

PRODUCER GUIDE

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WELCOME



On behalf of our Sales Leadership team, I welcome you to SCAN!

Leadership Team (L-R)

David Milligan - SVP, Sales
Chris Bond - Director, Sales
Francine Chong - Director, Broker Sales
Dick Peitzmeier - VP, Sales
Holly Ackman - VP, Sales Operations
Julie Kiefer - Director, Sales Systems
Edith Monge - Manager Employer Group Sales
Michael Lucens - Director, Sales Operations

We've produced this guide as a handy reference containing "everything you need to know" to sell our plans. Our goal is to make SCAN the most agent-friendly MAPD with whom you contract.

This leadership team is committed to you--our selling agents, and to the Medicare beneficiaries that we serve. But we are equally dedicated to ensuring that our agents abide by all federal and state regulatory guidance, and that they "sell with integrity" every time they interact with a client. That's why we contract only with agents who possess and maintain the highest level of personal and business ethics.

SCAN's commitment to CMS sales and marketing guidelines is reflected in the manner in which we onboard, educate and provide sales tools for our agents. Our objective is to set you up for business success, and if we succeed, we'll expect to see it in your results as you compliantly sell SCAN plans in 2016 and beyond.

Sincerely,

David Milligan
SVP, Sales



About SCAN Health Plan

SCAN Health Plan®, headquartered in Long Beach, California, is a Medicare Advantage plan serving the needs of over 160,000 members. Founded in 1977, we employ over 1,000 people 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. Our service areas in California includes Los Angeles, Orange, Riverside, San Bernardino, San Diego and Ventura counties to the south, and Marin, Napa and Sonoma, San Francisco, San Joaquin and Santa Clara in Northern California.



OUR MISSION

Keeping seniors healthy and independent.

The Best Reasons to Sell SCAN

- SCAN is the second largest not-for-profit MAPD plan in CA – also the 4th largest in the nation – and one of the fastest growing in the United States!
- We have served seniors from our Long Beach, CA location for almost 40 years.
- We only serve people on Medicare.
- Our expert Customer Service representatives are located in Long Beach, so they know the marketplace.
- When your clients call SCAN, they'll reach a "live" person. There are no "talk-time" limits.
- 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.
- SCAN disenrollment rates are low.
- Our Network Management team works to ensure that we have a full range of quality physicians and respected providers to meet your clients' healthcare needs.

And...ask us about our stars!

Here's what SCAN does to help you be successful

- 1 There is a dedicated Sales Support Team available to take your calls Monday-Friday 8 a.m.-6 p.m.
- 2 There is a dedicated Broker Account Executive in each market to service our broker agents.
- 3 You'll be provided with extensive training programs that give you the tools you need to be successful.
- 4 Your writing number is available within three to five business days of successful completion of SCAN's contracting and training certification requirements.
- 5 SCAN pays commissions at CMS maximum allowable rate – and we offer lifetime renewals to certified agents.
- 6 We furnish a variety of CMS - approved marketing pieces and customizable marketing tools to help you build your business.
- 7 Every month, you'll receive a newsletter which provides updated industry information.
- 8 In addition, the SCAN Sales Training team offers various face-to-face courses in local markets such as:
 - > Annual Benefit-Certification Training
 - > Selling to Duals (Connections)
 - > Community-Based Marketing
 - > Selling During Lock-In

Star Ratings

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

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 Open Enrollment.



Training (L-R)

Aymee Abreu - Manager
Tracey Patrick - Trainer
Isha Serrano - Training Coordinator



Becoming a SCAN Contracted Agent

Contracting and Certification

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

To contract with SCAN, email us at: SCANbrokercontracting@scanhealthplan.com or contact your agency.

Electronically complete and submit the following paperwork

- > Hierarchy Form
- > Current State Insurance license
- > Current Errors & Omissions
- > Signed W-9
- > Agent Contact Form
- > Agent Agreement
- > Assignment of Commissions *(if applicable)*

Licensing

You must be licensed in your primary state of residence to sell any of our products. Licensing rules vary by state. Contact your broker agency or your local market Broker Account Executive.

Appointment

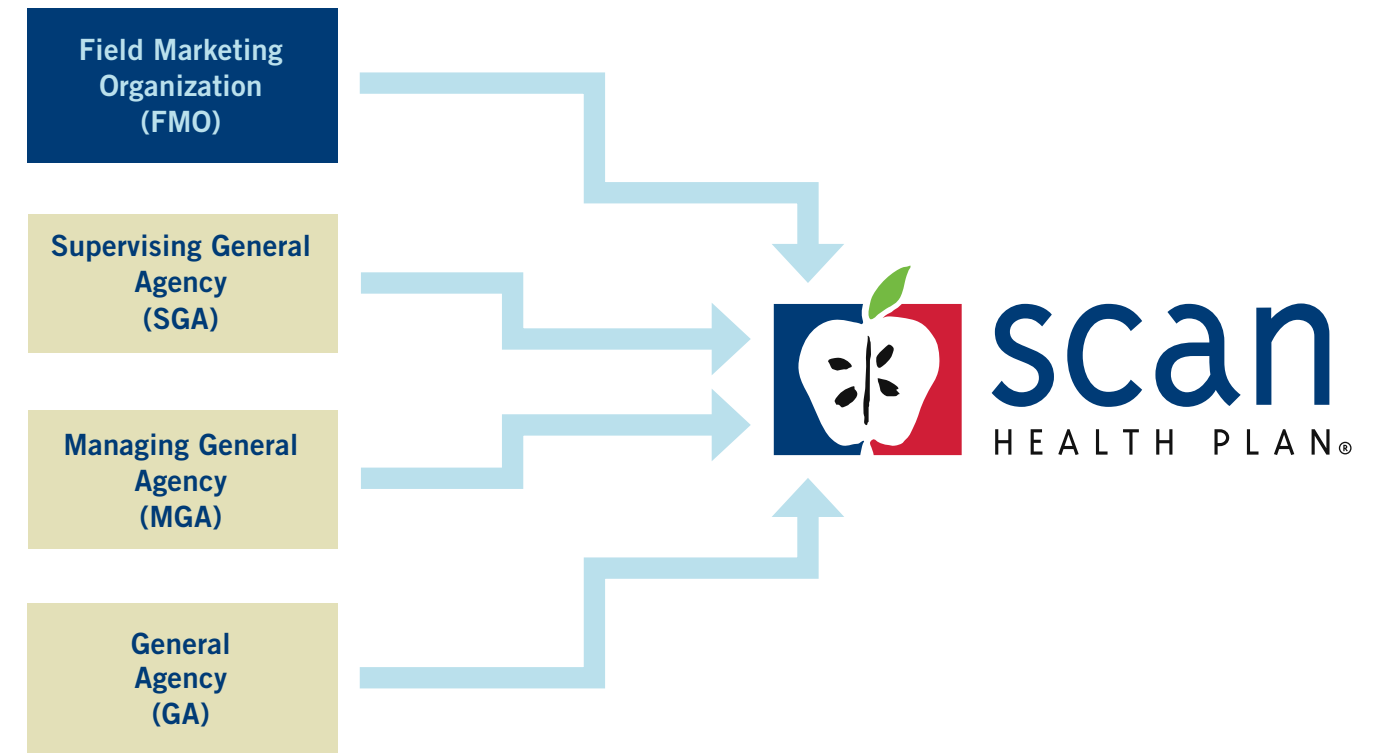
Once you are fully contracted and successfully certified, you'll receive a "Welcome" email containing your agent writing number and officially appointing you as an authorized SCAN sales agent. Now you can begin selling!

Questions about your writing number?

Contact us at: SCANbrokercontracting@scanhealthplan.com

Agency/Agent Hierarchy

SCAN contracts with numerous Field Marketing Organizations (FMO's) and our FMO's are responsible for the oversight of the various types of agencies in their hierarchy.



Not contracted with SCAN yet?
Contact: SCANbrokercontracting@scanhealthplan.com or your local Broker Account Executive.

Hierarchy Transfer Requests

SCAN allows agents with a current active status to change agency hierarchy once a calendar year; however, no hierarchy changes are permitted between September 16 – 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.

To initiate the request, email to SCANbrokercontracting@scanhealthplan.com and you will electronically receive:

- > Hierarchy Transfer Form
- > W-9 with current signature date or Assignment of Commission form if applicable

NOTE → Forms must be signed and submitted by agents.

The Path to Certification for 2016

For new and returning Agents and Brokers

1

- New Agents** Please complete all your contracting paperwork and then begin the certification process.
- Returning Agents** Please recertify according to the instructions below.
- TO START** Go to <https://scan.cmpsystem.com>

2

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

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

3

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

- > Complete our online "Selling with Integrity" module
- > Attest to reviewing our P & P's and Code of Conduct

4

FOR TIER 3, SUCCESSFULLY COMPLETE OUR FACILITATOR-LED COURSE WHERE YOU'LL LEARN ABOUT:

- > Sales Presentation requirements
- > Market-Specific Products

When you pass the exam with a score of at least 85%, new agents will be issued their writing number and all agents will be SCAN-certified.

GREAT JOB!

You are now certified to sell the SCAN products available in your market!*

*Ask your Broker Account Executive about the additional yearly certification required to sell the Connections Plan.

Sales Agent Compensation

Compensation policies & procedures

To be eligible for payment, you must maintain a current state insurance license and complete your yearly training certification. Please refer to the section "YOUR ELIGIBILITY FOR COMMISSIONS" in the SCAN Broker Commission Guide for further details.

SCAN pays commissions:

- > In accordance with CMS guidelines and at the maximum allowable amount
- > Monthly & consistently – a commission calendar with key dates is published annually
- > For as long as the member remains with SCAN (lifetime renewals)
- > For renewal membership in pro-rated amounts. Renewable payments are paid at the start of the calendar year – not the anniversary date
- > At the CMS maximum allowable rate in a lump sum for members who join an MAPD plan for the first time
- > At the CMS maximum allowable pro-rated amount for members who move from an existing MAPD (Prior Year or Cycle Year 2 or more)
- > At the CMS maximum allowable rate based on the official MARx data from CMS
- > At the pro-rated amount upfront each month. If an adjustment to compensation is necessary due to changes to MARx data, over/under payments are corrected the following month

2016 Commission Rate for Contracted Agents

Initial year enrollments \$536

Renewal commissions \$268

Questions about commissions?

For any issues, email us at SalesCompensation@scanhealthplan.com.

For complete information, review the 2016 SCAN Broker Commission Guide.



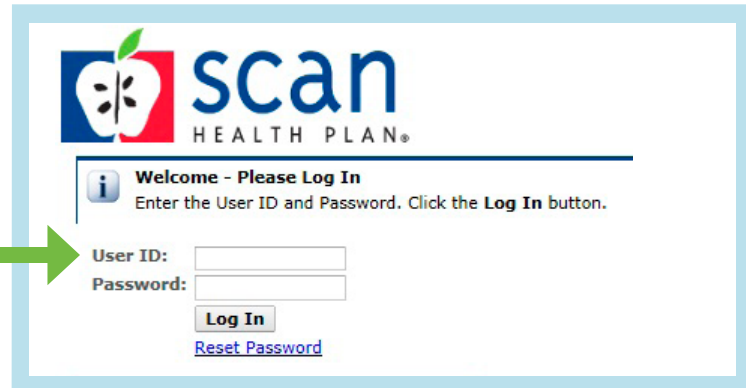
Using Our Broker Commission Portal

LOG IN

Using Internet Explorer or Chrome, go to www0.apiclient.com/SHP (that's a zero after the "www").

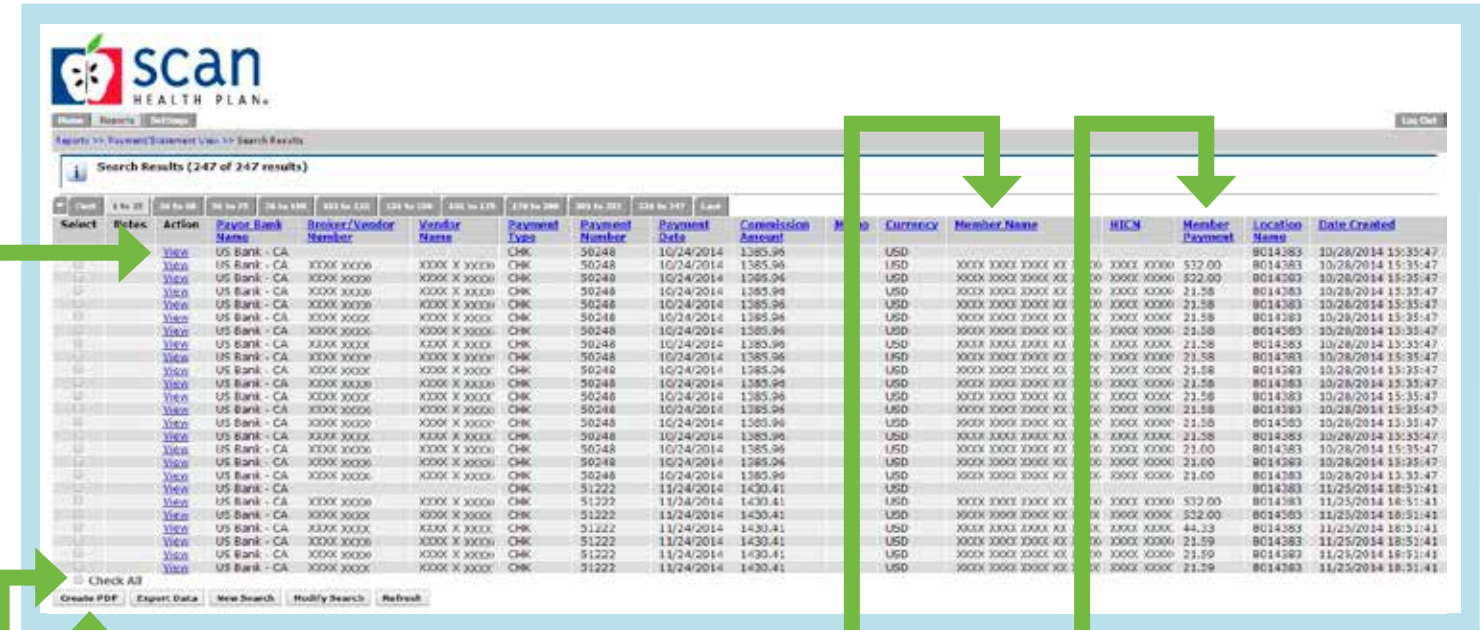
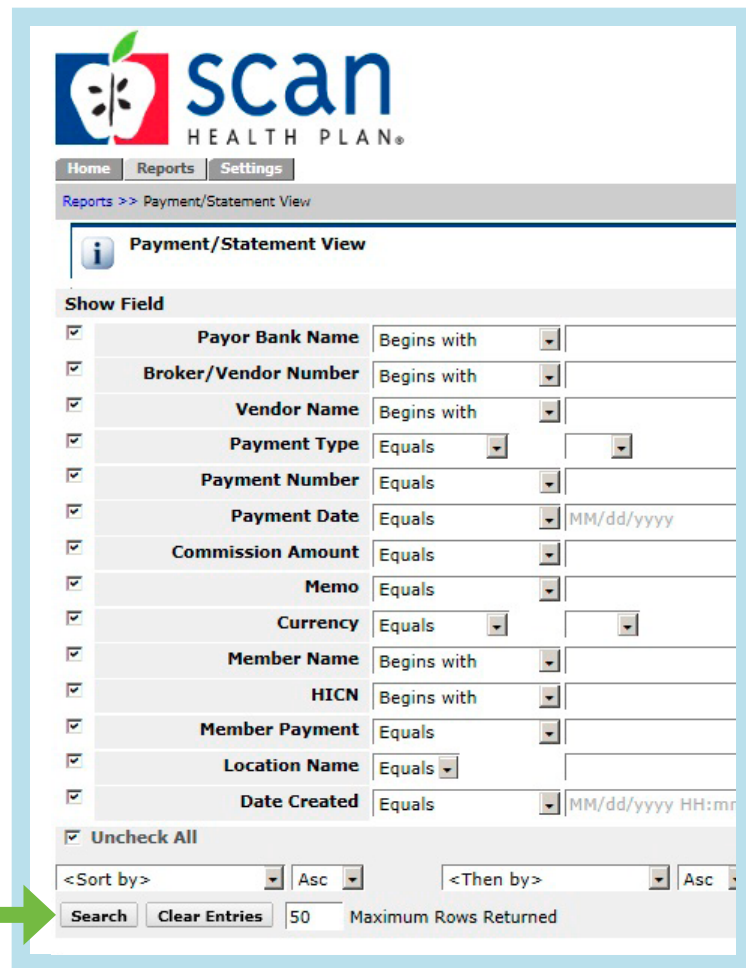
Username: That's the email address you used when you contracted with SCAN.

Password: Enter your password and click [Log in](#). First time user or forgot your password? Click on [Reset Password](#) and instructions will be sent to your email address.



To view your Monthly Statements online

1. After logging in, the next screen gives you options to search your Enrollees.
2. To view a complete monthly statement, go to bottom on the left side of the page and click [Search](#).



3. Your monthly statements will appear with all your [Member Names](#) and [Payments](#). Click on [View](#) to see each individual statement. Choose your search criteria by using any of the search fields at the top for specific commission information.
4. If you wish to get a PDF version, scroll to the bottom left of the page and click on [Check All](#). Then click [Create PDF](#) at the bottom left side of the page.



Sales Operations (L-R)
Aida Castellanos, Noemi Galicia, Jennifer Desamito, Terry Paine, Jessica Alvarado, Nichelle Brown, Karina Corrales

To set up Direct Deposit (Electronic Fund Transfer) for your commission checks

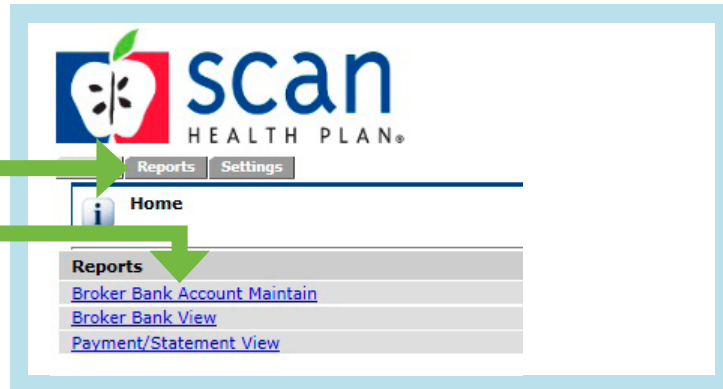
NEW

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

- > Do NOTHING to continue receiving a manual check, OR
- > Have your funds electronically transferred to your bank by providing your bank information

Here's how...

1. Log in
2. Click on the **Reports** tab to set up your Direct Deposit.
3. Click on **Broker Bank Account Maintain**.



Contracting (L-R)
 Aida Castellanos - Supervisor, Sales Operations
 Noemi Galicia, Nichelle Brown,
 Karina Corrales - Sales Operations Coordinators



4. Then click **Search** at the bottom of the screen.

The screenshot shows the 'Broker Bank Account Maintain' search form. It has a 'Show Field' section with several fields, each with a checkbox and a dropdown menu for search criteria. The fields are: Vendor Number (Begins with), Vendor Name (Begins with), Broker Bank Name (Begins with), Routing Number (Begins with), Account Number (Equals), Account Type (Begins with), Payment Type (Equals), Broker Name (Begins with), and Active (Equals). Below the fields is an 'Uncheck All' checkbox and sorting options: '<Sort by>' (Asc), '<Then by>' (Asc), and '<Then by>' (Asc). At the bottom, there are buttons for 'Search', 'Clear Entries', and a '50 Maximum Rows Returned' indicator.

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

The screenshot shows the search results page for 'Broker Bank Account Maintain'. It displays 'Search Results (2 of 2 results)'. Below the results, there is a table with columns for 'Action', 'Vendor Number', 'Vendor Name', and 'Broker Bank Name'. The first row shows a 'View' link, the vendor number 'C000007', the name 'Tracey Patrick', and the bank name 'Enter Your Bank Name Here'.

Action	Vendor Number	Vendor Name	Broker Bank Name
View	C000007	Tracey Patrick	Enter Your Bank Name Here

6. Then fill out ALL your bank account information and click **Save**.

The screenshot shows the 'View Details' form for a Broker Bank Account. It contains various input fields for account information. The fields include: Vendor Number (C000007), Vendor Name (Tracey Patrick), Broker Bank Name (Enter Your Bank Name Here), Routing Number (99999999), Account Number (99999999), Account Type, Payment Type (Dw), Currency (USD), Broker Name, Address1, and Address2. There are also fields for City, State, Postal Code, and Country (UNITED STATES - US). The form also shows the Date Created (05/07/2015 19:15:03), Location Name (C000007), Date Updated (05/07/2015 19:15:03), and an Active checkbox.

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.
- > Understand that they must continue to pay Part B premiums (if not paid for by Medicare or another third party).
- > Don't have End Stage Renal Disease and are not currently undergoing a regular course of dialysis. (Exceptions may apply. SCAN Health Plan also offers an ESRD – SNP Plan.)

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 **October 15 - December 7, 2015**
 Special Election Period **All year round**

Other important dates

MA Disenrollment Period **January 1 - February 14, 2016**
 Lock-in Period **February 15 - December 31, 2016**

Some Enrollment Exceptions

They may enroll at any time of 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
- > Have certain other circumstances

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

Enrollment Lock-In

Between January 1 and February 14:

- > One allowable switch from their existing MA plan to Original Fee-For-Service Medicare plus Prescription Drug plan.

After February 14:

- > No further plan switching is permitted unless they qualify for a special election.

Beginning October 15:

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

With SCAN, you can sell even during Lock-In! In addition to Special Election periods, (which may allow applicants to join, switch or drop an MA Plan outside the AEP or ADP), we have products you can sell even during lock-in.

SEP Eligibles*

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
	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	Dual Eligible - Full or Partial	Ongoing from date notified	Medicaid # or Award Letter
	Part D Subsidy (LIS)	Ongoing from date notified	SSA Award Letter
	State Pharmacy Assistance Program	The effective enrollment date to the year's end	Application or Award Letter
Chronic SNP	Qualifies for SNP due to Diabetic diagnosis or Congestive Heart Failure (CHF)/ Cardiovascular Disease (CVD) diagnosis	Year-round	Patient Authorization Form and Pre-Enrollment Qualification Assessment Tool
Losing Coverage	Part D Subsidy (LIS) terminated	From the month notified to 2 months after coverage loss	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

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

SCAN's Products and Benefits

TARGET: Healthy/Average	MAPD	"Classic" "Signature"
Benefits	Details	
<ul style="list-style-type: none"> > Preventive care > Gym membership (for most plans) > Additional benefits such as transportation/vision* > Competitive Rx (gap coverage*) 	<ul style="list-style-type: none"> > Core lock-in products > Large network of providers > Physician referrals for most services (specialist, hospital, etc.) 	* See plans for availability

TARGET: Chronic Conditions	C-SNP	"SCAN Balance" "Heart First"
Benefits	Details	
<ul style="list-style-type: none"> > Affordable doctor and hospital visits > Low Rx copays for chronic condition medications > Robust Case Management services > Additional benefits such as routine Transportation and Podiatry > In-home meal benefit post-hospital discharge > Gap coverage for most plans 	<ul style="list-style-type: none"> > Year-round products > Select network of providers > For members who have the qualifying heart condition and/or diabetes. 	

TARGET: Dual Eligible Beneficiaries	D-SNP	"Connections" SoCal – LA, RV, SB NoCal – San Joaquin
NOTE Requires additional certification to sell this plan.		
SoCal Benefits	NoCal Benefits	
<ul style="list-style-type: none"> > Integrated Medicare/Medi-Cal product > \$0 Benefit design > Additional benefits such as routine Chiropractic, Acupuncture, Podiatry, Vision, and Comprehensive Dental > Unlimited Routine Transportation > Personal Assistance Line (PAL) > OTC drug benefits 	<ul style="list-style-type: none"> > Coordinates with Medi-Cal > FFS Benefit design > LIS-directed prescription benefit design > Additional benefits such as routine Transportation, Chiropractic, Vision and Podiatry > Personal Assistance Line 	
SoCal Details	NoCal Details	
<ul style="list-style-type: none"> > Year-round product > Enrollee assigns their Medi-Cal to SCAN > Coordinated Medi-Cal benefits 	<ul style="list-style-type: none"> > Year-round product > Enrollee doesn't assign their Medi-Cal to SCAN 	

TARGET: Full Dual Eligibles	MAPD	"Plus Plan"
For full Dual Eligibles seeking an MAPD that coordinates with FFS Medi-Cal/Medi-Cal Managed Care or for Duals Pilot "Opt Outs"		
Benefits	Details	
<ul style="list-style-type: none"> > Coordinates with Medi-Cal/Medi-Cal Managed Care > FFS benefit design > LIS-directed prescription benefit design > Additional benefit coverage such as routine Transportation, Chiropractic, Acupuncture, Podiatry, Hearing, and Vision 	<ul style="list-style-type: none"> > Year-round products > Enrollee does not assign their Medi-Cal to SCAN 	

All Products and Benefits may not be available in all counties. Check your benefit highlights for your county-specific Product and Benefits.

Understanding Part D Stages

- 1 Yearly Deductible**
Most SCAN Plans do not have a Yearly Deductible.
- 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 \$3,310 for the year. When this happens, members move into Coverage Gap.

SCAN cost + Member's cost = Total Drug Cost

Initial Coverage
Total Drug Cost = \$3,310
- 3 Coverage Gap (aka Donut Hole)**
The member may continue paying copayments (flat amount) for some drugs and/or 45% of the price for brand-name drugs and up to 58% of the price for generic drugs.

Members stay in this stage until their "Out-of-pocket costs" for the year reach \$4,850. When this happens, they will move into Catastrophic Coverage.

Coverage GAP
Out-of-pocket costs = \$4,850
- 4 Catastrophic Coverage**
In this stage, members' copayments or coinsurance are smaller.

SCAN pays the rest until the end of the year!

Catastrophic Coverage
Until the end of the year



Supplemental Benefits and Services Available in Certain Products

ACUPUNCTURE/CHIROPRACTOR

American Specialty Health (ASH)

Website: www.ashcompanies.com/
 Provider Lookup: www.choosehealthy.com/

DENTAL

Delta Dental

Website: www.deltadental.com
 Provider Lookup: www.deltadental.com/DentistSearch/DentistSearchController.ccl

EMERGENCY RESPONSE SERVICES

Tunstall

Website: www.tunstall.com
 Provider Lookup: Not available

FITNESS

SilverSneakers

Website: www.silversneakers.com
 Provider Lookup: www.silversneakers.com/tools/fitness-locations

HEARING

EPIC Hearing

Website: www.epichearing.com
 Provider Lookup: Not available

HEARING

HearUSA/HearRX

Website: www.hearusa.com/
 Provider Lookup: www.hearusa.com/find-clinic.aspx

MEAL DELIVERY

LifeSpring

Website: www.lifespringmeals.com/
 Provider Lookup: Not available

PODIATRY

Podiatry Plan Organization

Website: www.podiatryplan.com/
 Provider Lookup: www.podiatryplan.com/podiatrist_locator.php

TRANSPORTATION

(Except San Diego and Ventura)

LogistiCare

Website: www.logisticare.com/
 Provider Lookup: Not available

National MedTrans Network

(San Diego and Ventura only)
 Website: TBD
 Provider Lookup: Not available

VISION

EyeMed

Website: www.eyemedvisioncare.com
 Provider Lookup: www.scanhealthplan.com



SCAN Discount Marketplace offers additional value-added services like these to SCAN members.

- > Personal Care and Homemaking Services
- > Incontinent Supplies
- > Weight Loss Program
- > Cell Phone Services
- > Pet Insurance

Guidelines for Planning and Working an Event

ALL sales events must be submitted to SCAN for upload into CMS' HPMS. 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 CMS?	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.

	EDUCATIONAL EVENTS	FORMAL & INFORMAL MARKETING & SALES (M&S) EVENTS
What CAN I Do?	<p>Respond to questions asked.</p> <p>Give an informational presentation that pertains to Medicare history/disease management/types of MA options, but no benefit-specific info on MA plan can be provided.</p> <p>Display a banner with SCAN's name and logo.</p>	<p>Accept applications, enroll beneficiaries, set up one-on-one sales appointments (requires an SOA), and request permission to call the attendee.</p> <p>Proactively discuss a plan's merits.</p> <p>If the event is informal, you must wait to be approached before discussing our products.</p>
What CAN'T I Do?	<p>Discuss plan-specific premiums, benefits, options.</p> <p>Distribute or display BRC's, Scope of Appointments, or sign-up sheets.</p> <p>Accept or help them complete applications.</p> <p>Ask if they want info or steer them toward any specific plans. Set up sales one-on-one appointments or request permission to call.</p>	<p>Serve meals.</p> <p>Provide meals or gifts that may be turned into cash.</p> <p>Approach prospects at informal sales events. They must always approach YOU.</p> <p>Require attendees to provide contact info on sign-in sheets, to participate in a raffle or as a prerequisite for attending event.</p> <p>Compare one plan to another by name, unless both sponsors have agreed.</p> <p>Conduct "cherry-picking" activities such as health screenings.</p> <p>Solicit enrollment prior to the start of the AEP (October 15-December 7).</p>

Your Sales Events Submission Process

Your agency will designate one representative responsible for submitting all submission requests for SCAN contracted agents. They will:

- > Complete "SCAN Broker Sales Event Template" or the CMS MCE template. (Contact Seminarsubmission@scanhealthplan.com for a template.)
- > Submit requests **10 business days** in advance of the event or the event's advertisement to: Seminarsubmission@scanhealthplan.com.

NOTE We are closed weekends and holidays.

The email subject line must include your **Agency Name, "New Event"**, and the **event month and year**.
Example: ABC Agency - New Event – January 2015

SCAN's Sales Event Coordinator will respond within two business days of receipt of your request. If accepted, we will submit to CMS for approval. If rejected, your agency will be asked to make corrections and resubmit.

Wait for CMS approval before marketing or conducting your sales event. We'll send a confirmation email to your agency as soon as we receive CMS approval for your sales event.

NOW you can conduct and/or advertise your sales event!

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 distribute permitted info
- > Event cancellations must also be submitted to CMS

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 for CMS request. Include the list of beneficiary names, phone numbers, and the date and time you notified them.

How to Stay Compliant

SCAN Compliance Audits and Sales Integrity

As a SCAN sales agent, you are expected to conduct your sales and marketing efforts in an ethical and compliant manner and it is our responsibility to establish thresholds for the monitoring of agent performance. It is mandatory that you know and comply with federal, state, and SCAN guidelines as described in your training and that you maintain your performance data at an acceptable level according to SCAN's defined thresholds.

If you fail to meet these requirements, you may receive progressive outreach and discipline including coaching, training, corrective action, and/or suspension or termination if you are in violation of the following criteria (not an all-inclusive list):

- > Rapid disenrollment rates (greater than 10% per month)
- > Late enrollment application submission
- > Secret Shopper results
- > Outbound enrollment calls
- > Call monitoring results
- > Complaints
- > Contracting, Licensing, Appointment, and Certification Status



National Sales Integrity (L-R)
 Lesandra Castillo - Telephonic Monitoring Specialist
 Diana Navarro - Supervisor
 Eduardo Aguilar - Monitoring and Reporting Specialist
 Misty Dunphy - Director
 Margarita Nunez - Telephonic Monitoring Specialist,
 Jeanette Villegas - Assessor
 Michael Lahey - Assessor (not pictured)

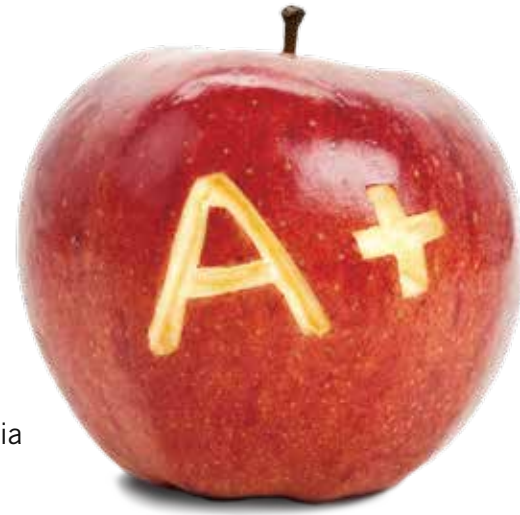
Here are the components of a compliant Sales Presentation that – if you do them all – will reward you with a CMS Secret Shopper score of 100%.

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
	✓	State that you don't represent Medicare or any branch of the Federal government
	✓	Have Scope of Appointment (SOA) signed prior to beginning presentation
	✓	Discuss ONLY the products identified on the SOA
	✓	Cover all pages of your PowerPoint or flip-book sales presentation
	✓	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)
	✓	Hand out and discuss our current Star rating sheet.

THINGS YOU SHOULD NEVER DO	✗	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
	✗	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
	✗	Conduct any sales activities whatsoever in hospital patient rooms, waiting rooms, dialysis treatment areas, or at pharmacy counters

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



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.

THEY 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

THEY 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

Submitting Enrollments

Is the Application Complete? Just a Few Things to Remember...

- > Any changes or errors must be initialed by the enrollee
- > Just one plan name should be checked
- > A Post Office box number is unacceptable
- > If a plan has a premium or if the prospect is determined to owe a Part D late enrollment penalty – a payment option must be chosen
- > The Primary Care Physician's name and Group ID number need to be included
- > Have the member (or Authorized Representative) sign and date the form and leave a copy with the enrollee
- > Make certain your enrollment form is legible
- > If enrolling electronically, use the Receipt of Enrollment form since there isn't a copy of the completed application

To ensure you get paid, remember to also include your name and writing number!

Required Forms

These forms should accompany every application, if applicable:

All plans

- > Scope of Appointment
- > Coordination of Services

Heart First and SCAN Balance

- > Chronic SNP Pre-Enrollment Qualification Assessment and Patient Authorization

C-SNP, D-SNP and Plus plans

- > Dental Provider Selection

Classic, Options and Signature plans

- > Dental Enrollment (for optional Dental coverage)





Enrollment Process

Enrollment Process

NOTE → *The process described here may differ for your agency. If so, follow your agency guidelines.*

Your goal should be to submit all paper applications within 24 hours of the beneficiary's signature date; any delay in submission could put you out of compliance with CMS guidelines.

Electronic Enrollments (EE) must be entered within 24 hours.

To be processed for enrollment eligibility for the first of the following month, all applications must be received by the end of the previous month.

Incomplete enrollment applications will be pended to obtain additional information. If complete information is not received, the application could be denied.

You may not enroll a member over the phone unless you are an exchange.

There are several ways to submit a paper enrollment application once you receive the hard copy. But you should only use ONE of these methods...

1 ENTER ELECTRONICALLY

Instructions follow on next page

2 OVERNIGHT TO*

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

3 HAND DELIVER TO

SCAN office (Monday – Friday between 8:00 a.m. – 5:00 p.m.)

Accessing SCAN's Electronic Enrollment Portal

Simply contact your agency. They will provide a username, password, and in-depth training instructions. Then use these links below:

To submit Electronic Enrollments (EE's) with a 2015 effective date

<https://scan.destinationrx.com/PlanCompare/Professional/Type1/2015/Home/Home>

To submit Electronic Enrollments (EE's) with a 2016 effective date

<https://scan.destinationrx.com/PlanCompare/Professional/Type1/2016/Home/Home>



Questions? Watch our recorded Webinar on "How to Use the EE Website" at <http://scan.cmpsistemas.com>

When completed and submitted with your client present, this is a "real time" enrollment.

If you used a paper enrollment and are completing electronically AFTER the meeting, key in the enrollment within 24 hours of the time the paper application is signed.

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 and Reconciliation office.

If you leave an enrollment form with a beneficiary, make certain it has your **writing number** on it before you leave it. The beneficiary can mail it back directly to the Enrollment and Reconciliation Department using the postage paid envelope enclosed in the sales kit.

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



C-SNP Verification Process

Pre-Enrollment

- > When enrolling a new member into Balance or Heart First, complete both the Pre-Qualification Assessment Tool and the Patient Authorization Form. Submit with enrollment forms as usual.
- > Provide the extra Patient Authorization 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 advise (via phone or a report) that you need to contact your member to urge them to get an appointment with their new PCP to verify the diagnosis. (Provide another Patient Authorization 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.*

What's Next?

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



- > An approval letter
- > A letter confirming membership and full understanding of their chosen plan.
- > Their SCAN member ID card
- > Our New Member Welcome Kit
- > A letter informing them how to get help with Medicare premiums (if they qualify)
- > A health questionnaire
- > A Welcome call from SCAN

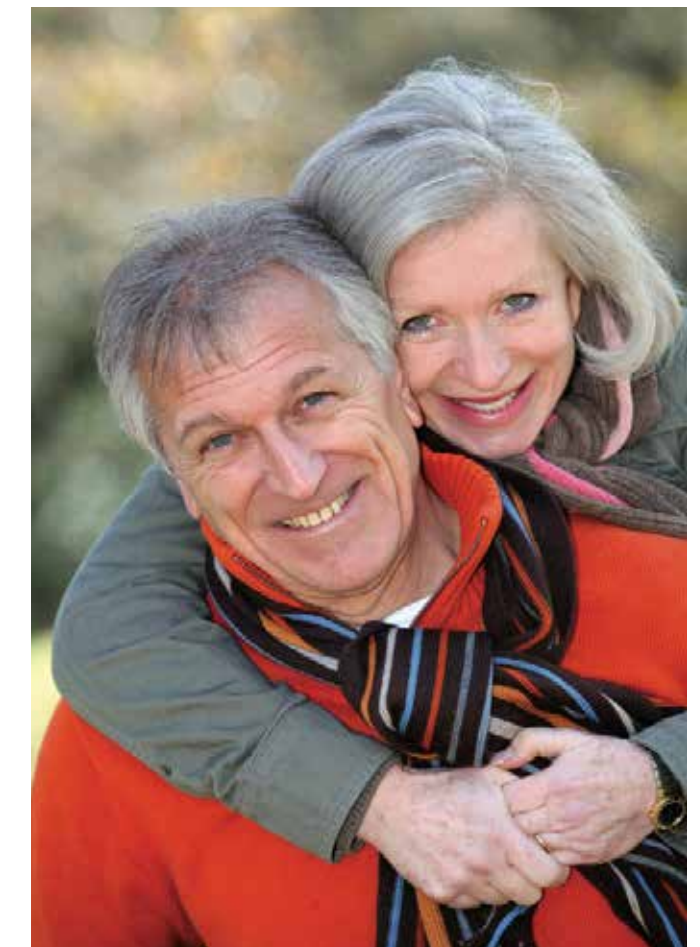


3800 Kilroy Airport Way, Suite 100
Long Beach, CA 90806

<Larry Smith>
<12 Any Street>
<Sacramento, CA 99999>

Member Card for Proof of Insurance

PLAN: <XXX X>		
ID: <30000000-01>		
NAME: <LARRY SMITH>		
DR: <MARY SMITH>	PH: <XXX-XXX-XXXX>	
MEDICAL GROUP: <GREAT BENEFITS>		
HOSPITAL: <GENERAL HOSPITAL>		
PRIMARY PHYS <X.XX>	SPECIALIST <X.XX>	EMERGENCY <X.XX>
Prescription Drug Plan		
RxBin: <003858>	Issuer: <80840>	
RxPCN: <MD>	RxGrp <AN9A>	CMS <HXXXX>< 00X>



Access to SCAN's Marketing Tools

There are 3 ways to get SCAN materials

- 1 If you don't have access to a local Agency or SCAN office, order from the Marketing Storefront at: www.scanhealthplan.com/storefront
- 2 Contact your Agency first. They should have a supply on site.
- 3 Your local SCAN office will supply up to five kits. Call your Sales Coordinator (see "CONTACT US" for phone numbers) to make arrangements for pick-up.



Marketing Storefront Instructions

- > User name is the email address or NPN number you have on file with us.
 - > If you forget your password, click the prompt on the screen and an email will be sent to you. Follow the link to change your password.
 - > Select the county, materials, and which language you wish to order.
 - > Check out, review order in cart, and confirm shipping address.
 - > 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 ordering and processing and two to three business days for delivery.

Submitting Marketing Materials for Approval

All materials that promote Medicare Advantage products or that use the SCAN logo, either in print or on your website, must be submitted to SCAN for review prior to use.

Send your materials or the request to use our logo to: SCANMarketingSubmissions@scanhealthplan.com. We'll reply within two business days with either our approval or the time frame for CMS approval (which is dependent on your material's content).

- 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 do contain specific benefits and/or a list of sales events, they must be filed with CMS, which typically requires five days. In some cases, it may require the full 45-day CMS approval.

The SCAN name, logo, and MA promotional materials may only be used with express written consent. Until you receive our email with your approval code, your materials cannot be used or distributed.

If you have additional questions please contact your SCAN Broker Account Executive.

To order customized flyers from the Marketing Storefront

- 1 For Non-Event flyers, select the County and the Preferred Flyer Layout.
- 2 For Event flyers, you must register your events with SCAN first. If they are already registered and approved by CMS, they'll be listed on the left side of any event flyer. Select up to two events per flyer.
- 3 Use the "Update Preview" button on the site to review and correct your customized flyer prior to ordering.
- 4 Check out, review order in cart, and confirm shipping address.
- 5 An email confirmation will be sent to you after order is placed; a UPS tracking number will be sent to you once shipment is mailed.



The Telesales Team

Resources & Contact List



Got general questions?

Reach out to your local Broker Account Executive (see next page).



Got sales support questions?

For help with benefits, eligibility, enrollment, network, formulary, and more, contact the Sales Support Unit (contact information below).



Need your writing number?

Contact Sales Operations – Agent Contracting
SCANBrokerContracting@scanhealthplan.com

Member Services

Monday through Friday
 8 a.m - 8 p.m. Pacific Time
 (800) 559-3500
Best time to call? Wednesday, Thursday, and Friday afternoons

Sales Support Unit (SSU)

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

Commission Assistance

SalesCompensation@scanhealthplan.com

Sales Materials

www.scanhealthplan.com/storefront

Sales Training

ScanSalesTraining@scanhealthplan.com

Sales Training Website

<https://scan.cmpsyste.com>



SSU Team (L-R)
 Michael Torres,
 Jessica Carlos,
 Elizabeth Norman,
 Tracy Patrick,
 Christian Guerrero



Broker Account Executives (L-R)
 Julie Rowlands, Dan Rivera,
 Gale Gajardo, Luz Lopez

SCAN Offices

CORPORATE OFFICE

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

REGIONAL OFFICES - CALIFORNIA

WEST

Los Angeles and Ventura Counties

Glendale Regional Office

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

Sales Coordinator:

Ana Martic (562) 989-5100

Broker Account Executive:

Luz Lopez (562) 225-4894
llopez@scanhealthplan.com

Marin, Napa and Sonoma, San Francisco, Santa Clara and San Joaquin Counties

Northern California Regional Office

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

Sales Coordinator:

Gail Chalios (650) 581-2475

Broker Account Executive:

Julie Rowlands (415) 404-2306
jrowlands@scanhealthplan.com

EAST

Riverside and San Bernardino Counties

Corona Regional Office

555 Queensland Circle, Ste. 101
 Corona, CA 92879

Sales Coordinator:

Sarah Cordova (562) 989-8387

Broker Account Executive:

Dan Rivera (949) 929-6124
drivera@scanhealthplan.com

Orange and San Diego Counties

San Diego Regional Office

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

Sales Coordinator:

Paula Villasenor (855) 670-7226

Broker Account Executive:

Gale Gajardo (714) 403-7874
ggajardo@scanhealthplan.com

SOUTH

