



Agency Guide

ROCK SOLID
scan 2016





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On behalf of our Sales Leadership team, Welcome to SCAN!

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

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

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

Thank you for partnering with SCAN.

*Holly K. Ackman
VP, Sales Operations*



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This Guide is intended for our agency partners use only.

SCAN Overview – Rock Solid!

SCAN Mission

SCAN will become one of the leading geriatric-focused health management enterprises in each of the markets in which we operate. Our mission is to continue to find innovative ways to enhance seniors' ability to manage their health and to continue to control where and how they live.

SCAN Values

Caring: We provide consistent and compassionate service to our members. We understand and appreciate the value of each team member's contributions, and constructively challenge each other to achieve our very best.

Trustworthy: SCAN is a company that stands for integrity and accountability. As SCAN employees, we can be trusted to do the right thing. We make commitments and live up to them, realizing that none of us is perfect, but that we always seek to improve.

Member Focused: Our mission is to make a difference in members' health and independence. Everything we do has an impact, whether directly or indirectly, on our ability to better serve our members.





Where We Came From: 1977 to 2016

Since 1977 SCAN Health Plan has been focusing exclusively on the unique needs of seniors and others on Medicare. Unlike most Medicare Advantage plans, SCAN has no commercial members, which allows us to dedicate 100 percent of our energy and programs toward keeping seniors healthy and independent. Our focus is providing affordable and accessible quality health care to seniors and to continue to look for innovative ways to serve over 160,000 SCAN Medicare members' healthcare needs.

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

From the beginning SCAN realized a broad base of support. From community and business leaders to local, state and federal government, there was recognition of the value of this comprehensive approach to senior care. Initial start-up and operating capital was contributed by numerous major corporations and philanthropic foundations.

In 1982 Congress invited health care companies across the country to apply to be a demonstration site for a unique program: the Social Health Maintenance Organization (SHMO). SCAN, a very small organization at that time relative to the other health plans under consideration, was awarded one of four SHMO contracts. The SCAN SHMO began operations in 1985.

The SHMO demonstrations project was extended several times over the years, during which time SCAN experienced explosive membership growth and firmly established itself as a geriatric expert. From Special Needs Plans (SNPS) to benefit plans that include many value-added services, SCAN today is meeting the needs of an increasingly diverse membership.

In 1996, SCAN expanded into three Southern California counties: Orange, Riverside and San Bernardino. Then we expanded to Ventura and Kern Counties in 2005, and in 2007 we entered San Diego County, California. The company entered the Northern California market in 2010, with Contra Costa, San Francisco, San Joaquin and Santa Clara counties. Then into Marin County, California in 2014. And for 2015, the Northern California Counties of Napa and Sonoma rounded out our service areas.



As a result of commitment to our mission, even in these times of reduced funding and the challenges that Medicare Advantage Plans face while figuring out how to best meet the needs of those eligible for Medicare – SCAN employees and our agency and agent partners live our Mission every day, whether they are on the phone or in the field, on the “front line” or behind the scenes. We see that commitment reflected in our members’ satisfaction. We are very proud that our members rate us so highly – this is what drives us. This is at the heart of all we do.

And as a result – check out our 2016 STAR ratings! Those ratings indicate the “grade” the federal government gave SCAN after measuring out ability to manage cost, provide quality services and accessibility to our members. SCAN continues to deliver on our Mission. We are very pleased to have you join us on that journey!

Partnering With SCAN is A Win-Win-Win: For You, Your Agents and for SCAN!

Why SCAN wants your agency to partner with us

7 As you will see as you read through this guide, SCAN takes our partnership with you very seriously. We have designed our internal processes around input received from our agency partners, and we continue to ask for (and receive!) ideas from you on how we can best meet your needs. But having said that, we also want you to know that there are some things about how we run our business that REGARDLESS of input, we will not change. And one of those concepts is how we select our agency partners. We have very robust guidelines in place relative to our requirements for contracting and oversight, and we will never back off from those requirements. We only work with agencies and agents who share our commitment to CMS and state regulatory compliance – and that's why we are looking to partner with **YOU!**

Why Sell Medicare Advantage

Because our population is aging. More than 15 million Americans are turning 65 in the next few years. Adding these prospects to your book of business increases your revenue and commissions and gives you a prospect base for years to come.





ROCK SOLID

SCAN 2016

Why SCAN Health Plan

As a not-for-profit health plan, SCAN is dedicated to Medicare Advantage. SCAN offers you and your clients:

- 4 Star Rating in most California counties*
- 91% Satisfaction Rating**
- Extensive network of participating providers
- Member and broker service centers in Long Beach, CA
- A portfolio of products you can sell all year long
- Access to marketing materials and tools
- Year-round training and certifications
- Lifetime renewal commissions!

** 4 Star ratings applies to all 2015 plans offered by SCAN Health Plan in CA except Healthy at Home and Village Health*

*** 2014 Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey.*

SCAN Health Plan is recognized as one of the fastest growing Medicare Advantage plans in California. For over 35 years, SCAN has been dedicated to helping members stay healthy and independent.

Why you should partner with SCAN

So, what's in it for you? Let's take a look at some of the reasons why we'll become your favorite health plan partner!

Our Sales Operations team is designed to assist you. Members of the team understand that the only reason that they have a job is because they have you, their customer, to serve. They strive every day to be responsive to any questions you might have about the contracting and onboarding process for both your agency and your agents.

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Our Broker Account Executives (BAEs) are field-based and provide concierge service to our agencies. Just a phone call away, your assigned BAE is based in your market and is responsible for triaging any issues/concerns you may have, and additionally, they are your go-to contact for training. Just pick up the phone and let them know how they can help.

Our Commissions Team ensures accurate and timely commission payments. We know that nothing is more important to you and your agents than making sure that commission payments are handled appropriately. Whether you contact them by phone or by email – this responsive group makes sure that you can get answers to any commission question you might have.

Our Sales Support Unit (SSU) is available to take your calls Monday-Friday 8 a.m. – 6 p.m. The five members of this team are your subject-matter experts! They provide answers to any question you or your agents may have. We believe that this group is best-in-class in the industry. Their knowledge and responsiveness is stellar.

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

We communicate industry and company updates in a timely and effective manner. Whether through our Monthly “Sales Core” newsletter, our email blasts that keep you updated on concepts critical for sales success, our Sales website or via our online training portal – we make sure that our Web Links and Websites have all the most relevant information to keep you compliant and help you manage your MAPD business.

Ordering marketing and enrollment materials and supplies is a snap! Sales and marketing materials are available through the SCAN Marketing Storefront. Templates for approved fliers, benefit highlights, Scope of Appointment pads – and much more are at your fingertips. Materials can be ordered for delivery, or downloaded by your agency or your agents.

SCAN can help you with your recruiting efforts. Want to increase your downline? We are always looking at opportunities to work with our agency partners and discuss ways to recruit new agents.

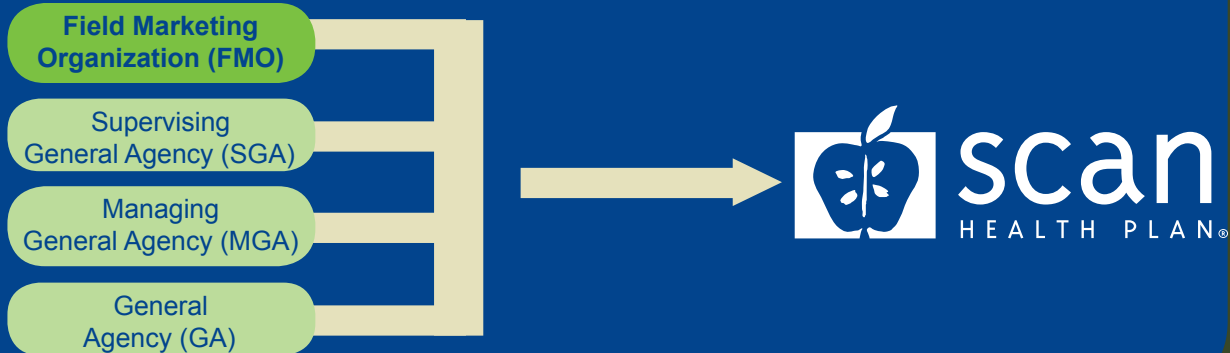
Come visit our corporate office in Long Beach! We are happy to schedule “Orientation Days” for your agency at our corporate office. Meet the SCAN team that performs all the “back office” operational activities and tour our Member Service and Marketing departments. You will like what you see.

How to get started

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

Agency/Agent Hierarchy

SCAN contracts with various broker agencies.



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

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



Aida Castellanos- Supervisor, Sales Operations, Noemi Galicia- Sales Operations Coordinator, Nichelle Brown- Sales Operations Coordinator , Karina Corrales- Sales Operations Coordinator,

Agency and Agent Training Certification Requirements

The Path to Certification for 2016

1

New Agents

Please complete all your contracting paperwork and then begin the certification process.

Returning Agents TO START

Please re-certify according to the instructions below.
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, go to the training site at <https://scan.cmpsystem.com>

- Complete our online “Selling with Integrity” module
- Attest to reviewing our P & P and Code of Conduct

Upon Completion, you may register for Tier 3 sessions.

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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!

Connections Certification Requirements

The Path to Annual Connections Certification for 2016 Connections Plan For new and returning Agents and Brokers

New Agents

You must be fully certified (with a writing number) before you can begin your Connections certification process.

Returning Agents TO START

Please re-certify according to the instructions below.
GO TO <https://scan.cmpsyste.com>

1

Complete our annual certification process to gain access to our Connections Training Calendar. Then successfully complete our facilitator-led course where you'll learn about:

- Medi-Cal general overview
- Discuss Connections Plan as a unique product in the marketplace
- Review Connections Plan benefits and services

When you pass the exam with a score of at least 85%

2

Wait for an email from SCAN Broker Contracting letting you know that your score has been recorded! You must also wait for your badge to be mailed to you before you sell!

Wait!

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SCAN Sales Trainers: Aymee Abreu - Manager, Training & Support, Tracy Patrick - Trainer, Isha Serrano - Training Coordinator

Agency Contracting Requirements

SCAN's Sales Operations team will provide you with an electronic version of SCAN's Agency Agreement ("Contract") that is specific to the agency level at which you are being onboarded. It is your responsibility to review and sign the contract and submit all required documents to SCAN within 60 days of the date upon which you signed the contract. Failure to complete all the requirements for onboarding in that time frame will necessitate a resubmission of your paperwork.

To be an authorized SCAN Agency, you must:

Complete Agency credentialing administered by SCAN or its designee and provide:

1. **A signed SCAN Agency Agreement (Contract)**
2. **State Business License**
3. **Errors & Omissions (E&O) insurance documents**
4. **W9**
5. **A signed Agency Specifications Addendum**
6. **Hierarchy Form**
7. **FDR Attestation Form**
8. **Must be a registered entity**

- Complete all levels of the SCAN Agency certification/recertification training (Tier 1, Tier 2 and Tier 3) and pass the required certification examination.
- Have a valid business insurance license and be a registered entity in the state in which you operate, be in good standing, and annually supply SCAN with copy of the license.
- Have a signed Agency executed agreement with an FMO or SCAN, as applicable.
- Agree to comply with all legal, compliance and regulatory guidance in accordance with applicable State and Federal law and SCAN policies.
- Agree to receive continuing education relative to the current Medicare Advantage Sales and Marketing guidelines and comply with any changes that occur to this program.
- Attend informational meetings in order to stay informed of compliance and regulatory changes, procedural changes, network changes, etc. and make sure an agency principal is certified annually in all SCAN required trainings.
- Agree to participate in field evaluations and secret shopping assessments, as required by CMS and SCAN.
- Have reasonable accessibility for receiving communications concerning immediate regulatory or network changes (i.e., phone, email, fax, pager, voicemail, etc.). Email address is mandatory.
- Agencies are required to have and provide to SCAN annually, the Errors and Omissions (E&O) Insurance as follows;

FMOs

Consistent with industry standards, but at no time less than \$1,000,000 per occurrence and \$1,000,000 aggregate limit, with a reasonable deductible. Shall provide evidence to SCAN that such coverage is in force prior to certification. Must notify SCAN immediately if such insurance is reduced, modified, cancelled or terminated. After onboarding, agencies are required to review the SCAN Agency Guide and attest that they will comply with all expectation and guidelines which are in accordance with CMS and DHCS guidelines.

Subordinate Agencies

FMO's must make sure that all agencies in their downline (subordinate agencies) maintain Errors and Omissions insurance in amounts consistent with industry standards, but at no time less than \$250,000 per occurrence and \$250,000 aggregate limit, with a reasonable deductible, or the applicable state required coverage amounts, and to provide evidence of such coverage upon request by SCAN.

Specifications for Agency Level Agreement

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

*Specifications subject to change by SCAN Sales Management

Requirements for Switching Hierarchies

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

SCAN allows agents with a current active status to change agency hierarchy once a calendar year. "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 for hierarchy change:

Submit to SCANbrokercontracting@scanhealthplan.com the following:

- Name of Agent
- Agent Writing Number (Rep Code)
- New Agency
- State License Number

Once documentation is submitted:

SCAN will then send a pre-populated form to the Agent for signature.

Hierarchy transfers (HTF) are processed once a calendar year, and only during the months of January through September. No transfers are allowed October through December.

The last day to submit a HTF will be September 15th for a October 1st date.

The first day to submit a HTF will be December 1st for a January 1st date.

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

If the form is received by January 1-15th the transfer will be effective February 1st

If the form is received by January 16th-February 15th the transfer will be effective March 1st

If the form is received by February 16th-March 15th the transfer will be effective April 1st

After SCAN has processed:

The hierarchy transfer, the agent will receive an email with a new writing number (Rep Code) if applicable, as well as a new password to electronic enrollment by the 25th of the month. This new rep code must be used for all new enrollments. Failure to do so will delay the processing time for the commission payment.

SCAN will send a notification to the current and the new agency notifying them of the transfer request.

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

Your agency has been onboarded with your Agency Level Agreement based on criteria established by SCAN's sales leadership. All agencies in SCAN's hierarchy must be certified, licensed and appointed to sell Medicare Advantage products in the states in which they operate. Due to the high degree of compliance necessary and the fact that Medicare Advantage products are governed by State and Federal regulations, SCAN's agencies must comply with all SCAN Health Plan ("SCAN") Policies and Procedures (P&P's). You reviewed and attested to those P&P's as part of your Tier 2 online training.

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

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

Agencies must ensure that any SCAN Contracted Agent affiliated with an FMO or a Subordinate agency be required to abide by all SCAN P&P's and regulations, including HIPAA and MIPPA requirements. Agents have attested that they have reviewed our P&P's as part of the Tier 2 online training, and the HIPAA and MIPPA guidance is part of their agent contract.

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

All levels of the agency hierarchy must be licensed by the applicable state insurance regulatory agency as an insurance agency.

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

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

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

Oversight Accountabilities cont.

If your agency conducts telephonic sales and marketing on behalf of SCAN, you are responsible for submitting telephonic sales scripts to SCAN for approval prior to implementation. And remember, only SCAN certified agents are authorized to conduct telephonic sales and marketing activities.

As stated in your contract with SCAN, you must agree to keep complete and accurate records for 10 years of all transactions connected with your agency and make those records available for examination when requested by an authorized representative of SCAN.

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

Each FMO or subordinate agency is responsible for submitting all educational or marketing/sales events, formal and informal to SCAN. The following process must be adhered to at all times.

Your local Broker Account Executive (BAE) will conduct quarterly Agency reviews for SGAs and above.

Twice a year we'll sit with you and review production to make sure you are in alignment with your agency partnership agreement. We'll take a look at your production reports, agent production, agency ranking, year-to-date production and the status of your contracted agents.

Annually SCAN will evaluate your production.

Remember - you'll need to continue to meet your production requirements. Produce enough SCAN sales and your agency may be upgraded. But missing your number may result in downgrade or even termination of your agency contract, if you don't meet the minimal production requirements.



Obligations of Agent

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

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

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

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

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

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

Prohibition on the Provisions of Meals. Agent agrees not to provide meals to prospective enrollees prior to, during or after a presentation to prospective enrollee. Light snacks as defined herein are allowed to be provided at sales presentations, events or meetings.

Appointment and Termination of Agents. Agency agrees to only use state-licensed, certified or registered individuals as Agents. Both independent Agents and internal/employed/captive Agents that perform sales/marketing activities must be licensed and appointed with SCAN. SCAN is required to report the termination of any Agent and the reason for the termination to the State in which the Agent is appointed. Therefore, Agency agrees to notify SCAN of any terminations of Agents who are subordinate to Agency or Subordinate Agency, including reason for such termination.

Agent/Agency Training. Agent agrees to meet the requirements of the Medicare Advantage Agent Addendum, including successfully completing the SCAN approved Agent/Agency certification training and passing the initial certification and annual recertification exams administered by SCAN or its designee, with a score of 85% or greater.

Oversight Requirements for Agent Performance

SCAN has established thresholds for the monitoring of performance of your agents as well as for your agency. It is your responsibility to be diligent as you observe your agents as they conduct their day-to-day sales activities and make sure they are operating in a compliant manner – and that their performance data is at an acceptable level according to SCAN’s defined thresholds. Your agents may receive progressive outreach and discipline including coaching, training, corrective action, and/or suspension or termination if in violation of the following criteria.

Rapid disenrollment, denials, withdrawals (should be 10% or below)

Late Enrollment Application Submission

CMS Secret Shopper Results

Outbound Enrollment Calls

Deficiencies identified during field or telephonic assessments

Complaints

Contracting, Licensing, Appointment, and Certification Status

Not Showing up for a Sales Event

Non-Compliant Marketing Materials/Website

This list is an example and is not all inclusive

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

It’s important for our agency partners to remember SCAN’s electronic enrollment system, “Destination Rx”, references the user ID to assign credit to an agent for an enrollment. DO NOT key enrollment forms from multiple agents under the same Destination Rx user ID.

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

Should an agency have any questions relative to what is permissible as part of the sales and marketing process, the 2015 Medicare Marketing Guidelines are posted at:

<https://www.cms.gov/Medicare/Health-Plans/ManagedCareMarketing/Downloads/2016-Medicare-Marketing-Guidelines-Updated.pdf>

Your Sales Events Submission Process

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

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

*not including SCAN observed holidays

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, except during AEP (responses can vary from two to five days).

If accepted, we will submit to CMS for approval. If rejected, we will provide the information you need to correct your request for resubmission.



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 Changes and Cancellations

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

- Communicate the change, using the original email sent to SCAN, no less than 48 hours prior to the scheduled date.
- For cancellations, your email subject line must say: Agency name, Cancelled Event. **Example: ABC Agency, Cancelled Event.**
- For modifications to location, time, date, SCAN contracted agent, or type of event (formal/informal), your email subject line must say: Agency name, Modification. **Example: ABC Agency, Modification.**

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

- 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 information
 - 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.
- 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.

If you need updated job aides or in service training please send an email to Seminarsubmission@scanhealthplan.com

Submission of Marketing Materials and Websites

Marketing materials are highly regulated. Any materials that promote Medicare Advantage products, must be submitted to SCAN for review prior to use. Send all materials to:

SCANMarketingSubmissions@scanhealthplan.com

We will reply within two business days with either an approval to use or the timeframe for approval. In general, the timeframe depends on material content:

- If the materials contain no benefit information or sales events, we will typically review and approve within the two business days.
- If the materials do contain specific benefit and/or list of sales events, they must be filed with CMS. This typically requires five days but in some cases, may require the full 45 day CMS approval.

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Until you receive our email with your approval code, the materials cannot be used or distributed.



DOs

- Submit all sales events where SCAN will be promoted to SCAN for approval.
- Include appropriate disclaimers when requesting a prospect's information or promoting a sales event via your website. SCAN will provide upon request.
- Submit any website updates to SCAN for prior approval if we are referenced.
- Submit all agency marketing materials that promote sales events to all the plan carriers that are being presented, including SCAN.
- Distribute only approved materials at the sales event.
- Always have these materials available to prospects:
 1. SCAN Sales Kit
 2. Current Star Rating sheet

DON'Ts

- Do not imply that you or your agency is endorsed by Medicare.
- Do not use the SCAN name or logo on your website without prior, documented approval from SCAN.
- Do not promote the event until you have received approval.
- Do not conduct sales events and health screenings simultaneously or back-to-back in the same vicinity.
- Do not include downloadable enrollment forms or electronic enrollment portals on your website. CMS prohibits MAPD enrollment except on the plan's primary website (www.scanhealthplan.com).
- Do not place SCAN plan materials (Evidence of Coverage, Summary of Benefits, benefit highlights, etc.) on your website. Instead, link to:

<http://www.scanhealthplan.com/scan-resources/plan-materials/>

How SCAN Monitors & Audits Our Agency Partners

Sales Integrity Oversight of SCAN Agencies & Agents

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

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

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

SCAN's Sales Integrity Assessor Program

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This is a SCAN compliance program that evaluates agent marketing and sales practices at reported marketing/sales events, and during one-on-one sales activities. The program uses both random and targeted sampling techniques to select agents to evaluate. The SCAN Sales Integrity Assessor will be in attendance and introduce themselves 10 minutes before the presentation – so this program is not “Secret”. As a part of the oversight of marketing activities, the Sales Assessor Program ensures that contracted sales agents adhere to CMS and DHCS marketing guidelines while representing SCAN Health Plan in an accurate and compliant manner. Formal Events, Informal Events, and In-Home Appointments are evaluated by Sales Integrity Assessors using an assessor tool derived from CMS Secret Shopper reports. Immediate coaching and feedback is provided to sales agents at the close of the marketing activity.

The objective of this program is to detect, correct, and report identified deficiencies and provide **immediate** feedback to sales agents to prevent deficient activity in the future. This will enable the agents who are assessed to feel confident that their prospects receive all of the required information in a compliant manner. Deficiencies will be tracked and trended in an effort to proactively alert the Sales team and our agency partners to prevent potential future deficiencies.

Sales Integrity Oversight

As a valued contracted agency that conducts sales/marketing efforts on behalf of SCAN, your agency is classified as a “First Tier Down Stream Related Entity” (FDR) in accordance with CMS guidelines. As a result, SCAN initiated the Sales Integrity Oversight program that includes an FDR Attestation process and a Monthly Random Enrollment Audit for all FDRs. With your help, the Sales Integrity Oversight program will demonstrate to CMS that SCAN and its contracted agencies are compliant with CMS guidelines.

Sources of Complaints and Allegations

Internal Sources

- Member Services
- TeleSales/Field Sales
- Field Observation
- Monthly random enrollment audits (Sales Integrity)
- Grievance and Appeals
- Healthcare services

External Sources

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

Secret Shopper

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



Step-by-step FDR Attestation Process

1

Complete Annual FDR Attestation

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

2

Demonstrate compliance with the Attestation

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

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

- a. Excluded Individuals screening: <http://exclusions.oig.hhs.gov/>
- b. Excluded Parties screening: <https://www.sam.gov/portal/public/SAM/>

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

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

(Important Note: You DO NOT need to conduct the screenings for your sales agents that are SCAN certified!).

3

Quarterly Monitoring

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

Quarterly OIG Monitoring Schedule

Quarter	Documentation Due
1	April
2	July
3	October
4	February

4

Annual Random Audit

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

FDR Attestation Process Contact:

Eddie Aguilar, Monitoring & Reporting Specialist—Sales Integrity
(562) 989-8332 eaguilar@scanhealthplan.com

Monthly Random Enrollment Audit

If selected, SCAN will send an email notification to your agency alerting you that the enrollment Attestation Form has been dropped in your secure FTP site.

Upon receiving the file(s) you will need to provide the supporting documentation listed below within five business days.

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

Enrollment Audit Contact:

Diana Navarro, Supervisor—Sales Integrity
(562) 308-1166 dnavarro@scanhealthplan.com

Corrective Action

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

Disciplinary Actions

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

- Retraining or re-education
- Recertification
- Ride-along
- Monitoring (Secret Shopping)
- Suspension of sales and marketing
- Termination

- Both For Cause and Not-for-Cause terminations may occur.
- If terminated “Not-for-Cause”, no state or federal regulatory agencies are contacted
- If terminated “For-Cause”, applicable state and federal agencies may be contacted

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

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

Agency Suspension of Sales and Marketing

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

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

A notification of suspension may be provided to your agency from one of two sources:

1. **Sales Integrity** will do the outreach when the situation involves an allegation relative to sales practices or ethical/compliant behavior.
2. **Sales Operations** will do the outreach when the situation involves a contracting, licensing, production or agency affiliation issue.

When a recommendation to suspend has been made, you will be contacted via email and mailed communication, and a follow-up call will be placed to your agency. Your agency will not be permitted to market or sell SCAN products while on suspension status. New business written during the suspension period will not be eligible for commission. Renewals, however, will be paid while on a suspension status. IT IS CRITICAL THAT YOU ADHERE TO THE PROCESS OUTLINED IN THE COMMUNICATIONS THAT YOU RECEIVE.

Agency Termination of Sales and Marketing Not-for-Cause and For-Cause

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

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

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

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

All contract and appointment terminations are classified in one of these two manners: Termination may be recommended by SCAN, an upline agency of the subordinate agency, a regulatory agency, state Department of Insurance, or an agency may request a voluntary termination or an alteration to the agency level hierarchy.

A **Not-for-Cause** termination can be initiated by multiple stakeholders, including the agency themselves. Retirement, relocation, expired license, expired E&O insurance coverage or disciplinary actions are among the reasons for agency termination. Should termination be necessary, your agency will be mailed/emailed a termination notification letter that will identify the effective termination date as identified in your agency level contract. For terminations requested by SCAN, your entire downline is assigned to the next hierarchy level as of the termination effective date.

A **For-Cause** termination can be initiated by SCAN or by an external regulatory agency. A For-Cause termination notification letter, detailing the offense, termination effective date, and the appeal process, is sent to the agency via an overnight delivery vendor, and all up and downline agencies are notified of the termination. Downline agents are reassigned to the next highest entity in the hierarchy as of the effective termination date.

Agency Reporting Requirements

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

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1

Compliance Attestation Process for First Tier, Downstream or Related Entities (FDR). Medicare program requirements apply to all employees of FDRs who provide health or administrative services to an enrollee; your agency is an FDR and therefore required to provide this information annually! SCAN's FMOs receive this attestation form(s) from SCAN's Sales Integrity team and the FMO is required to triage the collection of the required information from each of their downline agencies and provide it back to Sales Integrity. This form must be completed upon contract execution (or earlier if required) and SCAN issues a new request to the FMO's each December and requires them to collect new attestation forms from their downline agencies and respond by February annually thereafter. An agency's failure to provide this documentation may result in contract suspension or termination.

This form requires that our agency partners have compliance policies and procedures and Standards of Conduct that meet CMS requirements and, if they do not, that FDRs distribute SCAN's Standards of Conduct and compliance P&P's to their downline.

- Have written compliance policies and procedures and Standards of Conduct that they can distribute to their company employees.
- Requires that all agency employees take annual Compliance and Fraud, Waste and Abuse training within 90 days of hiring and annually thereafter.
- Attest that they have reviewed the DHHS OIG list of Excluded Individuals and Entities and the GSA Excluded Parties Lists System prior to hiring or contracting of any new associate and that they have a process in place to monitor the entities with which it contracts to make sure they are in compliance with all applicable laws and regulations. SCAN is held accountable for collecting this information – and we take very seriously any delay in the provision of the required documentation.

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

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

2

Monthly OIG Screening documents: Agencies are expected to screen staff members and contracted organizations prior to contracting and monthly thereafter. Screen prints of search results are expected to be saved incase audited.

3

Quarterly OIG Attestation: A quarterly “Exclusions List Verification Certification” attestation form is sent to agencies and will need to be returned to SCAN.

4

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

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Commissions/Compensation

Agency Administrative Services

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

Commission is a form of compensation given to an agent for new enrollments and membership renewals of consumers in the plan that best meets the consumers' health care needs. Plan sponsors are not required to compensate agents or brokers for selling Medicare products, but since SCAN does compensate our agents, our compensation to both agents and agencies complies with CMS and other regulatory guidance. Most agents are paid directly by SCAN – but there is a process in place for Assignment of Commissions if the agent wants to have their upline agency receive payment on their behalf.

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

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

Compensation Overview

Change in Payee

When requesting changes to the payee name or Tax ID, you must submit a new W-9 to SCANbrokercontracting@scanhealthplan.com. This will ensure the payments are issued accurately. The change will take effect in the next commission cycle provided that the request was submitted prior to the 15th of the 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.

When requesting a payee change to a corporation, you must provide proof of either the corporation state license, indicating you are an endorsed agent or proof of registered entity with the state, county or city along with the new W-9.

The business rule regarding W-9 is listed below:

- DBA limited to family members
- Requesting new W-9's from the brokers where a non-certified agency was listed.

Address Updates

To ensure all payments are sent to the correct address, submit a new W-9 to:

SCANbrokercontracting@scanhealthplan.com

The change will take effect in the next commission cycle provided that the request was submitted prior to the 15th of the month.

Assignment of Commission (AOC)

If you have assigned your commission to your SCAN-contracted direct agency, the commission amount you have assigned will be issued to your agency.

Our agency and agent partners are paid in accordance with the rates and provisions set forth below. These provisions may be amended by SCAN in accordance with CMS regulations.

Agency Commission Rates - Initial Year

	California
GA	\$100.00
MGA	\$125.00
SGA	\$150.00
FMO	\$200.00

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

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

Chargebacks

If an enrollee leaves the plan prior to month four (4), no compensation is earned and a one hundred percent (100%) chargeback will be made to compensation calculations (90-day chargeback period).

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

SCAN Offices

Corporate Office

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

Regional Offices

Los Angeles and Ventura Counties

Glendale Regional Office

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

Sales Coordinator:

Ana Martic (818) 550-4902

Broker Account Executive:

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

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

Northern California Regional Office

1255 Treat Blvd. Ste. 360
Walnut Creek, CA 94597

Sales Coordinator:

Gail Chalios (650) 581-2475

Broker Account Executive:

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

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

Additional Contact Information

Commission Assistance

SalesCompensation@scanhealthplan.com
(562) 637-1220

Contracting

SCANBrokerContracting@scanhealthplan.com

Event Submission

SeminarSubmission@scanhealthplan.com

Marketing Materials

SCANMarketingSubmissions@scanhealthplan.com

Sales Materials

www.scanhealthplan.com/storefront

Sales Support Unit

(888) 445-2038

Training

SCANSalesTraining@scanhealthplan.com
<http://scan.cmpsyste.com>

