

2021

Producer Guide



Medicare

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Molina & Our Partnership with You

Dear Broker Partner,

We want to thank you for contracting and becoming ready to sell our Molina Medicare products.

Here at Molina, we know the valuable role that you play with our members and the people we serve in your communities. Your partnership makes it possible for many Molina members to lead healthier lives. You make a listing difference for our members, and everyone we serve.

With all the changes and improvements this year, we know the changes we've made will help make doing business with us that much easier. We encourage you to spend time reviewing our updated Producer Guide for information on our products, contracting requirements, various enrollment options and much more. The table of contents is an easy way to navigate through the Producer Guide to better help you find the exact information you are looking for.

We are here to support you in growing your business with Molina. Here's to another healthy and successful year for us all.

Sincerely,

Dave Peters
AVP, Medicare National Distribution



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1. Introduction

Producer Communications

Overview

What Makes Molina Unique

Why Selling Molina Medicare is a Great Opportunity for You

Producer Communication

You will regularly get information from us through Constant Contact via email.
We will provide updates on:

- Products and benefits
- Updated marketing materials
- Compliance information
- Training

We send communications to the email you gave us when you first contracted.
To start receiving our communications at a new email address, or if you're not getting our communications, please call or email the Broker Services.

- It's your responsibility to make sure we have a valid email address on file.
- To help ensure you receive our emails, please add our sender address Broker@MolinaHealthcare.com to your email address book or contact list.

Overview



Molina Healthcare, Inc., a FORTUNE 500, multi-state healthcare organization, arranges for the delivery of healthcare services to individuals and families who receive their care through the Medicaid and Medicare programs, and through the state insurance marketplaces (the "Marketplace").



Through our locally operated health plans in 12 states (including MMP plans) we serve over 110,000 Medicare members as of October 2020.



Molina was founded in 1980 as a provider organization serving low-income families in Southern California. We were originally organized in California as a health plan holding company and reincorporated in Delaware in 2002.



Molina's mission is to provide quality health care services to financially vulnerable families and individuals who are covered by government programs.

What Makes Molina Unique

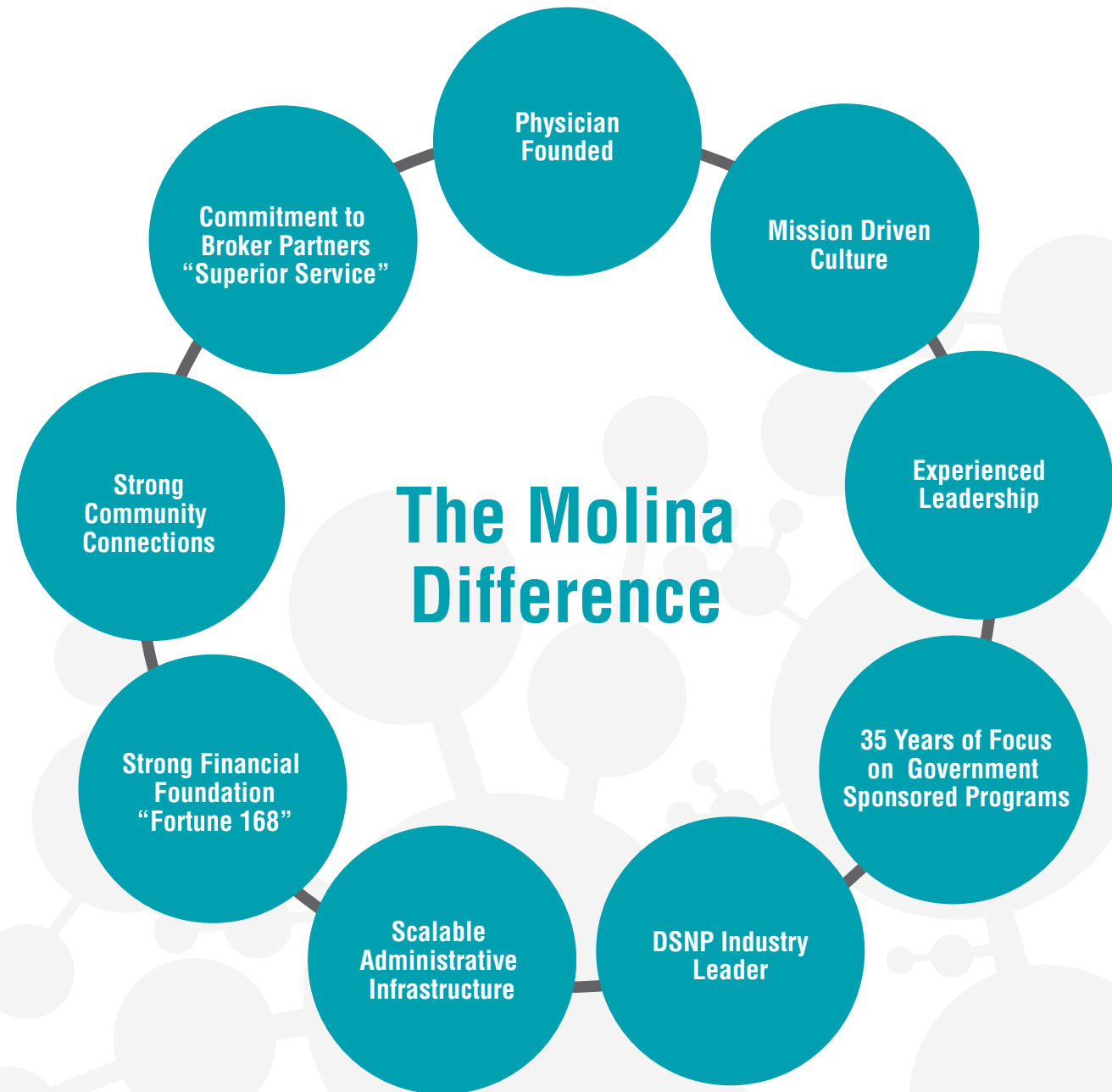
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Producer Communications

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What Makes Molina Unique

Why Selling Molina Medicare is a
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1. Introduction

Producer Communications

Overview

What Makes Molina Unique

Why Selling Molina Medicare is a
Great Opportunity for You

Why Selling Molina Medicare is a Great Opportunity for You

The Medicare Beneficiary Population:



Currently, 44 million beneficiaries-some 15 percent of the U.S. population-are enrolled in the Medicare program. Enrollment is expected to rise to 79 million by 2030.



Only one in 10 beneficiaries relies solely on the Medicare program for health care coverage. The rest have some form of supplemental coverage to help with medical expenses.

Molina wants you to be our partner and make it easy to do business:

- Molina Medicare products offers the opportunity to sell during the entire year, an extensive network of providers, lifetime renewal compensations, and an online training and certification system for your convenience.
 - As our partner, you will enjoy the benefits of working with an engaged team in serving our members and bringing high quality medical coverage to Medicare beneficiaries.
 - Our Broker Services is ready to assist you with all of your needs in marketing Molina Medicare's products, including assistance with sales materials, and answering any questions you may have regarding our products or the enrollment process. Experienced Broker Channel Leadership here to help you.

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2. Products to Grow Your Business

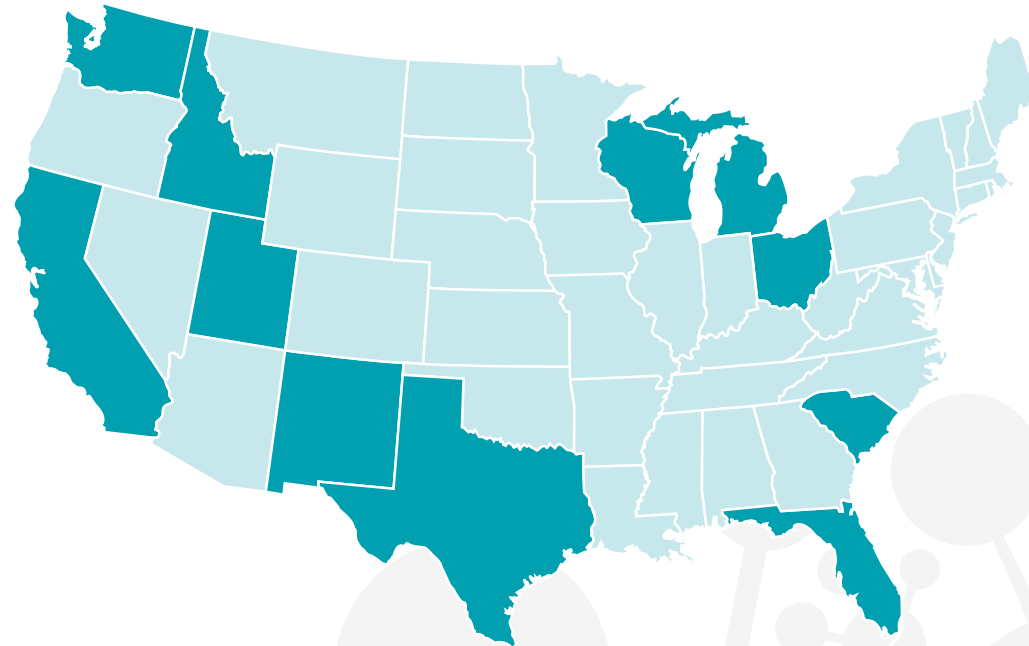
National footprint

2021 Product Portfolio

2021 Service Areas

National Footprint 2021

Service Area



State	2020 Existing Medicare Counties	2021 Expansion Medicare Counties
CA	5	5
FL	6	7
ID	21	21
MI	20	41
NM	12	23
OH	27	71
SC	43	43
TX	34	52
UT	9	9
WA	13	17
WI	24	29
TOTAL	214	318

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2. Products to Grow Your Business

National footprint

2021 Product Portfolio

2021 Service Areas

2021 Product Portfolio

NEW Product Names

► **D-SNP:** Molina Medicare Complete Care (HMO D-SNP)

► **MAPD:** Molina Medicare Choice Care (HMO)

Supplemental Benefit Vendors for 2021

Molina Healthcare is thrilled to begin new partnerships with these nationally recognized Companies. Partnering with customer focused organizations such as Delta Dental, Access2Care and HearUSA will allow Molina to enhance our members satisfaction, customer loyalty and retention.



Delta Dental is the largest insurer in the U.S. servicing nearly 60 million enrollees. With Delta Dental's direct-contracted provider network, our members will have greater access to care. www.deltadentalins.com/molinahealthcare



With a national footprint and advanced customer care technologies, A2C has the ability to hone-in on member-specific requirements and preferences including options for: rideshare, mileage reimbursement, and special services for members needing a ride to the pharmacy, their provider, or hospital due to chronic conditions. www.access2care.net



This new partnership with HearUSA allows for greater flexibility, letting us offer market-specific hearing aid benefit designs. www.hearusa.com
MA/DSNP: <https://www.hearusa.com/members/molina-medicare>
SC MMP: <https://www.hearusa.com/members/molina-health-connections>



ConveyHealthSolutions.com provides over the counter catalog for our members and new for 2021 they will provide, upon request, a OTC debit card which can be used at Walmart. Order online - visit MolinaHealthcare.com. Order by phone: call an OTC Advocate toll-free at (866) 420-4010 (TTY/TDD: 711), Monday to Friday, 8 a.m. to 11 p.m. (Eastern Standard Time), excluding holidays.



Silver Sneakers is providing the fitness benefit for our members. Our members can get 2 at-home fitness kits or join a participating gym.



March Vision Care is one of the nation's most popular and relied upon vision care networks.



They will be an active partner not only dispensing prescription eyewear but helping us protect our member's eye health.

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2021 Service Areas

2. Products to Grow Your Business

National footprint

2021 Product Portfolio

2021 Service Areas



CA D-SNP
Molina Medicare Complete Care
Available Counties:
Imperial
Los Angeles
Riverside (partial)
San Bernardino (partial)
San Diego



FL D-SNP
Molina Medicare Complete Care
Available Counties:
Broward
Hillsborough
Miami-Dade
Palm Beach
Pasco
Pinellas
Polk



ID FIDE SNP
Molina Medicare Complete Care
Available Counties:
Ada
Bannock
Bingham
Boise
Bonner
Bonneville
Boundary
Canyon



Cassia
Elmore
Fremont
Gem
Jefferson
Kootenai
Madison
Minidoka
Nez Perce
Owyhee
Payette
Power
Twin Falls

ID MAPD
Molina Medicare Choice Care
Available Counties:
Ada
Canyon
Twin Falls

MI D-SNP
Molina Medicare Complete Care
Available Counties:
Allegan
Antrim
Arenac
Barry
Bay
Branch
Charlevoix
Clare

Crawford
Genesee
Grand Traverse
Gratiot
Huron
Kalkaska
Kent
Lake
Lapeer
Leelanau
Livingston
Macomb
Manistee
Mason
Mecosta
Missaukee
Monroe
Montcalm
Muskegon
Newaygo
Oakland
Oceana
Osceola
Otsego
Ottawa
Roscommon
Saginaw
Sanilac
Shiawassee
Tuscola
Washtenaw
Wayne
Wexford

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2021 Service Areas

2. Products to Grow Your Business

National footprint

2021 Product Portfolio

2021 Service Areas



NM MAPD Molina Medicare Complete Care Available Counties:

Bernalillo
Chaves
Cibola
De Baca,
Dona Ana
Grant
Guadalupe
Lincoln
Los Alamos
Luna
McKinley
Mora
Otero
Rio Arriba
Roosevelt
San Juan
San Miguel
Sandoval
Santa Fe
Sierra
Socorro
Torrance
Valencia



OH D-SNP Molina Medicare Complete Care Available Counties:

Adams

Auglaize
Brown
Butler
Carroll
Champaign
Clark
Clermont
Clinton
Columbiana
Coshocton
Crawford
Cuyahoga
Darke
Defiance
Delaware
Erie
Fairfield
Fayette
Franklin
Fulton
Gallia
Geauga
Guernsey
Greene
Hamilton
Hardin
Harrison
Henry
Highland
Hocking
Holmes
Jackson
Lake

Lawrence
Licking
Logan
Lorain
Lucas
Madison
Mahoning
Marion
Medina
Meigs
Mercer
Miami
Monroe
Montgomery
Morgan
Morrow
Noble
Ottawa
Paulding
Perry
Pickaway
Pike
Preble
Portage
Putnam
Shelby
Stark
Summit
Trumbull
Union
Van Wert
Vinton
Warren

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2021 Service Areas

2. Products to Grow Your Business

National footprint

2021 Product Portfolio

2021 Service Areas



SC D-SNP Molina Medicare Complete Care Available Counties:

Washington
Williams
Wood
Wyandot
Abbeville
Aiken
Allendale
Anderson
Bamberg
Barnwell
Beaufort
Berkeley
Calhoun
Charleston
Chester
Chesterfield
Clarendon
Colleton
Darlington
Dillon
Dorchester
Edgefield
Fairfield
Florence
Georgetown
Greenville
Greenwood
Hampton
Horry



TX D-SNP Molina Medicare Complete Care Available Counties:

Jasper
Kershaw
Laurens
Lee
Lexington
Marion
Marlboro
McCormick
Newberry
Orangeburg
Pickens
Richland
Saluda
Spartanburg
Sumter
Union
Williamsburg
York
Anderson
Atascosa
Austin
Bandera
Bexar
Cameron
Camp
Chambers
Cherokee
Collin
Cooke

Comal
Dallas
Delta
Duval
El Paso
Fannin
Fort Bend
Franklin
Harris
Hidalgo
Hopkins
Houston
Hudspeth
Jim Hogg
Kendall
Liberty
Marion
Maverick
McMullen
Medina
Morris
Montgomery
Navarro
Panola
Rains
Rusk
Rockwell
San Jacinto
Starr
Smith
Tarrant
Trinity
Upshur
Waller

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2021 Service Areas

2. Products to Grow Your Business

National footprint

2021 Product Portfolio

2021 Service Areas

Webb
Wharton
Willacy
Wilson
Wise
Wood
Zapata



UT D-SNP Molina Medicare Complete Care Available Counties:

Box Elder
Cache
Davis
Iron
Salt Lake
Tooele
Utah
Washington
Weber

UT MAPD Molina Medicare Choice Care Available Counties:

Box Elder
Cache
Davis
Salt Lake
Summit
Tooele
Utah
Webber



WA D-SNP Molina Medicare Complete Care Available Counties:

Adams
Clark
Cowlitz
King
Kitsap
Lewis
Mason
Pierce
Skagit
Snohomish
Spokane
Stevens
Thurston
Walla Walla
Whatcom
Whitman
Yakima



WI D-SNP Molina Medicare Complete Care Available Counties:

Brown
Calumet
Dodge
Door
Florence
Fond du Lac
Forest

Green Lake
Jefferson
Kenosha
Kewaunee
Langlade
Manitowoc
Marinette
Marquette
Milwaukee
Oconto
Outagamie
Ozaukee
Portage
Racine
Shawano
Sheboygan
Walworth
Washington
Waukesha
Waupaca
Waushara
Winnebago

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Broker Resource and Online Tools

3. Broker Resources and Online Tools

Molina Medicare Broker Services

Molina Medicare Broker Services
Contact Information

Broker Channel Managers by State

Brand website	www.MolinaHealthcare.com
Find a provider	https://providersearch.molinahealthcare.com/?redirectfrom=molinastaticweb
Formulary	https://www.molinahealthcare.com/members/ut/en-US/hp/medicare/drug/Pages/drug.aspx
Callidus Broker Portal Link	https://molina.callidusinsurance.net/ICM/
Electronic Enrollment 2021	https://molina2.destinationrx.com/PC/2021
Searching the Molina formulary	https://www.youtube.com/watch?v=Zn9xRPgWaIU
Find a PCP	https://www.youtube.com/watch?v=snHfh9AEgRY
Find a pharmacy	https://www.youtube.com/watch?v=-rJwH8RR8KY
Find the evidence of coverage or member handbook	https://www.youtube.com/watch?v=vfnljyEDbwM
Litmos (Certification)	https://molina.litmos.com/account/Login

State	Plan	Contact #	Plan ID	Plan Materials Page
CA	D-SNP (Imperial)	H5810	013	www.MolinaHealthcare.com/members/ca/en-US/mem/medicare/drug/Pages/plan-materials.aspx
CA	D-SNP (S CA)	H5810	001	www.MolinaHealthcare.com/members/ca/en-US/mem/medicare/drug/Pages/plan-materials.aspx
FL	D-SNP	H8130	001	www.MolinaHealthcare.com/members/fl/en-US/mem/medicare/drug/Pages/plan-materials.aspx
ID	FIDE-SNP	H5628	008	www.MolinaHealthcare.com/members/id/en-US/mem/medicare/drug/Pages/plan-materials.aspx
ID	MAPD (Ada, Canyon)	H5628	009	www.MolinaHealthcare.com/members/id/en-US/mem/medicare/plans/opt/Pages/plan-materials.aspx
ID	MAPD (Twin Falls)	H5628	010	www.MolinaHealthcare.com/members/id/en-US/mem/medicare/plans/opt/Pages/plan-materials.aspx
MI	D-SNP	H5926	001	www.MolinaHealthcare.com/members/mi/en-US/mem/medicare/drug/Pages/plan-materials.aspx
NM	MAPD	H9082	007	www.MolinaHealthcare.com/members/nm/en-US/mem/medicare/drug/Pages/plan-materials.aspx
OH	D-SNP	H8176	002	www.MolinaHealthcare.com/members/oh/en-US/mem/medicare/drug/Pages/plan-materials.aspx
SC	D-SNP	H8176	001	www.MolinaHealthcare.com/members/sc/en-US/mem/medicare/plans/hmosnp/Pages/plan-materials.aspx
TX	D-SNP	H7678	001	www.MolinaHealthcare.com/members/tx/en-US/mem/medicare/drug/Pages/plan-materials.aspx
UT	D-SNP	H5628	001	www.MolinaHealthcare.com/members/ut/en-US/mem/medicare/plans/opt/Pages/plan-materials.aspx
UT	MAPD	H5628	007	www.MolinaHealthcare.com/members/ut/en-US/mem/medicare/plans/healthyadvplus/Pages/plan-materials-happlus.aspx
WA	D-SNP	H5823	006	www.MolinaHealthcare.com/members/wa/en-US/mem/medicare/drug/Pages/plan-materials.aspx
WI	D-SNP	H2879	001	www.MolinaHealthcare.com/members/wi/en-US/mem/medicare/drug/Pages/plan-materials.aspx

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3. Broker Resources and Online Tools

Molina Medicare Broker Services

Molina Medicare Broker Services
Contact Information

Broker Channel Managers by State

Molina Medicare Broker Services

Key Functions:

- Contracting, certification and compensations
- Ready to sell information
- Support for Molina online tools
- Verification of member enrollment status

Contracting and Hierarchy Assistance:

- New and returning Producer contracting setup
- Onboarding maintenance and changes
- Tax ID changes
- Principal changes
- W9 and payee changes (banking)
- State appointment requests
- Producer of record reassignment

Additional Services Available:

- Formulary look-up
- Compensation assistance
- Compliance requirements
- Service areas
- Personal assistance with member escalated issues
- Provide prospect Medicare and Medicaid eligibility levels
- Provide Medicaid/Medicare LIS Levels
- Provider network look-up
- Benefit information

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Molina Medicare Broker Services
Contact Information

Broker Channel Managers by State

Molina Medicare Broker Services Contact Information

Hours of Operation:

Monday – Friday
7:00 AM – 6:00 PM Mountain Time

Telephone:

866-440-9788

Enrollment Fax:

844-541-6848

General Fax:

866-891-2422

Email:

General mailbox:

Broker@MolinaHealthcare.com

Enrollment inquiry:

MCREnrollment@MolinaHealthcare.com

Commission inquiry:

MCRCommissionInquiry@MolinaHealthcare.com

Contracting:

MCRBrokerContracting@MolinaHealthcare.com

CARE:

MedicareBrokerCAREteam@Molinahealthcare.com

Logo Request:

MolinaLogoRequest@Molinahealthcare.com

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Molina Medicare Broker Services
Molina Medicare Broker Services
Contact Information

Broker Channel Managers by State



California
JoJo Morales
Medicare Broker Channel Manager
JoJo.Morales@MolinaHealthcare.com
(562) 881-9711



Florida
Eric Smith
Medicare Broker Channel Manager
Eric.Smith@MolinaHealthcare.com
(727) 207-3333



Utah/Idaho
Jim Spencer
Medicare Broker Channel Manager
James.Spencer@MolinaHealthcare.com
(801) 871-9251



New Mexico
Sophia Flores
Medicare Broker Channel Manager
Sophia.Flores@MolinaHealthcare.com
(575) 339-5935

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3. Broker Resources and Online Tools

Molina Medicare Broker Services
Molina Medicare Broker Services
Contact Information

Broker Channel Managers by State



Michigan/Wisconsin

Greg Beck

Medicare Broker Channel Manager

Greg.Beck@MolinaHealthcare.com

(248) 330-1869



Ohio

Lytoria Whitfield

Medicare Broker Channel Manager

Lytoria.Whitfield@MolinaHealthcare.com

(330) 418-9262



South Carolina

Kevin OConnor

Medicare Broker Channel Manager

Kevin.OConnor1@MolinaHealthcare.com

(843) 408-6650



Washington

Kimberlee Modrow

Medicare Broker Channel Manager

Kimberlee.Modrow@MolinaHealthcare.com

(253) 307-6830

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Overview of what you need to be Ready to Sell (RTS):

4. To Be Ready To Sell (RTS)

Overview

You work very hard to enroll your clients into Molina Medicare and we want to make sure you are compensated! This RTS section walks you through the critical requirements needed for you to write on behalf of Molina Medicare and be eligible for compensation.

IN ORDER TO WRITE and BE ELIGIBLE FOR COMPENSATION for ANY Molina Policy:

- Molina contract
- You must have a signed Participating Producer (Independent Producer)
- If you are a Licensed Only Agent (LOA) or LOA Telesales Agent, no Molina contract needs to be signed.
- You must have a passed background check at the time you write the policy
- You must have successfully completed the current selling year Molina certification process at the time you write the policy
- You must have a current Errors and Omissions Insurance Policy with your name on it on file with us at the time you write the policy
- You must have a current State license in the state(s) you are contracted with us at the time you write the policy
- You must have a current Appointment in the state(s) you are contracted with us at the time you write the policy
- You will receive a formal *Welcome letter* once you are Ready to Sell in the state(s) listed in your *Welcome Letter*. Until you receive your *Welcome Letter*, you are not Ready to Sell.
- All Principals must be certified, licensed and properly appointed in ALL states and markets where their Participating Producers intend to sell

4.1 Contracting, Licensing & Appointment

Contracting Types

Contracting Process

Contract Level or Participating Producer Change

Upline Administrative Services, Duties, Obligations and Required Activities

Release and Constructive Release Guidance & Process

Release and Constructive Release of Agency

Requesting Appointments & Adding States

E & O Insurance Requirements

Contracting Types:

Producer Level to be determined by your Agency, which is your direct upline.

- Participating Producer
- LOA Licensed Only Agent (Participating Producer)
 - LOA's are no longer required to have a contract. Your direct upline agency's contract allows you to continue to sell on behalf of Molina Healthcare.
 - If the employer or upline terminates a Producer, the Producer is deemed released from the agency.
- LOA Telesales (Participating Producer).

Contracting Process

Agency:

- Receive invitation for agency to complete contract.
- Log into Workflow and complete onboarding.
- Once appointment(s) complete, Principal Producer will receive invitation to onboard.
- Follow LOA producer process

Participating Producer:

- Receive invitation for Participating Producer to complete contract.
- Log into Workflow and complete onboarding and annual certification.
- Welcome Letter-with writing# and appointed state(s)

LOA Licensed only agent (Participating Producer):

- Receive invitation for LOA to complete onboarding.
- Log into Workflow and complete onboarding and annual certification.
- Welcome Letter-with writing# and appointed state (s).

Contract Level or Participating Producer Change

4.1 Contracting, Licensing & Appointment

Contracting Types

Contracting Process

Contract Level or Participating Producer Change

Upline Administrative Services, Duties, Obligations and Required Activities

Release and Constructive Release Guidance & Process

Release and Constructive Release of Agency

Requesting Appointments & Adding States

E & O Insurance Requirements

Agency Contract Level Change:

Agency contract level changes requires Molina approval and new contract to be completed.

Participating Producer Change:

Within the same hierarchy:

- New onboarding is not required

To move to a different hierarchy (not within existing hierarchy)

- Complete notice of intent/or transfer release form.
- Agent completes a new onboarding

Producers/agencies must remain in their current hierarchy for at least 6 months prior to being allowed to change.

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Upline Administrative Services, Duties, Obligations and Required Activities

4.1 Contracting, Licensing & Appointment

Contracting Types

Contracting Process

Contract Level or Participating Producer Change

Upline Administrative Services, Duties, Obligations and Required Activities

Release and Constructive Release Guidance & Process

Release and Constructive Release of Agency

Requesting Appointments & Adding States

E & O Insurance Requirements

- Upline and its agents to abide by applicable law and all of Molina's Participating Producer Communications about Medicare products.
- Upline to maintain proper licensing (including agency licenses, as applicable) in line with applicable law in each state in where a certified Participating Producer is selling.
- Upline is responsible for confirming that the principal is properly licensed in line with applicable law in each state in where a certified Participating Producer is selling.
- Upline will notify Molina if upline's, principal's or any Participating Producer's and Participating Producer LOA's license is suspended or revoked.
 - Suspension or revocation will affect principal's or Participating Producer's and Participating Producer LOA's ready-to-sell status.
- Upline to ensure that all Participating Producer's and Participating Producer LOA's of the upline perform their services in a manner that is compliant with the terms of their contract.
- Upline will perform the services identified in their contract and outlined in Molina's Medicare Producer Guide.
- Uplines will share information and communication from Molina as applicable with Participating Producer LOA's

The table below indicates which administrative duties and services are required for each contracting tier. Uplines are required to provide reliable administrative services and are compensated for such administrative services:

- Compliance
- Agent Recruiting
- Agent Training
- Office administration requirements
- Marketing

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Upline Administrative Services, Duties, Obligations and Required Activities

4.1 Contracting, Licensing & Appointment

Contracting Types

Contracting Process

Contract Level or Participating
Producer Change

Upline Administrative Services,
Duties, Obligations and Required
Activities

Release and Constructive
Release Guidance & Process

Release and Constructive
Release of Agency

Requesting Appointments &
Adding States

E & O Insurance Requirements

Molina has nine upline contract levels:

- NATIONAL MARKETING ORGANIZATIONS (NMO)
- FIELD MARKETING ORGANIZATIONS (FMO2)
- FIELD MARKETING ORGANIZATIONS (FMO)
- SPECIAL GENERAL AGENCY (SGA2)
- SPECIAL GENERAL AGENCY (SGA)
- MASTER GENERAL AGENCY (MGA2)
- MASTER GENERAL AGENCY (MGA)
- GENERAL AGENT (GA2)
- GENERAL AGENT (GA)

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Required Activity	NMO	FMO2	FMO	SGA2	SGA	MGA2	MGA	GA2	GA
Compliance									
<i>Designated Compliance Officer who is responsible for assuring compliance and developing policies and procedures.</i>	X	X	X	X	X	X	X		
<i>Ensure Participating Producers and Participating Producers LOA's are trained on CMS Fraud Waste and Abuse training annually.</i>	X	X	X	X	X	X	X	X	X
<i>Implementing written policies, procedures, and standards of conducts</i>	X	X	X	X	X	X	X		
<i>Conduct effective training and education annually to all Participating Producers and Participating Producers LOA's</i>	X	X	X	X	X	X	X	X	X
<i>Enforce standards through well-publicized disciplinary guidelines</i>	X	X	X	X	X	X	X	X	X
<i>Responsible for ensuring Participating Producers and Participating Producers LOA's are in good standing</i>	X	X	X	X	X	X	X	X	X
<i>Responsible for responding to sales allegation inquiries in timely manner</i>	X	X	X	X	X	X	X	X	X
<i>Responsible for promptly responding to detected offenses and undertaking corrective action.</i>	X	X	X	X	X	X	X	X	X

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Required Activity	NMO	FMO2	FMO	SGA2	SGA	MGA2	MGA	GA2	GA
Agent Recruiting									
<i>Identify and prequalify Participating Producers and Participating Producers LOA's for selling with Molina</i>	X	X	X	X	X	X	X	X	X
<i>Ensure Participating Producers and Participating Producers LOA's and agency Principals are properly licensed, certified and appointed to sell Molina Medicare products throughout the year and on an annual basis.</i>	X	X	X	X	X	X	X	X	X
<i>Assist Participating Producers and Participating Producers LOA's with appointment efforts between upline and Molina.</i>	X	X	X	X	X	X	X	X	X
Office Administrative Requirements									
<i>Assist in the maintenance of accurate contact information for Participating Producers and Participating Producers LOA's within Molina systems (phone, email, address)</i>	X	X	X	X	X	X	X	X	X
<i>Manage telephonic marketing in compliance with the terms of your agreement, including CMS rules regarding unsolicited telephone calls.</i>	X	X	X	X	X	X	X	X	X

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Required Activity	NMO	FMO2	FMO	SGA2	SGA	MGA2	MGA	GA2	GA
Office Administrative Requirements Contd.									
<i>Facilitate agent record-keeping of Scope of Appointment and related enrollment materials.</i>	X	X	X	X	X	X	X	X	X
<i>Provide general administrative support of Participating Producers and Participating Producers LOA's (i.e. materials, copiers and other types of overhead expenses)</i>	X	X	X						
<i>Website development and maintenance for Participating Producers and Participating Producers LOA's support and service. (Broker Portal)</i>	X	X							
Agent Training									
<i>Communicate training requirements, changes and deadlines to all agents</i>	X	X	X	X	X	X	X	X	X
<i>Ensure Molina Medicare annual certification is completed as part of Ready to Sell</i>	X	X	X	X	X	X	X	X	X
<i>Support agent awareness and implementation of the Molina Producer Guide</i>	X	X	X	X	X	X	X	X	X
<i>Ensuring Participating Producers and Participating Producers LOA's understanding of Medicare Products offered in Molina's service area to help meet beneficiary needs and help them make informed healthcare decisions.</i>	X	X	X	X	X	X	X	X	X

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Required Activity	NMO	FMO2	FMO	SGA2	SGA	MGA2	MGA	GA2	GA
Marketing									
<i>Ensure all Participating Producers and Participating Producers LOA's comply and adhere to all MCMG and CMS related guidance.</i>	X	X	X	X	X	X	X	X	X
<i>Ensure all third-party sites upline uses to generate leads follow all Molina and CMS regulations</i>	X	X	X	X	X	X	X	X	X
<i>Ensure uplines and Participating Producers and Participating Producers LOA's use CMS approved Molina specific direct mail pieces when marketing Molina products</i>	X	X	X	X	X	X	X	X	X
<i>Ensure compliance with CMS and Molina third-party website requirements for uplines and agents using public-facing websites</i>	X	X	X	X	X	X	X	X	X

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If a Participating Producer wishes to sell Company Products under a different Agency, that Producer must submit a Release or Constructive Release request to Company. Participating Producers must remain with an Agency for at least six (6) months prior to requesting a Release or Constructive Release from that Agency unless otherwise agreed in writing by Company.

Upon the effective date of the Release or Constructive Release, Company has the right to appoint or otherwise authorize the Participating Producer to sell Company Products on behalf of a different Agency.

Notwithstanding any other provision, there will not be a Release or Constructive Release effective during the time period of October 1-December 15 of each calendar year. If a Release or Constructive

Release should have been effective during that time period; it will be effective January 1.

Release:

- A Release is a written authorization from Agency that gives authority to Company to release Participating Producer from the Agency's contract with Company.
 - A Release will be effective upon the date of its receipt by Company.

Constructive Release:

Company allows for two types of Constructive Releases as an avenue for Participating Producer to move from its existing Agency to a new Agency. The requirements for each are as follows:

- Participating Producer may request a Constructive Release if the Participating Producer has not Solicited any Benefit Contract or Policy for the current Agency during the preceding six (6) months.
 - This request for Constructive Release will be effective the first day of the month following receipt of the request.
- Participating Producer may also request a Constructive Release if the Participating Producer provides Company with prior written notice of its intent to be released from its Agency. Company will not process this request for Constructive Release until six (6) months after its receipt. The effective date for this Constructive Release will be the first day of the month following the six (6) month waiting period.

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- If Participating Producer requests this type of Constructive Release, Participating Producer may continue to Solicit Company Products between the time of submission of the request to Company and the effective date of the Constructive Release (i.e. the waiting period). However, any Commissions associated with Benefit Contracts or Policies sold during this time will remain under the current Agency.

In-order for Company to process a Constructive Release, the Participating Producer must fill out the Molina Release Form(s) which is located in the Appendix Section of this Producer Guide. Please return completed form to MCRBrokerContracting@MolinaHealthcare.com. Upon receiving a request for Constructive Release, Company will also provide notice of your request to Agency.

Release and Constructive Release of Agency

Agency can only have one hierarchy. Dual hierarchies are not allowed by Molina. If an Agency wishes to sell Molina Medicare products under a different upline Agency, that Agency must obtain a Release or Constructive Release.

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Requesting Appointments and Adding States

Per CMS Communication and Marketing Guidelines (110.1), compliance with state licensure and/or appointment laws is required. Producers have the responsibility to maintain state licenses, continuing education and all other state requirements. Uplines must be contracted and have the proper licenses and appointments required by applicable law.

Agencies may now add additional appointments for direct downline agencies and agents through our onboarding tool. We want to make it easier to do business with Molina Medicare, so we've added this convenient and efficient additional to our online tools.

Step 1:

- To qualify, agents must be licensed in the states where you are contracted to sell in order to be added.

Step 2:

- Make sure that the proper state(s) Line of Authority is held by licensee.

Lines of Authority:

- CA – Accident & Health
- FL – Health
- ID – Accident & Health or Sickness
- MI – Accident & Health
- NM – Accident and Health or Sickness
- OH – Accident & Health
- SC – Accident Health or Sickness
- TX – Life, Accident, Health and HMO
- UT – Accident and Health or Sickness
- WA - Disability
- WI – Accident & Health

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Step 3:

- Agencies please login to Workflow/Onboarding.

Step 4:

- Access our step-by-step instructions to add appointment(s) in the workflow/onboarding system see the document titled “How to Add Appointments” in the Appendix.

When will new appointments be active?

- Appointments will process within 1-3 business days.
- Please note: if you use DRX for enrollment submissions, your access to the new states will be available 1-2 business days after the appointment processes.
- We will send you a welcome letter email when the new state appointment is active.

E & O Insurance Requirements

We require all agencies/Producers to carry an Errors and Omissions (E & O) policy and supply a copy to Molina on an annual basis.

Agencies must carry at least \$1,000,000 per claim and \$1,000,000 per aggregate for the policy year.

Producers must carry at least \$1,000,000 per claim and \$1,000,000 per aggregate for the policy year.

Broker Services sends out 30-day, 60-day courtesy letters advising that your E&O is going to expire within 30 or 60 days.

4.2 Certification

Certification

SAP Litmos

Certification is completed in Litmos, a module of the SAP Onboarding/Workflow tool.

LITMOS

Log into SAP Onboarding/Workflow

<https://social.webcomserver.com/wpm/userHome.do?&tenantName=molinahealthcareinc>

1. Complete annual certification.
2. Upload AHIP or other CMS approved Medicare + Fraud Waste & Abuse Certificate.
3. Complete the Product Training test with a passing score of 85% or better.
 - Returning Producers will need to complete their annual certification no later than November 30.
 - New Producers must complete certification/onboarding within 60 days of receiving the invitation of appointment.
 - Non-Producing Principal Producer is only required to upload their AHIP or other CMS approved Medicare + Fraud Waste & Abuse Certificate.

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How We Pay

- Compensations pay out on the first and third Friday's of the month.
 - Initials, replacements and renewals paid out on the first Friday.
 - True up and adjustments as needed paid out on the third Friday.
 - Compensation Payment Process: Producers who are paid direct by Molina, you will receive via email a deposit notification from our Accounts Payable Dept. the day before your deposit hits your bank account we have on file. You may access your compensation statements from Molina broker portal.
- Compensation year is January 1 through December 31.
- Compensation schedule for each Producer and the Administrative Fee schedule for each upline is outlined in their contract.

Producers are paid a compensation for each qualified enrollment for a Molina Medicare product in accordance with CMS requirements and terms of their contract. We pay directly to the Producer, or to the payee, as specified upon contracting. Compensations for licensed only agents (LOA) sales are paid directly to their upline for any qualified enrollment.

Administrative Fees:

Administrative Fees are paid to uplines for providing administrative services, such as Producer recruiting, Producer training, sales compliance, office administration related to Medicare sales/enrollment, and marketing.

Initial Sales

Initial Year Compensation means the compensation paid to the Producer of Record for a Molina Medicare Qualified Enrollment when it meets the CMS Requirements to be qualified as an initial year enrollment and compensation is permitted to be paid pursuant to CMS requirements and Law. The Initial Year Compensation shall never extend beyond December 31 of each calendar year regardless of when the Beneficiary enrolled with Molina Healthcare.

Molina will, if permitted by law, advance the full initial rate set forth in your contract after CMS confirmation that it is an initial sale, and after the effective date.

With respect to an initial sale arising from a plan change occurring after January 1, Molina shall pay a prorated lump sum compensation starting from the effective date until the end of the year.

Molina will pay fair market value (FMV) rates per CMS guidelines.

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Replacement and Renewal Compensations

- Replacement means a sale to a Medicare beneficiary who was enrolled in a Medicare plan other than Molina Medicare and not defined by CMS as an Initial Sale.
- With respect to a replacement sale arising from a plan change occurring after January 1, Molina shall pay a prorated lump sum commission starting from the effective date until the end of the calendar year.
- Molina defines a Renewal as a member remaining continuously enrolled in their Molina Medicare plan into the next calendar year.
- Renewal compensations are prorated and paid on a per month basis according to your contract.
- We pay lifetime renewals for as long as the member remains continuously enrolled in their original Molina Medicare plan. Producer/Agency is required to maintain active licensing in the state sold.
- If you are terminated for cause, then you will stop receiving compensation.

Chargebacks and Compensation Recovery

Molina Medicare utilizes CMS regulations for all chargeback guidelines.

Rapid Disenrollment:

- Molina will charge back or recoup the full amount of the Initial Year Compensation, Replacement Year Compensation, Renewal Compensation and Agency Administrative Payment when there is a Rapid Disenrollment of a Qualified Enrollment and such Rapid Disenrollment does not meet one of the exceptions pursuant to CMS requirements.

Other Chargebacks:

- Disenrollments and Retro-disenrollments. If a Qualified Enrollment disenrolls or retro-disenrolls, and such disenrollment is not considered a Rapid Disenrollment. Molina will charge back or recoup the applicable Initial year Compensation, Replacement Year Compensation, Renewal Compensation and Agency Administrative Payment for a Renewal Compensation, if such amounts have been paid after the Beneficiary's disenrollment date.

Recovery process for Producers with negative owing balance:

- Negative balances are offset with earned compensations for any new or renewal business and per your contract.

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Enrollment Cancellations and Rapid Disenrollment

- Enrollment Cancellations are situations where a potential enrollee completes the enrollment request process, but cancels the enrollment prior to the effective date of that enrollment.
- Rapid Disenrollments means an individual who disenrolls from Molina Medicare or changes plans within Molina Medicare during the first three (3) months of enrollment.
- Molina will monitor the Enrollment Cancellations and Rapid Disenrollment rates of the Agency and each of its Participating Producers. In the event, Molina identifies an issue, Molina will have the right to remediate the issue.

Compensation Eligibility Requirements

Initial and Replacement Sales

- Completed onboarding process
- Active agreement with Molina at time of sale.
- Completed annual certification with cleared background at time of sale.
- Active license in state at time of sale.
- Active appointment in state at time of sale.
- Sale in allowed service area.

Renewals

- Must have been eligible to receive initial/or replacement compensation.
- Agency/or Producer has not been terminated with cause.
- Active license in state of sale on the first of the month that the renewal payment is generated.

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Initial and Replacement Sales

- Complete onboarding process.
- Active agreement with Molina at time of sale.
- Active license in state at time of sale as required by state law.
- Active appointment in state at time of sale as required by state law.
- Sale in allowed service area.
- Producer of record must be eligible to receive initial/or replacement compensation.

Renewals

- Active license in state of sale on the first of the month that the renewal payment is generated as required by state law.
- Renewals will not be paid if upline was termed with cause.

1099 Forms

- Compensations are reported via the Internal Revenue Service (IRS) 1099 process. The 1099-MISC forms are post marked to all eligible recipients by January 31 of a given year and mailed to the payee address on file.
- Please review your address on your broker portal to verify your address.
- A 1099-MISC form will only generate to a Producer if annual earnings are \$600 or above and Corporation is not indicated as the tax classification on the W-9.

*Does not apply to LOA Producers.

Compensation Payment Information

Broker Services will send an email with your Callidus Login Information for you to access your Broker Portal Commission statements.

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Producer of Record (POR) Policy

Scenario	POR Scenarios Descriptions	Examples	Process	Requirements
1	LOA (Licensed Only Agent) Producer leaves the agency.	Producer quits. Producer fired.	Agency is Producer of record. Agency to provide list of policies.	Agency Principal must be RTS.
2	Participating Producer Independent Producer leaves the business.	Retirement, career change, death.	Bill of sale, legal documentation.	New Producer must be RTS.
3	Beneficiary change from current to new Producer.	Producer meets with beneficiary, same plan just wants to change POR.	Do not allow - Molina Producer of Record Protection Commitment. Molina is committed to protect the integrity of the Producer-member relationship and supports your book-of-business growth.	Do not allow if same plan. If enrollment in a new plan change the POR.

Molina will NOT process any POR change requests during open enrollment.

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- Implementing written **policies, procedures, and standards of conduct.**
- Designating a **compliance officer** and compliance committee.
- Conducting effective **training and education.**
- Developing effective **lines of communication.**
- Conducting **internal monitoring and auditing.**
- Enforcing standards through well-publicized **disciplinary guidelines.**
- Responding promptly to detected offenses and undertaking **corrective action.**

Each of the Seven Elements requires robust, organization-wide enforcement and documentation.

Why Compliance is Important

As a partner representing Molina Medicare products you must follow Molina Medicare policies and procedures and CMS regulations and guidelines in daily sales and marketing activities. You are responsible for knowing these rules and ensuring you follow them.

Molina Medicare wants its potential members to be properly informed when they choose a Molina Medicare product and to not feel coerced or misinformed. Following the rules and guidelines set forth by Molina Medicare and CMS will ensure this happens. Use of approved sales and marketing materials will also ensure the marketing and enrollment process used by your Producers will be compliant.

Failure to follow these rules and guidelines places Molina Medicare at risk of CMS action and jeopardizes your opportunity to market Molina Medicare products at risk. Potential consequences of engaging in inappropriate or deceptive marketing practices include disciplinary actions, termination of contract and loss of compensation.

For questions regarding compliance send an email to Sales_Oversight@Molinahealthcare.com

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Agencies and Producers who partner with Molina Medicare must follow the Molina Healthcare Code of Business Conduct and Ethics. Each year, you will be required to attest to having reviewed the Code of Business Conduct and Ethics, and that you and your organization agree to abide by the standards contained therein.

Reporting Fraud Waste & Abuse and Compliance Concerns

As an agency and Producer contracted with Molina Medicare, you are required to prevent, and report suspected or actual non-compliance and/or fraud. You can report suspected or actual non-compliance or fraud, waste and abuse by either calling Molina Healthcare AlertLine, or using the AlertLine web link below.

Molina Healthcare AlertLine is an external telephone and web-based compliance hotline hosted by NAVEX Global. AlertLine is available 24 hours a day, 7 days a week, and 365 days a year. When you make a report, you can choose to remain confidential or anonymous.

The Molina Compliance Hotline Phone: 866-606-3889

To report an issue online visit: <https://molinahealthcare.AlertLine.com>

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As an appointed Producer of Molina Medicare, Molina Medicare is responsible for any actions you make on its behalf.

This responsibility extends to both potential members and existing Molina Medicare members. CMS holds plans responsible for the behavior and conduct of its Producers. As such, Molina Healthcare has a responsibility to monitor the activities of its Producers that sell Molina Medicare products.

Some of the oversight and monitoring includes:

- Ensuring Producers are following all Molina Medicare policies and CMS requirements.
- Taking measures to ensure Medicare beneficiaries are not misled during the marketing process.
- Ensuring that marketing events and cancellations are timely reported to Molina, so that appropriate notification obligations are executed.
- Identifying and correcting inappropriate behavior or activity by Producers or agencies.
- Monitoring enrollment applications to ensure they are complete and sent timely (within 2 calendar days of signature).

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A grievance is an inquiry, or concern related to an alleged sales staff miscommunication of benefits or plan rules, inappropriate sales/marketing practices or action/inaction that negatively impact a member/prospect.

The source of grievances vary and can be written or verbal (complaint tracking module), CTMs come from complaints made to CMS, and/or can be obtained through routine monitoring and oversight.

The Molina Medicare Appeals & Grievance team reviews each complaint and conducts an investigation. Statements are taken from the producer and the member or their representative. The person conducting the investigation also reviews all the documents in the member's files including their enrollment application and any notes from customer service calls.

Upon the completion of the investigation, a determination is made as to whether the grievance and/or CTM is substantiated or unsubstantiated, and whether or not disciplinary action is required.

First Tier, Downstream & Related Entities (FDR)

Producers and Agencies that market and sell Molina Medicare plans are considered first tier entities and thereby are subject to CMS's applicable requirements.

CMS requires that FDRs:

- Have a Compliance Program in place – Code of Conduct, Policies and Procedures
- Provide fraud, waste and abuse (FWA) training to its employees
- Retain records for 10 years
- Conduct exclusionary list screening, OIG/GSA
- Reporting mechanism to identify possible FWA and non-compliance issues
- Attest to satisfying these compliance requirements and adhering with applicable CMS rules and regulations

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Scope of Appointment Requirements

Telephonic Scope of Appointment (SOA)

Enrollment Form Submission

Telephonic Enrollment

FDR Oversight Program

Molina has an FDR oversight program which monitors Producers and agencies to ensure applicable CMS requirements are being followed. Below is a list of activities associated with this oversight program.

- Collection of annual FDR compliance attestations
- Review and submission of marketing materials for CMS filing
- Obtain FDR policies and procedures
- Identification of FDR Compliance Officer
- FDR website review
- Investigation of sales allegation

Educational vs. Marketing/Sales Events

CMS regulations define two different categories of public events: educational and sales/marketing. Educational events are designed to inform prospects about Medicare Advantage plans or other Medicare programs.

The following requirements apply:

- Must be explicitly advertised as educational
- Must not include marketing or sales activities or the distribution of marketing material or enrollment forms

Marketing/Sales events are designed to steer or attempt to steer potential enrollees toward a plan.

The following requirements apply:

- Must use CMS approved presentations
- Must clearly label sign in sheets as optional
- Must not do health screenings or other activities that may be perceived or used as “cherry picking”
- May not require attendees to provide contact information as a prerequisite for attendance

6. Agency Compliance & Producer Oversight

The Seven Elements of a Compliance Program

Why Compliance is Important

Molina Healthcare Code of Business Conduct and Ethics

Reporting Fraud Waste & Abuse & Compliance Concerns

Producer Oversight

Grievances & Sales Allegations (CTMs)

First Tier, Downstream & Related Entities (FDR)

FDR Oversight Program

Educational vs. Sales/Marketing Events

Sales Events Notifications & Changes

Scope of Appointment Requirements

Telephonic Scope of Appointment (SOA)

Enrollment Form Submission

Telephonic Enrollment

Sales Events Notifications and Changes

Agencies must inform Molina Medicare about marketing events no later than the **20th** of each month (this does not include CVS events which must be submitted 30 days prior to the requested date). All Producers will need to complete Marketing Event Proposal Form for the following months events and send it to Broker Services.

Note: Events for CVS Pharmacies are submitted on a separate form as required by CVS and follow blackout rules. Agents must have a Letter of Approval in their possession when working a CVS pharmacy.

A monthly reminder will be generated on the 10th of each month to provide ample time to complete form(s). In the event of a change, update or cancellation of an event, a minimum 48-hour notice in advance of the events must be provided.

The Broker Services email box for sending completed worksheets and any change notifications is SalesEngagement@MolinaHealthcare.com

Scope of Appointment Requirements

Agencies and Producers must use a Medicare approved “Scope of Appointment Form” (SOA), prior to initiating any face-to-face appointment with a prospective enrollee.

The SOA must document the scope of what will be discussed, including specific products, prior to the appointment. If a Producer would like to discuss additional products during the appointment due to beneficiary interest, but was not agreed to in advance, the Producer must document a second SOA for the additional product(s) to continue the appointment.

The Scope of Appointment form or recordings of prospective enrollee’s consent to the scope of appointment must be retained by Producer for a period of ten (10) years, or as otherwise required by CMS regulations. Scope of Appointments must be provided upon request by Molina Healthcare.

6. Agency Compliance & Producer Oversight

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Educational vs. Sales/Marketing Events

Sales Events Notifications & Changes

Scope of Appointment Requirements

Telephonic Scope of Appointment (SOA)

Enrollment Form Submission

Telephonic Enrollment

Telephonic Scope of Appointment (SOA)

To accommodate situations where the broker cannot physically meet with the beneficiary, Molina offers an alternative to a paper SOA, a Telephonic SOA. A job aid is available from the Broker Services for the telephonic SOA process. The broker will contact the Broker Services with the beneficiary on the phone, and the team will complete the telephonic SOA in just a few minutes on a recorded line.

Enrollment Form Submission

There are three methods that enrollment applications can be submitted:

1. Submit electronic enrollments through Connecture/DRX this is the preferred method of enrollment.
 2. Fax paper enrollments to The Molina Medicare Enrollment Form Fax line is (844) 541-6848.
 3. Your agency/employer may also provide a tool to submit your enrollments that Molina has pre-approved. Please check with your agency on other tools that may be available for you to quote and enroll.
- All enrollment submissions must be made within 2 calendar days of the application sign date.
 - Enrollment applications must be fully completed, including signatures and dates.
 - The Broker Services will send a confirmation email for every successful receipt of a paper enrollment sent to the Molina Medicare Enrollment Fax line.

Telephonic Enrollment

To accommodate situations where the broker cannot physically meet with the beneficiary, Molina offers an alternative to a paper application or DRX enrollment a Telephonic Enrollment. A job aid is available from the Broker Services for the telephonic enrollment process. Training sessions are also available from your local Broker Channel Manager. The broker will upload the completed Telephonic Enrollment Submission form into Callidus then the Molina Telephonic Enrollment team will assist them with the enrollment on a recorded line.

7. Marketing Materials

Marketing Policy Overview

Websites

Referencing Molina in your Materials
and on your Websites

Sales and Marketing

Marketing Policy Overview

Agencies may only use Molina Medicare and CMS approved marketing materials when discussing or presenting Molina Medicare products.

Most if not all marketing materials intended for distribution to potential members must be filed with CMS. All materials provided by Molina Medicare have been reviewed for compliance with CMS regulations, inclusion of required disclaimers and accuracy. Additionally, these materials have been filed with and approved by CMS.

Agencies and their Producers may not alter CMS-approved materials other than to add personal information like agency/Producer name, phone number, and email address or event date where appropriate.

Any material that promotes Molina Medicare products not previously approved by Molina Medicare needs to be submitted for review prior to use.

Per CMS regulations, the official first day for marketing for Annual Election Period (AEP) begins on October 1 of each year. The AEP is for enrollments in the upcoming benefit year. To be compliant, you cannot market or advertise the upcoming year's products before October 1.

Websites

CMS defines websites used by Molina Medicare contracted agencies and their Producers as third-party marketing websites. Third-party marketing websites that market Molina Medicare products must meet all applicable Molina Medicare and CMS marketing guidance including those found in the CMS Medicare Marketing Guidelines. These requirements apply to websites used by agencies or Producers to generate leads as well.

Third-party websites that market Molina Medicare products must be submitted to CMS. If the website markets several MA plans' products, it may be submitted through the multi-plan process.

Producers and agencies are required to provide the website addresses of all sites used to market Molina Medicare products to your Broker Channel Manager.

Agency and Producer websites may not:

- Request health status information, such as pre-existing conditions, weight, and whether a beneficiary is a smoker.
- Provide misleading information, such as identifying a Medicare Supplement plan as a Medicare Advantage plan.
- Use prohibited terminology, including unsubstantiated absolute superlatives.

7. Marketing Materials

Marketing Policy Overview

Websites

Referencing Molina in your Materials
and on your Websites

Sales and Marketing

Referencing Molina in Your Materials and on Websites

Producers may reference Molina Medicare in its recruitment and training documents so long as they only mention what products they sell. Documents that mention Molina Medicare intended for potential members will need to be reviewed by your Broker Channel Manager, and written permission provided before distribution.

Documents, including websites that mention Molina Medicare and contain any plan information, e.g. benefit information, copayments/coinsurances, plan premiums, etc., will need to be submitted to the Broker Channel Manager for review.

Sales and Marketing

Molina Logo Use

All uses of Company's Logos must be reviewed and approved by Molina. Company must provide written authorization prior to any use of Logos.

To request authorization to use a Company Logo, please send the Molina Logo Request Form to MolinaLogoRequest@MolinaHealthcare.com. You will need to e-mail the document along with a brief explanation of what the document is intended for.

You will receive a response within five business days as to whether the document is approved.

You may not use or distribute the Molina Logo until you receive written approval.

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How To Order Your Sales Materials

8. Sales Materials

How to Order Your Sales Materials

Other sales materials available:

- Provider directory
- Formulary
- Lead cards
- Customizable brochures
- Flyers without events
- Flyers with events

There are two ways to order Sales Materials

- Complete the [New Order Form](#) and send to the Broker Services
- Call the Broker Services and order the materials over the phone

9. Enrollment Process

What You Need to Know

Telephonic Enrollment

Cancellation of an Enrollment
Application

Requests for Disenrollment

What You Need to Know

Electronic Enrollment - Connecture/DRX

- After receiving your welcome packet, you will receive access to our electronic enrollment system DRX within 2 business days.

Paper Based Enrollment - Using the Molina Medicare Enrollment Kit

- Be sure you use a new and complete Enrollment Kit with each potential member with whom you meet. The Enrollment Kit includes the Summary of Benefits, Scope of Appointment (SOA) Form, Eligibility Attestation Form, Pre-Enrollment Checklist, Enrollment Application Form, Enrollment Receipt, Drug List, Star Ratings, Multi-Language Insert and Next Steps Form.

Telephonic Enrollment

To accommodate situations where the broker cannot physically meet with the beneficiary, Molina offers an alternative to a paper application or DRX enrollment a Telephonic Enrollment. A job aid is available from the Broker Services for the telephonic enrollment process. Training sessions are also available from your local Broker Channel Manager. The broker will upload the completed Telephonic Enrollment Submission form into Callidus then the Molina Telephonic Enrollment team will assist them with the enrollment on a recorded line.

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9. Enrollment Process

What You Need to Know

Telephonic Enrollment

Cancellation of an Enrollment Application

Requests for Disenrollment

Cancellation of an Enrollment Application

Enrollment Cancellations

- A prospective member or his/her legal representative may request to cancel their enrollment application for any reason prior to the effective date of coverage.
- An enrollment may only be canceled if it is received by Molina Medicare prior to the effective date of coverage.
- If a prospective member requests to withdraw their enrollment application prior to submitting the application, **you must still submit the application to Molina Medicare.** You will then need to contact Broker Services to request that the enrollment be canceled. Do not mark, write on or alter the application to indicate the member wants to cancel the enrollment. If an enrollment is submitted and later canceled or withdrawn prior to it effectuating, it will not report as the SEP used for that quarter.
- To forward a request from a prospective member or their authorized representative to cancel an enrollment, please email Broker Services at MCREnrollment@MolinaHealthcare.com

Requests for Disenrollment

Request for Disenrollment

- Disenrollment requests made to Molina Medicare must be in writing. A member may request disenrollment from an MA plan by:
 - Enrolling in another plan (during a valid enrollment period);
 - Emailing signed written notice to MCREnrollment@MolinaHealthcare.com
 - Faxing a signed written notice to Molina Medicare; Fax # 562-495-1726
 - Calling 1-800-MEDICARE.

10. Member Experience

What Members Need to Know

Member Services

Medicare Member Services

Contact Information

What Members Need to Know

Next Steps



Acknowledgement of Enrollment Letter will be sent to the member confirming their enrollment form.



Confirmation of Enrollment Letter will be sent when Medicare approves the enrollment. The member should keep this letter for their records. They may use the *Confirmation of Enrollment* letter as proof of coverage until the member receives their Member ID card.



Molina Healthcare Member ID card will be sent to the member. The member should use this card whenever they need medical services. They may also use their *Enrollment Form* as temporary proof of coverage until they receive their Member ID card.



Delta Dental Member ID card will be sent to the member. The member will use this card to access their plan covered supplemental dental services.



Welcome Kit will be sent to the member, which contains important plan documents including information on how to obtain:

- Evidence of Coverage
- Drug Formulary
- Provider Directory
- Pharmacy Directory

Also available via electronic format on the Molina Healthcare website:

www.MolinaHealthcare.com



Health Assessment Survey will be completed with the member. A Molina medical professional may call the member to get more information about their health history to make sure they get all the services they need.



Annual Wellness Visit Appointment Call will be made to the member by one of our trusted partners. This call will be made within the first 60 days to schedule an appointment for the member's Annual Wellness Visit. This visit helps us understand what care and services can help the member.

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Member Services

10. Member Experience

What Members Need to Know

Member Services

Medicare Member Services
Contact Information

Molina Medicare Member Services

If prospective members or existing members have any questions regarding their Molina Medicare plan, they should contact our Member Services Department. For fastest service, the member should call the number included on the back of their ID Card. If they do not have their ID card, they can call the number listed on the next slides. TTY 711, 7 days a week, 8 a.m. to 8 p.m., local time.

Adding a Designated Person to Speak with Molina on Their Account

Members can contact the Member Service to have a form mailed to them to add a person to their account. The member will then need to complete the form, sign it and return it to Molina.

Power of Attorney

If a power of attorney form was not included with the original enrollment application and it meets the legal requirements of a health care power of attorney and allows health care decisions to be made, a representative can contact Member Services for a fax number or address to send a copy of the power of attorney. The power of attorney will be included in the member's record and the named representative(s) will be able to contact Molina Medicare and make decisions regarding their plan.

Medicare Member Services Contact Information

State	Phone Number	Hours of Operation
California	(800) 665-0898	8:00 am – 8:00 pm PT
Florida	(866) 553-9494	8:00 am – 8:00 pm ET
Idaho (MAPD)	(844) 560-9811	8:00 am – 8:00 pm MT
Michigan	(800) 665-3072	8:00 am – 8:00 pm ET
New Mexico	(866) 440-0127	8:00 am – 8:00 pm MT
Ohio	(866) 472-4584	8:00 am – 8:00 pm ET
South Carolina	(844) 526-3195	8:00 am – 8:00 pm ET
Texas	(866) 440-0012	8:00 am – 8:00 pm CT
Utah (D-SNP)	(888) 665-1328	8:00 am – 8:00 pm MT
Utah (MAPD)	(877) 644-0344	8:00 am – 8:00 pm MT
Washington	(800) 665-1029	8:00 am – 8:00 pm PT
Wisconsin	(855) 315-5663	8:00 am – 8:00 pm CT

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Appendix

[2021 Order Form](#)

[Molina Medicare Release Form](#)

[Molina Medicare Constructive Release Form](#)

[Marketing Events Proposal Form](#)

[How to Add Appointments](#)

[Molina Logo Request Form](#)

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Molina HealthCare Medicare Materials Order Form 2021

Fax to 866-891-2422 or email to: Broker@MolinaHealthcare.com
All orders take 7-10 business days once the order has been placed

Agent NPN#	
Name:	Agency Name:
Shipping Address (No PO Boxes):	

ENROLLMENT KITS

State	Molina Medicare Complete care (D-SNP)	Molina Medicare Choice Care (MAPD)	English (Quantity)	Spanish (Quantity)
CA	H5810-001			
CA	H5810-013 (Imperial)			
FL	H8130-001			
ID		H5628-009 (Ada Canyon)		
ID		H5628-010 (Twin Falls)		
ID	H5628-008			
MI	H5926-001			
MI	H5926-004			
NM		H9082-009		
OH	H9955-001			
SC	H8176-001			
TX	H7678-001			
UT	H5628-001			
UT		H5628-007		
WA	H5823-006			
WI	H2879-001			

MMP MATERIALS - SUMMARY OF BENEFITS

State	English (Quantity)	Spanish (Quantity)
SC		

MARKETING MATERIALS

State	Item	Plan ID	English (Quantity)	Spanish (Quantity)
	Plan Overview Guide			
	Event Flyers without Events			
	Tri-fold Benefit Brochures			
	Lead Cards (50 cards per pad)			
	Flyers with Events			
	Dental Flyer			
	OTC Flyer			
	Vision Flyer			
	Transportation Flyer			
	Thank you Cards			
	Birthday Cards			
	Posters w/pull tabs			
	Banners (6ft)			
	Banners (Tabletop)			

Information as you would like it to appear on editable marketing materials.

Name: _____

Phone Number: _____

License # _____

Additional Notes:



Molina Healthcare Release Form

Requesting a release for: (Please Mark one)

Individual Agent Only ☐

or, Agency and Downline ☐

Please fill out the below fields:

1) Broker Name/Agency Name:

Print Broker/Agency Name _____

Broker NPN /Molina Writing#/or Agency Tax ID _____

Signature (Agent/or Agency Principal) _____

Date _____

2) Immediate Upline Approving Transfer Release:

Agency Name (please print) _____

Principal Name (please print) _____

Signature (Principal) _____

Date _____

3) Upline/Top of Hierarchy Approval for Transfer Release:

Agency Name (please print) _____

Principal Name (please print) _____

Signature (Principal) _____

Date _____

*Note: If the releasing agency is both the Top of Hierarchy and the Immediate Upline, please complete #2 and #3.

There will not be a Release or Constructive Release effective date during the time period of October 1-December 15 of each calendar year. If a Release or Constructive Release should have been effective during that time period, it will be effective January 1.

Please email signed release form to mcrbrokercontracting@molinahealthcare.com

For Molina Office Use Only:

Date Molina Received: _____

Effective Date of Transfer: _____

Molina Healthcare Internal Use Medicare Agent/Broker



Molina Healthcare Constructive Release Form

Requesting a constructive release for: (Please Mark one)

Participating Producer Only

☐

or, Agency and Downline

☐

Please choose one of the following options:

Option #1 - Name of the new Upline Agency you are selecting:

Print Your Name

Broker NPN/or Molina Writing#

Signature

Date

Option #2 - Agency and Downline

Agency Name (please print)

Principal Name (please print)

NPN

Agency Tax ID

Signature (Principal)

Date

There will not be a Release or Constructive Release effective date during the time period of October 1-December 15 of each calendar year. If a Release or Constructive Release should have been effective during that time period, it will be effective January 1.

Please email signed release form to mcrbrokercontracting@molinahealthcare.com

For Molina Office Use Only:

Date Molina Received: _____

Effective Date of Transfer: _____



How to request additional appointments:

- Log into [Workflow/Onboarding](#)

SAP

! User cannot be identified

User Name *

Password *

Domain
molinahealthcareinc

Sign In

☐ Remember Me [Forgot Password?](#)

- Click the plus sign in the upper right-hand corner

- Select Downline Appointment Request

Create New Case

Bulk Invitation

Downline Appointment Request

Onboarding

- Input the Agency/Agent Writing Number

Please fill out all fields below.

Producer ID *

Search

- You will see the producer's name and NPN you have entered.
- Click Create

- The system will display the active agent licenses & appointments in Molina's Market and the direct upline has appointments in
- Choose Select & Send

- Select the states you wish you create additional appointments

Select Appointments

Select All

<input type="checkbox"/>	License State
<input type="checkbox"/>	MI

1 total rows, displaying from 1 to 1

- Click Submit



USE THIS RESET BUTTON TO CLEAR THE FORM

Request to Use Molina Healthcare Logo

Thank you for your interest in using the Molina Healthcare, Inc. ("Molina") Logo. Let's get started!

- Please review the terms and conditions in the Agency Agreement associated with the use of the Logo.
- Please review and agree to the Terms of Use of the Molina Logo.
- Please complete the form below so that we may evaluate your request. Upon completion, please email this form along with a sample of your intended use of the Molina Logo to MolinaLogoRequest@MolinaHealthcare.com. Please put your company name in the "Subject" line. The sample may be in a PDF or JPG format.
- Please allow 5 – 7 days for review. You do not have authorization to use the Logo until you receive written approval from Molina. Any use must be within the scope of the approval.

Please enter your contact information

First Name: _____

Last Name: _____

Job Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

Please answer the following questions:

Please identify yourself:

Participating Producer _____ Agency _____

If you are a Participating Producer, please provide your NPN Number _____

Name of Agency contracted with Molina (if you are a Participating Producer who has contracted directly with Molina, please list yourself): _____

Use of Molina Logo:

Will the Logo be associated with any Medicare offerings?: ☐ Yes ☐ No

Will the Logo be associated with any Molina Marketplace offerings?: ☐ Yes ☐ No

For what purpose do you want to use the Molina Logo? _____

How do you want to use the Molina Logo?

- ☐ Use the Logo as a link to the Molina Healthcare website
- ☐ Display the Logo on my website without linking to Molinahealthcare.com Provide website address (formatted as www.website.com)

- ☐ Brochure (submit sample for review)
- ☐ Print ad (submit sample for review)
- ☐ Email Campaign (submit sample for review)
- ☐ Other – Please explain: _____

TERMS OF USE

By using the Logo, you agree:

- To use the Logo solely in the specific manner that is approved by Molina, below
- Not to modify, distort or alter the Logo, except to proportionately scale the Logo to desired size
- Not to display the Logo as the most prominent feature on a website
- Not to incorporate “Molina” or “Molina Healthcare” into an internet address, or use either in any meta tags or other hidden text
- Not to use the Logo in a manner that would be likely to cause confusion among consumers
- Molina owns the Logo and will not do anything inconsistent with such ownership
- All use of the Logo and all goodwill developed therefrom shall inure to the benefit of and be on behalf of Molina.
- Nothing herein shall give Agency any right, title, or interest in or to any Logo, other than the right to use the Logo in accordance with any written authorization provided by Molina.
- If consumer facing, please work with Molina for appropriate filing with CMS or state regulators.
- To space the Logo at sufficient distance from other design elements in all directions so as not to appear combined
- To cease use of the Logo immediately upon termination of your current relationship with Molina or when directed by Molina.
- If you are a Participating Producer, to notify your Agency of your request to use the Logo and any written approval that is provided by Molina

I understand that any use of the Logo shall be governed by the terms of the Agency Agreement between my Agency and Molina Healthcare, Inc.

By signing below, I agree to the Terms of Use, above, and agree to only use the Logo in the manner that is approved by Molina. If I am signing on behalf of an Agency, I represent that I have the authority and proper authorization to bind and act on behalf of the Agency.

Printed Name

Title

Signature

For Molina Office Use Only:

Your request to use the Molina Logo has been reviewed. Molina's decision is as follows:

Approved for the following use:

Comments:

Denied:

Issued by:

Date:



