

**Health First Administrative Plans, Inc.**  
**Medicare Advantage/Commercial Group Medicare**  
**Referral Compensation Agreement**

As a Licensed Insurance Agent/Broker in Florida, you may refer prospects who are eligible or soon to become eligible to enroll in a Medicare Advantage (MAPD)/Commercial Group Medicare plan to Health First Health Plans, Inc. (HFHP)/AdventHealth Advantage Plans. As our licensed Medicare Sales Representatives enroll these clients, the following referral fees and renewals will be paid to the referring agent. No advertising, telemarketing, door- to-door solicitation or any other form of proactive marketing may be done in order to obtain the clients' name for referral to HFHP/AdventHealth Advantage Plans. You must hold a valid Florida Health Insurance license and have an active appointment with HFHP in order to participate in this program.

HFHP/AdventHealth Advantage Plans does not allow the sale of a MAPD/Commercial Group Medicare product to a Medicare-eligible applicant without an active appointment.

HFHP/AdventHealth Advantage Plans Medicare Sales Representatives are responsible for presenting the sale and assisting in the completion of the prospect's application for enrollment. The prospective member must contact our Customer Service Department at 321.434.5665 or 800.716.7737 with any questions, or to request an enrollment form or in-home appointment.

**Initial sale**

**MAPD/Commercial Group Medicare**

HFHP will compensate the referring agent \$100 per approved application by CMS. The referral fee will be paid upon the member remaining in the plan for 90 consecutive days.

**Renewals**

**MAPD/Commercial Group Medicare**

One annual renewal commission of \$75 will be paid to the referring agent for each Medicare member who has been referred, approved and effective on a HFHP/AdventHealth Advantage Plan for 12 consecutive months. The renewal payment will be made on the 13th month following the initial contract date of the member.

**Cancellations and Chargebacks**

A referral fee will not be paid if the referred Medicare member does not remain on the HFHP/AdventHealth Advantage Plans for a minimum of 90 consecutive days. Once the referral payment has been made for referral members, the payments made will be 100 percent earned, with no chargebacks occurring. Rapid disenrollments will be tracked on each Agent/Broker who completes the sale.

**Miscellaneous Conditions**

For referral commissions to be paid, leads from the agent must be received by HFHP online Accessing the Medicare Referral Form on the Broker Portal under Medicare Sales.

New sales referral fee rates and eligibility requirements are subject to change at HFHP's/AdventHealth Advantage Plans discretion with 30 days written notice. This addendum pertains to all HFHP/AdventHealth Advantage Plans MAPD/Commercial Group Medicare plans and may be terminated in its entirety by HFHP, with 30 days written notice, or immediately required by any change in state or federal law, CMS guidance or regulations. Please reference Agent/Broker Compensation Code of Federal Regulation 42 CFR 422.2274(a), 423.2274(a) for additional information. This contract is contingent upon the agent's/broker's compliance with the Agent/Broker Referral Addendum and the Agent/Broker Code of Ethics. HFHP/AdventHealth Advantage Plans has the right to monitor compliance through analysis of complaints or enrollee satisfaction surveys and other resources to obtain enrollee input. If HFHP/AdventHealth Advantage Plans believes a referring agent is not complying with the terms of the agreement, sending over lead lists of prospective members, attempting to complete the sale, or represent HFHP/AdventHealth Advantage Plans the agreement will be terminated immediately.

Controlling Documents: To the extent that there exists a conflict between this Medicare Advantage Agent Agreement, Medicare Advantage Referral Compensation Agreement and the Health First Administrative Plan Broker Agreement, the terms, conditions, covenants, and/or provisions of the Medicare Advantage/Commercial Group Medicare Agent Agreement shall prevail. Whenever possible, the provisions of such documents shall be construed in such a manner as to avoid conflicts between the provisions of the various documents.

\_\_\_\_\_  
Agent Signature

  
\_\_\_\_\_  
Vice President, Sales & Business Development

\_\_\_\_\_  
Agent Name (Print)

\_\_\_\_\_  
Jason Alford

\_\_\_\_\_  
Date