

Medicare Advantage Commission Schedule – Attachment D

Effective January 1, 2025

Providence Health Assurance (PHA) New Appointment

Before selling our Medicare Advantage products, you must be an appointed Producer and meet the following requirements for our Medicare Advantage product line.

- Complete and return our appointment application. Please provide all information requested, including references. The application will be reviewed with consideration for:
 1. Professional association affiliation
 2. Medicare Advantage plan health insurance focus
 3. Congruence with Providence core values
- The application includes:
 1. A completed Agency and Commission Agreement
 2. A copy of current Errors and Omissions Policy, stating policy holder name, policy limits (\$1 million minimum aggregate coverage), and policy effective dates
 3. A copy of your current producer/agency license(s)
 4. A completed W-9 form for accounting purposes
- Complete and pass the online Providence Medicare Advantage Plans Certification Training which consists of:
 1. CMS required information such as plan offerings and enrollment process
 2. Providence Medicare Advantage Plans Certification Test (must receive a passing score of 85% or greater)
 3. Provide a copy of the AHIP, NAHU or Pinpoint Medicare training certificate

Please note the following:

- Agents appointed under an upline agency who desire a different upline agency or seek a direct appointment with PHA must first obtain a release from their current agency before PHA will appoint or transfer them. In the absence of a release, agents are required to wait 3 months before switching GAs or obtaining a direct appointment with PHA.
- Moving to a different upline agency or seeking a direct appointment with PHA will only be allowed once per calendar year
- Changing appointment status will not be allowed from October 1 – December 15

Maintaining Existing Appointment

Insurance agents who are currently appointed with Providence Health Assurance are required to meet the following appointment standards:

- Maintain current license(s)
- Maintain \$1 million in errors and omissions coverage at all times
- Comply with all the provisions of the Agency and Commission Agreement
- Complete the online Providence Medicare Advantage Plans Recertification Training and pass the product test with a score of 85% or greater
- Provide a copy of the AHIP, NAHU or PinPoint Medicare training certificate

Commission Schedule

Commission schedule for approved Medicare Advantage contracts:

- Commission schedule will adhere to the Centers for Medicare & Medicaid Services (CMS) agent/broker compensation maximum amount allowed to be paid to agents/broker for Initial and Renewal enrollment for the plan year
- Initial Compensation is paid at the fair market value (FMV) cut-off amount published by CMS annually, as long as the member(s) policy is active and the agent's Medicare Advantage appointment is in good standing
- Renewal compensation is paid at fifty (50) percent of the initial compensation, as long as the member(s) policy is active and the agent's Medicare Advantage appointment is in good standing

- The enrollment (Initial or Renewal) is determined by CMS and reported to PHA monthly. PHA will adjust the commission (Initial or Renewal) based on the monthly report from CMS.
- After the 1st year of enrollment with PHA, renewal commission will be paid on a per member per month basis (PMPM)

Oregon & Washington	
Initial Compensation	\$626 lump sum
Renewal Compensation	\$313 lump sum
Renewing PMPM Compensation	\$26.08 PMPM

California	
Initial Compensation	\$780 lump sum
Renewal Compensation	\$390 lump sum
Renewing PMPM Compensation	\$32.50 PMPM

- If the policy is a new enrollment to Providence Health Assurance, we will pay a lump sum payment for the entire year. The lump sum will be either \$626/\$780 or \$313/\$390 if the member does not meet CMS definition of initial.
- Unless advised differently by CMS, renewal commission will be paid for the lifetime of the policy assuming the Agent and the Member contract is in good standing
- Commission may change from year to year based on the Agent Broker Compensation amounts released by CMS annually
- Commissions shall be issued twice a month to the appointed agency. If appointed directly, commissions will be paid to the producer.
- Any disputes in payment for new Medicare enrollments must be submitted to PHA by the appointed producer / agency within 90 days of the effective date of the plan. Any disputes in payment for an existing Medicare enrollment need to be submitted to PHA by the appointed producer / agency within 180 days of the last received payment. After review by PHA, if PHA determines payment is due, the payment will be included the following month.

- PHA will not accept payment disputes for new Medicare enrollments past the 90-day threshold. For payment disputes for an existing Medicare member, Providence Medicare Advantage Plans will not accept payment disputes past a 180-day threshold.
- PHA is required to recover, per CMS, all commission payments when a Medicare beneficiary disenrolls from the plan within the first three months of enrollment (rapid disenrollment). If a beneficiary disenrolls after the first three months, all unearned initial commission payments are recovered.