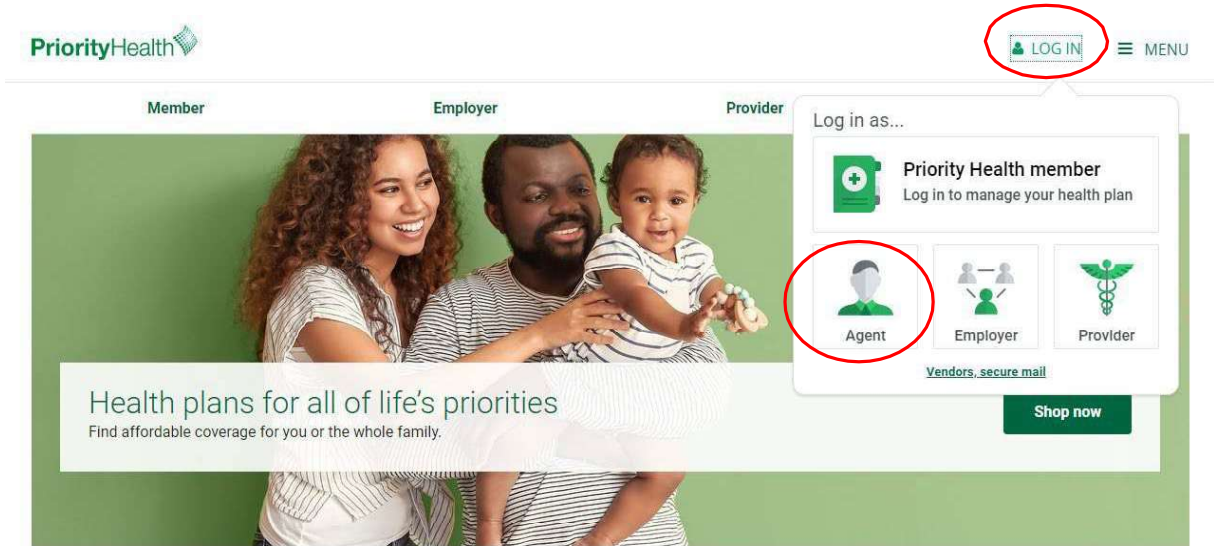


STOP- Are you are New to Medicare Advantage Sales/New to Priority Health?

You will need to Pre-Register on the Agent Portal (<https://www.priorityhealth.com/>)
Login as an Agent:

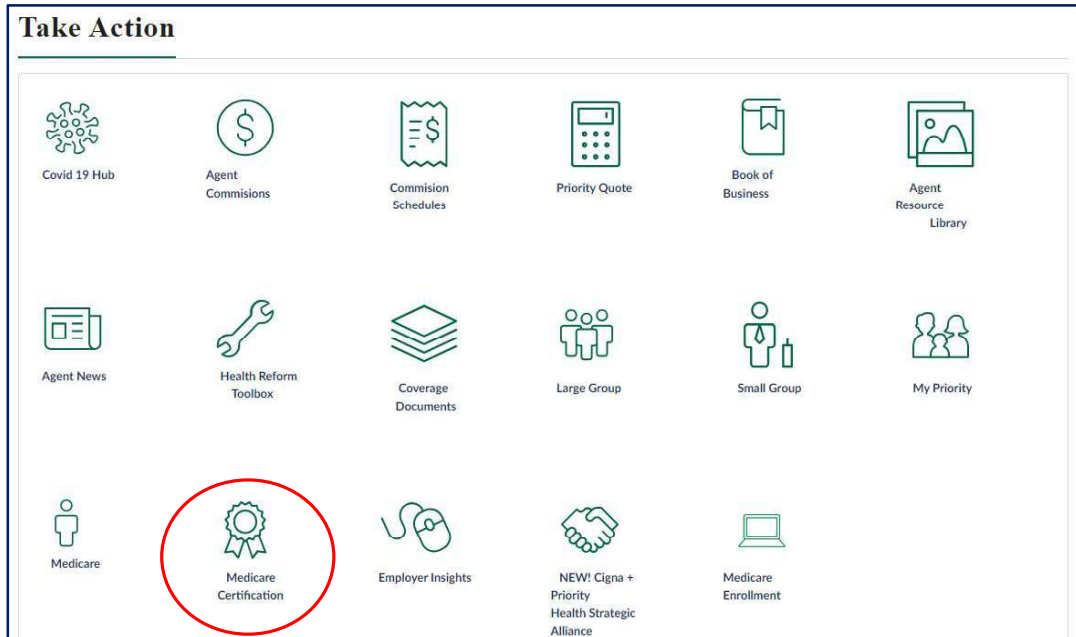


Username is your email, and you can reset the password if need be:

A screenshot of the PriorityHealth Agent Center Sign In form. The form is titled 'Agent Center Sign In' and features the PriorityHealth logo at the top. It contains two input fields: 'Email' and 'Password'. Below the 'Password' field is a green 'Log in' button and a 'Forgot your password?' link. At the bottom of the form, there are two links: 'Register as Agency Admin' and 'Get Appointed-Agent Agreement'.

Continued on next page

Once logged in, go to “Medicare Certification” on the homepage:



Enter your information and Submit:

PriorityHealth | Agent Center

Home > Agent > Center > Medicare > MAPD > Certification

Medicare Advantage plan certification

Certification sessions are held online and in person. If you have a group of agents needing certification, please contact your sales representative. You must be certified every year to sell Priority Health MAPD plans (individual or group plans). Annual Enrollment begins October 15.

Existing Medicare agent recertification Information +

Never sold Medicare Advantage with Priority Health? Request to certify with Priority Health

Do not use if you are an existing agent. See directions above.

Note: This form is processed by hand in the order received. Allow one business day for processing.

First Name *

Last Name *

Priority Health Broker ID *

National Producer Number (NPN) *

FMO or Agency name, if applicable

Email Address *

Submit

Continued on next page

Once you have Pre-Registered:

Once that is complete, you will be able to register in the Priority Health certification portal (<https://priorityhealth.pinpointglobal.com/Apps/Medicare/Certifications>) within 24 hours.

Click "Click here to Register"

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First time visitors
[Click here to register](#)

Returning users
Username:
Password:
Log In
[Forgot password?](#)
[Forgot username?](#)

PriorityHealth Medicare Certification System

Welcome to the PriorityHealth Medicare Certification System.

The Centers for Medicare & Medicaid Services (CMS) requires plan sponsors to provide training and testing to demonstrate sales representatives' knowledge on the Medicare program, rules, regulations and compliance-related information, as well as plan specific details on the products they intend to sell.

As a sales representative or employee of PriorityHealth with responsibility for some aspect of marketing, sales and/or service, you are required to complete an annual certification.

Registration ID will be your **NPN**

Access Code is **PH2024**

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New User Registration

You should have received your Registration credentials in a welcome email. If not, [click here](#) to resend the information to your email.

Register to Complete PriorityHealth Medicare Certification

Registration ID: **NPN**

Access Code: **PH2026**

Already registered? [Click here](#) to login.

Why Certify?

The Centers for Medicare & Medicaid Services (CMS) requires plan sponsors to provide training and testing on Medicare rules, regulations and compliance-related information on the products they intend to sell.

You are required to complete annual Medicare and product certification if you are responsible for marketing, selling or servicing PriorityHealth.

Continued on next page

Next look up your NPN:

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Registration
*required field

Confidential Information
NPN must match the data provided by the NIPR website to ensure unique ID information.
Please click [Lookup NPN using NIPR to populate your National Producer Number.](#)

National Producer Number:*

Please save your NPN in a secure location, as it will become your username.

Complete the final registration steps and then log in:

PriorityHealth
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Registration
*required field

Confidential Information
NPN must match the data provided by the NIPR website to ensure unique ID information.
Please click [Lookup NPN using NIPR to populate your National Producer Number.](#)

National Producer Number:*

Please save your NPN in a secure location, as it will become your username.

Personal Information

First Name:*

Middle Initial:

Last Name:*

Suffix:

E-mail:* (Required)

Confirm E-mail:*

Enter a shipping address for your Agent Starter Kit delivery (NO P.O.Boxes). (Note: the kits will go out after September 20th to any agents who have completed all certification steps)

Address 1:* (Required)

Address 2:

City / Town:* (Required)

State / Territory:* (Required)

ZIP Code:* (Required)

Priority Health Writing Number:

Contact phone number for shipping purposes

Phone Number

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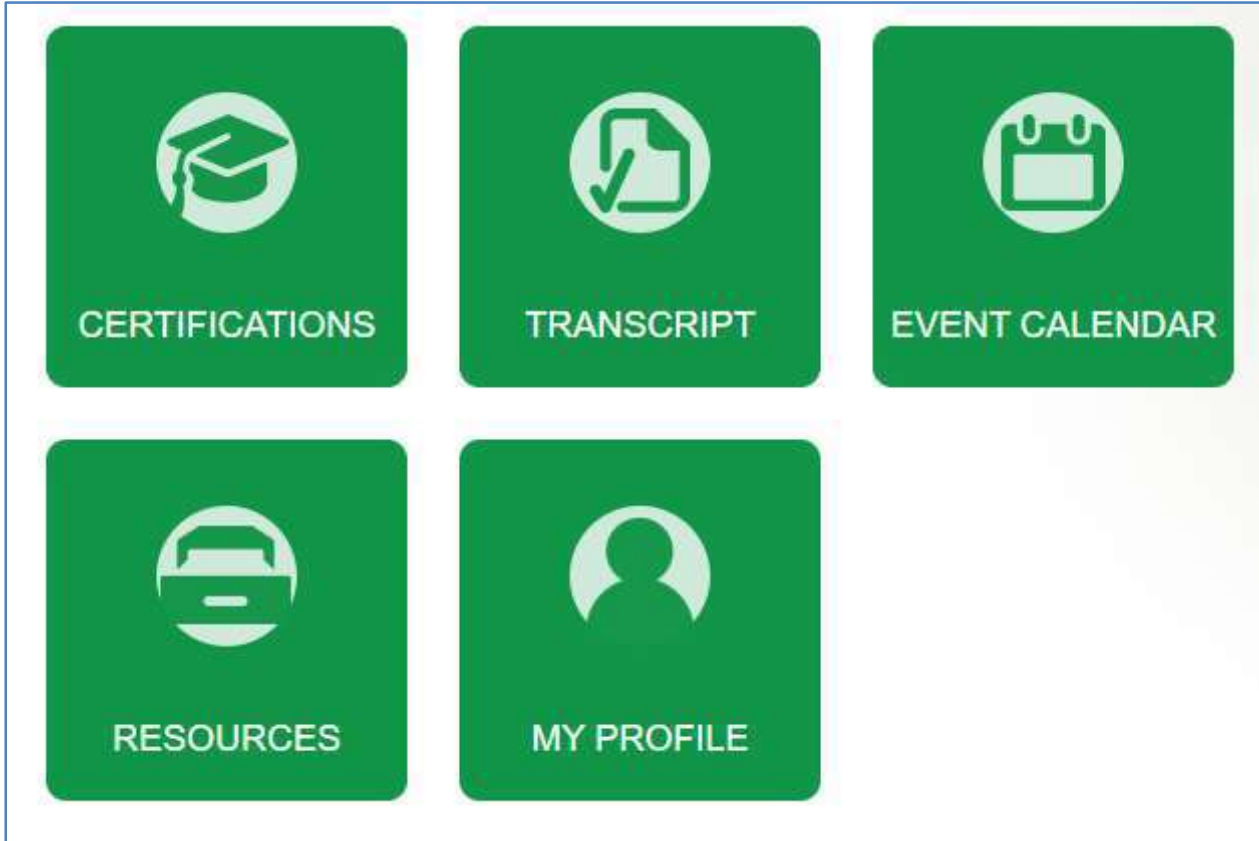
Returning Agents/Registered Agents:

<https://priorityhealth.pinpointglobal.com/Apps/Medicare/Certifications>

Username: Your NPN

Password: Set by you, use "forgot password" to reset

Select Certifications:



Complete each required step:

Annual Requirement Year:

Medicare Training (click to expand or collapse)		Status
<input type="checkbox"/>	REQ CMS Annual Medicare Certificate Upload Click on the title 'CMS Annual Medicare Certificate Upload' above to submit your certificate OR switch to Pinpoint as your Medicare provider.	Incomplete
<input type="checkbox"/>	REQ Priority Health Products Certification Classroom (Live or Virtual) Training Completing the Live Training will give you credit for the Online version of the Product Certification Training course	Incomplete
<input type="checkbox"/>	REQ Priority Health Product Certification Exam Coming Soon	Incomplete

Continued on next page

First, upload your Medicare Certificate (they will accept AHIP, Gorman/Convey and NABIP):

Please complete the following fields related to the selected Certification Year and browse your local file system for the relevant certificate to upload.
* Required

Certification Year: * 2025

Date Completed: *

Must be in mm/dd/yyyy format.

NOTE: Completion date must match the completion date that is on the certificate.

Certification Training Provider: *
-- Select Vendor --
-- Select Vendor --
AHIP
Gorman/Convey
NABIP

I attest that I have completed the Medicare course indicated and am uploading a valid certificate.

NOTE: If more than one file is uploaded for a given certification year, only the latest file uploaded and its associated fields will be considered for review and displayed on the Certifications and Transcript pages

Next, complete the certification course by scheduling a live class or webinar:

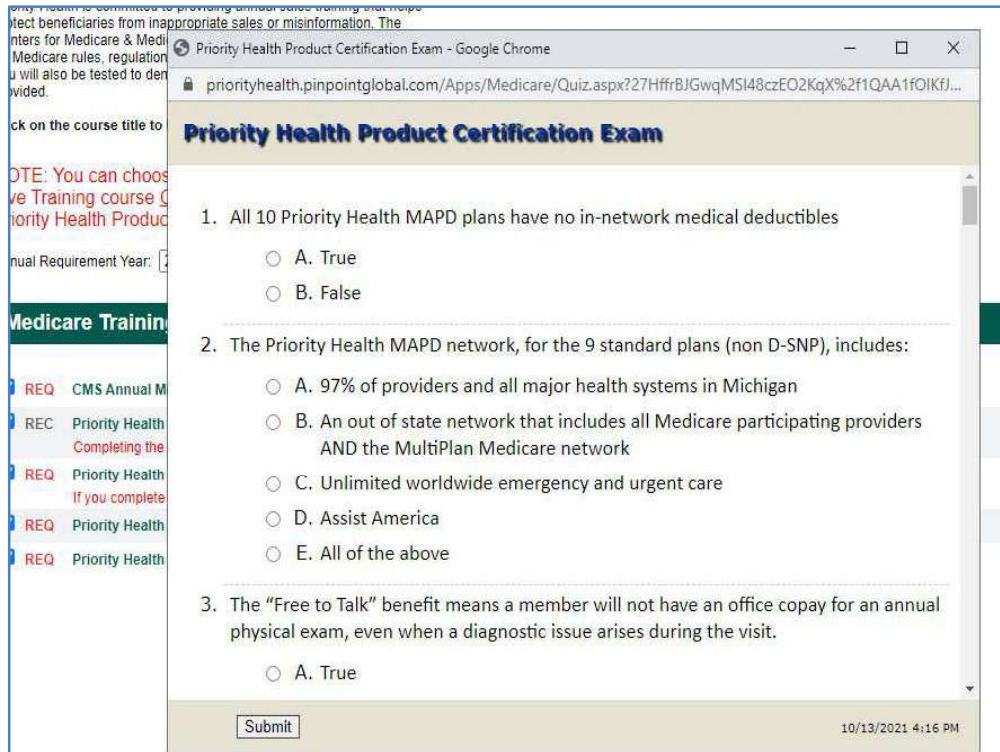
Annual Requirement Year: 2025

Medicare Training (click to expand or collapse)

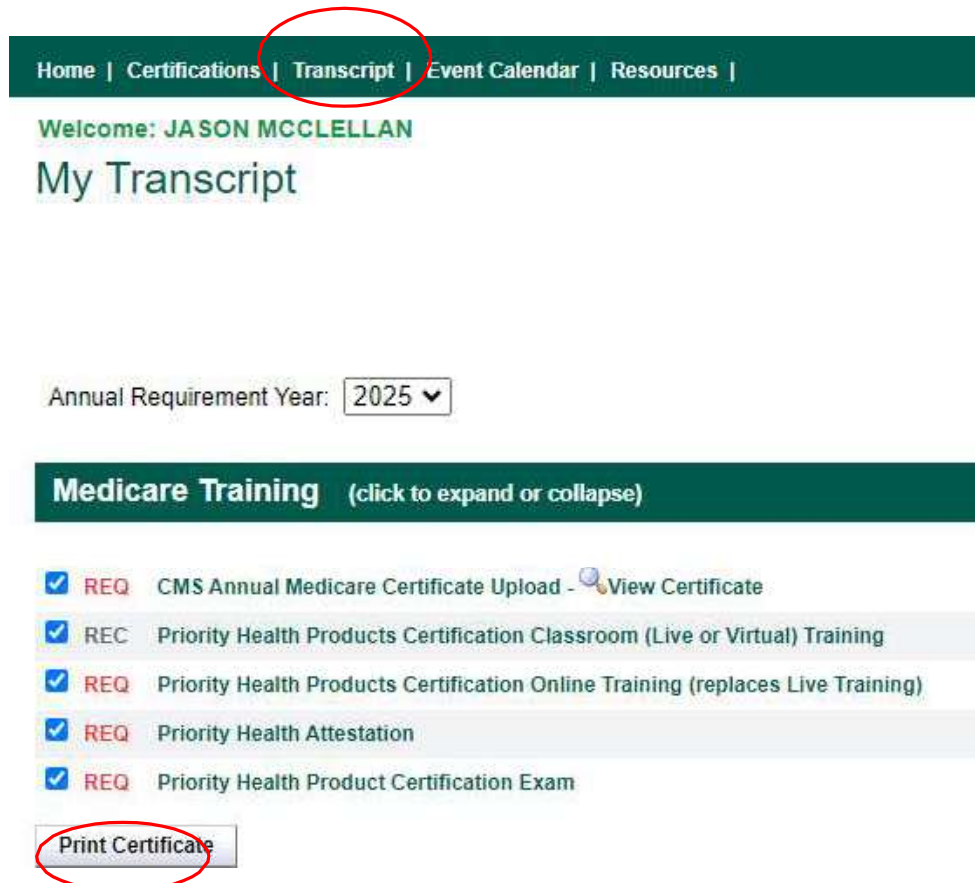
	Status
<input checked="" type="checkbox"/> REQ CMS Annual Medicare Certificate Upload - View Certificate	Approved
<input type="checkbox"/> REQ Priority Health Products Certification Classroom (Live or Virtual) Training Completing the Live Training will give you credit for the Online version of the Product Certification Training course	Incomplete
<input type="checkbox"/> REQ Priority Health Product Certification Exam Coming Soon	Incomplete

Continued on next page

The last step will be the certification exam that will cover the material learned in the training:



Once all required courses are complete, you can go to "Transcripts" and the print your certificate:



Please note, **agents must certify for 2024 and 2025** to sell the remainder of the year:

Annual Requirement Year: 2025 ▼
2025
2024

Medicare Training (click to expand or collapse)

		Status
<input checked="" type="checkbox"/>	REQ CMS Annual Medicare Certificate Upload - View Certificate	Approved
<input type="checkbox"/>	REQ Priority Health Products Certification Classroom (Live or Virtual) Training <small>Completing the Live Training will give you credit for the Online version of the Product Certification Training course</small>	Incomplete
<input type="checkbox"/>	REQ Priority Health Product Certification Exam Coming Soon	Incomplete