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Commission Planning

Health & Wellness

CALIFORNIA BROKER

Serving California's Annuity, Life & Health Insurance Professionals

APRIL 2026





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CRC BENEFITS

Access *isn't* enough.

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CRC Benefits supports brokers with strategic expertise, infrastructure, and funding solutions — helping them grow, compete, and deliver better outcomes for clients.

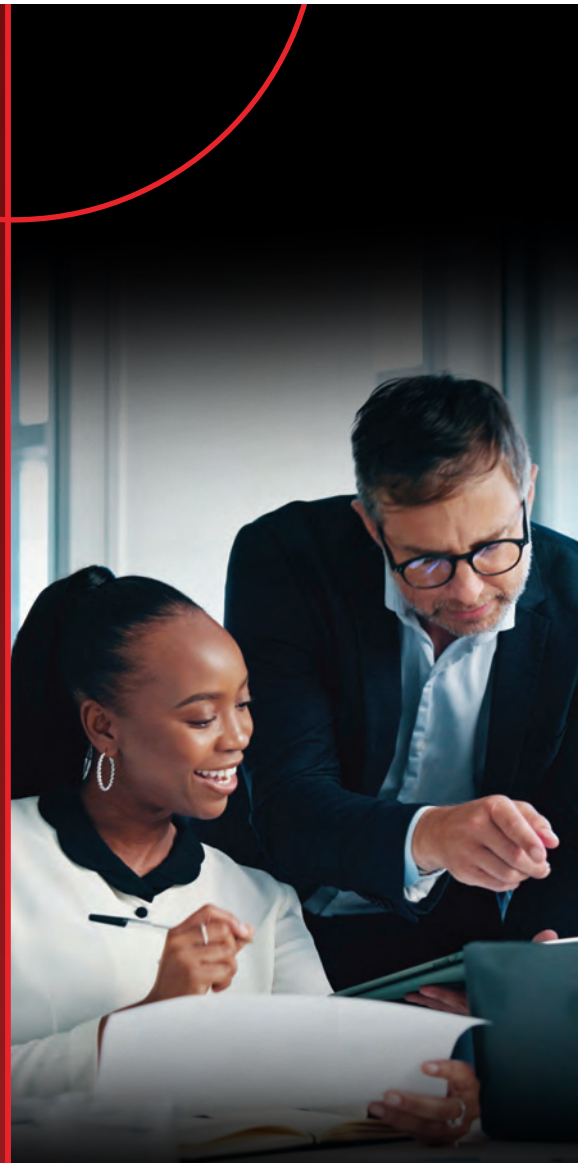
As an extension of your practice, CRC Benefits provides the support you need to stay focused on advising clients and growing your book.

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- + Specialized Benefits Divisions
- + Individual + Senior Products
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- + and more!

CRC BENEFITS

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DISCOVER WHAT
A GENERAL AGENCY
SHOULD
BE DOING FOR YOU

crcbenefits.com

POWER OF YOU. POWER OF US.

APRIL 14

1 pm - 4 pm:

Join us at Embassy Suites Sacramento Riverfront on April 14 for our Sales Summit, a powerhouse event designed to elevate your skills and business success. Hear from industry leaders Phil Walker, Stan Israel, and Bryce Gill as they share insights on **innovative retirement strategies, planning for long-term care, and the economic forces shaping today's markets.** *You can register for this event at the same time as Legislative Day for an added \$25.*

NAIFA-California Legislative Day April 15, 2026



Make your voice heard. Join NAIFA-California in Sacramento to advocate for the industry, meet with legislators, and hear directly from candidates for Insurance Commissioner. Stay informed on key policy issues while networking with fellow professionals. Don't miss this chance to protect your business and the clients you serve.

APRIL 15

TENTATIVE AGENDA

9:00 am:

Registration Opens

10:00 am:

Welcome, President's Message

10:15 am:

PAC and Political Involvement

10:30 am:

Issues Review

11:15 am:

Meeting Etiquette

11:30 am:

Break/Lunch

11:45 am:

Guest Speakers: Insurance
Commissioner Candidates

12:45 pm:

Group Photo

1:00 pm:

Lobby Visits in the Swing Space

4:00 pm:

Wrap-Up Session



By Phil Calhoun

With the recent changes to commissions, many health insurance brokers and agents are looking for ways to add new lines of insurance for their clients. Some are focused on attracting new business and new revenue. Here are a few ideas.

2026 best practices when looking to grow commission revenue:

1. Build in a cross selling capability for health clients to benefit from other insurance lines to address their needs. Also consider referral partnerships.
2. Look to more traditional marketing options to grow your health book. Telemarketing following email campaigns is a popular and often successful method to win new business. Implementing a proper marketing plan that is measurable and adjusted to maximize results will increase success. Health insurance professionals can find help with marketing tips from carrier representatives, general agency professionals and FMOs. Attending professional association meetings and networking with industry colleagues can also be helpful.
3. Protect your commissions and help other brokers protect theirs as well. [Commission.Solutions](#) has provided programs for over 10 years to grow health commissions through the use of their planning solutions. The Commission Protection Plan helps active brokers protect commissions in all life events with an experienced Successor. A Health Commission Purchase Agreement helps health brokers looking to exit the business find Buyers for high value and the tools to mitigate taxes on sale proceeds. The Preferred Successor/Buyer program enables health brokers to access the expert team at Commission Solutions. [Learn more and contact David Ethington for guidance](#)
4. Evaluate your focus and consider merging, selling, or any of the above methods to grow.

With all the changes with carriers focused on profit margins and the risk of potential claims, broker commissions have been a target. NAIFA and NABIP are working with state and local representatives to emphasize the role of health insurance professionals and bring consistency and clarity to contractual terms and conditions included in producer carrier agreements.

There are several issues here, one of them being how the process to change or eliminate commissions needs to be conducted. Are the agreements going to stand up in most situations, or can the carriers change commissions whenever they want? With the mutually beneficial arrangement between carriers and producers, it seems solutions will be developed in the long run, but health insurance professionals need to work together to build the case and present it to decision makers in a unified manner. To join this effort, you will need to get involved. The first step is to join NABIP and NAIFA to be part of the solution.

Assuming that no reversal of recent commission changes is likely, many brokers have moved to cross selling other insurances. Some work with experts and share commissions when introductions are made to their clients and some are shifting to learn how they can be an expert in new lines of insurance their clients need.

Many CBM subscribers are viable collaborative partners. We have thousands of subscribers who focus on one area such as life insurance, annuities or long-term care insurance. Health only brokers who partner with specialists in these insurance lines can build referral relationships that are based on sharing commissions from referrals when possible. If you need suggestions on viable partnerships either attend local and state professional chapter meetings with NAIFA or CAHIP. You will find many insurance experts who can help you. Check our eCalendar for dates and locations of these meetings. You can also [contact me](#) and learn more about our team of insurance specialists.

To protect what health commissions you have please look at the content available at www.commission.solutions

If you have had enough and want to plan your exit from the health insurance business or possibly cash out one line of insurance, you can find professionals experienced with this process. David Ethington is one of the active brokers who has experience with commission exit planning and his team includes experienced legal, tax and retirement planning professionals.

The key point is to take action and get involved.

APRIL

CALIFORNIA BROKER

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SERVING CALIFORNIA'S ANNUITY, LIFE AND HEALTH INSURANCE PROFESSIONALS

Cal Broker's commitment is to be the leading source of news and information for California brokers and agents operating in the health, life, and annuity industry. We are committed to connecting Life and Health insurance professionals to valuable resources and solutions they can provide to their insurance clients.

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PUBLISHER'S NOTE

By Phil Calhoun

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PREMIER HCM

How Brokers Should Evaluate Payroll Partners

Most insurance brokers spend their time focused on the big pieces of the employee benefits puzzle, health plans, renewals, networks, plan design and compliance. Those are the issues that drive most client conversations. But there is another system sitting quietly inside every employer that touches almost everything brokers care about, and that's the one your client uses to process payroll.

By Steve Evans

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LIFE INSURANCE

Why Choose Us for Life Settlements?

It is a privilege to work with advisors and their clients across the country. Every once in a while, someone will ask "Why should I do business with you, versus working with a buyer directly?" This is a question that I am delighted to answer. In this article are reasons to choose us for life settlements.

By Lisa Rehburg

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LONG-TERM CARE

2026 Long-Term Care Market Outlook: The New Era of interconnected Care

The United States is entering a defining decade for long-term care. As Americans live longer, the need for care is expanding faster than the systems designed to support it. Families, caregivers, health care providers, insurers, employers, researchers and government programs are all feeling the strain. The 2026 Long-Term Care Market Outlook introduces a new framework—interconnected care—recognizing that no single solution or stakeholder can address these challenges alone.

By OneAmerica Financial

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ANNUITIES & LIFE INSURANCE

Annuities & Life Insurance: From 'Live On' to 'Leave On'

We're in the midst of the great intergenerational wealth transfer era. As much as \$124 trillion is expected to pass from the baby boom generation to millennials and Generation X by 2048, according to Cerulli Associates. How can you help a client determine the ultimate purpose of the assets they own?

By Paul Garofoli

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COMMISSION PLANNING

Turn Commission Risk into Renewal Revenue

This article covers how General Agents, FMOs and agency owners can help subagents protect, stay active and grow while building a reliable succession pipeline. Their Commission Protection Plan and purchase agreement framework have been tested in California's health market over the past decade and are designed to protect commissions and provide a sale in the future.

By Phil Calhoun and David Ethington

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HEALTH & WELLNESS

Tips for Diabetes Risk factors, Treatment and Lifestyle Choices

April is Defeat Diabetes Month in the United States, a time for education and action to help mitigate diabetes. About 830 million people worldwide have diabetes, making it one of the most common chronic diseases in the world. Fortunately, the American Diabetes Association (ADA) has recently recommended ways to improve how health professionals diagnose, treat and monitor diabetes. Stay informed and guide your clients to make educated decisions about their health and wellness.

By California Broker Magazine

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HEALTH & WELLNESS

Rewiring Brain and Body: Lifestyle Strategies That Improve Coordination, Cognition, and Quality of Life in Parkinson's

Parkinson's Disease (PD) affects nearly one million Americans and that number is rapidly increasing. Characterized by tremors, stiffness and slowed movement, there are also many other symptoms of coordination, cognition and quality of life that impact both the person with PD and their loved ones. PD also represents a healthcare utilization challenge, due to increased fall risk, hospitalizations and cognitive decline that all cost money and require medical oversight.

By Megan Wroe

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AI IN BENEFITS

AI In Benefits: What You Need to Know to Keep Your Data Safe While Using Artificial Intelligence Tools

AI is everywhere, whether we want it to be or not. Sure, it can be a great tool to speed up your work, and it can help make your presentations more attractive and engaging, and your videos more compelling to watch. But there are a lot of dangers when working with AI—most often when you don't even realize that AI is being used!

By Dorothy Cociu

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BOOK REVIEW

Book Review of "The Champion's Creed"

In "The Champion's Creed," NFL star and Chief Culture Officer Ben Utecht unveils the blueprint for forging unbeatable teams in any arena. Central to Utecht's methodology is the creation of a "Culture Creed"—a dynamic manifesto that transcends typical mission statements. This powerful tool becomes the compass guiding every decision, action and interaction within an organization. Readers will learn how to craft and implement their own Culture Creed, infusing their company's Culture with purpose and direction.

By California Broker Magazine & Melissa Nicolas Hernandez

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CALIFORNIA POSITIVE

How to Celebrate Earth Month this April

Earth Day has grown from a single day to the full month of April, with activities aimed at encouraging sustained climate action. From donating to environmental charities and volunteering to clean up local public spaces to focusing on awareness and education, there are many ways to get involved this Earth Month. In this article, we will share some ways you can make this April a time to expand your appreciation for our planet.

By California Broker Magazine

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Industry News

CURATED NEWS FROM THE INDUSTRY

Funding bill extends telehealth, enacts PBM reform

The minibus package also funds HHS and extends acute hospital care at home.

By Susan Morse Executive Editor

President Trump on Tuesday signed into law a funding bill that ended a short-term partial government shutdown, funds the Department of Health and Human Services, extends telehealth and virtual care flexibilities, and enacts pharmacy benefit manager reform.

The minibus package did not revive Affordable Care Act enhanced premium tax credits that expired Dec. 31, 2025. Nor did it include provisions from President Trump's healthcare plan to send money directly to consumers' health savings accounts. .

[READ FULL ARTICLE »](#)

Victory for Financial Professionals: NAIFA Leads the Way!

[Here is the scoop...](#)

This is not a one-time win. It is the latest chapter in NAIFA's 90+ years of shaping the standard of care debate. Since the Securities Exchange Act of 1934 established the modern regulatory framework for securities and financial advice, NAIFA has been the relentless advocate ensuring rules protect both consumers and the professionals who serve them. We helped shape Regulation Best Interest, drove adoption of the NAIC Best Interest Annuity Model across the states, and continue to fight every day in Congress, state legislatures, and regulatory agencies so you can deliver the advice your clients deserve — without unnecessary barriers or one-size-fits-all mandates.

Alone, one advisor's voice gets lost in Washington and state capitals. Together through NAIFA, we are heard — and we win.

When you join NAIFA, you become part of the only association that:

- Represents you in every state capitol, on Capitol Hill, at the White House, and before every relevant regulator
- Gives you exclusive grassroots tools to contact your legislators directly with NAIFA's proven messaging
- Delivers industry-leading education, practice management resources, and marketing support to grow your business
- Connects you with a nationwide community of like-minded professionals who share best practices and referrals
- Protects your business model so you can continue offering the full range of products and compensation structures your clients need

[JOIN NOW »](#)

Amazon expands access to health-focused AI assistant

The assistant launched for members of the technology giant's One Medical primary care chain in January. Now, the tool will be available to all U.S. customers.

By Emily Olsen

Amazon's expanded offering comes as the market for dedicated health chatbots is heating up. OpenAI launched ChatGPT Health in January, a similar tool that allows users to connect their medical records and data from connected devices and ask the AI questions about their health.

Another major AI firm, Anthropic, also rolled out functionality for consumers to upload health data so the AI could offer insights on their care.

[READ FULL ARTICLE »](#)

TrumpRx.gov traffic beats competitors in first month, despite limited features

By Allison Bell

Publications like STAT are reporting that there's a big gap between what the administration of President Donald Trump said about TrumpRx.gov before it launched and how the site really works.

But early usage figures suggest that the site is still a force to be reckoned with.

A review of web traffic data compiled by Similarweb shows that, in terms of attracting traffic, the site is lagging far behind Ro.com — a telehealth services and anti-obesity drug provider — but crushing the Mark Cuban Cost Plus Drug Company's CostPlusDrugs.com site.

TrumpRx.gov also appears to be getting about four times as much traffic as Wegovy maker Novo Nordisk is getting for its Novocare.com direct-to-consumer sales website.

[READ FULL ARTICLE »](#)

Michele Andrews, OD, Appointed Chief Medical Officer of VSP Vision

VSP Vision™ announced that Michele Andrews, OD, has been named chief medical officer. In the role, Dr. Andrews will provide strategic oversight across all clinical modalities, align clinical aspects of optometric care, and develop programs to deliver and monitor high-quality, accessible eye care for VSP's diverse patient populations. She will report to Michael Guyette, president and CEO of VSP Vision.

"Dr. Andrews brings more than three decades of leadership experience spanning retail and private optometric practice, managed vision care, and medical device manufacturing and distribution," said Guyette. "Working closely with other clinical leaders across VSP, her expertise will further advance our care delivery efforts to meet evolving patient needs while upholding the highest standards of care across all practice modalities."

[LEARN MORE »](#)

'We're running in when others are running out': Stability drives record growth for regional Medicare Advantage plans

By Jakob Emerson

Medicare Advantage enrollment grew less than 1% during this past annual enrollment period, but beneath that modest topline number was a dramatic reshuffling as national payers shed hundreds of thousands of members while smaller and regional plans posted some of the largest enrollment gains in their histories.

In interviews with Becker's, leaders at five of those plans independently pointed to the same explanation for their success: stability.

[READ FULL ARTICLE »](#)

Evidence Shows ACA's Mandated Benefits Alone Don't Drive Up Costs. The Debate Continues.

By Julie Appleby and Sarah Boden

In January, when President Donald Trump unveiled his one-page outline to address health care spending, dubbed "The Great Healthcare Plan," he specifically mentioned the Affordable Care Act's role in driving up costs.

"I call it the unaffordable care act," he said. He reprised the line in his 2026 State of the Union address, blaming "the crushing cost of health care" on Obamacare.

Trump's words also play off an ongoing congressional debate that began late last year with the expiration of the enhanced tax subsidies that had lowered the cost of ACA insurance for millions of Americans — and thrust the issue of ACA-related costs back to center stage.

[READ FULL ARTICLE »](#)

'How Low Can You Go?' The Shifting Guidelines for Blood Pressure Control

By Paula Span

The patient initially came to see Mark Supiano in 2017 because her family was concerned about her short-term memory loss.

While taking her history and vital signs, Supiano, a geriatrician at the University of Utah, saw one disturbing signal: Her blood pressure was 148/86, above normal despite her taking two medications intended to lower it. "Clearly that was too high," he said recently.

[READ FULL ARTICLE »](#)

Anthem to penalize California hospitals for out-of-network doctors

By Allison Bell

Managers of Anthem Blue Cross think that in-network hospitals in California should use in-network physicians to treat health plan participants.

The Elevance Health subsidiary announced earlier this week that it will impose a 10% payment penalty on some in-network hospitals and other health care facilities that bill patients for care provided by out-of-network doctors.

“Participating facilities may not balance bill members for any such reduction in payment,” Anthem said.

In some cases, Anthem said, it may exclude facilities that repeatedly bill for care furnished by out-of-network providers from its provider networks.

The penalty policy is set to take effect June 1.

[READ FULL ARTICLE »](#)

Trump’s new AI framework could block state robo provider laws

By Allison Bell

A new effort by the administration of President Donald Trump to preempt state regulation of artificial intelligence could lead to battles over the rules for AI health care providers.

The White House posted an AI national policy framework document Friday.

Trump administration officials call in the framework for letting states enforce child protection laws, fraud prevention laws and consumer protection laws against AI developers and AI users.

Officials also state that the federal government should “prevent a fragmented patchwork of state regulations that would hinder our national competitiveness.”

“Congress should preempt state AI laws that impose undue burdens to ensure a minimally burdensome national standard consistent with these recommendations, not 50 discordant ones,” according to the framework.

[READ FULL ARTICLE »](#)

Where the ACA stands, 16 years in

By Elizabeth Casolo

Signed into law 16 years ago on March 23, 2010, the ACA has recently been at the center of a government shutdown, coverage dips and political discourse.

Here are five things to know about where the law currently stands:

President Donald Trump has not been shy about wanting to deviate from the ACA. He suggested redirecting ACA dollars to consumers, bypassing insurers, but has not articulated a specific plan to do so. In a November Truth Social post, he argued that Americans could purchase their own insurance if given the funds. He called to “terminate, per Dollar spent, the worst Healthcare anywhere in the World, ObamaCare.” President Trump continued his criticisms in his Feb. 24 State of the Union address, referring to the ACA as the “Unaffordable Care Act.”

[READ FULL ARTICLE »](#)

Mark Cuban’s Cost Plus Drugs to reach hospitals via new partnership

By Alan Goforth

Hospital access to Mark Cuban Cost Plus Drugs and other alternative suppliers will be expanded through a new strategic partnership between Bluesight and GraphiteRx. This alliance, which brings marketplace data into CostCheck and ShortageCheck, will help hospitals reduce drug spend and strengthen resilience amid ongoing shortages, according to a Bluesight news release.

Through the partnership, Bluesight customers can view Cost Plus Drugs pricing alongside traditional wholesaler options within their existing procurement decision workflows. This added visibility gives pharmacy teams greater flexibility when sourcing medications and making cost-based decisions. This addresses two of the most pressing challenges facing hospital pharmacies -- rising drug costs and persistent shortages.

[READ FULL ARTICLE »](#)

Providence explores strategic options, sale of Providence Health Plan



Providence today announced it is actively exploring strategic options for Providence Health Plan (PHP) – including the sale of the plan.

In a message to Providence caregivers, Greg Hoffman, chief financial officer, said the review is part of Providence's "broader focus on delivering high-quality patient care and ensuring the long-term strength" of the organization.

PHP has served members for decades, receiving high marks in independent measures of quality and member experience. Hoffman said today's announcement reflects the challenges facing smaller, regional health plans that lack the scale of larger insurers, including the ability to share resources, spread costs and make ongoing investments in technology. He emphasized that it is not a reflection of PHP's quality or the commitment of its caregivers.

[READ FULL ARTICLE »](#)

Notice: Requirement to Report Changes in Background Information (Annual Reminder)

RICARDO LARA
INSURANCE COMMISSIONER

California Department of Insurance

Please review the attached Notice from the California Department of Insurance regarding the "Requirement to Report Changes in Background Information (Annual Reminder)."

Thank you.

[LEARN MORE »](#)

New individual life premium hits record-setting \$17.5B in 2025

By Fred Schulte

Total new annualized premium exceeded \$17.5 billion in 2025, up 10% year over year, according to LIMRA's individual life insurance sales survey. Individual life insurance new premium has set records for four of the past five years, including 2025. The number of policies sold rose 7% for the year.

In the fourth quarter of 2025, new annualized premium totaled \$4.9 billion, up 6% over the prior year. Policy count rose 9% in the fourth quarter.

[READ MORE »](#)

Diabetes outcomes worsen after insurance loss, OHSU study finds

Low-income patients face higher risks; findings raise concerns as widespread loss of Medicaid, rising insurance premiums loom

By Angela Yeager

Losing health insurance can quickly worsen health for people with diabetes as patients struggle to control the disease after coverage is interrupted, according to new research from Oregon Health & Science University,

The study, published today in JAMA Health Forum, found that low-income adults with diabetes who experienced insurance "churn" — defined as losing coverage for multiple medical visits — had poorer blood sugar control and needed more intensive medications than similar patients who stayed insured.

[READ MORE »](#)

Overpayments to Medicare Advantage plans are costing seniors billions, Joint Economic Committee finds

Congressional investigators found Medicare Part B premiums rose by more than \$200 per member, totaling \$13.4 billion in additional spending, due to the alleged overpayments.

By Rebecca Pifer Parduhn

Dive Insight:

Medicare Advantage was created in the late 1990s to save taxpayers and Medicare beneficiaries money and improve care for the program's elderly and disabled beneficiaries. The idea was to incentivize private insurers to curtail unnecessary care and prevent avoidable medical events by paying a flat rate per member and allowing them to keep a slice of any financial savings they generate.

MA has proved popular with seniors, growing to cover more than half of all Medicare beneficiaries. But MA also costs significantly more than traditional Medicare — 20% more on average, according to estimates from the Medicare Payment Advisory Commission, a congressional advisory group.

[READ FULL ARTICLE »](#)

Medicare Advantage enrollment declines for first time in 7 states: 9 notes

By Jakob Emerson

Medicare Advantage growth is slowing down as payers prioritize margins over membership, and some states are recording a decline in enrollment for the first time, according to a Feb. 26 report from HealthScape Advisors and Chartis.

The report used CMS monthly enrollment, penetration, and star ratings data from 2022 through 2026 and surveyed government program leaders at more than 35 health plans in January 2026 to assess the current market outlook.

Nine notes:

1. Medicare Advantage enrollment grew just 2.5% in 2026 to a record 35.4 million beneficiaries, down from 3.6% in 2025.

[READ FULL ARTICLE »](#)

The explosion of the Medicare Advantage special needs plan

By Elizabeth Casolo

For insurers that remain committed to their Medicare Advantage businesses, special needs plans have been a major growth driver. KFF estimated that almost half of MA enrollment growth from 2024 to 2025 stemmed from these tailored plans. In 2025, SNPs covered 21% of MA enrollees.

Chronic condition, dual-eligible and institutional SNPs address members who have specific long-lasting health issues, also qualify for Medicaid or require an institutional level of care (through a long-term facility or at home), respectively. Every SNP must follow a CMS model of care framework approved by the National Committee for Quality Assurance.

Becker's heard from two insurers and one SNP partner to better understand the value of these plans — and how to do them right.

[READ FULL ARTICLE »](#)

Medicare is cracking down on rising fraud and improper care at hospice as admissions soar

Hospice providers in six states are under extra regulatory scrutiny

By Jessica Hall

Scrutiny of hospice care has intensified, grabbing the attention of the federal government, which is vowing to decertify companies that are overbilling, stealing identities or charging for services never provided.

That could help consumers who run the risk of being defrauded by some questionable operators that have popped up to take advantage of rich reimbursements by Medicare — casting a shadow over even the reputable companies that provide sacred end-of-life care.

[READ FULL ARTICLE »](#)

APRIL 2026



2026 APRIL EVENTS

[Apr 2 @12:30-6:30pm CAHIP: Tech Day 3.0: Future Ready Benefits Summit-Del Mar, CA](#)
[Apr 2 @3-5pm EPI: What Your Clients Are Already Doing With Ai — & Why They're Not Telling You-Los Angeles, CA](#)
[Apr 6 @2:30-4:30pm EPI: Speed Dating: Always Know Who To Call!-San Francisco, CA](#)
[Apr 8 @2:30-4:30pm EPI: Designing A Smarter Exit: Leveraging Real Estate To Enhance Business Sale Outcomes-Solana Beach, CA](#)
[Apr 9 @11:30am-2pm CAHIP: Pathway to Excellence Awards & Lunch Celebration-Granada Hills, CA](#)
[Apr 9 @2:30-4:30pm EPI: Designing A Smarter Exit: Leveraging Real Estate To Enhance Business Sale Outcomes-Costa Mesa, CA](#)
[Apr 9 @7-11pm WIFS: Case Study Night-Sherman Oaks, CA](#)
[Apr 14 @1-4pm NAIFA: 2026 Sales Growth Summit-Sacramento, CA](#)
[Apr 15 @8:30am-4pm NAIFA: California 2026 Legislative Day-Sacramento, CA](#)
[Apr 15 @11am-1pm EPI:Exit Planning In A High Uncertainty Environment: Rates, Inflation, Tariffs-Westlake Village, CA](#)
[Apr 15 @11:30am-1pm NAIFA: NorCal April Member Meeting-Sacramento, CA](#)
[Apr 16 @4-7pm CAHIP: Member Event - Top Golf 2026-Burlingame, CA](#)
[Apr 19 @10am-12pm CAHIP: Golden Gate - Trail Talks April 2026-Location Coming Soon](#)
[Apr 20 @9:30am-5:30pm CAHIP: Take a Swing Fore the Cure Charity Golf Tournament-Aliso Viejo, CA](#)
[Apr 21 @11:30am-1pm NAIFA: Fresno Educational Luncheon-Fresno, CA](#)
[Apr 23 @11:30am-1pm EPI: Essential Estate Planning Strategies For Business Owners In The Current Tax Environment-Norco, CA](#)
[Apr 24 @2-6pm CAHIP: Annual Dance Showdown-San Diego, CA](#)

VIRTUAL EVENTS

[Apr 2 @12:30-6:30pm CAHIP: President's Pitstop with Susan Rider-Webinar](#)
[Apr 7 @10-11am Commission Solutions: Finding a Buyer with Phil Calhoun-Webinar](#)
[Apr 8 @3-4pm NABIP: Understanding Medicare Estimation and Medicare Secondary Payer \(MSP\) Rules-Webinar](#)
[Apr 14 @2-3pm NABIP: Member Chair Leadership Training-Webinar](#)
[Apr 15 @9-10am NAIFA: State of NAIFA Q2 2026-Webinar](#)
[Apr 15 @10am-12pm CAHIP: Medicare Roundtable-Webinar](#)
[Apr 15 @2-5pm NABIP: Individual Coverage Health Reimbursement Arrangements \(ICHRA\)-Webinar](#)
[Apr 16 @10-11am CAHIP: Medicare Agents Virtual Coffee Chat-Webinar](#)
[Apr 16 @3-4pm Commission Solutions: Being a Preferred Successor Buyer with Ray & Son-Webinar](#)
[Apr 23 @12-1pm NABIP: New Member Orientation-Webinar](#)
[Apr 23 @1-2pm NABIP: Virtual Leadership Forum - Succession Planning-Webinar](#)
[Apr 24 @10-11am Commission Solutions: How Not To Run Out Of Money In Retirement Post Sale Of Your Book Tony's Tips-Webinar](#)
[Apr 30 @10-11am Commission Solutions: Case Study Protecting Your Loved Ones with Phil Calhoun & David Ethington-Webinar](#)

SAVE THE DATE

[May 5-6 @8am-4pm CAHIP: Capitol Summit-Sacramento, CA](#)
[May 14 @ 8am - 5pm CAHIP: Golden Gate - CE Symposium 2026-Fairfield, CA](#)
[May 20 @ 8am-5pm CAHIP: LA Annual Conference 2026-Burbank, CA](#)
[May 29 @ 9:30am-5:30pm CAHIP: 23rd Annual Celebration of Women in Business Charity Luncheon & Fashion Show-Newport Beach, CA](#)
[June 27-30 @9am-12pm CAHIP: Capitol Summit-Atlantic City, NJ](#)

BROKER RESOURCES

Helping our brokers stay ahead of the curve with the latest news, events, trainings, and insights.

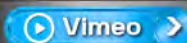
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How Brokers Should Evaluate Payroll Partners

By Steve Evans



Most insurance brokers spend their time focused on the big pieces of the employee benefits puzzle, health plans, renewals, networks, plan design and compliance. Those are the issues that drive most client conversations.

But there is another system sitting quietly inside every employer that touches almost everything brokers care about, and that's the one your client uses to process payroll.

Payroll determines how benefits are handled, how retirement contributions are processed, where employee data lives and how compliance documentation is tracked.

Brokers depend on payroll providers every day, but who their clients work with often doesn't get enough attention until something goes wrong and it starts affecting the broker's business. When it does, it can create problems for the broker and sometimes even give the HCM provider an opportunity to take a shot at getting your insurance business.

The payroll companies your clients use can have a bigger impact on the relationship than many people realize. For brokers who introduce payroll vendors to their clients, a few things are worth paying attention to.

Look beyond the salesperson

Most insurance brokers find their payroll partners the same way—at a networking event, through a referral or a payroll rep who walks into the office and says they want to “partner.”

This is how many of these relationships start. Before long, you're referring clients their way.

Often, it's simply because the salesperson is likable and seems easy to work with.

But the challenge is that the sales rep doesn't have control over what the company ultimately does.

Large payroll companies, like the one I left to start our company, are complex organizations with multiple divisions selling to the same clients and aggressive revenue targets. In that environment, it is not unusual for different parts of the company to pursue opportunities that compete with the advisors who originally introduced the client to them.

This is why brokers should always understand the following before referring a payroll provider:

Where else does the company try to generate revenue from its client base?

Because that answer matters more in the long run than the relationship with the individual salesperson.

Understand the ownership structure

Ownership is one of the most important aspects of evaluating a payroll provider.

Many payroll and HCM companies today are owned by insurance brokerages, private equity firms with insurance holdings, or are part of organizations that actively sell employee benefits under their brand.

That is where things can start to get messy.

When a payroll provider also sells insurance or financial products, they have a front-row seat to employer data, employee census information and benefit enrollment details. That kind of visibility can make it very easy to spot opportunities to sell other services.

When brokers lose business to payroll companies, it's rarely because someone redesigned the benefits plan and made it better. More often than not, it's a broker-of-record change positioned as a simpler way to manage payroll and benefits together. That doesn't include you.

A quick review of the company's website can be revealing. If benefits, retirement plans or insurance services are listed, or the company is owned by a large insurance or financial services firm, that tells you a lot. Hearing phrases like “single source for everything” can also signal how they plan to expand within their client base.

Payroll touches nearly every
part of your **client's employee**
experience. When it works
well, **everyone benefits.**

Ask how the relationship is protected

Now that you have a better understanding of the payroll providers you work with, there should be clear guardrails in place.

Brokers should ask their salesperson questions like:

- If one of my clients asks your team about services that I normally handle, how is that conversation handled?
- Who else within your sales organization is allowed to contact the clients I refer?
- Do you maintain a “no-call” list for referred clients, and how would I make sure my clients are included on that list?
- How am I identified in your system as the referring partner so my clients are not receiving ongoing sales calls from other divisions?
- If I need help supporting a client, who should I contact on your team?

These are things you should know. The right partner will welcome the conversation and explain in detail how they protect advisor relationships. They'll even put it in writing.

The wrong partner will hem and haw and tell you not to worry, that they have your back and you can just come to them for anything.

Look for alignment with the advisor model

The best payroll partnerships are built around a simple idea.

Payroll should strengthen the broker's role as the trusted advisor.

When payroll, HR and benefits systems work well together, the broker's job becomes much easier. When those systems are disorganized or disconnected, the problems eventually find their way back to the broker and can lead to unhappy clients.

There's also another factor worth thinking about. Many insurance brokers are also small business owners, just like the majority of their clients. They work in their communities, build relationships locally, and take pride in supporting other entrepreneurs they trust.

Yet when it comes to payroll, many advisors end up referring their clients to very large providers whose priorities are often driven by revenue targets and shareholder growth rather than local relationships. Smaller providers often align better with local brokers than the big box ones.

At the end of the day, a good HCM partner should make the broker look good for introducing them to the client, not create more work.

That means things like:

- Clean benefits integrations that reduce enrollment and deduction issues
- A service team that responds quickly when brokers need help supporting a client
- Direct access to experienced people within the company who can resolve issues, not just a salesperson or their manager
- Clear recognition of the broker relationship within the company
- Respect for the advisor relationship and the role the broker plays with the client
- A willingness to loop the broker in when conversations expand beyond payroll

Payroll touches nearly every part of your client's employee experience. When it works well, everyone benefits.

Service Still Matters

Technology in the HCM space has improved dramatically. Employee self-service portals, benefits administration systems and AI tools have made platforms more powerful than ever.

Even with all the technology available today, employers still need a little handholding from time to time.

When something goes wrong with payroll, it usually needs to be fixed right away. That is when your partner's service model matters.

One of the biggest complaints employers have about large payroll companies is that it can take a while to get to the right person when they need help. They often end up sitting in support queues, getting transferred from person to person, or leaving messages that never get returned.

The best payroll partners combine strong technology with real human support. Having a payroll specialist assigned to the account who is familiar with the client's payroll setup can make a big difference when questions come up. Because payroll is still a human business.

Think long term

The payroll partner a broker brings into a client relationship will usually be there for a long time.

Employers don't switch payroll systems very often. Once a system is in place, it tends to stay there for a while.

That's why it pays to think carefully about who you choose to work with for your clients.

The right payroll partner can make the broker's job easier and strengthen the relationship with the client. The wrong partner can slowly create problems that the broker ends up cleaning up or even cause them to lose the client.

Alignment matters

When payroll companies truly respect the advisor relationship, and brokers expect the same kind of partnership from their HCM provider that they would from any other trusted advisor, everyone wins. Especially our shared client.

[Click here](#) for a direct conversation about alignment, services, and book protection strategies.



Steve Evans is the Co-founder of Premier HCM with over 25 years of payroll sales and leadership experience, and he launched the company to elevate service in an industry that too often forgets what real support looks like. He partners with small to mid-sized businesses that want more than just software, delivering proactive guidance, clear answers, and a deep understanding of client needs through an integrated platform for payroll, HR, time, onboarding, and benefits backed by hands on service from seasoned professionals. Evans believes strong relationships and practical solutions matter as much as technology and is passionate about helping organizations simplify payroll, improve compliance, and build lasting partnerships.



LIFE INSURANCE

Why Choose Us for Life Settlements?

By Lisa Rehburg

It is a privilege to work with advisors and their clients across the country. Every once in a while, someone will ask “Why should I do business with you, versus working with a buyer directly?” This is a question that I am delighted to answer.

In this article are reasons to choose us for life settlements.

1. First and foremost, we are life settlements brokers, and we have a fiduciary duty to clients to market their policy to obtain the highest amount of money for it that we can. Buyers (called “Providers” in our market) do not.
2. Our superpower is leverage. Providers do not have this superpower, because it is not in their best interest. Allow me to explain. Providers are trying to obtain a client’s life insurance policy for as little money as possible. The lower the amount, the more potential profit they can make. They are not “bad.” It is the business-model. When you or I try to buy an asset—let’s say a car—we are not trying to pay the most amount of money for it, are we? Of course not. And, neither are the providers. However, when we are involved, things change. We have access to many different providers, leveraging them against each other to maximize value for client. I have seen the same provider offer 10 different times (literally) on a client’s policy. Competition drives the price for providers, and the value for clients.

Some recent client examples include:

Opening Offer	Closing at
\$90,000	\$225,000
\$60,000	\$225,000
\$40,000	\$230,000
\$20,000	\$55,000

3. Placing more policies - sometimes, there is only one provider that wants a policy. Having so many providers allows us to place more clients’ policies. With a provider direct, a client may not receive an offer on their policy at all, unless they happen to have contacted the one provider that wants the policy, which is like finding a needle in a haystack. Clients and advisors would not know many of the capital sources that we can access, and some are proprietary.

4. Transparency - a life settlements broker must disclose all offers made on a policy, and by which provider, making the process very transparent. Some providers will say “come to us, we have access to many funds, so you get the best deal for a policy.” Of note, providers do not have a duty to disclose all offers, so clients and their advisors do not know which funds offered on the policy or what the offer was. The process is opaque. In addition, do the providers leverage their funds against each other to maximize value, the way brokers leverage providers? There is no incentive for providers to do that. They get the business either way. The bottom line is you will never know. Most providers have multiple funds that they access. Which is better: working with one provider with multiple funds, or working with many different providers, each with multiple funds? In our market, the more providers with funds that see a client’s policy, the better the leverage and the better the opportunity to obtain the highest offer for a client’s policy.

Providers will say to come to them, because you don’t have to pay a broker commission, or advisors don’t have to split a commission. This is true. However, remember the broker’s superpower: leverage. Consider the examples above. Each of those clients, had they or their advisor gone to a provider directly, very well may have sold the policy for the opening offer. There are no “comps” as in real estate, so clients and advisors don’t know the true value of the policy. Instead, the advisors and clients came to us and received the top offer at which the policy was sold. Only when a policy is marketed will an advisor and client know the maximum amount that will be offered for a policy. This work is worth commission. And, even if advisors “split” commission with brokers, often the “split” commission is more than the full commission directly with a provider. In a recent case, a client went directly to a provider and received an offer of \$36,000 for her policy. Then, she contacted her advisor, who contacted us. We marketed the policy and sold it for \$47,000 net of commission. The client benefited by \$11,000 and the advisor benefited as well.

I appreciate the providers advertising on TV and online because it helps raise visibility for the solution that life insurance settlements can be. However, I also want people to know the difference between a provider and a broker. The bottom line is we work with advisors and their clients nationwide to maximize value for their client’s life insurance policy when it is no longer wanted, no longer needed, or perhaps no longer affordable. We’re here to help.

*Competition
drives the price for
providers, and the
value for clients.*



Rehburg Life Settlements

Lisa Rehburg, Broker

Life Insurance Settlements



*For more than 30 years, **Lisa Rehburg** has been working with insurance brokers, financial advisors, and clients across the country. She has held executive roles at carriers, general agencies, and third-party administrators (TPAs).*

Rehburg Life Insurance Settlements

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2026 Long-Term Care Market Outlook

The new era of interconnected care



By OneAmerica Financial

Long-term care reaches inflection point

The United States is entering a defining decade for long-term care. As Americans live longer, the need for care is expanding faster than the systems designed to support it. Families, caregivers, health care providers, insurers, employers, researchers and government programs are all feeling the strain. The 2026 Long-Term Care Market Outlook introduces a new framework—interconnected care—recognizing that no single solution or stakeholder can address these challenges alone.

The complexity and scale of aging, caregiver shortages, rising costs and increasing consumer expectations demand an interconnected response. A sustainable long-term care future requires coordination across sectors. Families remain the backbone of care, but they cannot carry this responsibility alone. Insurers, health care providers, researchers, government agencies, employers and technology providers must align to support early detection, care access, caregiver resilience and financial protection. Interconnected care reflects the reality that outcomes depend on collaboration, not isolation.

In this report, we explore three themes impacting the long-term care landscape in 2026:

1. The rise of preventive long-term care

The future of long-term care is shifting upstream. With the emergence of brain-health science, blood-based biomarkers, lifestyle medicine and early screening, long-term care planning is becoming a preventive pathway rather than a late-life emergency response.

2. The caregiver workforce crisis

Even the best care plans collapse without caregivers. America faces a structural shortage of home health care workers, facility staff, nurses and dementia-trained specialists — making caregiver access one of the most powerful determinants of future long-term care quality.

3. Family caregiving under extreme pressure

Family caregivers remain the backbone of America's long-term care system, but they are doing so at great personal cost. There is increasing emotional, financial and structural pressure on family caregivers, particularly Gen X households balancing multiple responsibilities. Their needs are expanding beyond emotional support to include financial protection, time-saving resources, mental health services and professional coordination.

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Family caregivers remain the backbone of America's long-term care system, but they are doing so at great personal cost.

Annuitants & Life Insurance: From 'Live On' to 'Leave On'

By Paul Garofoli



When it comes to insurance products, here's one piece of advice: The key isn't what the product is—it's what the client wants to do with it.

We've been trained to think each product has one specific purpose. For example:

- » **An annuity is the "live on" product. It provides a secure retirement by way of income that can't be outlived.**
- » **Life insurance is the "leave on" product. It provides for legacy and estate planning.**

Let's expand our thinking by considering three current and compelling factors.

1. We're in the midst of the great intergenerational wealth transfer era. As much as \$124 trillion is expected to pass from the baby boom generation to millennials and Generation X by 2048, according to Cerulli Associates.
2. Annuity sales are at record levels. LIMRA reported U.S. annuity sales totaled \$434.1 billion in 2024.
3. It's common for annuity owners to die with an annuity partially or fully intact, given the structure of many annuity contracts.

When live on becomes leave on

At some point, your clients will pivot and decide that some or all their assets—particularly their annuities—are destined for someone else. That's when "live on" becomes "leave on." When that occurs, there's a strategic lever within easy reach—annuity death benefit riders.

But first, how can you help a client determine the ultimate purpose of the assets they own? A few simple but probing questions will do the trick.

What is this asset? The answer can help you understand what the client knows about the asset.

What is this for? This answer helps you determine whether the client understands the benefits of owning the asset.

Who is this for? This is probably the key question to help you figure out whether the asset benefits the client while living or someone else when the client dies.

Many consumers easily confuse product and purpose. Don't assume the client knows the difference. Ask the questions.

Annuity death benefit riders

Let's circle back to death benefit riders. For some, they may be a good option to enhance an annuity's legacy value.

Although death benefit riders are not as common as income riders, both share similarities in design. These two riders:

- » Are usually associated with a fixed indexed or variable annuity
- » Offer some kind of "rollup," a predetermined rate of growth allowing a guaranteed accumulation of the death benefit value
- » Feature an accumulation period during which the rollup is active and the death benefit grows

» Come with a fee based on the growing death benefit value and charged against the account value

» May have a minimum eligibility age

And much like its income rider counterpart, a "free" death benefit rider usually features an offset in product design to accommodate the feature. Because the benefit does add value to the underlying annuity, there must be a cost. That expense can be covered by an outright fee or it can come in the form of a modification to the policy. Modifications include a lower cap or participation rate, restricted liquidity, or some other benefit give-back.

As you explore the menu of death benefit riders, remember to ask whether the rider pays out in a lump sum or over five years. Both options have a place, but the value of a five-year payout may outpace that of a lump sum. Also, think about how long a rider will have to accumulate value. Some riders have a growth limit of 10 or 15 years. For clients with a longer life expectancy, the value of the benefit with this limitation will diminish the longer the client lives.

The ideal client

The ideal clients for a death benefit rider are 65-to-80-year-olds who intend to leave the asset to someone else. That is, they don't need it for living expenses in retirement. Perhaps, due to health issues, these ideal clients don't qualify for life insurance or they may want to avoid underwriting. They may also want to preserve their options to enjoy the benefits of the annuity while living. The death benefit rider then becomes a "just in case" outcome.

Here are other prospects for an annuity with a death benefit rider.

[CLICK HERE TO READ FULL ARTICLE »](#)



Paul Garofoli is Regional Vice President for Individual Annuities at The Standard Insurance Company, with over 40 years of experience across underwriting, product development, marketing, and sales. He brings deep expertise in multiple distribution channels and has worked closely with state and federal regulators through his involvement with the National Association for Fixed Annuities. A nationally recognized speaker, Paul also serves on NAFA's Board of Directors. He holds a summa cum laude degree from the University of Massachusetts Amherst, is a member of Phi Beta Kappa, a Fellow of the Life Management Institute, and earned his RICP® designation in 2023.

Turn Commission Risk into Renewal Revenue

By Phil Calhoun and David Ethington



ARTICLE EXPERIENCE OPTIONS

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David Ethington brings a ground level perspective to succession and commission protection. He has spent 15 years learning every line of health insurance under the mentorship of agency founder Phil Calhoun and colleague Carmen Ponce. Ethington runs the Medicare side of Integrity Advisors. Today, he speaks to agency owners, General Agents, and FMO leaders about commission planning.

This article covers how General Agents, FMOs and agency owners can help subagents protect their commissions while they stay active and grow revenues while building a reliable succession plan. Their Commission Protection Plan and purchase agreement framework has been tested in California's health market over the past decade and is designed to protect commissions and provide a sale in the future.

Why commission protection is now a strategic imperative

Ethington points out that many California brokers are in the baby boomer retirement wave and are actively thinking about exit timelines, even if they have not formalized a plan. "This is a broad topic," he said, "not just for individual agents who are looking to retire," but for agents and subagents as all have risks from death to disability which can lead to the loss commissions.

For GA and FMO leaders, this risk impacts them and their subagents. When a subagent loses their license or passes away without a plan in place to protect their commissions, insurance carrier rules and compliance requirements will lead to terminating commissions. In many cases, clients are lost as they often seek a new broker and then commissions evaporate. Ethington reminds agency owners that when they protect their subagent's commissions they also protect their overrides. With all of the Baby Boomer brokers out there it can be the first broker approaches a subagent about planning has a much better chance to keep that book under their downline.

Phil Calhoun has seen the problem from every angle in Southern California since first getting licensed in 1990, including launching a hospital based Medicare HMO in 1990, building an FMO and later buying out an agency from a large medical group. After going through full valuations with CPAs and attorneys and then starting Calhoun and Associates DBA Integrity Advisors, he sold his share of the FMO and shifted focus over the last decade to help health brokers and subagents protect their commissions through a structured planning process called the Commission Protection Plan.

Two core tools for GA and FMO leaders

Calhoun and Ethington have distilled their experience into two core tools that GA, FMO and agency owners can offer subagents.

- The Commission Protection Plan for active agents who want to keep selling but need their commissions protected against death, disability or future retirement
- The Commission Purchase Agreement for active brokers who are ready to retire and sell now, without remaining active

"Every commission protection plan has a purchase agreement in it," Calhoun explains, but when a subagent is truly ready to exit, "we recommend the commission purchase agreement." Both structures are built to be carrier agnostic so they can encompass all lines of health insurance from Medicare, group and individual, and provide continuity across California's fragmented carrier landscape.

The value to a GA or agency owner is familiarity, motivation and predictability. With our approach they can effectively position themselves as the default successor buyer for multiple subagents. While each deal can be standardized, your deal terms are designed to help address how to retain clients and overrides. Planning is a way to prevent clients from scattering to competitors or be lost entirely in a broker's life event.

Turning planning into a growth engine

From their consulting work, Calhoun and Ethington have a track record that shows how quickly planning can convert to real deals. A California FMO that invited them to present to subagents ended up closing three immediate retire and sell acquisitions in one year. Using their planning process, the FMO owner was positioned as the buyer for all three transactions. This FMO was also able to help two more active broker subagents stay active with a commission protection plan. Then, last year a General Agency owner recently closed one acquisition of a subagent's book of business and has a second subagent moving forward on a commission protection plan.

Their consulting model is intentionally hands-on. "We walk side-by-side with you in this process," said Calhoun, "we supply our proven process-health insurance planning agreements, the required carrier commission transfer forms, and a client retention plan." Working with agencies on a single subagent planning deal, the consulting fee is \$2,250 for the full process, dropping to \$1,750 per agreement for agencies when multiple subagents get involved. With their expertise focused on health commission protection and eventual sale to a buyer, the process was built over 10 years is far more economical and effective than starting from scratch with an outside attorney or CPA.

Importantly, they emphasize that each subagent situation is personal. Many solo brokers in California have mixed books Medicare, small group, IFP and sometimes unpaid service work and may want to sell only part of their commissions or keep certain client segments. Calhoun notes that to secure the most valuable portion of a book, “sometimes you have to take it all” and then adjust pricing for lower value segments such as IFP unless those IFP lives represent a substantial pool of near Medicare eligibles. The details and differences between Buyers and Sellers are worked out with our support.

How the math and deal structure work

Ethington frames the starting point simply “How much commission is coming in the door” is the baseline for valuation, then adjusted for key factors like carrier mix, client geography, client tenure on the books and, in Medicare, client age. For most solo health brokers, the common annual commission revenue is between \$100,000 to \$350,000. Health insurance books above \$500,000 and more are less common and these deals can involve increased financial analysis and may draw in large institutional buyers.

“On deal structure, we strongly favor payouts over time rather than lump sums.” A common start is a 50% share of gross commissions paid over four to five years, effectively delivering roughly two or three times book value to the seller. This approach has many advantages for the Seller and Buyer. Since the key is to keep as much of the paid amount every seller needs to focus on the tax impact of the gross payment they receive. Smoothing the tax impact is how we help sellers with the payout approach. Reducing upfront cash demands on the buyer is how we recommend buyers can do multiple deals without bank loans or additional expense load on their business. Calhoun underscores the core principle, “It’s not what you’re paid, it’s how much you keep after taxes.” He notes that spreading payments over four or five years means the seller “is going to keep a lot more of their payout.”

This approach also aligns well with typical carrier compensation patterns in California where premiums and commissions tend to rise over time. As Ethington puts it, under a percentage of commissions structure, “the buyer is winning and the seller is winning,” because future commission increases benefit both parties within the agreed-upon payout term. Mutually beneficial deals often lead to greater success and satisfaction of both seller and buyer.

Building a repeatable, compliant process

For California brokers steeped in Medicare AEP and fourth quarter group renewals, any succession strategy is ideally built in between January and June. Planning for succession and protection of commissions needs to be operationally realistic. Calhoun is explicit that their focus is their proven commission planning process “what we bring to the table is the process,” including formal agreements, access to estate planning and tax experts and detailed guidance on timing, valuation, retention programs and post sale service.

Ethington says much of their work with agency owners and subagents is about these practical touches “What do you do during open enrollment? What do you do outside of open enrollment? How many times are you touching your clients throughout the year?” A smooth client transition is critical; if you stumble on service, retention drops, the economics suffer and the deal is less successful.

Over time, Calhoun observes that agencies can “stack” multiple commission protection plans with subagents of different ages and specialties, treating them almost like future accounts receivable. As those subagents eventually retire or face life events, the agency can bring on new staff to absorb the service load and convert protected books into owned revenue streams, all within a framework that respects client continuity and successor rules.

Keeping subagents and their families whole

For Ethington, the core purpose of the Commission Protection Plan is to give your subagents the flexibility to stay active while knowing that if they retire, become disabled or pass away, their beneficiary continues to get paid based on the terms of the purchase agreement. For California GA, FMO and agency leaders, offering that structure is not only a retention and override strategy; it is a way to demonstrate real stewardship of the subagents who power your distribution.

If you would like to explore commission protection options for your subagents or your own book, you can reach out directly to David Ethington or Phil Calhoun at Integrity Advisors. They suggest scheduling a 15-minute discussion about your agency’s needs and potential fit with their planning process.

Many solo brokers in California have mixed books Medicare, small group, IFP and sometimes unpaid service work and may want to sell only part of their commissions or keep certain client segments.



Phil Calhoun is the owner and publisher of California Broker Magazine. Phil also is a leader in coaching health insurance professionals. He is an active member of several insurance associations including the California Association of Health Insurance Professionals (CAHIP) and local chapters in Orange County, Los Angeles, San Diego and Inland Empire Health Insurance Professionals. He attends many state and local California chapter meetings. Phil’s book, “*The Health Broker’s Guide: To Protect Grow and Sell Commissions*” is available free at www.healthbrokersguide.com.

Phil offers complementary 15-minute coaching sessions to help brokers get answers to questions about how to protect, grow and sell their health commissions. To schedule a FREE phone call “[Click Here](#)”

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David Ethington is VP of the Medicare Division and director of Broker Relations with Commission Solutions, part of Integrity Advisors. His work has excelled due to his commitment to providing the best service to both health clients and health brokers. David respects the hard work it takes to build a book of business and enjoys working with retiring brokers and their families. David has participated in the commission protection process for seven years. He’s also involved in acquisitions, especially in the broker relationship transfer of commissions. David lives in Orange County with his wife and their cats. He is an avid runner and completes several long-distance events annually.

To schedule a FREE phone call “[Click Here](#)”

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Tips for Diabetes Risk factors, Treatment and Lifestyle Choices

By California Broker Magazine

April is **Defeat Diabetes Month** in the United States, a time for education and action to help mitigate diabetes. About 830 million people worldwide have diabetes, making it one of the most common chronic diseases in the world. Diabetes is a metabolic disease that causes a person to have elevated blood sugar levels. Over time, it can have serious side effects, ultimately damaging the heart, blood vessels, nerves, eyes and kidneys. Fortunately, the American Diabetes Association (ADA) has recently recommended ways to improve how health professionals diagnose, treat and monitor diabetes. By staying informed about diabetes updates on managing care, you can confidently guide your clients to make educated decisions about their health and wellness.

Common diabetes risk factors

There are different types of diabetes: type 1 diabetes, type 2 diabetes, prediabetes and gestational diabetes. Being aware of risk factors can help people live more intentional lifestyles, detect problems earlier and work with their doctors more effectively to prevent diabetes.

Medical professionals believe type 1 diabetes is caused by an autoimmune reaction, making its prevention unknown. However, people who are at higher risk of developing type 1 diabetes include:

- Those who have an immediate family member with type 1 diabetes
- Children, teens and young adults (adults rarely develop type 1 diabetes)
- Caucasians (African Americans, Hispanic/Latino Americans are less likely to develop type 1 diabetes)

You are more likely to develop prediabetes or type 2 diabetes if you:

- Are overweight or obese
- Are over the age of 45
- Are related to a family member with type 2 diabetes
- Live a sedentary lifestyle
- Have non-alcoholic fatty liver disease
- Have gestational diabetes or gave birth to a baby that weighs nine pounds or more
- Are African American, Hispanic, Latino, American Indian or Alaskan Native

You are at a higher risk of developing gestational diabetes, or diabetes while pregnant, if you:

- Had diabetes during a previous pregnancy
- Gave birth to a baby weighing over nine pounds
- Are overweight or obese
- Are over the age of 25
- Have an immediate family member with type 2 diabetes
- Have polycystic ovary syndrome, or PCOS
- Are African American, Hispanic, Latino, American Indian or Alaskan Native

Sometimes the symptoms of type 2 diabetes aren't very noticeable, which can lead to late diagnoses after a person has already started experiencing more severe complications. Therefore, it's crucial to understand the risk factors and get tested if you have concerns.

Updated methods for testing and diagnosing diabetes

The ADA recently published its updated "Standards of Care in Diabetes," which outlines the most recent diabetes updates on managing care, including recommended testing methods.

Currently, to confirm a diabetes diagnosis, doctors typically use blood glucose tests, which measure a person's blood sugar levels. They also use oral glucose tests and A1C tests, which measure a person's average blood sugar level over two to three months.

For clients **diagnosed** with **diabetes**, health insurance **professionals** can still **provide** valuable **insights** to help them **improve** their **quality** of life and **decrease** negative **symptoms**.

Now, the ADA also recommends antibody-based testing for individuals with a higher risk of developing type 1 diabetes, even if they don't show symptoms. A positive antibody test means the patient is likely to develop type 1 diabetes. However, the ADA recommends repeating the antibody test within three months to confirm it.

Although no patient wants to receive a diabetes diagnosis, antibody testing can help individuals avoid severe diabetes complications by catching the condition earlier and getting the proper treatment to prevent unwanted symptoms.

New treatments and strategies for diabetes care

According to the ADA, new medications and lifestyle changes can significantly improve projections on longevity as well as patients' overall health and wellbeing. To reap these benefits, the ADA recommends the following habits and practices for people with a diabetes diagnosis.

New medications for blood sugar control and heart health

The ADA's most recent diabetes updates on managing care advise doctors to prescribe medications like GLP-1 receptor agonists for people with type 2 diabetes and chronic kidney disease. In those individuals, it may help lower the risk of heart disease and reduce further kidney damage.

Diabetes treatment with new medications like GLP-1 receptor agonists and SGLT2 inhibitors may also help lower blood sugar levels and reduce the need for insulin injections. However, doctors should prescribe them in tandem with lifestyle changes, such as diet modification and regular exercise.

Improved access to diabetes technology

Diabetes technology devices, such as continuous glucose monitors (CGMs), are recommended to people with diabetes, especially in the early phase of treatment or immediately upon diagnosis.

CGMs work by continually monitoring blood sugar levels and providing real-time updates via a device attached to the person's body. This helps patients better understand their body's responses to different foods so they can make educated food choices to manage their diabetes.

The type of device prescribed varies based on the patient's specific treatment needs, preferences and ability. Patients should also be trained on how to properly use their device.

Evidence-based healthy diets

The ADA recommends that people diagnosed with diabetes focus on eating a healthy and balanced diet filled with a variety of foods, while also emphasizing plant-based protein and fiber to improve satiation.

Healthcare providers should also encourage patients to limit their consumption of saturated fats, such as those found in full-fat dairy, processed and fatty cuts of meat, baked goods and fried foods.

Additionally, the updated diabetes management guidance recommends drinking water instead of high-calorie beverages or those with calorie-free sweeteners like Stevia or monk fruit extract.

Lastly, with the increased popularity of weight-loss medications and surgery, the ADA recommends that healthcare providers remain vigilant in monitoring symptoms of malnutrition among patients using these methods.

Lifestyle tips for clients with diabetes

For clients diagnosed with diabetes, health insurance professionals can still provide valuable insights to help them improve their quality of life and decrease negative symptoms. Here are some general tips health insurance providers can share with their clients to help them live comfortably with diabetes:

- Test your blood sugar frequently
 - Take your medicine as advised by your doctor
 - Skip the takeout and cook your own healthy foods at home
 - Find a fun way to be active each day or invite a friend to join your workouts
 - Learn new ways to deal with stress, like yoga or meditation, and implement them in your daily life
 - Set a regular bedtime and get at least eight hours of sleep
- Attend your regular checkups to stay on top of your health

By staying informed about the latest diabetes updates on managing care, health insurance professionals can help educate clients about diabetes and its risk factors, treatment options and positive lifestyle changes.

SOURCES:

World Health Organization (WHO): ["Diabetes."](#)

US Centers for Disease Control and Prevention (CDC): ["Diabetes Risk Factors."](#)

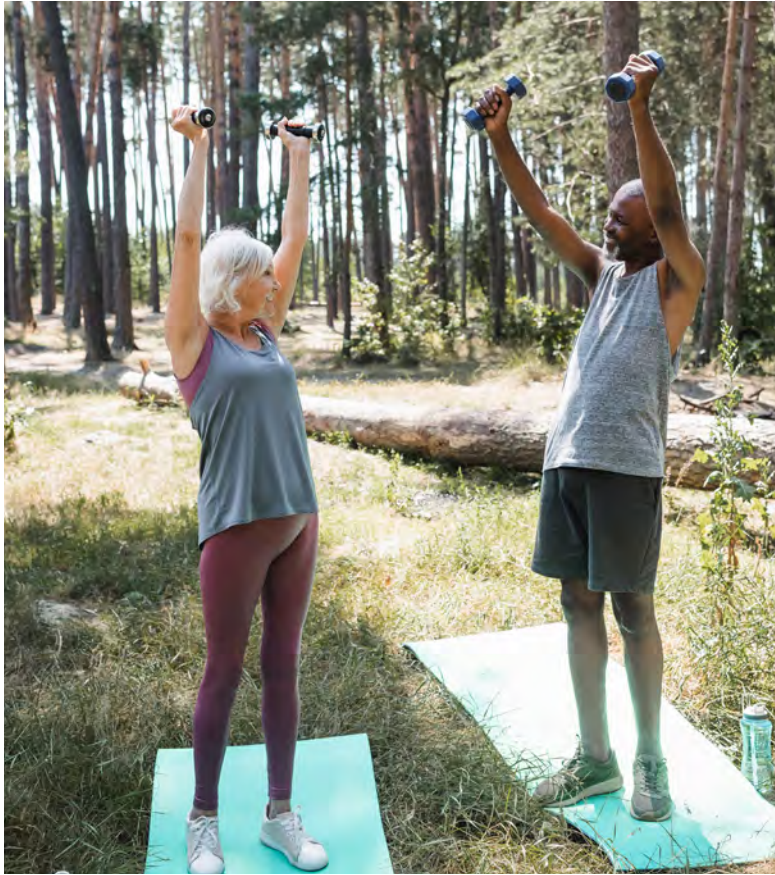
American Diabetes Association (ADA): ["Standards of Care in Diabetes 2025."](#)

US Centers for Disease Control and Prevention (CDC): ["Living With Diabetes."](#)

Rewiring Brain and Body:

Lifestyle Strategies That Improve Coordination, Cognition, and Quality of Life in Parkinson's

By Megan Wroe, MS, RD, CNE, CLEC



Parkinson's Disease (PD) affects nearly one million Americans and that number is rapidly increasing. Characterized by tremors, stiffness and slowed movement, there are also many other symptoms of coordination, cognition and quality of life that impact both the person with PD and their loved ones. PD also represents a healthcare utilization challenge, due to increased fall risk, hospitalizations and cognitive decline that all cost money and require medical oversight.

While PD is incredibly complex in how it impacts each person individually and often requires a unique concoction of medical management for each patient, it is also unique in how responsive it is to lifestyle management. From symptom management to slowed progression, there are a host of strategies people with PD can employ alongside medication to make a true impact on how their condition affects their lives. This is because of the concept of neuroplasticity, which is the brain's capacity to adapt and form new neural connections. The more neuroplasticity, the better cognition and the slower progression of decline. Certain lifestyle interventions act as signals to stimulate neuroplasticity. Movement, learning, recovery and nourishment all improve coordination, reaction time and cognitive function. What's even better is that this is true for ALL aging populations—with or without PD! For Parkinson's Awareness Month, let's focus on what we can do for overall function and discuss ways to move, think and live more independently.

Lifestyle strategy #1: exercise

Exercise is one of the most well-supported interventions in Parkinson's care. Research shows that regular movement can improve gait, balance, strength, brain function and even more day-to-day symptoms such as constipation and sleep. While all of these are reasons to start exercising, possibly the most meaningful benefit to the healthcare industry is the reduced fall risk.

Falls are one of the leading causes of emergency room visits and hospitalization in people with Parkinson's (and seniors in general). Changes in gait, posture and reaction time increase the likelihood of tripping or losing balance. Once a fall occurs, confidence often declines and other injuries can surface, leading to reduced activity and further deconditioning (which is again true for all seniors, not just those with PD).

In addition to reducing fall risk, targeted exercise programs focused on both cardiovascular and cognitive challenge can minimize symptoms acutely for many with PD and can improve how they interact with the physical world around them, from walking and talking to remembering routines to handling a gait freeze in a doorway.

There are several research-backed fitness programs for managing Parkinson's, such as PWR!, Big & Loud and Rocksteady. While each program uses different modalities of movement, they all share similar components such as:

- Strength training to support posture and stability
- Balance and mobility work to improve gait mechanics
- Rhythmic or patterned movement to enhance coordination
- Higher-effort intervals (when appropriate) to support brain activation
- Dual-tasking (physical movement paired with cognitive challenges)

With PD, the key to getting positive outcomes from exercise is consistency. Finding an exercise program that is accessible and fun is key since this should be a lifelong fitness prescription commitment.

Lifestyle strategy #2: sleep

Sleep disturbances are extremely common in Parkinson's and often under-addressed. Poor sleep impacts not only energy, but also cognitive function, mood, motor control and even immune function. Chronic sleep disruption can worsen cognitive symptoms and increase daytime fatigue, which in turn raises fall risk, reduces coordination and activity levels, and impairs overall quality of life. Some people may need more invasive interventions for true sleep disorders, but often all that is needed are some very simple routine changes to significantly improve both sleep onset and length of sleep. The following strategies seem almost too simplistic but are often not being followed consistently. Like exercise, consistency is key to outcomes, and also like exercise, sleep strategies help even those without PD.

- Daytime light exposure. Yep, this one is something to do while awake during the day! Early morning and midday natural light give the circadian rhythm a timestamp, which allows for a more regular onset of sleepy hormones in the evening.
- Minimize evening light. Dim the lights and swap out blue lights for red and orange one or two hours before bedtime. This tells your body that sleep is approaching.
- Eliminate cognitive stimulus pre-bedtime. From excitement to stress, anything that creates heightened emotions will spin in your head when you finally hit the pillow. No global news, difficult conversations or even books so invigorating you can't put them down an hour before bed.
- Environment for sleep. Cool bedroom, zero lights and as silent as possible are the ingredients for a happy sleep room.
- Routine. Human brains love routine and we respond very well to it. Does just the smell of coffee in the morning perk you up? Find some similar triggers to tell the brain it's bedtime. Brush your teeth, wash your face and do some stretching all in the same order at the same time. Your brain will catch on.
- Breath work. Sometimes we just can calm the racing thoughts. Forcefully slowing down breath tricks the body into thinking it is calm. A simple count of inhale for four seconds, hold for seven and exhale for eight, repeated 15-20 times will have you snoozing in no time! This is also a great technique for chronic stress at any time of the day.

Lifestyle strategy #3: nourishment

Nutrition plays a key role in supporting brain and body function in PD. Acutely, adequate protein and calories help to ensure the muscles and bones are fed and prevent both sarcopenia and osteoporosis. Fiber and hydration are critical for maintaining healthy bowel movements as well as a strong immune system. Eating to manage insulin resistance is also important for minimizing inflammation, which can translate to exacerbated decline within the brain.

Key considerations for nutrition with PD include:

- Adequate protein to preserve muscle mass and strength
- Fiber-rich foods to support gut health and digestion
- Anti-inflammatory dietary patterns to support overall brain health
- Preparing homemade food and minimizing ultra-processed foods for both the anti-inflammatory effect as well as the social and joyful effects of cooking and eating alongside others

While each of these lifestyle strategies is powerful on its own, their impact is amplified when combined into an integrated approach.

- Movement improves coordination.
- Cognitive fitness training sharpens response.
- Sleep restores the brain.
- Stress management calms the system.
- Nutrition fuels the process.

From outpatient staff to community centers to insurance brokers, I talk with other professionals in the healthcare field who are outside of acute medical offices, I find that we all share a common goal: to close the gaps in healthcare continuums in order to help our community thrive independently and keep them out of the hospital. It becomes our responsibility then to provide education and resources on lifestyle health management so our community can choose the interventions that work best for them, the PD community being no exception. While Parkinson's presents real challenges, it also presents an incredible opportunity to approach health in a more integrated, proactive and hopeful way.

For **Parkinson's Awareness Month**, let's focus on what we can do for **overall function and discuss ways to move, think and live more independently.**

Upcoming programs at St. Jude Wellness Center

[See schedule & book here:](#)

Programs & Events – St. Jude Wellness Center

Parkinson's Empowerment Program

An early intervention program for those with recent PD diagnoses and their care partners. This four-week program combines education from an integrative team of health and wellness experts along with caregiver support and PD exercise. Participants receive personalized recommendations for next best fitness program. Cohorts are free of charge and offered every one to two months.

Next cohort is Thursdays from 2pm-4pm and begins May 7

Brain Fit

Our signature brain gym circuit course focused on utilizing dual-tasking exercises for enhancing neuroplasticity and reducing risk of cognitive decline. This course is for active, independent agers who are not currently managing cognitive conditions. Brain Fit is a twice weekly, six-week series offered consistently throughout the year for \$165

Next cohort is Wednesdays and Fridays from 12pm-1pm starting May 6

Wellness Center Tours: For those new to our center, we offer bimonthly tours free of charge to give you the behind-the-scenes scoop of what we offer



Megan Wroe, MS, RD, CNE, CLEC, is a registered dietitian and Manager of St. Jude Wellness Center, an integrated program of Providence St. Jude Medical Center. She leads a multidisciplinary team providing nutrition, fitness, mind-body therapies, and preventive wellness services that support the hospital's mission of whole-person care. Megan partners with community organizations and insurance professionals to advance preventive health strategies that help reduce chronic disease risk, promote healthy aging, and improve quality of life for Medicare and senior populations. From single offering services and packages to virtual comprehensive programs for larger employee populations, the wellness center team will create a wellness package based on the health needs and interests of your clients and groups. Learn more about the wellness center and their upcoming programs at their website.

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AI In Benefits: What You Need to Know to Keep Your Data Safe While Using Artificial Intelligence Tools

By Dorothy Cociu

Your grandmother Peggy is sitting quietly at home watching her favorite TV show when she gets a very frightening phone call. It's someone who says they have you, her cherished grandchild, and Peggy has to pay X dollars in Bitcoin to get you back. Then they let her hear your voice, begging you to please pay so you can go home. We've all heard the stories on the news about scammers using artificial intelligence to create videos, images and audio that sound like our loved ones and use it to trick you (or your grandparent), scare you and, quite often, take your money. Today, it's not just a phone call. It could be a message sent to your grandmother's phone or email, with a video from what looks and sounds just like you, and it's even more terrifying. Unfortunately, Grandma Peggy has no idea it's an AI deep fake. Less than two years ago, it was just something that happened to others, scattered stories in the news. But now, AI tools are everywhere, and literally everyone and anyone can learn to use them. Quite often, large platforms create videos to train you on exactly how to create those video and audio clips that bad actors can use to do just that, with very little effort.

AI is everywhere, whether we want it to be or not. Sure, it can be a great tool to speed up your work, and it can help make your presentations more attractive and engaging, and your videos more compelling to watch. But there are a lot of dangers when working with AI—most often when you don't even realize that AI is being used!

The basic dangers of AI finding its way into your data

Combine the basic dangers of using AI with the restrictions on industries like health insurance, where there is a ton of confidential and private information, including medical information, sitting in what you think are very secure areas of your systems, encrypted and protected. And yet, every day, confidential data is leaking, being used in Large Language Models (LLMs) or worse, being spread across the internet. Often times, the leakage happens even though the company has put in protections, because the employees of your company are using unauthorized AI tools that open the doors and allow the AI to work its way into your systems, sometimes without you knowing it. I ask you: do you know if or when your staff is using AI? Do you know what they are using and how or why?

Are there restrictions on what is fed into the AI tool with prompts to get the responses that the employee wants? I asked principals of Aditi Group (technology & IT consultants) what words of caution they would share with individuals and companies as they move more and more towards AI tools in their everyday lives.

"First of all, 'AI' is used loosely and can really mean a slew of different things," stated Ted Flittner of Aditi Group. "Some position algorithms as AI. OCR. Voice-to-text is AI. AI Agents can be a simple researcher while others can take actions—do things on their own. Do your research. Read the privacy policies, security practices, certifications and use policies. And understand a little about how AI works. The fact is that AI models are black boxes. Anthropic CEO Dario Amodei is famously quoted as saying 'People outside the field are often surprised and alarmed to learn that we do not understand how our own AI creations work. They are right to be concerned: this lack of understanding is essentially unprecedented in the history of technology.'" For example, you cannot audit a decision you cannot explain. Flittner continued, "AI models are not like software programs that can be debugged and corrected in code. Models are trained. Like people are. Biases in training become part of an AI model or AI agent. Some AI models have hallucinated answers and, in some cases, have fabricated fake data. Others have been shown to act counter to their guardrails."

Flittner suggests "Treat AI like you would when hiring people. Would you hire someone without any background check, references, work history or interview? Would you immediately give them access to company and customer confidential data immediately? Would you give them login credentials to your bank, social media accounts and email? Would you pass their work directly to customers without reviewing it first? Yet that's what many people have done by racing to try out new AI tools. Consider OpenClaw personal AI agent. In a span of several months, it changed names three times as security researchers found glaring security holes, while users turned over logins to all their social media, email and other accounts. The lure of a tool that can do so much for us makes many people turn blind eyes to security and privacy."

Some additional suggestions from Flittner included the following:
“Do research before adopting AI. Use it to enhance work your people do. But keep a human layer—make sure people review AI work before using it or passing it on. If AI does research or makes content, have AI give you the sources and check them.”

I also asked some experts to share their thoughts on my [Benefits Executive Roundtable podcast, Season 7, Episode 8](#) (which aired on March 3, 2026).

When asked about the explosion of AI in the past few years, Eric Barricklow, owner of Stellar Cyber Solutions, (BER S7E8 plus panelist on the CAHIP-OC Annual Sales Symposium AI Panel, which I moderated, on March 10, 2026) stated: “The constant use of AI is prevalent; it’s everywhere, and I’m not surprised it’s exploded into use like it has now, but I am a little surprised that it hasn’t imploded a little bit yet, because I used to say ‘well, anything you need, there’s an app for that.’ Now, anything you need, there’s an AI for that. But there are like 15 AIs for that! I think we’re still in that explosive innovation phase of throwing spaghetti against the wall to see what actually works, and there’s a lot of things that are being taken advantage of right now, because people don’t know how AI works. Businesses, small businesses especially, are inviting AI into their environment, and it’s an unregulated employee with complete access. That’s one aspect I’m a little shocked at—how welcoming businesses are at inviting in this unknown, unfathomable technology, to really crawl through all their intellectual property, all their data, all their contacts, and they are just trusting.”

As Barricklow said, your employees are using AI, and if you’re not monitoring it, not putting up the proper guardrails to protect your data, it can and will leak outside of your protected environment and into the unknown areas of these learning models and possibly onto the internet or on the front page of a newspaper for everyone to have access to.

Who is using AI and what are they using it for?

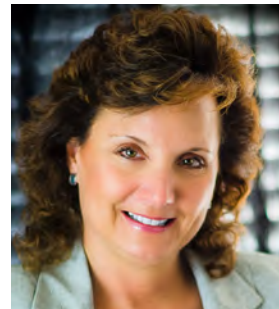
In my podcast, Miguel Villegas (Mike), founder of iSecure Privacy, discussed further what very common uses are today in the workplace, regardless of the industry you work in. “Today they are using it every day. For everything,” said Villegas. “Productivity with Co-Pilot, drafting emails, summarizing meetings, turning notes into action items, building slide decks and rewriting policies. It’s amazing. It even helps us research benefit plans or gather evidence for claims processing. I use it for writing code. I can write a Python program in less than two minutes, but I still have to de-bug it and everything. But it’s amazing how much of a productivity tool [it can be]. It’s been able to allow me to be much more efficient.”

I asked Barricklow who he sees using AI much more predominantly than others today. “I see the younger generation adopting it much more readily and using it to compose emails, do their LinkedIn queries, their outreach, their cold calling. Also, for code writing and data analytics, and to actually rely on its business decisions with whatever data they input into it.” We’ll get more into why these uses can be dangerous later in this article. Barricklow continued, “Many times they’ll ask the AI [tool] ‘tell me what this means.’ [For] many businesses, there is a disconnect between the old guard, who does it their way, and the newer generation, who are adopting AI to find out what it can do. But there is also that difference, because I’ve always been told that you have to show your work. If you arrive [at a] business decision, you have to have the algorithms, the calculations and how you derived at that decision in order to stand up in court, in case you go to legal action, or something along those lines. In many cases, in trusting AI to make a decision, you lose that transparency. You lose that ability to defend that decision that you’re making. I see a lot of businesses employing AI or accepting its use without understanding the business risk to it.”

“The *lure of a tool* that can do so much for us makes many people turn blind eyes to security and privacy.” -Ted Flittner

That’s where the disconnect is. That’s where the risk is. Your employees may be doing what they think is good for the company or making their jobs easier by using an AI tool like ChatGPT, Google Gemini or Microsoft Pilot, using a free or individual (not enterprise) version of one or more of these or others, and they’ve never been told, never been trained to know that by using this little AI tool everyone is using, that they’ve put your data and your business at risk.

[CLICK HERE TO READ FULL ARTICLE »](#)



Dorothy M. Cociu, RHU, REBC, GBA, RPA, is a nationally recognized expert in employee benefits with more than 30 years of experience in self-insurance, compliance, and health plan administration. She is the author of *The ABC’s of HIPAA Compliance* and a leading authority on HIPAA Privacy and Security, ARRA, HITECH, and the Affordable Care Act. Dorothy has served as a consultant, expert witness, and independent fiduciary for employers, third-party administrators, and the U.S. Department of Labor. A longtime instructor for the Certified Employee Benefit Specialist (CEBS) Program, she is also a nationally sought-after speaker who provides education and training on healthcare legislation, compliance, and self-funded health plans.

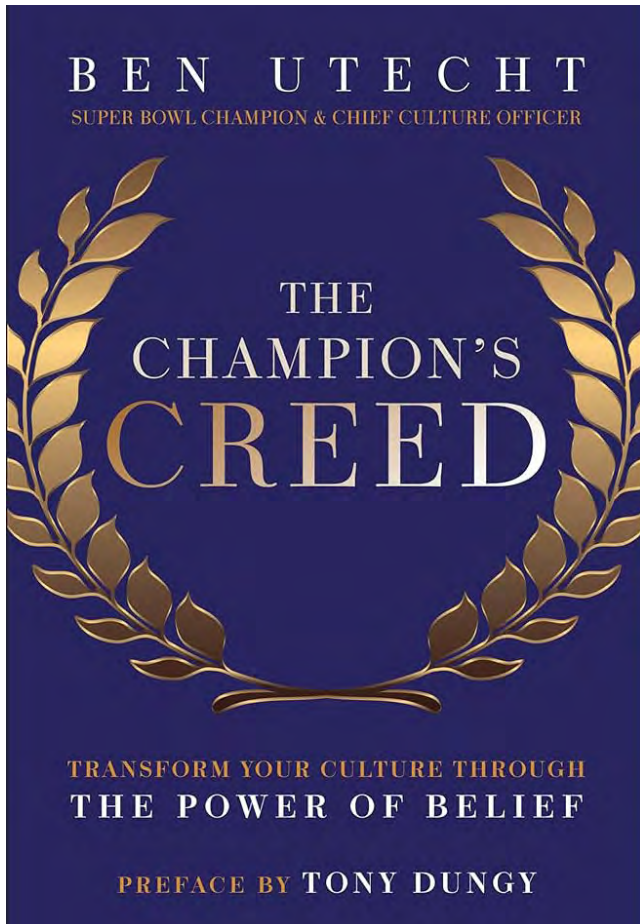
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Book Review of “The Champion's Creed”

By California Broker Magazine & Melissa Nicolas Hernandez



In “The Champion’s Creed,” NFL star and Chief Culture Officer Ben Utecht unveils the blueprint for forging unbeatable teams in any arena. Central to Utecht’s methodology is the creation of a “Culture Creed”—a dynamic manifesto that transcends typical mission statements. This powerful tool becomes the compass guiding every decision, action and interaction within an organization. Readers will learn how to craft and implement their own Culture Creed, infusing their company’s Culture with purpose and direction. Drawing from his unique journey from Super Bowl victor to leading corporate strategist, Utecht melds gridiron wisdom with executive acumen, presenting a transformative approach to culture, leadership and team building that promises to show readers how to:

- Synchronize fundamental beliefs with business objectives
- Nurture an atmosphere that naturally boosts productivity
- Master the “Four L’s” of exemplary guidance: Listening, Learning, Language, Love
- Develop a potent “Ethos Declaration” to steer every facet of operations

Whether you’re helming a startup or steering a Fortune 500 behemoth, “The Champion’s Creed” not only provides an essential resource for visionaries aiming to leave an indelible mark on their industry but also gives us the secrets to building a legacy of success, inspiring peak performance and creating an organizational culture that stands the test of time.

Reviews

“In ‘The Champion’s Creed,’ Ben Utecht reveals the heart of what separates good teams from great ones: a belief-driven culture rooted in trust, integrity and shared purpose. His journey from the NFL to the boardroom is filled with lessons that inspire leaders to cultivate unity and excellence within their organizations. Ben’s commitment to helping others build cultures that endure shines through each page. This book is a roadmap for anyone who wants to lead with impact and leave a lasting legacy.”

— **John C. Maxwell, Leadership Expert and Bestselling Author of “The 21 Irrefutable Laws of Leadership”**

“Ben Utecht has masterfully combined his experiences from the football field with his deep understanding of leadership to create this roadmap for building a winning culture. This is not just another culture book. It’s a must read for every business leader and coach!”

— **Jon Gordon, 17x Bestselling Author of “The Energy Bus and The Power of Positive Leadership”**

“Not only compelling but also essential for any organization looking to thrive in today’s world. Ben’s heart for people and his passion for creating environments of trust and excellence come through in every page. This book will inspire leaders at all levels to rethink how they approach culture and to lead with authenticity and purpose.”

—**Dr. Tony Bridwell, Chief Talent Officer, Chief People Officer and 7x Author**

“A powerful testament to the impact of intentional culture-building on organizational success. Ben Utecht’s personal journey and actionable insights make this a must-read for anyone looking to transform their team or organization into a championship-level culture.”

— **Jaime Taets, Chief Vision Officer and Founder of Keystone Group International, Speaker, 2x Author, Inc Top Female Founders 2023**

“Ben Utecht has crafted a playbook for building trust, culture, and lasting success. His deep understanding of how beliefs drive behavior and his personal journey through sports and leadership make this an invaluable resource for leaders.”

— **David Horsager, Bestselling Author of “The Trust Edge” and CEO of Trust Edge Leadership Institute**

“Ben has provided us with a powerful statement of how belief and culture create winning teams, both on and off the field. This book is an inspiring and essential read for leaders who seek lasting success.”

— **DeMaurice Smith, Former NFLPA Executive Director, Professor of Law, Scholar, and Storyteller**



“

Coach Dungy's philosophy was simple but powerful: **“If you build better men, you will get better football players.”** He understood that true success comes not just from developing skills, but from cultivating character.

”

Ben Utecht

Excerpt from
The Champion's Creed

From the Inside Flap

In “The Champion’s Creed,” former NFL star, Super Bowl winner, and Chief Culture Officer Ben Utecht unveils the playbook to creating unbeatable teams in any arena. A dynamic manifesto that transcends typical mission statements, the “Culture Creed” promises to become an indispensable tool for leaders, giving them a compass to help guide every decision, action, and interaction within an organization.

In these pages, you’ll not only learn how to craft and implement your own Culture Creed, based on your firm’s unique purpose and direction, but also synchronize your company’s fundamental values with business objectives. Additionally, you’ll discover a transformative approach to culture, leadership and team building that was shaped from the bottom up by Utecht’s transformative journey from Super Bowl victor to leading corporate strategist.

Not stopping there, “The Champion’s Creed” gives you the determination to nurture an atmosphere that naturally boosts productivity and demonstrates how to master the development of a culture by design. It also helps you to develop a potent “Ethos Declaration,” a framework that allows you to steer every facet of your company’s operations.

Whether you’re a CEO of a Fortune 500 company or simply looking to reinvigorate a group of colleagues, “The Champion’s Creed” is a must-read resource for visionaries seeking to both leave their mark and build a legacy of success that stands the test of time.

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BEN UTECHT is a renowned corporate leadership and culture expert. He’s the Chief Culture Officer for True North Private Equity and a former Super Bowl Champion. He is a recipient of the Uncommon Leader Award from NFL Hall of Fame coach Tony Dungy. His philosophy centers on intentional culture design, empowering companies to create and implement strategies that drive bottom-line improvement while developing individuals.

How to Celebrate Earth Month this April

By California Broker Magazine

This April 22 marks the 56th anniversary of Earth Day. The annual event was founded in 1970 by Gaylord Nelson, a U.S. senator from Wisconsin who was inspired to act after the 1969 oil spill in Santa Barbara which killed an estimated 3,500 seabirds and marine animals like dolphins and sea lions. It remains the largest oil spill in history to have occurred on the California coast. The first Earth Day mobilized 20 million people who were inspired to raise awareness about environmental sustainability and ecological protection.

Earth Day has grown from a single day to the full month of April, with activities aimed at encouraging sustained climate action. From donating to environmental charities and volunteering to clean up local public spaces to focusing on awareness and education, there are many ways to get involved this Earth Month. In this article, we will share some ways you can make this April a time to expand your appreciation for our planet.

Clean up your neighborhood

Many cities—especially beach communities—hold year-round cleanup volunteer opportunities. While anyone can go outside and pick up trash at their own leisure on any day of the year, Earth Month is the perfect opportunity to join a cleanup event near you and build community. Below are just a few that are taking place in April. Bring a friend, along with sunscreen and gloves, and enjoy taking part in making our planet a cleaner place to live and coexist with others and with wildlife.

April 11- Huntington Beach State Tower 9 Cleanup
- Huntington Beach, CA

April 13- Newport Beach Pier Cleanup - Newport Beach, CA

April 18- Shorebird Nature Center Cleanup - Berkeley, CA

April 19- Nothin' but Sand Beach Cleanup - Santa Monica, CA

April 22- Keep Tahoe Blue - South Lake Tahoe, CA

April 25- Earth Day Napa Community Cleanup - Napa, CA

April 26- Creek to Bay Cleanup - San Diego County

Go outside and marvel at nature

One of the easiest ways to celebrate Earth Month is to simply go outside and appreciate the beauty that surrounds you. Consider opting for public transportation or a bike whenever you can this month to help reduce carbon emissions. Take a trip to a local park, arboretum, beach or green space. Stop and, quite literally, smell the roses.

National Park Week is also April 18-26—a great time to visit one of California's beautiful national parks. California has more national parks than any other state and many of them are experiencing unprecedented super blooms due to heavy rainfall earlier this year, followed by severe heat.

Pick up a new eco-friendly hobby, like birding, which has surged in popularity with an estimated 96 million birders in the U.S. aged 16 and older, according to a 2024 U.S. Fish and Wildlife report. Birds are fundamental to our ecosystem—acting as both a pollinator and seed dispersers—and birding fosters a deeper understanding and appreciation for these magical creatures. All you need is a pair of binoculars, a physical or app-based field guide and a notepad to document your discoveries. Chances are there is a birding group in your area—connect with a local Audubon Society chapter to join a community near you.

Attend events around California

Many events organized by cities across Southern California will take place in the month of April to honor Earth Month. On April 18, the city of Costa Mesa will hold an Earth Day Festival at City Hall hosted by Costa Mesa Bikeability, focused on sustainable transportation and cycling in the area. Also on April 18 is the city of Chula Vista's South Bay Earth Day event, with live entertainment, organic food vendors, a group bike ride, tie-dye workshop, information about how to compost food waste and a "Fix-It Clinic" to restore electronic, mechanical or sewn items.

Santa Barbara will host its annual Earth Day festival on April 25-26, featuring over 200 exhibitors, an eco-marketplace, plant-forward food vendors and beer garden, live music and a car show with the latest electric vehicles and e-bikes. Just a few hours north, SLO Earth Fest takes place on April 18 in San Luis Obispo's Meadow Park, with a kids' zone, food trucks, local art and a green car show.

In northern California, Yerba Buena Gardens is celebrating Earth Day on April 21 with a free, family-friendly festival, including live performances, tree planting, chalk art and more.

In Los Angeles, the Roundhouse Aquarium in Manhattan Beach will hold its Keep it Green, Keep it Clean Earth Day celebration on April 25, with a beach cleanup activity and sustainability workshops. On April 22, Descanso Gardens will host a full day of activities, including a California native wildflower seed nest workshop, a DIY soil bioremediation workshop and a knitwear mending workshop. The Getty Museum presents a brand-new Art & Nature tour on select days during Earth Month, in addition to other Earth Month events. The Huntington features 16 themed gardens, along with environmentally focused exhibitions like "Laura Aguilar: Body and Landscape" which traces the artist's use of self-portraiture within the natural environment.

The Aquarium of the Pacific in Long Beach will hold its Earth Day Teen Climate Fest on April 25-26, with educational activities and sustainable art that will highlight the importance of preserving our world.

Read, listen, watch environmental content

There is an endless number of books, podcasts and films focused on the environment. We've gathered a handful to get you started:

Books

"Climate Change and the Health Sector: Healing the World" explores the health sector's significant contribution to the climate crisis and—on the flipside—its role in combatting it

"The Overstory" interweaves the lives of nine strangers whose stories become connected through trees and work together to combat deforestation

"Turning to Birds" dives into how birdwatching led award-winning actor Lili Taylor to mindfulness and a deeper connect with nature

"Under the White Sky" examines humanity's attempts to fix the environmental damage it has caused through radical technological interventions

Podcasts

"The Joy Report" features stories about climate solutions and environmental justice

"A Matter of Degrees" uncovers the powerful forces behind climate change and the tools we have to fix it

"Birds & Nerds" explores the connection between birds and the world around us

"The Climate Question" focuses on how we can help save our planet

Films

"My Octopus Teacher" follows South African naturalist Craig Foster on a year-long journey where he develops a friendship with a wild octopus

"All that Breathes" follows two brothers from New Delhi who devote their lives to protect a bird known as the Black Kite which is essential to their city's ecosystem

"Train Dreams" is an ode to the lonely labor of forestry and reflects the beauty and heartache of working in the forests of the Pacific Northwest amid the rapid expansion of the railroad industry in the early 20th century

"Kiss the Ground" follows a group of revolutionary activists, scientists, farmers and politicians who work towards a global movement to promote regenerative agriculture

Cool it with AI

Did you know that many AI tools consume a massive amount of energy and water? According to researchers at Cornell, AI data centers are on track to emit 24-44 million metric tons of CO₂ annually by 2030. They also stated the average single ChatGPT conversation consumes around 500ml of water and training one model can produce 626,000 pounds of CO₂. For Earth Month, consider being mindful about your AI usage—especially generative AI, which has the most harmful environmental impact.

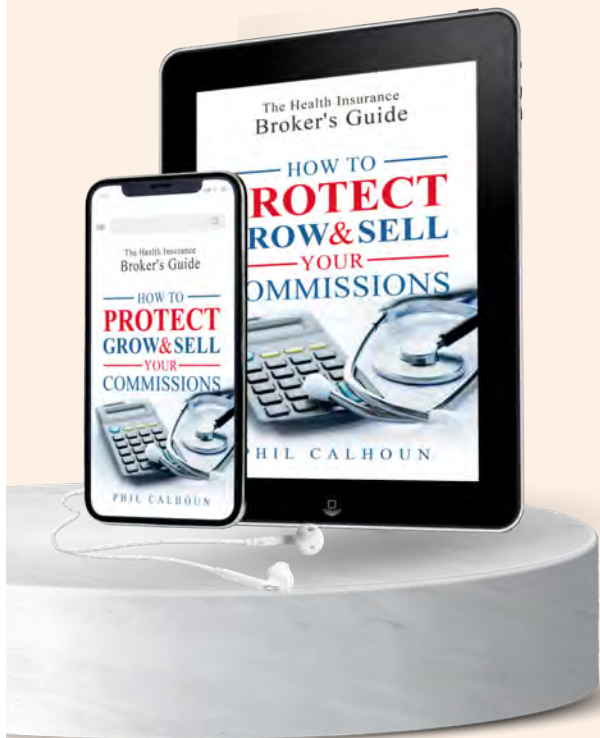
Consider donating to environmental charities

Another great way to celebrate Earth Month is by donating to an environmental cause—any dollar amount makes a difference in helping our planet. There are many notable charities you could support, including World Wildlife Fund, Earthjustice, Clean Air Task Force, American Rivers and Oceana. In addition to the gift of helping further the mission of your selected charity, many organizations offer donation perks, like branded gear, annual calendars or discounts to store items.

In conclusion, Earth Month is an important time to reflect on our relationship with Mother Earth, learn more about the environment and explore ways to help keep it healthy for generations to come.

One of the *easiest ways* to
celebrate Earth Month
is to simply *go outside* and
appreciate the beauty
that *surrounds you.*

SOURCES:
https://en.wikipedia.org/wiki/1969_Santa_Barbara_oil_spill
<https://www.fws.gov/story/2024-12/birdwatching-america>
<https://news.cornell.edu/stories/2025/11/roadmap-shows-environmental-impact-ai-data-center-boom>
<https://www.visitcalifornia.com/experience/12-earth-day-events-california-2023/>



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The New GA Ecosystem: PEOs, alternate funding and the evolving agent value proposition

PBM Trends & Transparency: What's shifting, what's emerging and what brokers must prepare for

Medical Tourism: Global care models and their growing influence on U.S. provider systems

Hospital Systems & AI: Consolidation, network strategy and the rise of digital payment technologies

Business Succession Planning: Legal and operational strategies for long-term agency stability

Medicare Market Expansion: New senior-focused specialties and emerging areas of opportunity

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