

Subject Line: Community Health Choice Agent Commission Statements
Sub-header: Explanation of Multiple Tabs on Commission Statement

Dear Valued Partner,

You will be receiving your January 2018 commission statement soon and we would like to offer explanation in advance to assist in reading your statement correctly.

At the bottom of your commission statement you will see multiple tabs to select from. Please note the following:

- **2017 tab** – The 2017 tab on the agent commission statement is for **existing agents only**. This is a reconciliation of their **2017** book of business. If an amount is owed to the agent, this will include members who paid late in December or after the statement was generated. This tab will still appear if you are a new agent but will be blank and have no data.

EXAMPLE:

Report Date: 1/18/2018

HEALTH CHOICE COMMUNITY CARES																			
Kelsy	10/1/2017	12/31/2017	12/31/2017	3	0	0	0	0	0	0	0	0	0	3	3	3	3	\$1	
Kelsy	7/1/2017	12/31/2017	12/31/2017	1	0	0	0	0	0	0	1	1	1	1	1	1	1	6	\$1
Kelsy	10/1/2017	12/31/2017	12/31/2017	1	0	0	0	0	0	0	0	0	0	1	1	1	1	3	\$1
Community	1/1/2017	1/31/2017	1/31/2017	3	3	0	0	0	0	0	0	0	0	0	0	0	0	3	\$1
Community	11/4/2017	12/31/2017	12/31/2017	2	0	0	0	0	0	0	0	0	0	0	0	0	2	2	\$1
Community	6/1/2017	12/31/2017	12/31/2017	1	0	0	0	0	0	1	1	1	1	1	1	1	1	7	\$1
Community	2/1/2017	12/31/2017	12/31/2017	1	0	1	1	1	1	1	1	1	1	1	1	1	1	11	\$1
Community	1/1/2017	12/31/2017	12/31/2017	1	1	1	1	1	1	1	1	1	1	1	1	1	1	12	\$1
Kelsy	8/1/2017	12/31/2017	12/31/2017	4	0	0	0	0	0	0	4	4	4	4	4	4	4	20	\$3
Community	8/1/2017	12/31/2017	12/31/2017	1	0	0	0	0	0	0	0	1	1	1	1	1	1	5	\$1
				Broker Subtotal	8	7	7	7	8	9	10	20	31	36	38	40	221	\$3	
				Grand Total	12	11	11	11	11	12	13	23	34	39	41	43	260	\$3	
Total Funds Distributed																		\$3	
Total Due to Broker																		\$	

Check Date	Check Number	Payee Number	Payee Name	Check Status	ACH	Check Amount
1/25/2017				Cleared	N	\$165
2/24/2017				Cleared	N	\$165
3/23/2017				Cleared	N	\$165
4/28/2017				Cleared	N	\$165
5/26/2017				Cleared	N	\$165
6/23/2017				Cleared	N	\$180
7/28/2017				Cleared	N	\$195
8/24/2017				Cleared	N	\$330
9/25/2017				Cleared	N	\$405
10/26/2017				Cleared	N	\$705
11/22/2017				Cleared	N	\$600
12/21/2017				Outstanding	N	\$680
Total Funds Distributed						\$3,900

Information included within this statement is accurate as of the date generated. Corresponding commissions are paid the 4th Friday of each month, or a business day before if...
 If you have any concerns, please contact Agent Commissions at Agent.Commissions@CommunityCares.com or call 743.295.6760.

2017 2018 2018 (2)

- **2018(2) tab**- The 2018(2) tab is a programming error. **Please disregard this tab**. There should not be any information in this tab and it should appear blank with no data.

- **2018 tab** – The 2018 tab on the agent commission statement is for **January 2018** commissions for **new and existing agents**. Also, the 2018 statements now include the Incentive portion which is a new feature for this year.

EXAMPLE:

Report Date: 1/18/2018

Broker					Subscriber		Incentive			Enrollment							Member M									
Broker Name	Broker NPN	Broker Eff Date	Broker Term Date	Broker Cert Date	Subscriber ID	Subscriber Name	HRA	Office Visit	Paid Through March	Enrollm ent ID	Issuer Subscriber ID	Rate Code ID	Plan Type	Subscribe r Eff Date	Subscribe r Term Date	Subscriber Paid Through Date	Number Of Members	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	
							0	2	Y				Community	1/1/2018	12/31/2018	12/31/2018	2	2	0	0	0	0	0	0	0	
							HRA	Office Visit	Paid Through	Broker Subtotal							2	0	0	0	0	0	0	0	0	0

In addition, due to unforeseen system issues, you may find that your January 2018 commission statement does not reflect your total membership. Please note that these issues have been addressed and should be reflected in your February 2018 commission statement.

Thank you for representing Community Health Choice! Your business is appreciated!

For questions related to application submissions, please contact AgentRelations@CommunityCares.com or by phone at (713) 295-6760.

For questions related to Contracting or Appointment, please contact Agent.Credentialing@CommunityCares.com or by phone at (713) 295-6760.

For questions related to Commissions, please contact Agent.Commissions@CommunityCares.com or by phone at (713) 295-6760.