

Subject:	Agent Compliance Attestation
Division:	Group & Individual (G&I)
Effective Date:	October 2015
Most Recent Revision:	October 2021
Next Review/Revision Due:	October 2022

In accordance with 45 C.F.R. § 156.340, BlueCross maintains responsibility not only for its internal compliance, but for the compliance of its delegated and downstream entities (DDE), including appointed agencies and its associated agents with all applicable standards.

BlueCross BlueShield of South Carolina, its subsidiaries, and affiliates (BlueCross), provides insurance products that fit a variety of lifestyles and budgets for South Carolinians. We are committed to maintaining compliance with relevant state and federal policies, regulations and laws that relate to insurance products and the way these products are solicited, marketed, negotiated, and sold by its agents.

As an agent with BlueCross, I attest to the following:

- I understand that as an agent involved in the solicitation, marketing, negotiation, and sales of BlueCross products, to include Qualified Health Plans (QHPs), I must remain compliant with the Agent/Agency Compliance Program (AACP), applicable state/federal guidance, regulations, and laws.
- I acknowledge that as an agent, failure to comply with the AACP, applicable state/federal guidance, regulations and laws will result in disciplinary action. This disciplinary action will be administered upon completion of a review of the situation and will depend on the severity of the issue in question; it may be as minor as a verbal warning or as severe as termination of my appointment and my activities being reported to the appropriate state and federal authorities.
- I recognize that as an agent, I am subject to periodic audits by BlueCross or state-level agencies. I acknowledge that if involved in the solicitation, marketing, negotiation, and sales of BlueCross QHPs, that in accordance with 45 C.F.R. § 155 & 156, that I shall grant access to my books, contracts, computers, or other electronic systems (including medical records and documentation), relating to compliance in connection with the duties and obligations set forth in the FFM agreements. As a condition of this requirement, I will give access to the United States Department of Health and Human Services (HHS) and its Office of Inspector General (or their designees) for the duration of the period in which its FFM Agreement is effective and for a minimum of 10 years after the agreement terminates.
- I understand that employing practices that discriminate based on race, color, national origin, sex, age, or disability, including discrimination based on pregnancy, gender identity and sex stereotyping, violate 45 C.F.R. § 156.200. Should it be determined that I have used or allowed others to use discriminatory practices in soliciting, marketing, negotiations or sales of its products, BlueCross will terminate my appointment and my commissions will cease immediately.
- I recognize that, annually, the agent compliance attestations will be released in conjunction with the annual product-training requirements and must be completed before the cut-off date for that respective year's

training. I understand that should I fail to complete this requirement before the deadline, I will not have the ability to sell products in the next year, and my appointment is subject to termination.

SPECIAL NOTES

Non-Discrimination: In accordance with GI-DV-PP-0003, BlueCross does not, nor does it allow DDEs associated with it, to employ marketing practices that discriminate based on race, color, national origin, sex, age, or disability, including discrimination based on pregnancy, gender identity and sex stereotyping.

Record Retention: All records related to administration of a qualified health plan will be retained for no less than 10 years from the process date. HC-CP-PP-0005, Document Retention and Management Pursuant to Qualified Health Plans P&P and 45 C.F.R. §156.705.

Print Disclaimer: Printed forms of this document are uncontrolled. It is the responsibility of the user to ensure any printed copy is the most current version approved and published by management.

REVISION HISTORY

Implementation Date	Description	Business Owner	BCBS Committee Approval
October 30, 2015	Policy and procedure developed		October 30, 2015
Rev. 01 October 28, 2016	Reviewed and revised; renamed series AO-PP-####		October 28, 2016
Rev. 02 October 27, 2017	Reviewed and revised		October 27, 2017
Rev. 03 October 26, 2018	Reviewed and revised		October 26, 2018
Rev. 04 October 25, 2019	Reviewed and revised		October 25, 2019
Rev. 05 October 30, 2020	Reviewed and revised		October 30, 2020
Rev. 06 October 29, 2021	Reviewed and revised		October 29, 2021