

Agent Guide

Contracting and Appointments



We offer both eContracting and paper contracting. Contact your upline for assistance utilizing the eContracting platform and more information.

Just-In-Time (JIT) Appointments

Appointments are processed Just-In-Time (JIT) except in pre-appointment states. Your contract will be processed upon receipt and you will be issued a producer number. We will not submit your appointment to the state until you submit your first piece of business. While it is preferred that you submit your contract and be issued a producer number prior to taking an application, this is not always possible. Please print and sign your name, and use your National Producer Number (NPN), on any business submitted prior to receiving your producer number. This will prevent a delay in processing.

Appointment Fees

We pay all agent resident and non-resident appointment fees, as well as renewals. The appointment fees are paid at the time your appointment has been submitted to the state, upon receipt of your first piece of business, with the exception of pre-appointment states.

Errors and Omissions (E&O)

E&O is not required to sell the Medicare Supplement product, although it is suggested.

Welcome Letter

Your will receive your Agent Welcome Letter once Shenandoah has issued your producer number. Your welcome letter will be sent to the email address you provided in your contracting packet.

Agent Portal Access

When you receive your welcome letter with your producer number, you will need to register on the agent portal. Visit www.ariatpa.com to begin the registration process. The Agent Portal has many useful features, such as current product information and materials, and the ability to check status on new business and access your commission statements.

Updating Your Contact Information

If your contact information changes, you will need to notify us. You may do so by submitting your request via email to tpacontracting@aiasvcs.com. Please be sure to include your full name, producer number and the information you would like to be changed.

Contact Information

New Business

Mailing Address:

Shenandoah Life Insurance Company
P.O. Box 14558
Clearwater, FL 33766-4558

Overnight Address:

2650 McCormick Dr.
Clearwater, FL 33759

Claims Address:

P.O. Box 14459
Clearwater, FL 33766-4459

FAX Number for New Business

1 (855) 414-1098

Agent Support:

1 (855) 406-9085

Agent Portal:

www.ariatpa.com



Submitting Business

There are two ways to take an application; eApplications (eApps) and paper applications. This section covers the various methods of submission and how to check status on an application once it has been submitted.

eApplications (eApp)

The preferred method of submission for Medicare Supplement enrollments is through our eApp platform, Firelight, located on the Agent Portal. eApps reduce the risk of human error and missing information, allowing your applications to be processed more efficiently.

To write an eApp, you must be contracted and have already received your producer number, as you will need to be able to access the Agent Portal. Once logged into the Agent Portal, you will select the “Start an eApp” button. For more information on how to use the eApp features, please contact your upline.

Important Note: Electronic submissions are only accepted if Electronic Funds Transfer (EFT) has been selected as the premium payment method.

Paper Applications

Paper applications should only be used if you are submitting the applicant’s initial premium payment via check. Paper applications can be mailed to the processing center, either overnight or regular mail. Be sure to use the proper mailing address to ensure timely processing of the application.

Please allow 48 business hours, from the time it was received by the processing department, for the application to appear on your Agent Portal.

Important Note: If this is your first piece of business, you may also fax a copy of the application in order to initiate the appointment process. Please fax a copy of the application to 1 (855) 414-1098. Please note on the fax cover sheet that you will also be mailing the original application with a check.

If you do not have access to the eApp platform and must take a paper application, faxing the application is only acceptable if the applicant selected EFT as their form of premium payment. Please attach a fax cover sheet, which includes your producer number. The fax cover sheet is located on the Agent Portal and is also available in the paper application packet. Completed applications should be faxed to 1 (855) 414-1098.

Application Type	Method of Submission
eApp, with EFT selected as payment method	Electronic
eApp, with check as initial premium payment method	Print and Mail
Paper Application, with EFT selected as premium payment method	Fax
Paper Application, with check as initial premium payment method	Mail

Checking Status of Enrollments

You may check status of applications by visiting the Agent Portal at www.aiatpa.com. Applications mailed to the processing center should be viewable on the portal within 5 to 7 business days. If this time has passed and you do not see the enrollment on the Agent Portal, please contact Agent Support at 1 (855) 406-9085. *Please do not resubmit the application; this interrupts and slows down processing times.*

Applications Submitted Electronically

Once you complete and submit an eApp, it is transmitted securely to the processing team and is available in the Firelight portal instantly. You will still need to allow 48 hours before being able to view the application on the Agent Portal.

Incomplete Applications

Applications will not be processed until they are complete and In Good Order (IGO).

If an application is incomplete when it is received, you will be notified via email, three times per week. This will continue until all missing requirements have been fulfilled and the application is considered In Good Order (IGO). If the missing/incomplete information is not received within 15 calendar days, you will be issued a final notice, giving you an additional 10 calendar days to submit the pending requirements. If the requirements have not been met by the final due date, the application will be withdrawn as incomplete and a letter will be mailed to both you and the applicant. If premium payment was submitted with the application, a refund will be sent to the applicant. If the applicant still wishes to obtain coverage after their application

has been withdrawn, a new application will be required.

If you have any questions concerning the status of an application reflected in the Agent Portal, the Agent Support team is available to assist you. You may contact Agent Support at 1 (855) 406-9085.

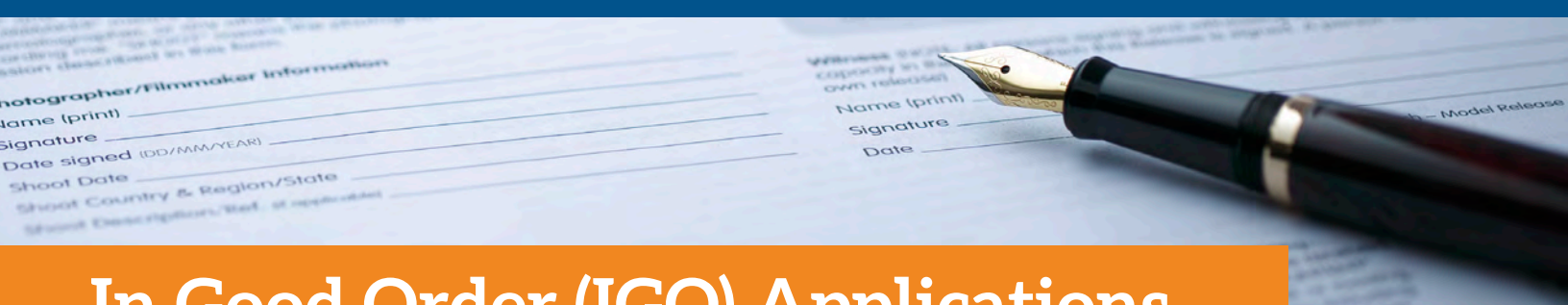
Declined Applications

If an application has been declined, notification will be sent to both you and the applicant. Please note, due to HIPAA regulations, the information you receive will be limited. The applicant's letter will provide additional information regarding the reason(s) their application for coverage was declined.

Appealing a Declined Application

Instructions on how to appeal an underwriting decision will be provided in the applicant's denial letter. A written request for appeal, along with additional medical documentation supporting the request, should be submitted. Allow 30 to 60 days for the appeal to be processed and a notification of the decision to be mailed to you and the applicant. If you have any questions regarding the appeal process, please contact Agent Support at 1 (855) 406-9085.





In Good Order (IGO) Applications

BASIC GUIDELINES

MACRA 2020

Please note: Plans C & F are only available to Medicare beneficiaries who are eligible for Medicare prior to 1/1/2020. For additional information, please consult the Underwriting Guide, your Marketing Director or contact Agent Support.

Current Materials

Applications must be written using the most current materials. Be sure to visit the Agent Portal to verify the materials you are using are most current, including the Outline of Coverage, application and state-specific forms. eApps include the most up-to-date forms necessary for writing a new policy.

Policy Issue State

The issue state is the state in which the applicant resides. The resident state is determined by the state in which the applicant files their federal income taxes. You must be appointed in the state where the application is signed and may also require an appointment in the issue state.

Effective Dates

The requested effective date can be any day of the month, with the exception of the 29th, 30th and 31st. The requested effective date cannot be prior to the application signature date. Please refer to the underwriting guidelines for additional information with respect to requested effective date.

Premium Calculations

Verify the premium rates are current prior to submitting the application, including the zip code, age, household discount, etc. Please refer to the Agent Portal for the most current rates.

NOTE: If the applicant selected EFT as their premium payment method, the initial premium payment will be drafted upon policy issue. Subsequent premium payments will occur on the date the applicant specified on their EFT form in the application. Bank-draft premium payments are withdrawn from the bank in arrears, rather than in advance. The applicant must notify us of any future bank changes as soon as possible.

Example: If the policy effective date is on the 1st of the month, and the EFT draft date selected is the 28th, the policy will already be 28 days into the 31-day grace period when the premium payment is requested from the bank. Should the policy become more than 31 days past due, the coverage will lapse.

Calculated Premium (Included app fee; HHD)				
\$ _____	- \$ _____	+ \$ _____	= \$ _____	
premium	hhd	app fee	total	

Calculating Initial Premiums

IMPORTANT: Calculated premium is the premium, for the applicant's EXACT AGE AS OF THE APPLICATION SIGNATURE DATE, multiplied by the premium modal factor. Some exceptions may apply around open enrollment when turning 65. Household Discount is the premium multiplied by the Household Discount factor for the applicant's state. The initial premium is calculated by taking the proper modal premium, less the Household Discount, plus the Application Fee.

Premium Modal Factors

Annual, semi-annual and quarterly premium payment modes are available on an EFT or direct bill basis. Monthly premium payment is only available if the applicant selects EFT.

NOTE: Policies may be issued in annual, semi-annual, quarterly or monthly mode. To obtain annual, semi-annual or quarterly premiums, multiply the Monthly Premium Amount by 12, 6, or 3 respectively.

Application Fee

There is a one-time application fee of \$25. In most states, it is non-refundable and non-commissionable. The application fee may vary by state. Please refer to the Underwriting Guide for state-specific details. The Household Discount does not apply to the application fee.

Paper Applications (Fax and Mail)

eApps are our preferred method of submission, however paper applications are acceptable. They must be written legibly. Applications that are not legible will delay processing. Applications may be faxed to 1 (855) 414-1098, provided the premium payment method selected is EFT. If initial premium payment is collected (via check) with the application, the application must be submitted through the mail.

- **Errors:** Draw a line through the error and have the applicant initial and date the corrections. Corrections made using correction tape or fluid will not be accepted.
- **Premiums:** Initial premium must be paid before (by check) or at the time of policy issue (by EFT). Initial premium that is paid by check must be submitted with the application or quickly thereafter. If an eApp is completed, and the initial premium is being collected

by check, the application must be printed and mailed to the processing center. Money orders and third-party payments will not be accepted. Payment from the applicant or an immediate family member is permitted.

- **Signatures:** Signatures must be original; stamped signatures will not be accepted, for either the applicant or the agent. Be sure to review all pages to ensure that all signature lines have been signed and dated prior to submission. Not doing so will cause processing delays.
- **HIPAA:** The HIPAA Authorization form must be signed and dated by the applicant. A HIPAA Authorization form must be submitted with each application.
- **Submissions:** Applications for Medicare Supplements must be received within 30 days of the applicant's signature date. Applications cannot have a requested effective date prior to the applicant's signature date. If this is your first application in a JIT state, you must submit your application immediately upon signature due to state appointment requirements. A delay in submission may require a new application be written.

Paper Applications, accompanied by a premium payment check, can be mailed directly to the appropriate mailing address. If the applicant has selected EFT for premium payment method, the application may be faxed to 1 (855) 414-1098.





Commissions

Agent Support can assist you with any questions regarding your commissions. They can be reached at 1 (855) 406-9085.

Commission Payment Frequency

Commissions are paid weekly. You can view your commission statements online through the Agent Portal.

Commission Advancing

We offer 12 month commission advancing. Your election to receive advanced commissions is indicated when you complete your agent contract. This election must be approved by your upline. You may change your advancing option. Interest is charged on all advances at

1% per month. Interest is assessed to you monthly on the unearned commission balance. Advances will only be paid on policies issued with monthly EFT premium payment modes that are not Guaranteed Issue. For more information, please consult your agent contract.

Advancing Caps

Commission advances have a maximum cap of \$1,500.00 per case.

Chargebacks

Chargebacks are calculated weekly and commissions are applied to debit balance. Remaining commissions will be paid to you, after the debit balance has been satisfied.



Shenandoah Life Policy Holder and Agent Support: 1 (855) 406-9085
Technology Support, eApp or Agent Portal login issues: 1 (844) 550-1200

Mailing Address:

Shenandoah Life Insurance Company
P.O. Box 14558, Clearwater, FL 33766-4558

Overnight Address:

2650 McCormick Drive, Clearwater, FL 33759

Claims Address:

P.O. Box 14459, Clearwater, FL 33766-4459

Supplies: Email completed Supply Order Form to: supply@aiascvs.com

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