

Medicare Advantage			
 		Agent Level	
FL	CSNP, DSNP	Initial (CMS New to Medicare)	\$ 694.00
		New to Company/Renewal	\$ 347.00
	Non-SNP, HMO, POS	Initial (CMS New to Medicare)	\$ 626.00
		New to Company	\$ 313.00
		Renewal	\$ 347.00
	Freedom Health PBP 052	Initial (CMS New to Medicare)	\$ 300.00
		New to Company/Renewal	\$ 150.00

1. Agent or the Principal of an Agency must be AHIP Certified and have an active health license in the state the application was written, at the time of payout to receive administrative fees.
2. Administrative fees are subject to proration if not new to CMS. Proration will be determined by the effective date.
3. Administrative fees are subject to chargebacks in the event the member has dis-enrolled from the plan in the same calendar year as the enrollment. Rapid dis-enrollments will result in a full chargeback. If a dis-enrollment occurs after the rapid dis-enrollment period the chargeback will be prorated.
4. Administrative fees will be paid monthly by Premier Marketing.
5. All Administrative fees are paid less the lower levels in the hierarchy.
6. Refer to carrier schedule for non-commissionable plans.



ATTACHMENT A

2026 Personal Producing Agent Commission Schedule Effective January 1, 2026 through December 31, 2026

This schedule is applicable to Medicare Advantage (MA) and Medicare Advantage Prescription Drug (MA-PD) plans that are offered by Freedom Health and Optimum HealthCare (together, "the Plan") to be sold in select counties within Florida. See each plan's Summary of Benefits for a complete list of counties.

Product (where available)	Commission Initial Year CMS New to Medicare	Commission Year 1 CMS Renewal	Commission Year 2+ Renewal
Freedom Health – Only Medicare Advantage Chronic Special Needs Plans (CSNP) and Dual Special Needs Plans (DSNP)	\$694	\$347	\$347
Freedom Health – Medicare Advantage Prescription Drug Plans (Non-SNP, HMO & POS)	\$626	\$313	\$347
Freedom Health – PBP 052	\$300	\$150	\$150
Optimum HealthCare – Only Medicare Advantage Chronic Special Needs Plans (CSNP) and Dual Special Needs Plans (DSNP)	\$694	\$347	\$347
Optimum HealthCare – Medicare Advantage Prescription Drug Plans (Non-SNP, HMO)	\$626	\$313	\$347

The agent/broker compensation year is January 1 to December 31. Compensation payments will be calculated on a January 1 to December 31 enrollment year. Total payment for initial year commission (i.e. new to Medicare Advantage) is dependent on notification from CMS that the beneficiary is considered "new" to Medicare Advantage (i.e., prior plan type listed as "none"). Initially, we pay an amount equal to one year's renewal commission at the monthly renewal rate multiplied by the remaining number of months in the calendar year. Upon notification of "new" to Medicare Advantage status from CMS, the Plan then pays the unpaid amount of the initial year commission in a lump sum to equal (together with the initial payment) 100% of the CMS initial year (i.e. new to Medicare Advantage) commission set forth in the table above.



There are four scenarios affecting how the Plan may pay in full or pro-rated compensation for:

- 1) For a beneficiary's first year of enrollment in a Medicare Advantage plan, in which the CMS indicates the prior plan type as "none" (i.e., new to Medicare Advantage), the Plan may pay full or pro-rated initial year compensation for a beneficiary's first year of enrollment in a plan.
- 2) When a beneficiary moves from an employer group plan to a non-employer group plan, in which CMS indicates the prior plan type as "none" (i.e., new to Medicare Advantage), organizations may pay full or pro-rated initial year compensation for a beneficiary's first year of enrollment in a plan.
- 3) A Medicare Advantage beneficiary in their renewal year(s) makes an "unlike plan change" (e.g., Freedom Health MA-PD to Optimum HealthCare MA-PD or Optimum HealthCare MA-PD to Freedom Health), occurring after January 1, organizations must pay pro-rated renewal year compensation according to the number of months in the plan. For example, a change from a Freedom Health MA-PD to Optimum HealthCare MA-PD effective May 1 is an unlike plan change resulting in a pro-rated renewal year compensation of 8/12 (May thru December) of the MA-PD renewal year compensation rate.
- 4) A beneficiary makes a "like plan change." (e.g., Freedom Health MA-PD to Freedom Health MA-PD or Optimum HealthCare MA-PD to Optimum HealthCare MA-PD). Renewals are not transferred to the "like plan change" producing agent and remain with the original producing agent or "agent of record."

**Rates outlined within this schedule are subject to change.
Advance notice will be sent prior to the effective date of any change.**

Freedom Health is a Medicare-contracted coordinated care plan that has a Medicaid contract with the State of Florida Agency for Health Care Administration to provide benefits or arrange for benefits to be provided to enrollees. Enrollment in Freedom Health depends on contract renewal.

Optimum HealthCare is a Medicare-contracted coordinated care plan that has a Medicaid contract with the State of Florida Agency for Health Care Administration to provide benefits or arrange for benefits to be provided to enrollees. Enrollment in Optimum HealthCare depends on contract renewal.