



KERN HEALTH SYSTEMS POLICY AND PROCEDURES

Policy Title	Agent Onboarding	Policy #	25.03-P
Policy Owner	Delegation and Oversight	Original Effective Date	10/1/2025
Revision Effective Date		Approval Date	01/09/2026
Line of Business	<input type="checkbox"/> Medi-Cal <input checked="" type="checkbox"/> Medicare <input type="checkbox"/> Corporate		

I. PURPOSE

The purpose of this policy is to ensure Kern Health Systems (KHS) shall adhere to and maintain a licensing, certification, and appointment process for both new and existing agents employed by or contracted with KHS so such sales agents and brokers may compliantly market and/or sell KHS Medicare-related product in accordance with federal and state laws and with Centers for Medicare and Medicaid Services (CMS) rules and regulations.

II. POLICY

- A. It is KHS' policy to maintain an Agent Onboarding process which shall ensure all KHS Medicare sales agents and brokers are appropriately licensed, trained, tested, qualified, and appointed to sell Medicare products on behalf of KHS, as required by federal and state laws and in accordance with the CMS rules and regulations.

III. DEFINITIONS

Term	Definitions
Agents/Brokers/Licensed Agent	As referenced in this policy and procedure, the term agent(s) refers to all individuals (employed by or external to KHS), who are properly licensed, certified and appointed to solicit and/or sell KHS Medicare-related products.



Term	Definitions
Appointment	Procedures required by most state governments granting limited authority to an individual enabling that individual to market and/or sell a health plan's insurance products within that state
License	A certificate giving proof of formal permission from a governmental authority to an agent to sell insurance products within a state.
Ready to Sell	Describe a sales agent or broker who is licensed, certified, and appointed by the plan as required, in order to compliantly and legally represent, market and/or sell Medicare-related health plans for KHS.

IV. PROCEDURES

A. ONBOARDING PROCESS

1. KHS requires that all sales agents and brokers who represent KHS Medicare-products complete the following prior to being ready-to-sell:
 - i. Licensure,
 - ii. Trained and tested annually as required on Medicare rules and regulations, the plan products that agents and brokers will sell, including any details specific to each plan product, and relevant State and Federal requirements, and achieve an 85 percent or higher on all forms of testing,
 - iii. Contracted directly or via applicable agency or Field Marketing Organization (FMO) complying with onboarding documentation and code-of-conduct attestation requirements, and
 - iv. Appointed as required by State law
2. Within the KHS Agent Onboarding process, KHS shall assure all state, federal, and CMS-required information is captured from all sales agents and brokers, maintained either directly or indirectly through a KHS approved tracking system or vendor, and monitored regularly. Regular monitoring of sales agent and broker status will occur at a minimum of monthly intervals.
3. KHS shall provide all sales agents and brokers with links to Title 42 Code of Federal Regulations (CFR) Part 422, Subpart V – Medicare Advantage Communication Requirements, Medicare Communications and Marketing Guidelines, and Department of Health Care Services (DHCS) CalAIM Dual Eligible Special Needs Plans (D-SNP) Policy Guide.



4. All KHS sales agents and brokers shall:
 - i. Represent KHS truthfully and accurately
 - ii. Treat customers, including prospective members, members, providers, community partners, government regulators, and KHS Staff with dignity, respect and with the highest level of confidentiality
 - iii. Act in the best interest of the prospective member or member at all times.
5. All KHS sales agents and brokers shall have a clear understanding of prohibited marketing behavior including but not limited to:
 - i. Representing him/herself as anyone other than a sales agent of KHS or a broker contracted with KHS
 - ii. Misrepresenting Kern Family Health Care Medicare or any plan benefits
 - iii. Using any type of perceived or actual coercion with a prospective member
6. All KHS sales agents and brokers that offer/sell Medicare products must be licensed by the state(s) that they sell in. Individual license(s) must be maintained without disruption to maintain good standing. Each external sales agent or broker is responsible for ensuring that all requirements have been met to satisfy his or her license requirements. It is the sales agent or broker's responsibility to obtain insurance licenses and meet the licensing qualifications required by each state insurance department to which they apply. It is also the sales agent or broker's responsibility to pay all initial and renewal licensing fees as required by each state. Furthermore, it is incumbent upon all sales agents and brokers to abide by all applicable insurance laws and regulations within CMS guidelines.
7. All sales agents and brokers representing KHS Medicare products shall take annual training and be tested on both Medicare and Plan-specific details for the products they intend to sell. The content of annual training and testing shall contain at a minimum those requirements set forth by CMS in the annual issuance of "Agent/Broker Training and Testing Guidelines." In addition to training, all modules of required agent training shall include a knowledge check in the form of test, ensuring quality learning to support accuracies of plan marketing. Agents or brokers must achieve a score of eighty-five (85 percent or higher to "pass" required testing).
8. Once an individual's licensure, certification and appointment has been completed, KHS will notify the sales agent or broker that he/she has fully completed the on-boarding process and is permitted to begin marketing and selling KHS Medicare-plans.
9. KHS shall monitor the progress of a new or renewing sales agent or broker's certification through regular reporting. Reporting shall be conducted by the Delegation and Oversight Department, and/or applicable onboarding vendors or systems, allowing Delegation and Oversight Sales management to stay apprised of agents in good standing, or those who have



fallen out of current status for their training and testing, and those who may need additional coaching.

V. ATTACHMENTS

Attachment A:	N/A
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VI. REFERENCES

Reference Type	Specific Reference
Regulatory	422.2274(b)-(c)
Regulatory	Medicare Communications and Marketing Guidelines (MCMG) Agent/Broker Requirements section

VII. REVISION HISTORY

Action	Date	Brief Description of Updates	Author
Effective	10/01/2025	New policy created to comply with D-SNP	M.M. Delegation and Oversight

VIII. APPROVALS

Committees Board (if applicable)	Date Reviewed	Date Approved
Choose an item.		