



# 2027 Idaho Agent Compensation and Bonus Program

We are pleased to present the commission schedule for 2027.

## Idaho Individual Plans

Commission for Idaho individual plans is \$16 PMPM.

Agents may earn a cash bonus of \$40 for all net-new subscribers.

## Idaho Individual Plans | Bonus will be calculated as follows:

This incentive applies to effective dates from **January 1, 2027**, through **December 31, 2027**, and is paid for net-new business.

| NET-NEW SUBSCRIBERS | BONUS PER SOLD SUBSCRIBER |
|---------------------|---------------------------|
| All net-new         | \$40                      |

## Idaho Small Employer Plans

Commission for Idaho Small Employer plans will remain at \$32 PEPM. Small Employer agents may earn a cash bonus for every new and renewing group. See details below.

## Idaho Small Employer | Bonus will be calculated as follows:

This incentive applies to effective dates from **January 1, 2027**, through **December 31, 2027**, and is paid in April 2028.

| GROUP SIZE | BONUS PER NEW AND RENEWING SUBSCRIBER |
|------------|---------------------------------------|
| 5-10       | \$10                                  |
| 11-20      | \$15                                  |
| 21-30      | \$20                                  |
| 31-50      | \$25                                  |

## Idaho Small Employer Level Funded Plans

Commission for Small Employer level funded plans is as follows: \$40 PEPM or agent choice of \$30, \$35, \$40, \$45, or \$50 PEPM.

## Small Employer Level Funding Bonus | Bonus will be calculated as noted below.

This incentive applies to effective dates from **January 1, 2027**, through **December 31, 2027**.

| SMALL EMPLOYER LEVEL FUNDING | BONUS PER SUBSCRIBER  |
|------------------------------|-----------------------|
| All sold groups              | \$75 One-time payment |

#### TERMS AND CONDITIONS.

1. Qualification period is limited to coverage effective dates between **January 1, 2027**, through **December 31, 2027**, on Idaho business.
2. Groups moving from Large Employer to Small Employer will not be counted.
3. Lost membership because of terminated accounts will reduce the total number of new members.
4. Split cases will be credited 100 percent to the primary agent.
5. Eligibility is limited to agents currently residing in Idaho.
6. Payouts will comply with standard reporting requirements on Schedule A (Form 5500) for all applicable group business. Agent is responsible for complying with other compensation disclosure requirements that apply and any tax obligations.

7. Select Health, in its sole discretion, will determine incentive qualification and how to resolve any other issues that may arise for the incentive campaign.
8. No alternative awards can be substituted.
9. An agent must be in good standing throughout the qualification period and at the time of incentive receipt to be eligible.
10. An agent may opt out of the program by providing advance written notice.
11. Incentive will be awarded to qualifying writing agent, not agent owner or representative when the agent is affiliated with an agency.
12. Incentive will be paid on the Individual Plan program in **April 2028**.
13. Incentive will be paid on the Small Employer Plan program in a one time payment in **April 2028**.
14. Incentive for the Level Funding bonus will be paid in a one time payment in **April 2028**.

## EXHIBIT A

### COMPUTATION OF AGENT/AGENCY COMMISSIONS - IDAHO

#### Effective January 1, 2027

For eligible, fully insured Idaho Individual and Group business written for SelectHealth, Inc. or SelectHealth Benefit Assurance Company, Inc. (regardless of product name), commissions are payable to Agent/Agency by Select Health for Agent/Agency production. Such commissions are computed and paid to Agent/Agency based upon monthly premiums actually paid to Select Health. Payment of the following commissions will begin approximately forty-five (45) days after the enrollment, and payments will be made on a monthly basis thereafter. Subsequent checks will be cut by the fifteenth (15th) of the following month for those cases that have paid premium. Otherwise, such commissions will be paid the month following receipt of premium.

| PRODUCT TYPE                       | COMMISSION RATE                                                 |
|------------------------------------|-----------------------------------------------------------------|
| Individual                         | \$16 Per Member Per Month (PMPM)*                               |
| Small Employer (ACA)               | \$32 PEPM                                                       |
| Level Funded                       | \$40 PEPM or agent choice: \$30, \$35, \$40, \$45, or \$50 PEPM |
| Large Employer (51+)               | 3% Flat, Negotiated PEPM or Percentage**                        |
| Short-term, Limited Duration Plans | 20% of Premium                                                  |
| Eyewear Plans                      | 10% of Premium                                                  |
| Dental Plans                       | 10% of Premium                                                  |

\*Commission will cap on each individual policy at a maximum of three children age 20 or younger. The cap does not apply to eligible children older than age 20.

\*\*Any negotiated arrangements must be agreed to in writing.