



## Onboarding User Guide

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## I. INTRODUCTION

We're thrilled to have you as a partner and are looking forward to working with you. Thank you for your interest in being part of Devoted Health's elite sales team!

Our mission is to build a health care solution that would be good enough for our own family and loved ones. We are devoted to the health and wellness of our members by helping them navigate the healthcare system with service guides, by utilizing world-class technology to enable a simplified experience, and by partnering with top providers for better health outcomes.

We value your partnership and hope to make your onboarding experience simple, yet informative. Here are a few quick — but important — updates.

Please keep in mind these instructions as you work through the onboarding and certification process:

In order to reach a complete status, you will be required to complete the following certification steps:

- Welcome Form & Agent Questionnaire
- Code of Conduct
- Agent Agreement
- Assignment of Commissions (if necessary)
- W-9 (if necessary)
- Direct Deposit Form (if necessary)
- Background Check Consent
- Medicare Core Training or equivalency upload (AHIP or Pinpoint)
- CMS Fraud, Waste & Abuse Training or equivalency upload (AHIP or Pinpoint)
- CMS Compliance Training or equivalency upload (AHIP or Pinpoint)
- State Selection
  - ◆ ONLY select the state(s) you hold an active health insurance license and are contracted to sell in by your upline agency
- Devoted Certification Training
  - ◆ You have 3 attempts to pass the training exam with a minimum score of 85%

- ◆ Each time the exam is opened (initiated) it will count as an attempt, therefore, it must be completed in one sitting (~30 min).

- License Check
- Appointment

If you can't finish these steps all at once, your progress will be saved and you can continue from the dashboard later.

Once you complete the appointment process for your respective state(s), you'll receive an email notification that you're "Ready to Sell" (RTS) for PY2021 and PY2020 (FL/TX Only). You cannot market or sell Devoted Health benefits until you receive this email.

## II. GETTING STARTED

**NOTE: Miramar Agent was formerly known as Sentinel Elite.** Your username and password should be the same if you are an existing agent. For password reset help, please contact Broker Support.

### OPTIMIZING YOUR EXPERIENCE

In order to optimize your certification experience in Miramar: Agent, please ensure you are using one of our supported browsers and have enabled pop-ups in your browser settings.

#### Supported Browsers

Compatibility for Miramar: Agent is tested with the following browsers:

-  Firefox
-  Chrome
-  Internet Explorer (IE) 9+

We recommend Internet Explorer 11. It is important you have enabled pop-ups before you access Miramar: Agent.

**QUICK TIP:** Restrictive security software can interfere with the ability to communicate training results to the learning management system from your browser. [Click here](#) for more information about what sites to set as secure.

- [https://\\*.gormanhealthgroup.com](https://*.gormanhealthgroup.com)
- [https://\\*.teamsupport.com](https://*.teamsupport.com)
- [https://\\*.miramar-agent.com](https://*.miramar-agent.com)

### Enabling Pop-Ups

It is important you have enabled pop-ups before you access Miramar: Agent, as training will pop up in a second tab or window.

Click [here](#) for more information on how to enable pop-ups in FireFox, Google Chrome, and Internet Explorer.

## ACCESSING THE SYSTEM

### Log in or register as a new user

To log in to your account, go to <https://miramar-agent.com> and enter your username and password on the main landing screen. Click Log In.

**miramar:agent**

## Welcome to Miramar:Agent

Miramar:Agent is a flexible, module-based software solution designed to assist government managed care organizations onboard agents, provide training, manage ongoing oversight activities, and pay commissions effectively and compliantly. Because every organization is unique, Miramar:Agent can be licensed as a complete solution or tailored to address specific needs. Log in below or click [here](#) to learn more.

Need help? Visit the [help](#) page.

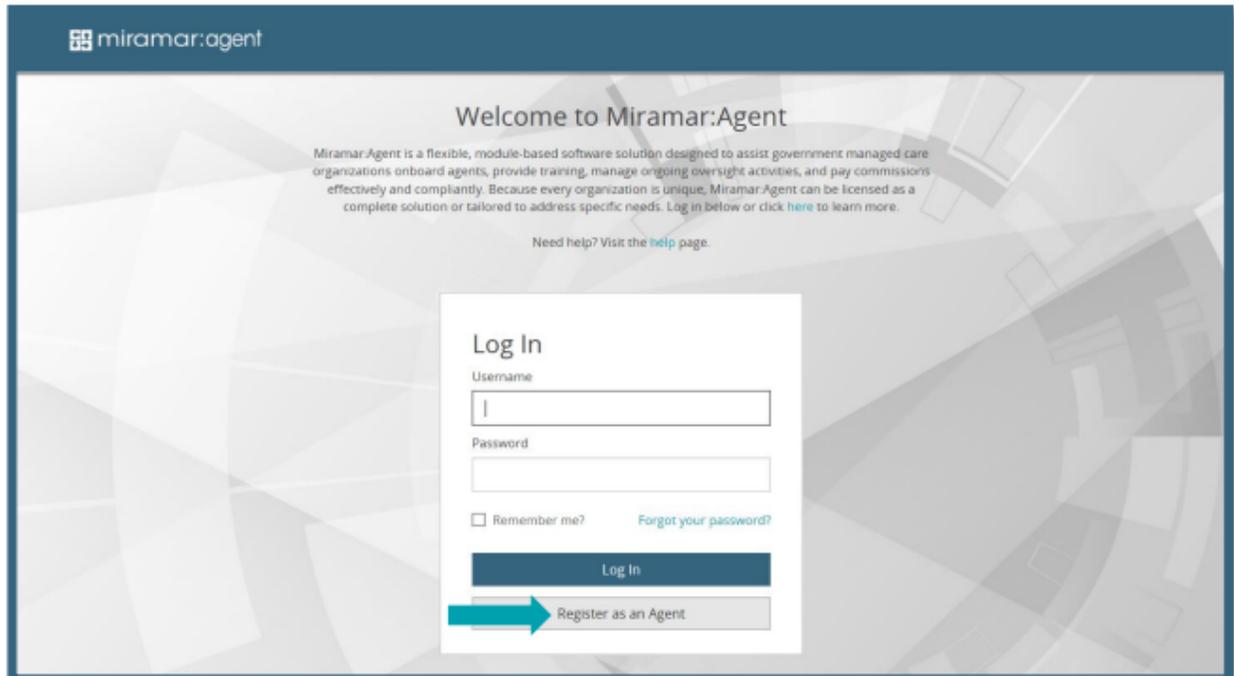
### Log In

Username

Password

Remember me? [Forgot your password?](#)

First-time users will need to register as an agent in the system. Click on **Register as an Agent**.



**miramar:agent**

## Welcome to Miramar:Agent

Miramar:Agent is a flexible, module-based software solution designed to assist government managed care organizations onboard agents, provide training, manage ongoing oversight activities, and pay commissions effectively and compliantly. Because every organization is unique, Miramar:Agent can be licensed as a complete solution or tailored to address specific needs. Log in below or click [here](#) to learn more.

Need help? Visit the [help](#) page.

### Log In

Username

Password

Remember me?    [Forgot your password?](#)

First, you will be asked to enter your Social Security Number (SSN). SSN is the unique identifier for users in the system. This step will check all existing users to verify the SSN entered does not already exist in a profile.

**IMPORTANT NOTE:** Failure to use a valid SSN could result in the inability to successfully complete a program, as the SSN is used for certain actions such as background checks.

miramar:agent

## Register for Program

Step 1 - Please enter your information so that we can securely verify you.  
Your information is kept confidential and secure at all times.

REGISTER

SSN\*

Confirm SSN\*

[Continue](#)

If you already have an account, please [log in](#).

Need help? Visit the [help page](#).

If you were given a **Registration Code** by Devoted or upline, enter the code immediately following the SSN validation. If you are not asked to enter a Registration Code, you were pre-enrolled into a program.

miramar:agent

## Register for Program

Step 2 - Please enter a registration code.  
If you do not have a registration code, please contact your plan admin.

REGISTER

Registration Code\*

[Continue](#)

If you already have an account, please [log in](#).

Need help? Visit the [help page](#).

Enter your demographic information, a username, password, and security question and answer. All fields marked with an asterisk (\*) are required. Click **Complete Registration** once you have completed the form. Once you have completed registration, you will be taken to your agent dashboard.

**miramar.agent**

### Account Setup

Final Step - We have validated your information.  
Please specify your demographic information and create login credentials below.  
Upon completion, you will be a member of the HealthFirst Demo group and will be registered to the Best Health Agent Certification program if/when the program is started.

**DEMOGRAPHIC INFORMATION**

First Name\*  Initial  Last Name\*  Suffix

Date of Birth\*  Gender\*  Male  Female

Social Security Number\*  National Producer Number

000-99-2344

hFS Logo

Email\*

Primary Phone Number\*  Phone Number Type\*

Additional Phone Number 1  Phone Number Type

Additional Phone Number 2  Phone Number Type

**LOGIN CREDENTIALS**

User Name\*

Password\*

Confirm Password\*

Security Question\*

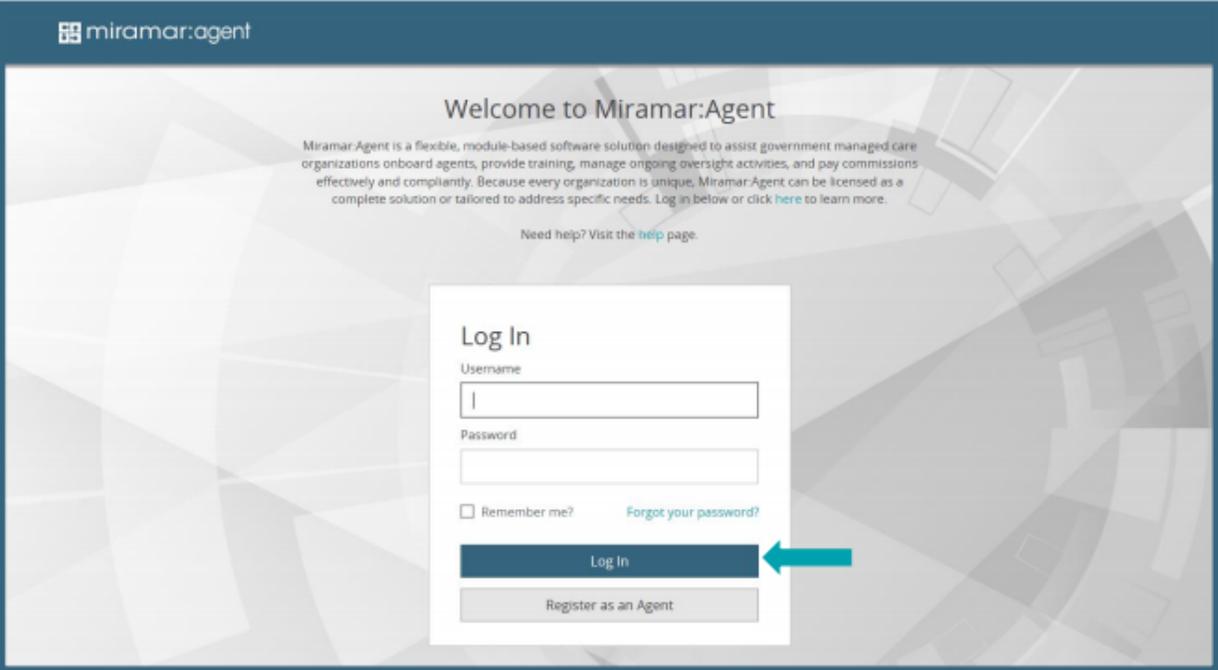
Security Question Answer\*

PRIMARY ADDRESS

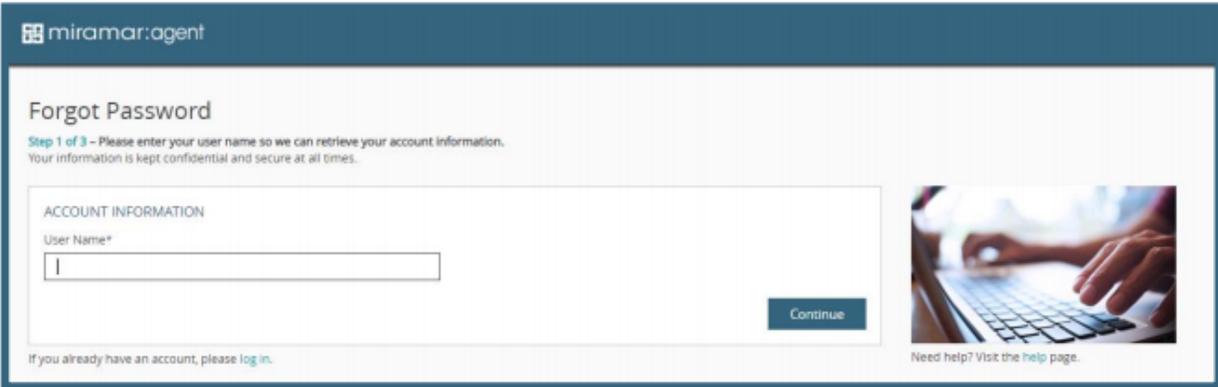
**IMPORTANT NOTE:** Enter a valid email as we will use it to send updates to you. Additionally, **the system will send you an email verification for you to confirm your email is valid.** Please complete within 24 hours or the link will expire. For security purposes, your SSN may not be used as your username. HINT: Passwords are required to contain a minimum of eight characters with at least one uppercase letter, one lowercase letter, one number, and one special character. Example: Password1#

### Password Reset

If you've forgotten your password, you can reset it directly from the login screen using a password reset wizard. Click on **Forgot your password?** and enter your username when prompted, then click **Continue**.



The image shows the Miramar:Agent welcome page. At the top left is the logo "miramar:agent". The main heading is "Welcome to Miramar:Agent". Below this is a paragraph of text: "Miramar Agent is a flexible, module-based software solution designed to assist government managed care organizations onboard agents, provide training, manage ongoing oversight activities, and pay commissions effectively and compliantly. Because every organization is unique, Miramar Agent can be licensed as a complete solution or tailored to address specific needs. Log in below or click [here](#) to learn more." Below the text is a link: "Need help? Visit the [help](#) page." The central focus is a "Log In" form with fields for "Username" and "Password", a "Remember me?" checkbox, a "Forgot your password?" link, a "Log In" button (highlighted with a red arrow), and a "Register as an Agent" button.



The image shows the "Forgot Password" screen. At the top left is the logo "miramar:agent". The heading is "Forgot Password". Below this is a sub-heading: "Step 1 of 3 - Please enter your user name so we can retrieve your account information. Your information is kept confidential and secure at all times." Below this is a form titled "ACCOUNT INFORMATION" with a "User Name\*" field. To the right of the form is a "Continue" button. Below the form is a link: "If you already have an account, please [log in](#)." On the right side of the screen is an image of hands typing on a laptop keyboard. At the bottom right is a link: "Need help? Visit the [help](#) page."

Next, confirm the answer to your self-selected security question and the last four digits of your SSN and click **Continue**.

**QUICK TIP:** If you cannot remember the answer to your security question, you will need to contact Broker Support at 1-877-764-9446 or the Miramar: Agent Helpdesk to answer additional questions to verify your identity and update your password. To contact the Helpdesk, create a ticket by clicking [here](#) or call using the plan-specific phone number provided by your plan representative.

Enter a new password and confirm by re-entering, then click **Reset Password**.

**NOTE:** Passwords are required to contain a minimum of eight characters with at least one uppercase letter, one lowercase letter, one number, and one special character. Example: Password1#

Once you have successfully reset your password, click log in to return to the login page.

### III. AGENT DASHBOARD

The Agent Dashboard is the hub of Miramar: Agent while also providing a snapshot of your current activity in the system. On your dashboard, you will see widgets for the following current information:

- Active programs
- Ready to sell information (current and previous benefit years)
- Group affiliations
- Recent training information

To view the full index of any of the dashboard widgets, click **View All**. From the individual index, you will be able to search and filter the available information.

From the dashboard, you can action any active program steps, edit your profile information, and access any of the tabs from your left side navigation menu.

The screenshot displays the 'Agent Dashboard' interface. On the left is a navigation menu with icons for Dashboard, Agent Appointments, Agency Appointments, Documents, Groups, Licenses, Messages, Programs, Ready to Sell, Training, and Scorecard. The main content area is titled 'Agent Dashboard' and includes a 'Register New' button. It is organized into three primary sections:

- ACTIVE PROGRAMS:** Features a progress bar for 'Best Health Agent Onboarding and Certification' (100%) and a 'Training: CMS Compliance' button.
- READY TO SELL:** A table with columns: Plan, Contract Name, Contract #, State, Benefit Year, Effective. It shows 'No results' and a 'View All' link.
- RECENT TRAINING:** A table with columns: Plan, Course Name, Enrolled Date, Attempt, Score, Passed, Completed Date. It shows 'No results' and a 'View All' link.

At the bottom right, there is a 'View All' link for the Groups section.

**Update profile information**

You can update your profile demographic information, change your account password, or change your security question and answer at any point in time after completing registration.

To do so, move your cursor to the upper right corner of your screen and click the down arrow that appears to the right of your name. A drop-down menu will be displayed. Select **Profile**.

The screenshot shows the 'miramar:agent' dashboard. In the top right corner, a user profile dropdown menu is open, with 'Profile' selected and highlighted by a red arrow. The dashboard content includes:

- Agent Dashboard** header with a 'Register Now' button.
- ACTIVE PROGRAMS** section showing 'Best Health Agent Onboarding and Certification' with a progress indicator and a 'Training: CMS Compliance' button.
- READY TO SELL** section with a table showing 'No results'.
- GROUPS** section with a table showing one group: 'Best Health Plan, Inc'.
- RECENT TRAINING** section with a table showing 'No results'.

Once you've made the desired changes to your profile, be sure to click Save at the bottom of the screen before you leave the page.

The screenshot shows the 'My Profile' page in the 'miramar:agent' system. The page is divided into several sections:

- DEMOGRAPHIC INFORMATION:** Includes fields for First Name (GHG), Initial, Last Name (Test), Suffix, Date of Birth (01/01/1980), Gender (Male/Female), Social Security Number (000-08-2374), National Producer Number, NPN License, Email (test82374@example.com), FFM ID, Primary Phone Number (000-555-0100), and Phone Number Type (Office).
- LOGIN CREDENTIALS:** Includes fields for Username (testagent82374), Password, Confirm Password, Security Question (What is the name of your first pet?), and Security Question Answer (dog).
- PRIMARY ADDRESS:** Includes fields for Address Line 1 (123 Street), Address Line 2, City (City), State (Alaska), and Zip (12345).

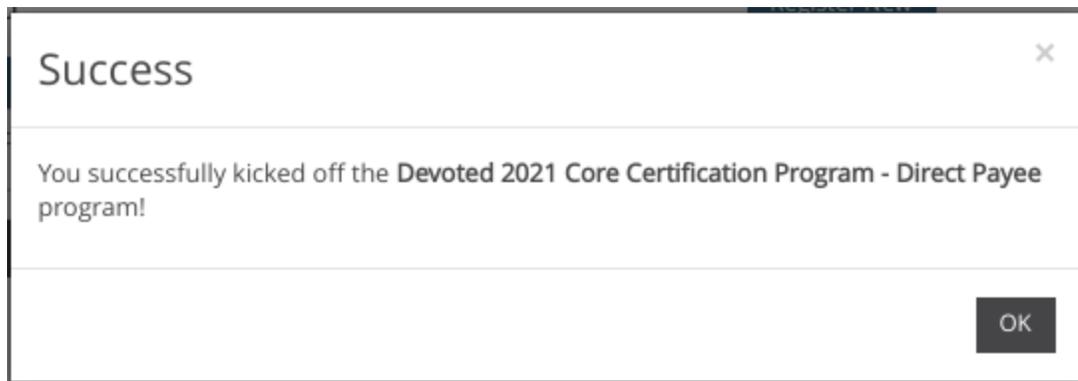
At the bottom right, there are 'Cancel' and 'Save' buttons. A note at the bottom states: 'If you plan to pursue appointment with any organization in the state of Tennessee, your primary address must match your address as on file with the state of Tennessee or your appointment will be rejected.'

## Onboarding & Certification Workflow

## Click Start

The screenshot shows the 'Agent Dashboard' interface. On the left is a navigation menu with items like 'Dashboard', 'Agent Appointments', 'Agency Appointments', 'Documents', 'Groups', 'Agent Licenses', 'Messages', 'Programs', 'Ready to Sell', 'Training', and 'Scorecard'. The main content area is titled 'Agent Dashboard' and includes a 'Register New' button. An alert banner at the top states 'Alert: Maintenance Tonight 9:00-11:00 EST'. Below this is the 'ACTIVE PROGRAMS' section, which features a progress bar for the 'Devoted 2020 Core Certification Program - Direct Payee' and a 'Start' button. To the right, there are sections for 'READY TO SELL' and 'GROUPS', each with a table of data. At the bottom, there is a 'RECENT TRAINING' section with a table of training records.

This window confirms you have kicked off the program. You will receive a confirmation email. Please make sure your profile information is up to date.



Click  (refresh), which is located above the Start button.

## Welcome Form

Click Welcome button.

**Agent Dashboard** Register New

**Alert:** Maintenance Tonight 9:00-11:00 EST [Learn more](#)

**ACTIVE PROGRAMS**

Devoted 2020 Core Certification Program - Direct Payee 1 [Welcome Form](#)

[View All](#)

**READY TO SELL**

Plan	Contract Name	Contract #	State	Benefit Year	Effective
No results					

[View All](#)

**GROUPS**

Plan	Group	Start Date	Writing Code
Devoted Health	Billing	07/19/2019	

[View All](#)

**RECENT TRAINING**

Plan	Course Name	Enrolled Date	Attempt	Score	Passed	Completed Date
No results						

[View All](#)

Complete the following questions. **Select** all fields that apply.

**Devoted 2021 Core Certification Program - Direct Payee**

**Devoted Health** For General Miramar:Agent Help: 877-494-2912 or <https://convey.na2.teamsupport.com>

**AGENT QUESTIONNAIRE**

We would like to learn more about our geographic coverage, as well as, understand our broker population further to build tools/training that most align with our broker partners. This information will not be used for certification and appointing purposes.

Which counties do you primarily sell in?

**Florida**

- Broward
- Clay
- Duval
- Hernando
- Hillsborough
- Lake
- Manatee
- Marion
- Miami Dade
- Nassau
- Orange
- Osceola
- Palm Beach
- Pasco
- Pinellas
- Polk
- Seminole
- Sumter

### Code of Conduct

Click the **Code of Conduct** button.

miramar:agent ✉ Need help? [Click here.](#) Devoted Test Agent ▼

**Agent Dashboard** Register New

**ACTIVE PROGRAMS** Code of Conduct

Devoted 2021 Core Certification Program - Direct Payee 1

[View All](#)

**READY TO SELL**

Plan	Contract Name	Contract #	State	Benefit Year	Effective
No results					

[View All](#)

**GROUPS**

Plan	Group	Start Date	Writing Code
Devoted Health	Devoted Health	06/23/2020	
Best Health Plan, Inc	Load Testing	07/14/2017	

[View All](#)

**RECENT TRAINING**

Plan	Course Name	Enrolled Date	Attempt	Score	Passed	Completed Date
No results						

[View All](#)

miramar:agent ✉ Need help? [Click here.](#) Devoted Test Agent ▼

**Devoted 2021 Core Certification Program - Direct Payee**

 For General Miramar:Agent Help: 877-494-2912 or <https://convey.na2.teamsupport.com>

**DEVOTED HEALTH PLAN CODE OF CONDUCT**

 **Business Code of Conduct**

At Devoted, we are building better healthcare for Medicare beneficiaries and are delivering on our promises to our members. Each of us must be committed to the highest standards of business conduct. We require all associates, officers, directors and our business partners to understand and follow these high standards while doing their jobs for Devoted. Although we are a very young company, we are built for the long term.

Our Code of Conduct reflects Devoted Health's core values. In fact, our Code, is at the very foundation of our core values:

- 1. We are a paragon of hypercompliance with the letter and spirit of the law.**
- 2. Every member is family.** Love for each other and for our members is at the heart of everything we do.
- 3. We build for a rolling 20-year time horizon.**

This document is your guide in understanding and following Devoted's high standards of business conduct.

**Policy Brief & Purpose**

Our Code of Conduct, which is closely aligned with Devoted's Employee Code of Conduct policy that outlines our expectations regarding employees' behavior towards our members, their colleagues, and overall organization. This code of conduct also outlines our obligation to the federal government and the laws governing the Medicare program.

**Scope**

This policy applies to all our employees, regardless of employment agreement or rank, business partners and Board Members. Business partners may include any non-associate contracted, directly or indirectly to perform a business function or provide goods or a service for or on Devoted's behalf. These may also be referred to as first-tier, downstream and related entities (FDRs).

**Policy Elements**

Devoted employees and business partners are bound by our Code of Conduct while performing their duties in work and also outside the workplace, if you become aware of a

**Check the acknowledgement box and **Click** continue.**

-  Dashboard
-  Agent Appointments
-  Documents
-  Groups
-  Agent Licenses
-  Messages
-  Programs
-  Ready to Sell
-  Training
-  Scorecard

### Devoted 2021 Core Certification Program - Direct Payee

 For General MiramarAgent Help: 877-494-2912 or <https://convey.na2.teamsupport.com>



### Business Code of Conduct

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- Any information (including personal information) on Company devices or systems is potentially recoverable by Devoted in the event of legal action or investigations.
- Any other information Devoted employees/business partners create, transmit, or possess, must adhere to our Code of Conduct. This includes but is not limited to our policies of Unlawful Discrimination and Harassment; Restricted, Confidential and Proprietary Information; and Conflicts of Interest.
- Social Media — If you post something on your own blog, webpage, social networking, Twitter or similar site or on someone else's, and you mention Devoted and also express either a political opinion or an opinion regarding Devoted Health's actions that could pose an actual or potential conflict of interest with the Company, you must include a disclaimer. You should specifically state that the opinion expressed is your personal opinion and not the Company's position. Content must adhere to our Code of Conduct, Centers for Medicare & Medicaid Services (CMS) and state regulatory guidelines, as applicable
- Follow the PHI and Office Security Policies — You must properly handle PHI. Do not enter any protected health information in any system that is not HIPAA compliant. Immediately report any suspicious activity or potential breaches to the privacy officer.
- All items such as Devoted manuals, reports, records and statements are the property of the company and must be kept at the company, unless removal has been properly authorized. Paper business records should be avoided whenever possible and shredded as soon as no longer needed.

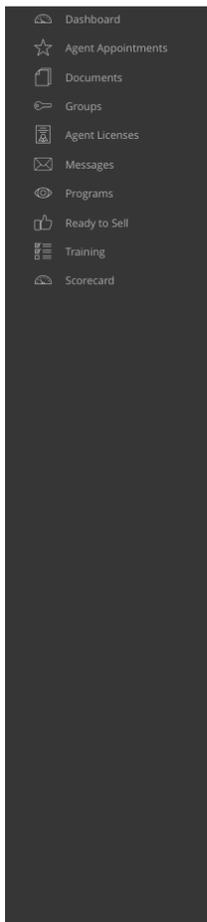
I acknowledge that I have read and understand Devoted Health's code of conduct and I agree to abide by its provisions.

[Continue](#)

**Agent Agreement**  
Click Agent Agreement.

The screenshot shows the 'miramar:agent' dashboard. On the left is a navigation sidebar with items: Dashboard, Agent Appointments, Documents, Groups, Agent Licenses, Messages, Programs, Ready to Sell, Training, and Scorecard. The main content area is titled 'Agent Dashboard' and includes a 'Register New' button. It features three main sections: 'ACTIVE PROGRAMS' with a progress bar for 'Devoted 2021 Core Certification Program - Direct Payee' and an 'Agent Agreement' link; 'READY TO SELL' with an empty table; 'GROUPS' with a table listing 'Devoted Health' and 'Best Health Plan, Inc'; and 'RECENT TRAINING' with an empty table. The top right corner has a 'Need help? Click here.' link and a user profile for 'Devoted Test Agent'.

Please review the entire agreement to understand all terms and conditions.



## Devoted 2021 Core Certification Program - Direct Payee


 For General Miramar:Agent Help: 877-494-2912 or <https://convey.na2.teamsupport.com>

## DEVOTED HEALTH PLAN AGENT AGREEMENT - DIRECT PAYEE

**DEVOTED HEALTH  
DIRECT PAYEE EXTERNAL AGENT AGREEMENT**

This Direct Payee External Agent Agreement ("Agreement") is made and entered into by and between the legal entity or individual identified in the Agreement ("External Agent") and Devoted Health, Inc., on behalf of its subsidiaries and Affiliates, as defined herein (each a "Plan"), that offers one or more Medicare Advantage ("MA") benefit plans.

**WHEREAS**, Plan is licensed as a health maintenance organization ("HMO") or insurer in the State and has or is seeking a contract with the Centers for Medicare & Medicaid Services ("CMS") to offer MA benefit plans in the State; and

**WHEREAS**, Plan wishes to contract with External Agent to, directly or indirectly, provide certain marketing and sales services in connection with Plan's MA plans.

**NOW, THEREFORE**, in consideration of the premises and mutual promises herein stated, the parties hereby agree as follows:

**ARTICLE I  
DEFINITIONS**

1.1 **Affiliate** means an entity controlled by, controlling, or under common control with another entity including, but not limited to, through ownership of stock, joint venture, or membership interest. For purposes of this definition, "control" of an entity means direct or indirect ownership of a majority of the entity.

1.2 **Attachment(s)** means the attachments to this Agreement, incorporated herein by reference, including all Exhibits and Schedules.

1.3 **Benefit Plan** means the agreement, certificate of coverage, policy forms or other documents, together with any riders that describes the services that Plan has agreed to provide to Plan Members, as may be amended, modified, replaced, or supplemented from time to time by Plan.

1.4 **Laws** means any applicable constitution, statute, code, ordinance, regulation, treaty, rule, court order or mandate, common law, policy, interpretation or guidance document enacted, published or promulgated by any federal, State or local governmental authority which has jurisdiction over the subject matter of this Agreement or the parties' performance of their duties hereunder.

Enter your name and **Click Continue.**

miramar:agent ✉ Need help? [Click here.](#) Devoted Test Agent ▾

Dashboard

Agent Appointments

Documents

Groups

Agent Licenses

Messages

Programs

Ready to Sell

Training

Scorecard

## Devoted 2021 Core Certification Program - Direct Payee

 For General Miramar:Agent Help: 877-494-2912 or <https://convey.na2.teamsupport.com>

appropriate, the laws of the Commonwealth of Massachusetts, excluding its body of law controlling conflict of laws.

i. **Entire Agreement. Effect on Services Agreement.** This BAA embodies the entire understanding of the parties in relation to the subject matter hereof and supersedes any prior or contemporaneous agreements, whether written or oral, between the parties in relation to the subject matter hereof. Except as specifically required to implement the purposes of this BAA, all terms of the Services Agreement shall remain in full force and effect. To the extent that any provision of this BAA specifically conflicts with the terms of the Services Agreement, the provisions of this BAA shall govern.

j. **Severability.** If any provision of this Agreement is held invalid or unenforceable by a court of competent jurisdiction, the remaining provisions of the Agreement will remain in full force and effect, and the provision affected will be construed so as to be enforceable to the maximum extent permissible by law.

k. **Waiver.** The waiver of any breach of any provision of this Agreement will not constitute a waiver of the same or any subsequent breach of the same or other provisions hereof.

l. **Counterparts.** This BAA may be executed in one or more counterparts, and such counterparts may be exchanged by electronic or facsimile transmission, each of which will be deemed an original, but all of which together constitute one and the same instrument.

m. **Independent Contractors.** For purposes of this BAA, Covered Entity and Business Associate are and will act at all times as independent contractors. None of the provisions of this BAA are intended to create, nor shall be deemed or construed to create, any relationship other than that of independent entities contracting with each other for the purpose of effecting this BAA. None of the provisions of this BAA shall establish or be deemed or construed to establish any partnership, agency, employment agreement or joint venture between the parties.

Electronic Signature: By entering your name and date below, you acknowledge that you are signing this Agreement electronically. You agree your electronic signature ("eSignature") is the legal equivalent of your manual signature on a paper copy of the Agreement and Sales Agent is therefore legally bound by this Agreement's terms and conditions. You also agree that no certification authority or other third party verification is necessary to validate your eSignature and that the lack of such certification or verification will not in any way affect the enforceability of your eSignature.

Signature:  Date: 6/23/2020

[Continue](#)

Click on the Dashboard to return to the workflow (if necessary).

## Assignment of Commissions (if necessary)

Click Assignment of Commissions button.

The screenshot shows the 'Agent Dashboard' in the miramar:agent system. The dashboard is divided into several sections:

- ACTIVE PROGRAMS:** Displays 'Devoted 2021 Core Certification Program - Direct Payee' with a progress indicator and an 'Assignment of Commissions' button.
- READY TO SELL:** A table with columns: Plan, Contract Name, Contract #, State, Benefit Year, Effective. It shows 'No results' and a 'View All' link.
- GROUPS:** A table with columns: Plan, Group, Start Date, Writing Code. It lists 'Devoted Health' (06/23/2020) and 'Best Health Plan, Inc' (07/14/2017).
- RECENT TRAINING:** A table with columns: Plan, Course Name, Enrolled Date, Attempt, Score, Passed, Completed Date. It shows 'No results' and a 'View All' link.

The left sidebar contains navigation options: Dashboard, Agent Appointments, Documents, Groups, Agent Licenses, Messages, Programs, Ready to Sell, Training, and Scorecard.

**Individual** - use if you would like your commissions to be paid to your personal bank account.

**Agency** - use if you would like your commissions to be paid to your personal agency (different than your upline agency) bank account.

## Agency Assignment (if necessary)

The screenshot shows the 'Assignment of Commissions' form for the 'Devoted 2021 Core Certification Program - Direct Payee'. The form includes the Devoted Health logo and contact information for General Miramar:Agent Help. The main question is: 'Would you like your commissions to be paid to you as an individual or your personal company (different than your upline agency)? (Only one can be selected)'. There are two radio button options:

- Individual (e.g. SSN)
- Personal Company (e.g. EIN)

A 'Continue' button is located at the bottom right of the form.

W-9 (if necessary)

The screenshot shows the 'miramar:agent' dashboard. On the left is a navigation sidebar with options: Dashboard, Agent Appointments, Documents, Groups, Agent Licenses, Messages, Programs, Ready to Sell, Training, and Scorecard. The main content area is titled 'Agent Dashboard' and includes a 'Register New' button. It is divided into three main sections:

- ACTIVE PROGRAMS:** Shows 'Devoted 2021 Core Certification Program - Direct Payee' with a progress indicator and a 'Form: W9' button. A 'View All' link is at the bottom.
- READY TO SELL:** A table with columns: Plan, Contract Name, Contract #, State, Benefit Year, Effective. It shows 'No results' and a 'View All' link.
- GROUPS:** A table with columns: Plan, Group, Start Date, Writing Code. It lists 'Devoted Health' (06/23/2020) and 'Best Health Plan, Inc' (07/14/2017). A 'View All' link is at the bottom.
- RECENT TRAINING:** A table with columns: Plan, Course Name, Enrolled Date, Attempt, Score, Passed, Completed Date. It shows 'No results' and a 'View All' link.

Complete all information.

- Dashboard
- Agent Appointments
- Documents
- Groups
- Agent Licenses
- Messages
- Programs
- Ready to Sell
- Training
- Scorecard

### Devoted 2021 Core Certification Program - Direct Payee

**DevotedHealth** For General Miramar:Agent Help: 877-494-2912 or <https://convey.na2.teamsupport.com>

Please complete the W9 form below. To reference the complete W9 form from the IRS website, [click here.](#)

Form <b>W-9</b> (Rev. October 2018) Department of the Treasury Internal Revenue Service	<b>Request for Taxpayer          Identification Number and Certification</b> <small>► Go to <a href="http://www.irs.gov/FormW9">www.irs.gov/FormW9</a> for instructions and the latest information.</small>	<b>Give Form to the          requester. Do not          send to the IRS.</b>
<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Devoted Test		
<b>2</b> Business name/disregarded entity name, if different from above [Type Business Name Here]		
<small>Print or type.          See Specific Instructions on page 3.</small>	<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small>	
	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
	<b>5</b> Address (number, street, and apt. or suite no.) See instructions. Requester's name and address (optional)	
	<b>6</b> City, state, and ZIP code	
<b>7</b> List account number(s) here (optional)		

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>									
<b>or</b>									
<b>Employer identification number</b>									

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Cancel Save

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Devoted 2021 Core Certification Program - Direct Payee



Please complete the W9 form below. To reference the complete W9 form from the IRS website, [click here.](#)

**Form W-9**  
 (Rev. October 2018)  
 Department of the Treasury  
 Internal Revenue Service

**Request for Taxpayer  
 Identification Number and Certification**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give Form to the  
 requester. Do not  
 send to the IRS.**

---

**1** Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  
 Devoted Test

**2** Business name/disregarded entity name, if different from above  
 [Type Business Name Here]

**3** Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC     C Corporation     S Corporation     Partnership     Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ \_\_\_\_\_

Other (see instructions) ▶ \_\_\_\_\_

**4** Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  
 Exempt payee code (if any) \_\_\_\_\_  
 Exemption from FATCA reporting code (if any) \_\_\_\_\_  
(Applies to accounts maintained outside the U.S.)

**5** Address (number, street, and apt. or suite no.) See instructions.      Requester's name and address (optional)

**6** City, state, and ZIP code

**7** List account number(s) here (optional)

---

**Part I Taxpayer Identification Number (TIN)**  
 Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>								
<b>or</b>								
<b>Employer identification number</b>								

---

**Part II Certification**  
 Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Cancel
Save

Click Save

### Direct Deposit (if necessary)

Enter bank account information and **Click** next.

**miramar:agent**  Need help? [Click here.](#) Devoted Test Agent 

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### Devoted 2021 Core Certification Program - Direct Payee

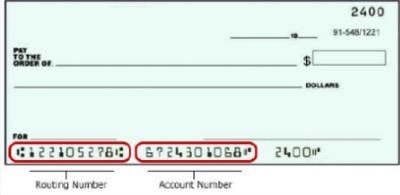
 For General Miramar:Agent Help: 877-494-2912 or <https://convey.na2.teamsupport.com>

#### DIRECT DEPOSIT

Please complete the following fields:

<b>Institution Name:</b>	<input type="text" value="Enter the name of your banking institution."/>
<b>Account Type:</b>	<input type="text" value="Checking"/> 
<b>Routing Number:</b>	<input type="text" value="Enter the routing number"/>
<b>Routing Number confirm:</b>	<input type="text" value="Confirm the routing number"/>
<b>Account Number:</b>	<input type="text" value="Enter the account number"/>
<b>Account Number confirm:</b>	<input type="text" value="Confirm the account number"/>

Refer the image below for information on how to find your Routing and Account numbers.



**Routing Number:** 22405276  
**Account Number:** 24304066 2400

[Continue](#)

## Background Check Consent

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 For General Miramar:Agent Help: 877-494-2912 or <https://convey.na2.teamsupport.com>

**BACKGROUND CHECK CONSENT**

**ACKNOWLEDGEMENT AND AUTHORIZATION FOR CONSUMER REPORTS**

In connection with your application for services with Devoted Health and their agent, Convey Health Solutions, you understand that consumer reports or investigative consumer reports may be requested about you including information about your character, general reputation, personal characteristics and mode of living, employment record, education, qualifications, criminal record, driving record, credentials, and/or credit and indebtedness, and may involve personal interviews with sources such as supervisors, friends, neighbors, associates, public record or various Federal, State, or Local agencies.

You hereby authorize the obtaining of such consumer reports and investigative consumer reports at any time after execution of this authorization. By signing below, you hereby authorize without reservation, any party or agency contacted by Devoted Health and/or its agent Convey Health Solutions, or the consumer reporting agency acting on behalf of Devoted Health or its agent, Convey Health Solutions, to furnish the above mentioned information to Devoted Health, its agent, Convey Health Solutions, or any other agents, affiliates, or designated representatives. You further authorize ongoing procurement of the above mentioned reports at any time during your continued contract for services. You also agree that a fax or photocopy of this authorization with your signature shall be accepted with the same authority as the original.

You can find the complete text of the Fair Credit Reporting Act, including your rights under the Fair Credit Reporting Act, on the Federal Trade Commission's website at:

<http://www.ftc.gov/>

For New York residents only: A consumer report will be requested in connection with your application, and additional consumer reports may be requested during your continued contract for service with Devoted Health. You have the right, upon request, to be informed whether or not a consumer report was requested, as well as the name and address of the consumer reporting agency that furnished the consumer report. By signing below, you also acknowledge receipt of Article 23-A of the New York Correctional Law (available at <https://www.labor.ny.gov/formsdocs/wp/correction-law-article-23a.pdf>).

For California residents only: By signing below, you also acknowledge receipt of A Summary of Your Rights Under the Provisions of California Civil Code Section 1786.22 (available at <https://ibrinc.com/rights/Notice-of-Rights-for-California-Employees-Your-Rights-to-Review-an-Investigative-Consumer-Report18.pdf>).

For Washington residents only: By signing below, you also acknowledge receipt of A Summary of Your Rights Under the Washington Fair Credit Reporting Act (available at <https://ibrinc.com/rights/Washington-Summary-Rights.pdf>).

My signature below indicates that I have read, understand, and accept all disclosure and acknowledgements.

**AUTHORIZATION**

Entering my name below constitutes my digital signature, and is intended by me to have legally binding effect.

**Enter your signature**  
**Click Accept**

<http://www.tlc.gov/>

For New York residents only: A consumer report will be requested in connection with your application, and additional consumer reports may be requested during your continued contract for service with Devoted Health. You have the right, upon request, to be informed whether or not a consumer report was requested, as well as the name and address of the consumer reporting agency that furnished the consumer report. By signing below, you also acknowledge receipt of Article 23-A of the New York Correctional Law (available at <https://www.labor.ny.gov/formsdocs/wp/correction-law-article-23a.pdf>).

For California residents only: By signing below, you also acknowledge receipt of A Summary of Your Rights Under the Provisions of California Civil Code Section 1786.22 (available at <https://ibrinc.com/rights/Notice-of-Rights-for-California-Employees-Your-Rights-to-Review-an-Investigative-Consumer-Report18.pdf>).

For Washington residents only: By signing below, you also acknowledge receipt of A Summary of Your Rights Under the Washington Fair Credit Reporting Act (available at <https://ibrinc.com/rights/Washington-Summary-Rights.pdf>).

My signature below indicates that I have read, understand, and accept all disclosure and acknowledgements.

AUTHORIZATION

Entering my name below constitutes my digital signature, and is intended by me to have legally binding effect.

Signature:

Date:  

## Medicare Core Training

### Upload AHIP or PinPoint certificate

or

### Click Proceed to Training

 Need help? [Click here.](#) Devoted Test Agent

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 For General Miramar:Agent Help: 877-494-2912 or <https://convey.na2.teamsupport.com>

**MEDICARE CORE TRAINING FOR AGENTS AND BROKERS**

In accordance with the guidelines set by the Centers for Medicare and Medicaid Services (CMS), Plans/Part D sponsors (including 3rd party vendors, if applicable) must ensure that all their agents and brokers (including employed, subcontracted, downstream, and/or delegated entities) that sell Medicare products are trained and tested annually on Medicare rules and regulations.

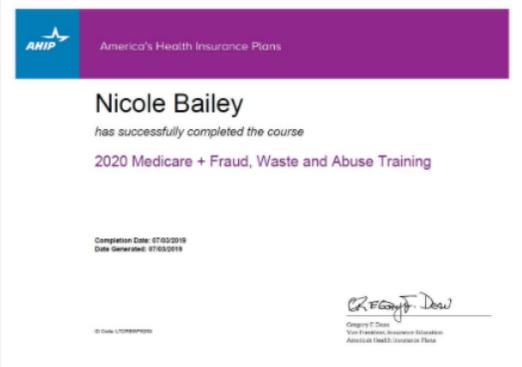
Have you completed Medicare Core training?

Within Miramar:Agent, if you've previously completed this training or have already uploaded one of the certificates above (for the current plan year), click "Recheck Completion" below.

**Attach 2021 AHIP or PinPoint certificate.**

**AHIP CERTIFICATE UPLOAD**

Please use this form to upload your AHIP Certificate.

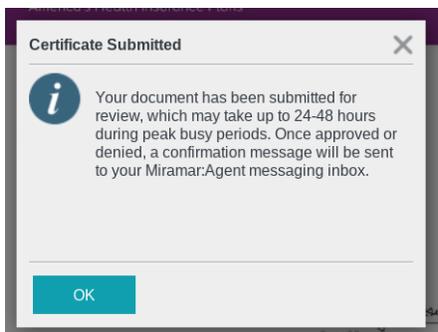


The certificate image shows the AHIP logo and text: "America's Health Insurance Plans", "Nicole Bailey has successfully completed the course", "2020 Medicare + Fraud, Waste and Abuse Training", "Completion Date: 07/03/2019", "Date Generated: 07/03/2019", and a signature of Gregory T. Davis.

Attach File: Click here to attach a file

Submit Cancel

This window will appear when your certificate has been submitted for review. Review can take 24-48 hours.



## State Selection

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Agent Dashboard Register New

Devoted 2021 Core Certification Program - Direct Payee 1 State Selection

View All

ACTIVE PROGRAMS

READY TO SELL

Plan	Contract Name	Contract #	State	Benefit Year	Effective
No results					

View All

GROUPS

Plan	Group	Start Date	Writing Code
Devoted Health	Devoted Health	06/23/2020	
Best Health Plan, Inc	Load Testing	07/14/2017	

View All

RECENT TRAINING

Plan	Course Name	Enrolled Date	Attempt	Score	Passed	Completed Date
No results						

View All

**Check** states that you have an active health insurance license and are contracted to sell in by their upline agency. Then **Click** continue.

miramar:agent ✉ Need help? [Click here.](#) Devoted Test Agent ▼

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Devoted 2021 Core Certification Program - Direct Payee

 For General Miramar:Agent Help: 877-494-2912 or <https://convey.na2.teamsupport.com>

**SELLING STATE SELECTION**

Please select the state(s) you hold an active health insurance license and intend to market and sell Devoted benefits. For every state selected, you will be enrolled in a State Specific Program that will verify your license and appointment – these require **no further action from you** as it is an automated process. Once this process is complete, expect to receive a Ready to Sell (RTS) email for each state you select. **Keep in mind, if you do not receive a RTS email communication you cannot begin to market or sell our benefits.**

Florida

Texas

Arizona

Ohio

Continue

## Devoted Health 2021 Certification Training

Click  to start the training.

Completing the course: Devoted Health 2021 Certification Training

2021 Devoted Agent Certification Training		
2021 Devoted Agent Certification Exam		

You are required to complete this exam with a minimum score of 85%. Opening the exam counts as an attempt, so do not proceed unless you have a good internet connection and adequate time to complete the exam.

dominKnow::: 2021 Devoted Agent Certification Training | Medicare. Now it's personal.
Close



**Medicare. Now it's personal.**



**2021 Agent Certification Training**

▶ ⏮ ⏪
00:08 / 00:08
⏩ ⏭ 1 / 67

To move forward or backward **Click** on the navigation button .

**Click**  to exit the training.

Click  to start the exam.

Completing the course: Devoted Health 2021 Certification Training

2021 Devoted Agent Certification Training	completed	
2021 Devoted Agent Certification Exam		

You are required to complete this exam with a minimum score of 85%. Opening the exam counts as an attempt, so do not proceed unless you have a good internet connection and adequate time to complete the exam.

Close



2021 Devoted Agent Certification Exam A

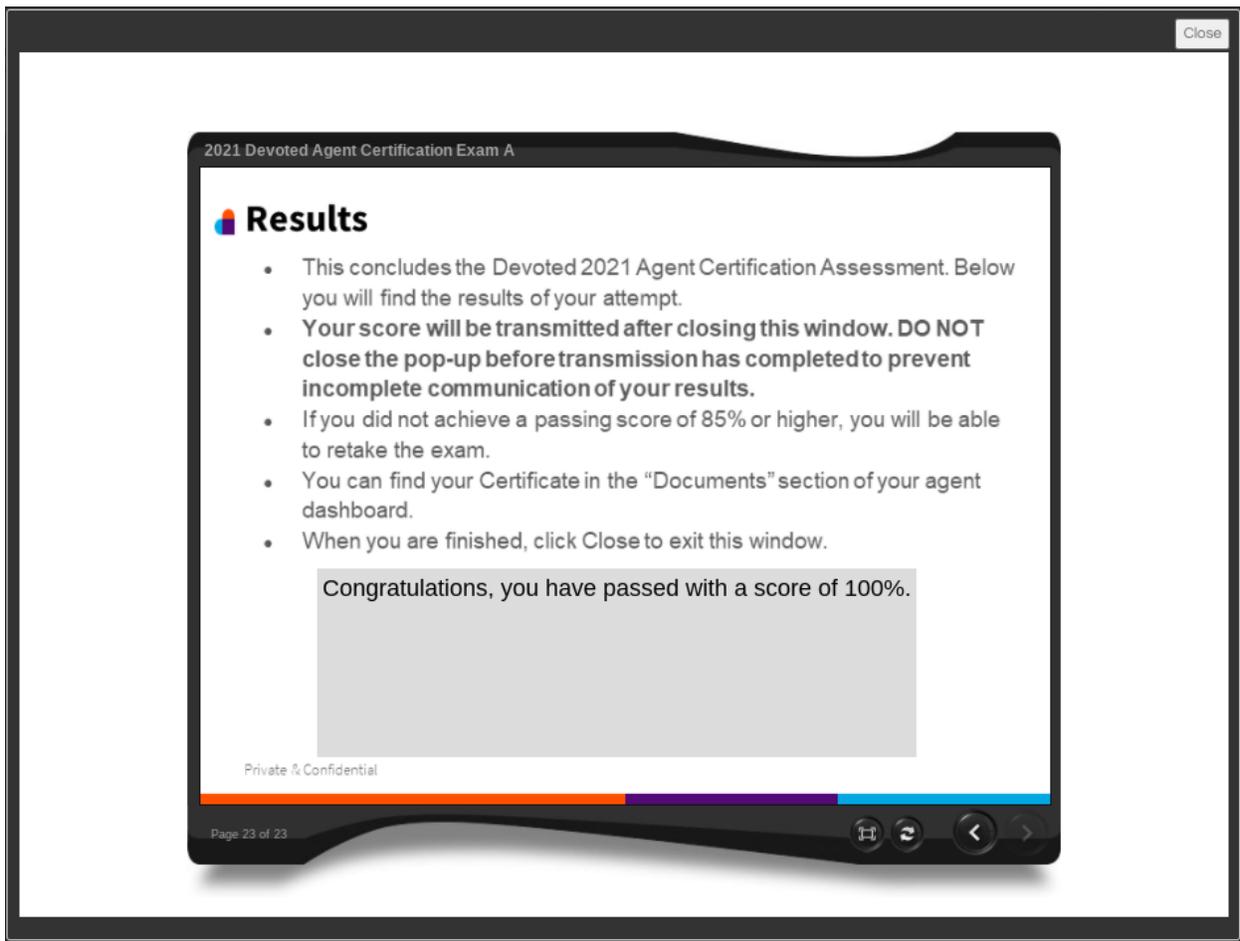
 DevotedHealth

Medicare. Now it's personal.

**2021 Agent Certification Assessment**

Page 1 of 23

Click  to exit the exam.



Return to the Dashboard

Once you get to this screen, you have completed the workflow.

The screenshot displays the 'Agent Dashboard' interface. On the left is a navigation sidebar with icons for Dashboard, Agent Appointments, Documents, Groups, Job Queue, Agent Licenses, Messages, Programs, Ready to Sell, Training, Scorecard, and Knowledge Base. The main content area is titled 'Agent Dashboard' and includes a 'Register New Program' button. It is divided into four sections:

- ACTIVE PROGRAMS:** A table with the message 'There are no programs currently in progress' and a 'View All' link.
- READY TO SELL:** A table listing health plans with columns for Plan, Contract Name, Contract #, State, Benefit Year, Effective, and In Good Standing.
 

Plan	Contract Name	Contract #	State	Benefit Year	Effective	In Good Standing
Devoted Health	Devoted Health Plan	H2697	OH	2021	08/19/2020	✓
Devoted Health	Devoted Health Plan	H8173	AZ	2021	08/17/2020	✓
Devoted Health	Devoted Health Plan	H1290	FL	2021	08/17/2020	✓
Devoted Health	Devoted Health Plan	H7993	TX	2021	08/17/2020	✓
- GROUPS:** A table with columns for Plan, Group, Start Date, and Writing Code.
 

Plan	Group	Start Date	Writing Code
Devoted Health		08/09/2018	
- RECENT TRAINING:** A table with columns for Plan, Course Name, Enrolled Date, Attempt, Score, Passed, and Completed Date. It shows 'No results' and a 'View All' link.

You will receive a Ready to Sell (RTS) email applicable to the state selection you made in the State Selection Form. The appointment process can take up to 5 - 7 business days depending on each state process. If you select multiple states, you will receive a RTS email for each state.

The email will come from noreply <[noreply@gormanhealthgroup.com](mailto:noreply@gormanhealthgroup.com)>

Subject: DEVOTED HEALTH 2021 READY TO SELL - FLORIDA

Congratulations on completing your 2021 certification with Devoted Health! This email confirms you are now "Ready to Sell" (RTS) for PY2021 and PY2020 - Devoted Health Medicare Advantage plans in Florida.

We're so excited to have you working with us. As a reminder, we hold all of our agents to the highest standards. We expect you to be ethical, compliant, courteous, and professional when representing Devoted Health. Make sure you follow the guidelines set forth in your agreement and keep your license in current and good standing at all times.

If any of your contact information changes, please be sure to update this information in Miramar:Agent as soon as possible. If you have any questions, just let us know.

We want to hear from you...please complete our [2021 Onboarding Experience Survey](#).

Cheers to a successful selling season!

All the best,

Devoted Health Agent and Broker Relations Department

[agent-support@devoted.com](mailto:agent-support@devoted.com)

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- CONFIDENTIALITY NOTICE -

The information contained in this transmission is intended only for the person or entity to which it is addressed and may contain confidential and/or privileged material. If you are not the intended recipient of this information, do not review, retransmit, disclose, disseminate, use, or take any action in reliance upon, this information. If you received this transmission in error, please contact the sender and destroy all printed copies and delete the material from all computers.

## IV. AGENT SUPPORT

We're fast and responsive. And we sweat the details (so you don't have to). Whether you're part of an FMO or on your own, work with us — we want to help your business succeed.

Questions? Call us at **1-877-764-9446** (9am to 6pm ET Monday through Friday) or

Email us at [agent-support@devoted.com](mailto:agent-support@devoted.com).