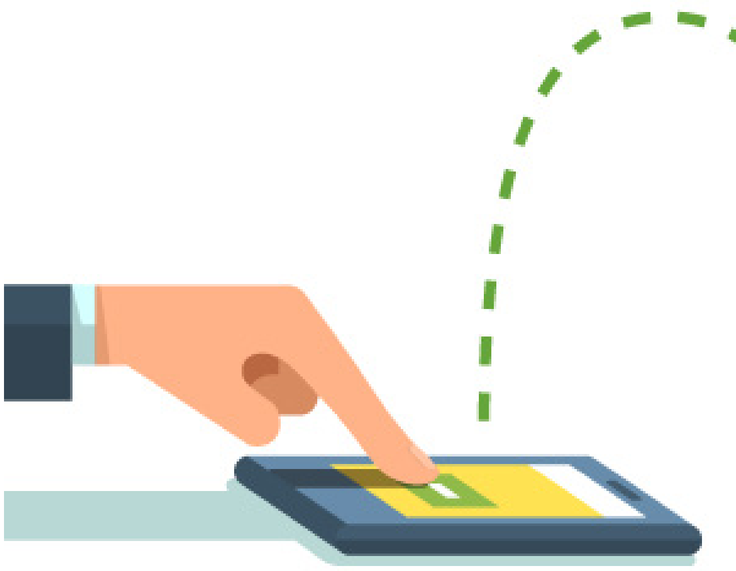
**A** Your SCAN commission is paid directly to your agency and not to the individual agent. Please contact your agency regarding the commission payment and statement.

# SUBMITTING ENROLLMENTS

You must have a valid Scope of Appointment prior to the discussion of any benefits with a beneficiary. You must maintain an easily retrievable copy of the Scope of Appointment in your files for 10 years, per CMS regulation.

**Electronic enrollment directly with the beneficiary** - Electronic enrollment completed directly with a beneficiary is usually done on a laptop in the home of the beneficiary or the broker's office. This is real time enrollment process; this enrollment transaction will be received by SCAN and processed within 24 hours from when the enrollment is accepted.

**Electronic enrollment after the appointment** - Occasionally, it is impossible to complete the electronic enrollment at the time of enrollment with the Medicare beneficiary. When a "real time" electronic enrollment cannot take place you may fill out a paper enrollment form and enter the electronic enrollment within 24 hours from when you accept the paper enrollment form. You must maintain a copy of the original paper enrollment form in your files for a period of 10 years. After completing the paper enrollment, provide a copy to the beneficiary.



**Paper enrollments** - If you do not enter the enrollments electronically, you may enroll beneficiaries using hard copy paper enrollments. When using a paper enrollment, make certain that you legibly write your name and representative National Producer Number (NPN) on the form to insure you will receive credit for the enrollment. If you use the paper enrollment method, SCAN will need the original copy of the enrollment and the Coordination of Services form within 48 hours. You must FedEx or hand-deliver the enrollment form, Coordination of Services and any additional forms required for the enrollment to:

**SCAN Health Plan**
**Attn.: Enrollment, Reconciliation & Premium Billing Dept.**
**3800 Kilroy Airport Way, Suite 100**
**Long Beach, CA. 90806**

Per CMS, the time clock for Health Plan compliance starts from the moment the broker 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, Reconciliation & Premium Billing office.**

If you leave an enrollment form with a beneficiary, make certain to put your representative NPN on the enrollment form before you leave it. The beneficiary can mail it back directly to the Enrollment & Reconciliation Department using the postage paid envelope enclosed in the sales kit. The beneficiary should be instructed to mail the form after AEP begins (October 15th).

# COMMISSION ELIGIBILITY

## Commissionable Applications

- Paid on new CMS approved members.
- Paid on members returning to SCAN after formally terminating their previous membership (must have a break in coverage).
- Commissions are not paid on plan changes within SCAN, including County to County changes. Please have the member contact Member Services at (800) 559-3500
- All accepted paper applications received by the 2nd business day of the payment month will be included in the month commission cycle. Paper applications received after the 3rd business day will be paid the following month.
- Credit for Sales. When multiple enrollments are submitted for the same beneficiary, credit will be given to the enrollment that becomes successfully processed with CMS.

## Initial Enrollments

### Eligibility:

- Active CA license in effect at the time the application is written
- Completed the required training to sell SCAN for the production year to which the application applies (Southern California requires additional training for VillageHealth and Connections Plans)
- Certification date is used to determine the commission eligibility. Any enrollments submitted prior, are not eligible for commissions

### Payment:

- Initial payment is a lump sum issued the month the member becomes effective based on CMS maximum allowable rate
- Payment is calculated in accordance with CMS guidelines, based on the member's Cycle Year, and Prior Plan Status as recorded in the monthly Medicare Advantage and Prescription Drug System (MARx) report from CMS

## Renewals

### Eligibility:

- Continue to maintain an active CA License
- Complete the required training each year no later than December 15th
- If you do not re-certify with SCAN each year, you will no longer be eligible for renewal payments on applications written in prior years*

If you terminate with SCAN before you have received payment on applications written prior to your termination, you will still receive those commissions as usual, in the month the member becomes effective.

If the broker is not certified at the time of enrollment, no commission is paid on the enrollment, including any agency payment.

**You cannot sell prior to certification date; wait for your e-mail from Sales Contracting before you sell. Date of the application is based on "application received date"*

**Example:**

You have a contract with SCAN effective July 12, 20XX. ABC is your SCAN contracted direct agency.

You enroll Mrs. Smith on July 25, 20XX for an August 1 effective date.

When August commissions are issued, for Mrs. Smith you will receive the payment applicable to August enrollments and ABC agency will receive the override.

## What's in a Date

- Payments are issued in accordance with your contract with SCAN Health Plan. They are based on the agreement in effect at the time the application was received
- Payee listed at the time of the application is received will continue to receive the renewal payment as long as the member is active
- Application received date will determine which agency receives the override and what, if any, Assignment of Commission rules might apply
- Commission rate paid for that enrollment is determined based on the member's effective date

## Assignment of Commission (AOC)

- Agree to assign your commission to your SCAN contracted direct agency
- Entire commission amount will be paid to your agency
- AOC rules will be applied based on the signature date of the AOC & the application received date
- Commission payment & statement are provided by the agency & **not available** through API. Please contact your agency regarding any commission question

**Partial Payments**

- If a member's enrollment does not initially appear on the monthly MARx report, your preliminary payment will be prorated based on the number of months remaining in the calendar year and the CMS Annual Renewal Rate applicable to the effective date of the member
- Revised payment will be calculated and issued once the MARx data from CMS is received

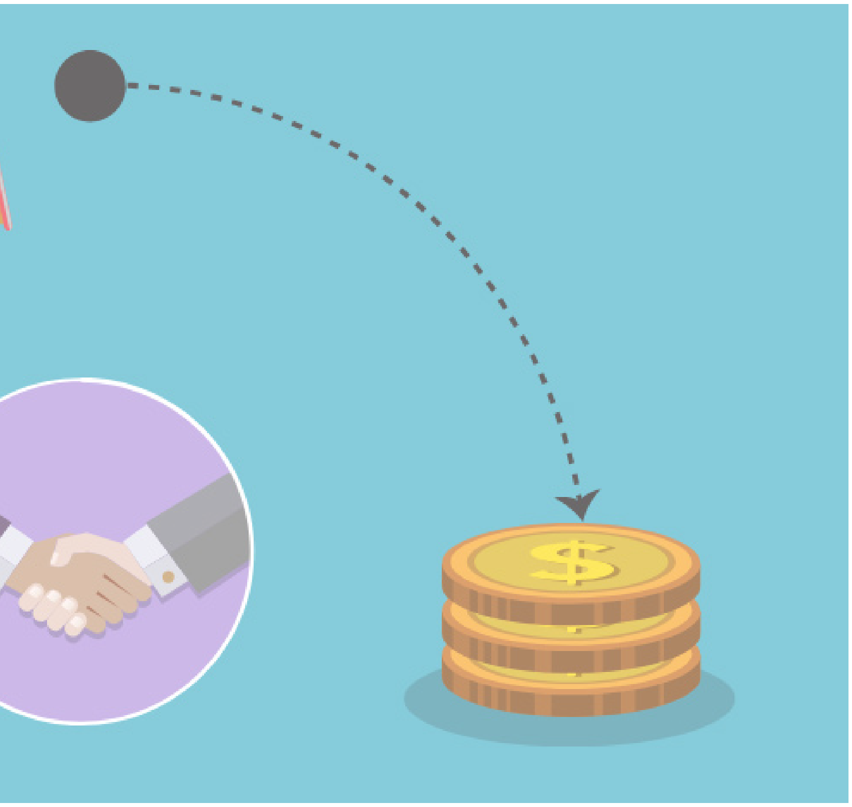
**Example:**

Mrs. Smith's application is received on May 29, 20XX for a July 1, 20XX effective date.

When July commissions are calculated, Mrs. Smith's enrollment is not yet on the CMS monthly MARx report, as a result, commission is calculated at $159.00 CA, which is 6/12 of the $318.00 CA Annual Renewal Rate.

In August, Mrs. Smith's application appears on the monthly MARX report, showing Plan Year 1, Cycle Year 1, no prior plan.

In August, SCAN issues an additional payment of $477.00 CA, for a total payment equal to the Initial Year rate of $636.00 CA.



### Disenrollment

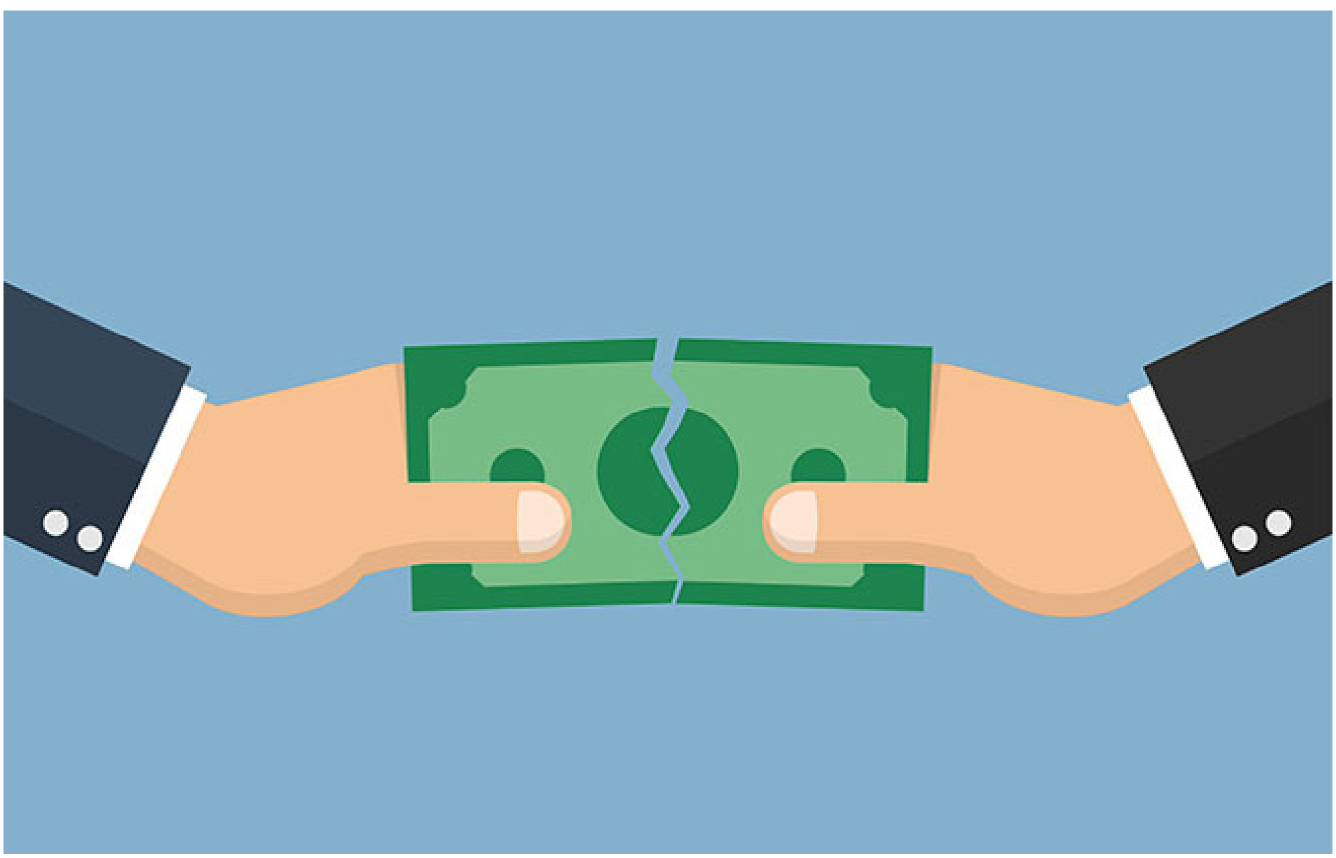
- Payment received will be charged back and replace with a prorated amount based on the number of months during the calendar year the member was enrolled

### Rapid Disenrollment

- If an enrollee leaves the plan prior to month four, 100% chargeback to compensation earned

### Overpayments

- Overpaid for an enrollment due to disenrollments, corrections to MARx data and other factors
- Next statement will reflect the member(s) and the amount of the recovery
- If commission payment due to you that month is equal to or greater than the amount being recovered, your payment will reflect the new amount due to you
- If overpayment still exists, the member will continue to appear on your statements until the overpayment has been in paid full



## Agency Change (Hierarchy Transfer)

- Agents with current active status to change agency hierarchy

**Examples:**

You have a contract with SCAN effective April 1, 20XX with ABC as your agency.

You move to AOC Agency effective September 1, 20XX and assign 100% of your SCAN commission to AOC Agency.

You enroll Mrs. Jones on August 30, 20XX for an October 1 effective date.

You enroll Mrs. Brown on September 15, 20XX for an October 1 effective date.

When October commissions are issued, you will receive the payment applicable to October enrollments for Mrs. Jones, and ABC Agency will receive the associated override.

AOC Agency will receive both the assigned commission (and future renewals) and the override (and future renewals) for Mrs. Brown.

**Examples:**

You have a contract with SCAN effective April 1, 20XX with ABC as your agency.

You move to XYZ Agency effective September 1, 20XX.

You enroll Mrs. Jones on August 30, 20XX for an October 1 effective date.

You enroll Mrs. Brown on September 15, 20XX for an October 1 effective date.

When October commissions are issued, you will receive the payment applicable to October enrollments for both Mrs. Jones and Mrs. Brown.

ABC Agency will receive the override (and subsequent renewals) for Mrs. Jones.

XYZ Agency will receive the override (and subsequent renewals) for Mrs. Brown.

# YOUR STATEMENTS

## How to Access Our Commission Website

### What can you do on our Broker Commission Portal?

- View your Monthly Statements online
- Setup to receive your Direct Deposit (Electronic Fund Transfers) commission checks
- Brokers on AOC will not be able to view statements, please contact your agency

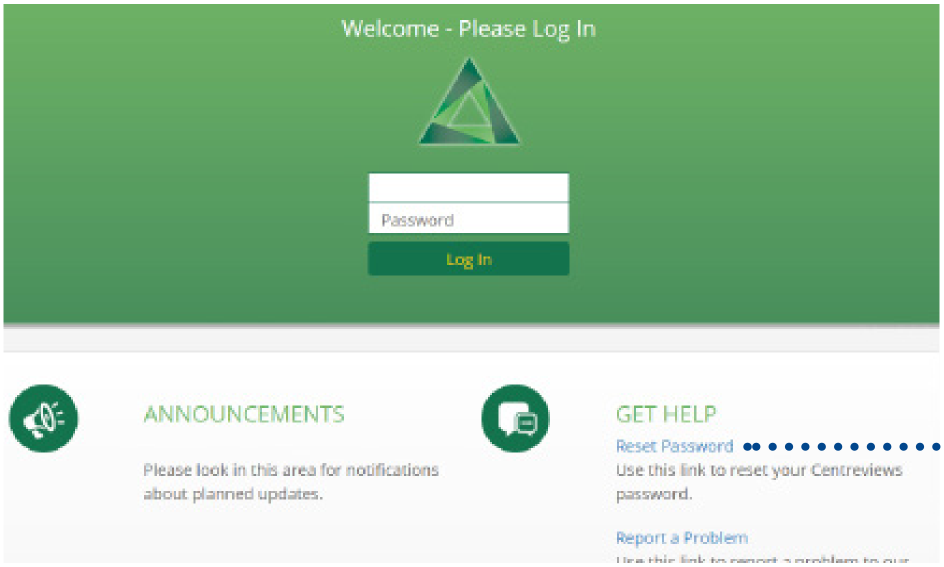
SCAN's Broker Commission Portal makes it easy for you to have your SCAN commission checks deposited directly into your bank account via Electronic Fun Transfer (EFT). Once you have logged in, you have the option to:

- Elect to have your funds electronically transferred from SCAN to your bank or by providing your bank information, OR
- Download your commission statement

### Let's Get started

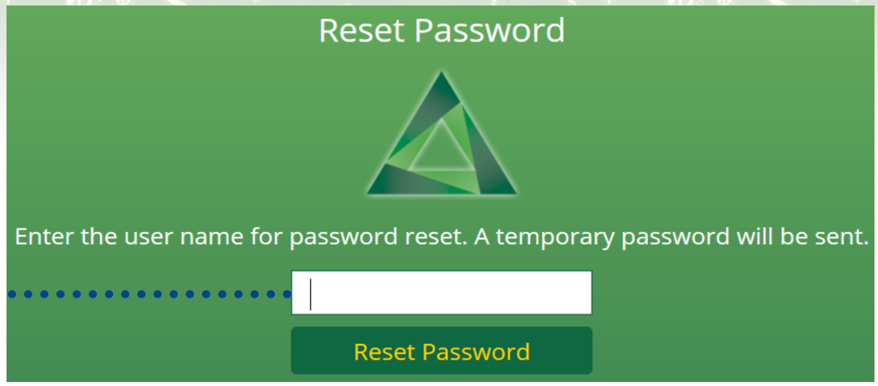
Using Internet Explorer or Chrome, go to https://www3.apiclient.com/SHP/login.html

- First time users must click on Reset Password to obtain a system-generated password (Initial log-in only, if you forgot your password, always click reset password if you forgot your password, please contact: SalesCompensation@scanhealthplan.com if you have any questions)
- You must use the email address that you previously submitted to SCAN



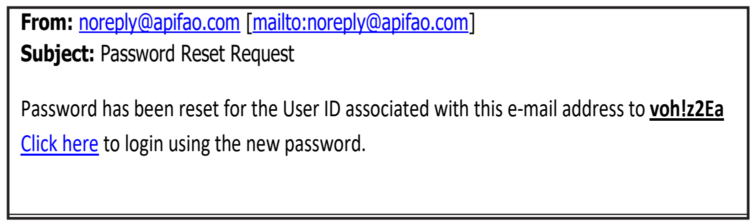

First time users must click on Reset Password to obtain a system generated password

You must use the email address you previously submitted to SCAN




- After you place your email address and submit, you will receive an email with your temporary password and a link to re-enter the site.

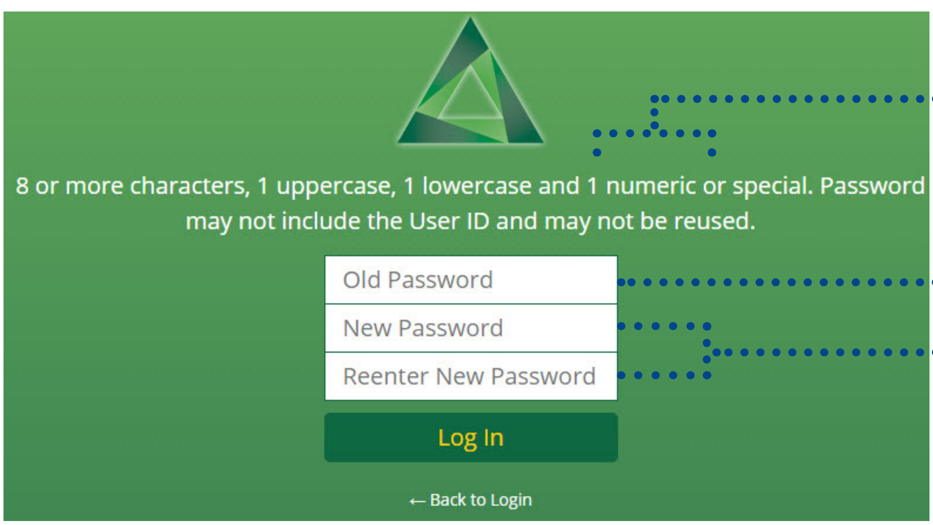
- Use the link provided (use "Click Here") to re-enter site and enter the temporary password provided in the email. You are able to copy temporary password and paste.



**From:** noreply@apifao.com [mailto:noreply@apifao.com]
**Subject:** Password Reset Request

Password has been reset for the User ID associated with this e-mail address to **vohl!z2Ea**
Click here to login using the new password.

- You will then be prompted to change your password. "Old Password" is your temporary password. Your "New Password" will be your permanent password to enter the site moving forward.




Password requirements

Use "temporary" password from email

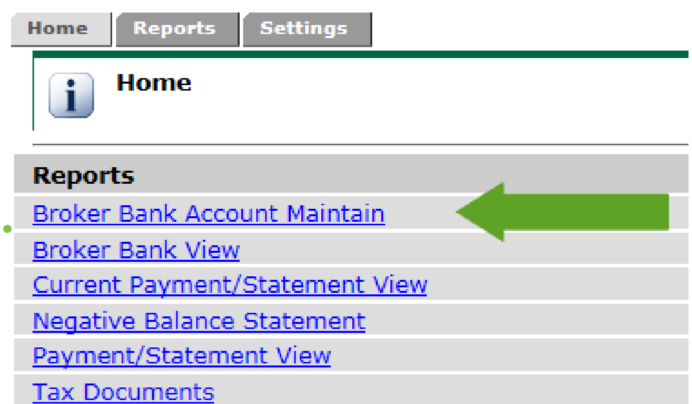
Enter NEW Password & enter twice

# DIRECT DEPOSIT SETUP

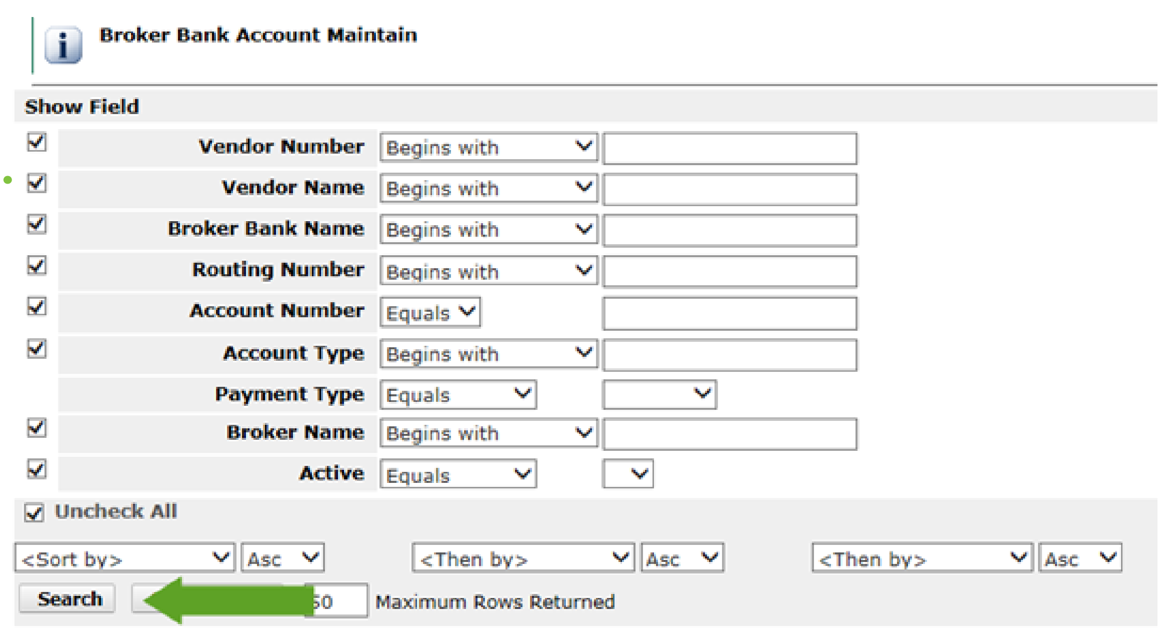
SCAN's Broker Commission Portal makes it easy to have your commission checks deposited directly to your bank account via Electronic Fun Transfer (EFT). You must receive one live check first before you are eligible for EFT.

1 **Log-in**

2 Click on **Broker Bank Account Maintain** from the **Home Page**

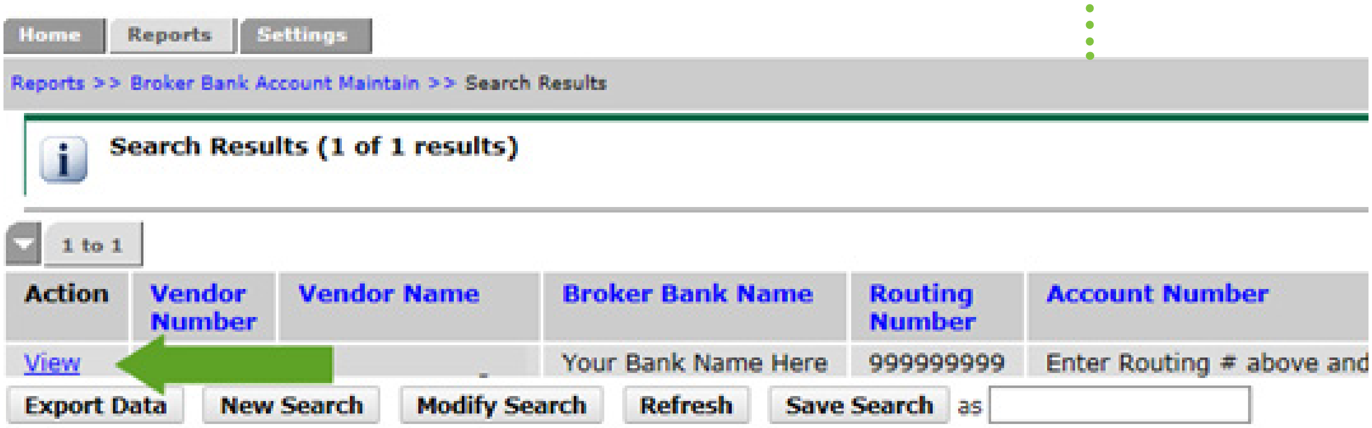



3 Click **Search** at the bottom of the screen



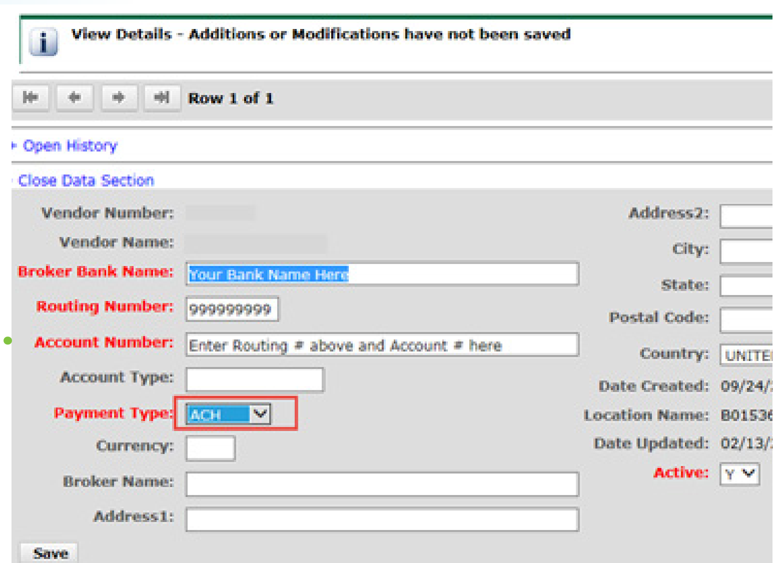
## 4

When the results come up, click **View** on the left side




## 5

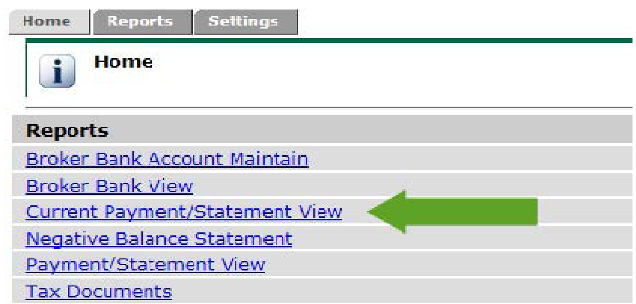
Fill out ALL items in RED and click Save. Don't forget to change the **Payment Type** to **ACH**




*Changes made after the 15th will not take effect until the following month. A pre-note test will be initiated to verify the accuracy of the account information. If the pre-note is successful, you'll receive the next payment by ACH. If it is not successful, you will be contacted by a SCAN Health Plan Compensation Team Member.*

# RETRIEVE YOUR CURRENT AND PREVIOUS STATEMENTS

## To view your Current Statement in API:

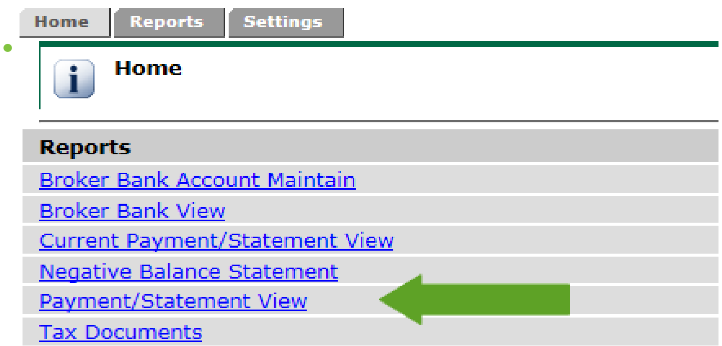



1 Click on **Current Payment / Statement View**

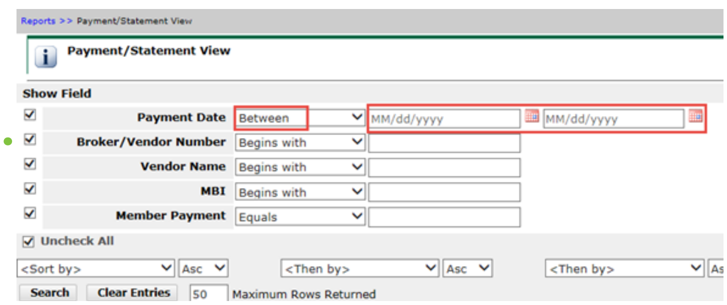
2 To view the image of the statement, click on **View**, which provides an option to save or print the statement. The first page will be an image of your check and the statement there-after.

## To view your Previous Statements in API:

**1** Click on **Payment/Statement View** on the Home Page

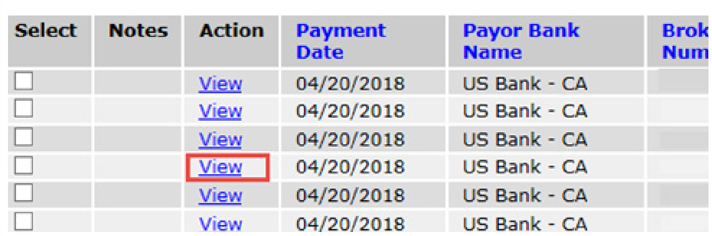



**2** In the Payment Date field, change the equals parameter to between (from the drop down menu) so that you can enter a date range

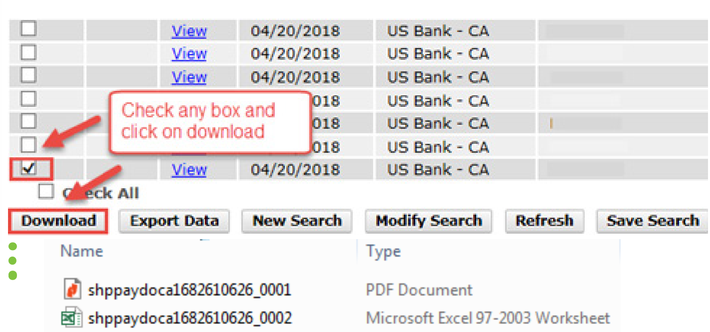



**3** Click on **Search**, It will take a few seconds to load, results should be shown at this time


**4** You can click on **View** on any one of the line items that appear in order to view the image of the statement, then save if you'd like. The first page will be an image of your check and the statement thereafter.




**5** Another option is to check any box under "**Select**" and click on "**Download**". You will now be able to view your statement PDF or excel format. The first page will be an image of your check and the statement thereafter.



| Summary | | | | |
|---|---|---|---|---|
| Payee: | | | | |
| Vendor Number: | | | | |
| **Description** | **Member Count** | **Transaction Count** | **Credit** | **Debit** |
| Initial Enrollments | 4 | 4 | $2,268.00 | $0.00 |
| Renewals | 2 | 2 | $47.34 | $0.00 |
| Rapid Disenrollments | 0 | 0 | $0.00 | $0.00 |
| Disenrollments | 0 | 0 | $0.00 | $0.00 |
| Miscellaneous | | | $0.00 | $0.00 |
| | | | | |

BROKER NAME & VENDOR NUMBER

**Enrollments** — Member Count: 4, Transaction Count: 4
Credit: $2,268.00, Debit: $0.00, Total: $2,268.00

| Tran# | App Date | Initial | Medi-Medi | MBI | Name | Effective | Term | Cy |
|---|---|---|---|---|---|---|---|---|
| 14896877 | 05/21/2018 | Yes | No | XXXXKN45 | | 06/01/2018 | | 1 |
| 14844146 | 05/07/2018 | Yes | No | XXXXFY37 | | 06/01/2018 | | 1 |
| 14844147 | 05/07/2018 | Yes | No | XXXXQU77 | | 06/01/2018 | | 1 |
| 14843941 | 04/30/2018 | Yes | No | XXXXYD87 | | 05/01/2018 | | 1 |
| | | | | | | | | |

**Enrollment Renewals** — Member Count: 2, Transaction Count: 2
Credit: $47.34, Debit: $0.00, Total: $47.34

| Tran# | App Date | Initial | Medi-Medi | MBI | Name | Effective | Term | Cycle |
|---|---|---|---|---|---|---|---|---|
| 14899701 | 11/16/2017 | Yes | No | XXXXFN91 | | 12/01/2017 | | 1 |
| 14897804 | 09/29/2017 | Yes | No | XXXXCU22 | | 10/01/2017 | | 1 |
| | | | | | | | | |

**Rapid Dis-Enrollments** — Member Count: 0, Transaction Count: 0
Credit: $0.00, Debit: $0.00, Total: $0.00

| Tran# | App Date | Initial | Medi-Medi | MBI | Name | Effective | Term | Cycle Yr | Pric Plan |
|---|---|---|---|---|---|---|---|---|---|
| No Records | | | | | | | | | |

**Dis-Enrollments** — Member Count: 0, Transaction Count: 0
Credit: $0.00, Debit: $0.00, Total: $0.00

| Tran# | App Date | Initial | Medi-Medi | MBI | Name | Effective | Term | Cycle Yr | Pric Plan |
|---|---|---|---|---|---|---|---|---|---|
| No Records | | | | | | | | | |

**Miscellaneous** — Credit: $0.00, Debit: $0.00, Total: $0.00

| Tran# | Payment Period | Misc Description | Payment |
|---|---|---|---|
| No Records | | | |

**Non-Payable Apps** — Non-Payable App Count: 0

| App ID | App Date | Effective Date | Name | Reason |
|---|---|---|---|---|
| No Records | | | | |

| Summary of Application Status | |
|---|---|
| Status | Count |
| New | 4 |
| Incomplete | 0 |
| Denial | 0 |
| Exception | 0 |
| Void | 0 |
| Termed | 0 |
| Death | 0 |

| Total |
|---|
| $2,268.00 |
| $47.34 |
| $0.00 |
| $0.00 |
| $0.00 |
| $2,315.34 |

SUMMARY OF PAYMENT & APP ACTIVITY

SECTION HEADER - CONTAINS SUMMARY OF ACTIVITY FOR THAT CATEGORY OF COMMISSION

| cle Yr | Prior Plan | Status | Mos. | Prior Pmts ? Curr Yr | Payment | YTD Payment |
|---|---|---|---|---|---|---|
| | | | 12 | $0.00 | $567.00 | $567.00 |
| | | | 12 | $0.00 | $567.00 | $567.00 |
| | | | 12 | $0.00 | $567.00 | $567.00 |
| | | | 12 | $0.00 | $567.00 | $567.00 |
| | | | | $0.00 | $2,268.00 | $2,268.00 |

| e Yr | Prior Plan | Status | Mos. | Prior Pmts ? Curr Yr | Payment | YTD Payment |
|---|---|---|---|---|---|---|
| | | | 1 | $118.33 | $23.67 | $142.00 |
| | | | 1 | $118.33 | $23.67 | $142.00 |
| | | | | $236.66 | $47.34 | $284.00 |

| or n | Status | Mos. | Prior Pmts ? Curr Yr | Payment | YTD Payment |
|---|---|---|---|---|---|
| | | | | | |

| or n | Status | Mos. | Prior Pmts ? Curr Yr | Payment | YTD Payment |
|---|---|---|---|---|---|
| | | | | | |

THE MISCELLANEOUS SECTION REFLECTS ANY MANUAL ADJUSTMENT ENTRIES THAT WERE MADE

# STATEMENT COLUMN GUIDE

*On the previous page, you will find a sample statement to show you how the various types of commission payments are reported*

| | |
|---|---|
| Tran# | SCAN System transaction reference number |
| App Date | Date application received by SCAN |
| Initial | Refers to initial CMS cycle year 1 payment, where cycle year 1 denotes "Yes", otherwise "No" |
| Medi-Medi | Refers to dual-eligible (Medicare-MediCal) enrolled in Connections, where "Yes" denotes Connection Plan enrollee, otherwise "No" |
| MBI | New Medicare Beneficiary Identifier (MBI) is replacing the SSN-based Health Insurance Claim Number (HICN) on new Medicare cards which was issued to beneficiaries since April 2018.) |
| Name | Member's name. Note name are displayed in each section in alpha order by last name |
| Effective | Refers to the date the member will be eligible for Medicare benefits through SCAN |
| Term | Date member termed (if applicable) |
| Cycle Yr | Number of year(s) member has been enrolled with a Medicare Advantage Plan |
| Prior Plan | The type of coverage the member had prior to joining SCAN. Note that if prior coverage was PDP only, member is still considered in Cycle Year 1 |
| Status | Not currently used |
| Mos | The number of months included in the commission payment or recoupment |
| Prior Pmts - Curr | The total amount paid by SCAN during this calendar year, prior to the current statement |
| Payment | The commission amount being paid on this statement |
| YTD Payment | The total amount paid by SCAN for the calendar year |

# 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***

***API Website***
***http://www3.apiclient.com/SHP***

***Enrollment, Reconciliation & Premium Billing***

*Attn.: Enrollment, Reconciliation & Premium Billing Dept.*

*3800 Kilroy Airport Way, Suite 100*

*Long Beach, CA. 90806*