

BLACK HISTORY MONTH ■ HEART HEALTHY WEIGHT LOSS ■ HEART HEALTH MONTH

# CALIFORNIA BROKER

SERVING CALIFORNIA'S ANNUITY, LIFE & HEALTH INSURANCE PROFESSIONALS ■ FEBRUARY 2025

## ■ Creating Challenges & **Opportunities**

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## ■ **Black History**

Contributions of Black Californians

## ■ **AI & Cardiology**

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MARCH

**20**

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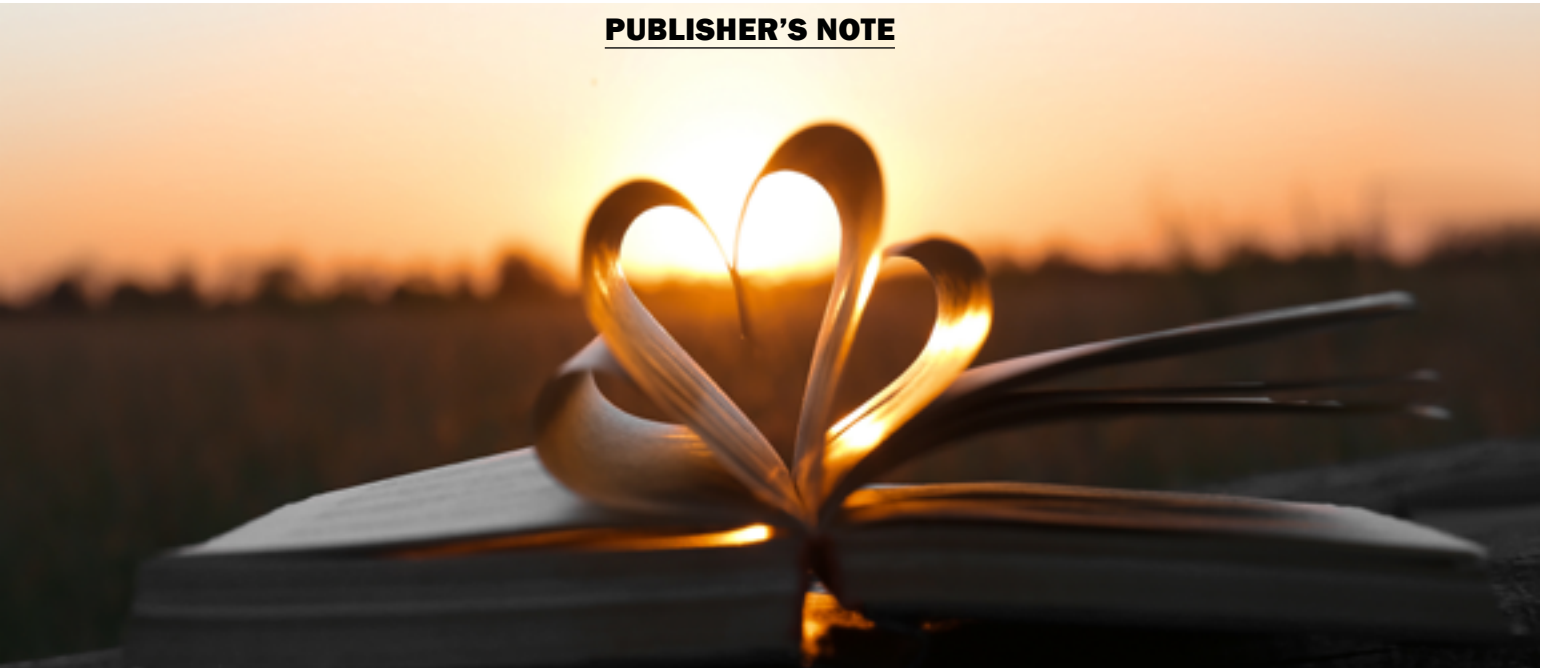
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## **PUBLISHER'S NOTE**



### **TO THE VICTIMS AND FAMILIES AFFECTED BY THE LOS ANGELES FIRE,**

*Our hearts go out to all those impacted by the devastating fire that has swept through the southern CA communities. We stand in solidarity with the victims, their families, and the brave first responders who continue to risk their lives to protect others.*

*In these difficult times, we recognize the immense loss suffered—homes, businesses, and most tragically, lives. No words can truly capture the grief and hardship faced by so many, but we remain committed to sharing your stories, amplifying relief efforts, and we ask our subscribers to be generous in their support of the victims. As the healing continues, please take a role to help your clients impacted by this tragedy with sound advice on accessing necessary medical and mental health services. As their trusted advocate connect with your colleagues to help address more issues and find solutions from emotional support to financial assistance.*

*As the community comes together to heal and rebuild, you can play a role directly to encourage those in need to seek the assistance available. All options to help need to be considered including prayers for the victims and their friends, neighbors, and loved ones.*

*If you have a story to share or a resource to highlight, we welcome you to reach out with positive ideas and suggestions.*

*Together, we will rise from this tragedy with resilience and hope.*

**P**lease enjoy this issue. We will soon offer a new feature for how to enjoy our articles. We have designed a way to accommodate the busy lives and preferences of as many readers as possible. Our options to read or listen to selected articles is coming soon. We will launch a select number of articles in our Insurance Insider e-Newsletter this month with this read or listen to articles option.

In this February issue we celebrate Baby Boomers, Black History Month, and Heart Health. Learn and celebrate all we have to be thankful for and enjoy in California.

***Finally, please complete our AEP Survey.***

*The results will be published.*

*This year was unique to say the least.*

*Your feedback and any tips you can share for managing AEP would be appreciated.*

**[CLICK HERE TO TAKE SURVEY»](#)**

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By CalBroker Magazine

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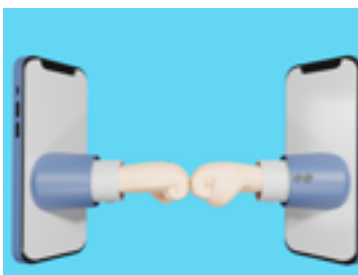
### How To Not Run Out Of Money After Selling Your Book Of Business

Every health insurance professional is a business owner when they build their book of business. Health brokers also have personal needs and the typical concern for brokers centers on decisions as to when and how to sell their commissions and not run out of money in retirement.

By Phil Calhoun

Contributors

Daniel J. Wexler & Anthony Di Bernardo



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# Industry News

CURATED NEWS FROM THE INDUSTRY

## California: the state that feeds America

World Ag Expo, held annually in Tulare, California, is the world's largest annual outdoor agricultural event. With California the undisputed leader in U.S. agriculture, Perkins was there to showcase its range of agriculturally focused power solutions. So too was Powernews ag correspondent Adrian Bell. Here, in the first of a two-part series, he dives into the history of Californian agriculture and where it stands today.

Gold gave the Golden State both its moniker and its agricultural legacy. The famous Californian Gold Rush of 1848 brought 300,000 people, drawn from other states and around the world by the heady promise of instant riches, to an undeveloped frontier that was still not yet part of the United States.

It was the greatest migration in U.S. history, yet wave after wave of its participants arrived in a territory that produced little of its own food. The growing gap between food supply and the hungry demands of hard-working prospectors was initially plugged by imports. Apples and wheat came south from Oregon, pork and beef west from Nevada and Texas, and Hawaii sent vegetables across the Pacific.

[READ FULL ARTICLE »](#)

## Every year, predictive AI saves 50 lives in two ERs at UC San Diego Health

And that's just one of the many artificial intelligence use cases Chief Health AI Officer Karandeep Singh is focused on with his team. He offers a closer look at some of the health system's other AI priorities.

By Bill Siwicki

Editor's Note: This is part two of our two-part interview with Dr. Karandeep Singh. To read part one, [click here](#).

Yesterday in our new series of articles, Chief AI Officers in Healthcare, we spoke with Dr. Karandeep Singh, Chief Health AI Officer and associate CMIO for inpatient care at UC San Diego Health.

He described how accountability for all AI in a health system must lie with the Chief AI Officer, and how to hold this hot new position, executives must have skills that encompass clinical and artificial intelligence – though there need not be a balance.

[READ FULL ARTICLE »](#)

## New California Law Prohibits Using AI As Basis To Deny Health Insurance Claims

Last year, about a quarter of all health insurance claims were denied in California — a reality mirrored nationwide that has stoked public anger toward health care companies, and led to accusations that such decisions lack human empathy.

But this month, a new state law is taking on the latest twist in the debate, ensuring that a human's perspective cannot literally be removed from such decisions by prohibiting coverage denials be made on the sole basis of artificial intelligence algorithms.

Signed by Gov. Gavin Newsom last September, Senate Bill 1120 — known as the “Physicians Make Decisions Act” — comes as frustration with the health insurance system has intensified. Last month's high-profile killing of UnitedHealthcare executive Brian Thompson in New York City ignited a wave of reactions that often reflected the public's anger.

[READ FULL ARTICLE »](#)

## Blue Shield of California restructures, launches health services business and names first female CEO

The bevy of changes for the massive California nonprofit is meant to improve operations, and should also give Blue Shield a financial leg-up as it competes with well-funded for-profit peers.

Blue Shield of California, one of the largest plans in the state, has revamped its corporate structure and named its first-ever female CEO.

Blue Shield created a parent company called Ascendium to oversee the insurer, along with its managed Medicaid subsidiary and clinical services firm Altas, starting Jan. 1, the company announced Wednesday. Ascendium also includes a newly created health services business called Stellarus, which aims to scale and sell Blue Shield's pharmacy and technology offerings to other insurers.

Lois Quam, who has been Blue Shield's president since last year, will step up as chief executive of the insurer. Quam will be the first woman to serve as Blue Shield's CEO in the organization's 86 years of operation. Paul Markovich, Blue Shield's CEO for over a decade, will become president of Ascendium and will also lead Stellarus on an interim basis.

[READ FULL ARTICLE »](#)

## Health Workforce Projections

The National Center for Health Workforce Analysis (NCHWA) helps public and private organizations understand how changes in population will affect future workforce demands.

What are the most recent projections data available?

In November 2024, NCHWA released projections for 2022-2037. This page provides summary information on those projections. All projections are available in the Workforce Projections Dashboard.

NCHWA also published these projections briefs in November 2024:

Nurse Workforce Projections (PDF - 185 KB)  
Long-Term Services and Support (PDF - 176 KB)  
Physicians (PDF - 159 KB)

How does this data help?

By estimating supply, demand, and distribution of health care workers, we inform public policy to help prevent shortages and surpluses.

[READ FULL ARTICLE »](#)

## HHS Proposes New Cybersecurity Requirements As First Major HIPAA Update In 10 Years

The Department of Health and Human Services (HHS) proposed a rule days before the new year began that would hold healthcare organizations to a higher standard for protecting sensitive healthcare information from security threats like cyberattacks.

The proposal would require that entities covered by the Health Information Portability and Accountability Act (HIPAA) achieve specific technical standards like encryption and multifactor authentication. The rule also holds business associates to higher security standards and emphasizes that group health plans have a responsibility to protect electronic health information.

[READ FULL ARTICLE »](#)

## **This disease kills more people than all cancers and accidents combined**

Heart disease remains the top cause of death in the US, major report states

By **Melissa Rudy**

Heart disease remains the top killer of Americans as risk factors continue to grow.

The latest statistics were revealed in the American Heart Association's annual report, 2025 Heart Disease and Stroke Statistics.

The report, which was published on Jan. 27 in the AHA's journal *Circulation*, revealed that cardiovascular disease kills more people than all types of cancer and accidental deaths combined.

[READ FULL ARTICLE »](#)

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## **Could taking fish oil supplements help lower cancer risk?**

Past studies show that omega-3 and omega-6 fatty acids play an essential role in a person's overall health.

These essential fatty acids are not made by the body and must be obtained through food sources.

Researchers from the University of Georgia have found that omega-3 and omega-6 fatty acids may offer protection against several types of cancer, including colon, stomach, and lung cancers.

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[READ FULL ARTICLE »](#)

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## **MARK CUBAN'S 2025 PLANS**

Nearly three years after its launch, Mark Cuban Cost Plus Drug Co. now manufactures injectables in shortage, works with thousands of healthcare facilities, including pharmacies, hospitals, long-term care sites and clinics, and offers more than 2,000 discounted generics and about a dozen branded medicines.

In an email Q&A with Becker's, Mark Cuban said his pharmaceutical company's central theme in 2024 has been exponential growth.

"But beyond that," Mr. Cuban said, "Not much :)."

[READ FULL ARTICLE »](#)

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## **Americans' confidence in healthcare quality hits record low: Gallup**

A recent Gallup poll revealed that Americans' perception of the quality of healthcare in the U.S. is the lowest it's been since Gallup began checking the trending data in 2001.

The findings come from Gallup's latest annual health and healthcare poll, conducted from Nov. 6 to Nov. 20.

Here are six things to know:

[READ FULL ARTICLE »](#)

**Proactive cybersecurity: How systems can stay ahead of evolving threats**

Compliance with information security standards doesn't guarantee that your systems are secure. Without proactive measures, hospitals and health systems remain vulnerable to evolving cyber threats that can disrupt operations and compromise patient care.

In this whitepaper, two cybersecurity experts discuss how health systems can take a more proactive approach to mitigate cyber threats and create a safer environment for clinicians and patients.

[READ FULL ARTICLE »](#)

**New California Law Prohibits Using AI As Basis To Deny Health Insurance Claims**

Last year, about a quarter of all health insurance claims were denied in California — a reality mirrored nationwide that has stoked public anger toward health care companies, and led to accusations that such decisions lack human empathy.

But this month, a new state law is taking on the latest twist in the debate, ensuring that a human's perspective cannot literally be removed from such decisions by prohibiting coverage denials be made on the sole basis of artificial intelligence algorithms.

[READ FULL ARTICLE »](#)

**Drugmakers To Raise U.S. Prices On Over 250 Medicines Starting Jan. 1**

Drugmakers plan to raise U.S. prices on at least 250 branded medications including Pfizer (PFE.N), opens new tab COVID-19 treatment Paxlovid, Bristol Myers Squibb's (BMY.N), opens new tab cancer cell therapies and vaccines from France's Sanofi (SASY.PA), opens new tab at the start of 2025, according to data analyzed by healthcare research firm 3 Axis Advisors.

[READ FULL ARTICLE »](#)

**LLC Fees in California**

**LLC Fees are based on total gross revenue. If you move higher than \$500,000 your fees increase to the point you may want to consider an S-Corp.**

**CALIFORNIA INCOME ROUNDED**

<small>If the total California income rounded to the nearest whole dollar is:</small>	<small>The fee amount is:</small>
\$250,000 • \$499,999	\$900
\$500,000 • \$999,999	\$2,500
\$1,000,000 • \$4,999,999	\$6,000
\$5,000,000 or more	\$11,790

## **CMS FINALIZES STRICT BROKER PUNISHMENTS FOR VIOLATIONS IN 2026 PLAN YEAR**

One week before President-elect Donald Trump's inauguration, the Biden administration is finalizing a rule that sets new standards for the individual market under the Affordable Care Act (ACA).

First proposed in October, the rule protects consumers from having their coverage swapped unwittingly. Brokers and agents that violate this policy, and pose other "unacceptable" risks, can be suspended. The rule will go into effect Wednesday.

[READ FULL ARTICLE »](#)

## **Medicare Change Backed by 20,000 People in New Letters**

By Claire Dickey

A coalition of around 20,000 advocates and twelve major health care groups has called on the Centers for Medicare & Medicaid Services (CMS) to expand Medicare and Medicaid to include FDA-approved anti-obesity medications.

The letters are being led by the Health Equity Coalition for Chronic Disease (HECCD) and they say the change would potentially benefit up to 7.5 million Americans enrolled in these federal programs who are living with obesity, per the press release.

[READ FULL ARTICLE »](#)

## **Medicare Targets 15 More Drugs For Price Negotiations – Including Ozempic**

The Biden administration, in its last full weekday in office, announced the next 15 drugs up for Medicare price negotiation. Blockbuster diabetes drug Ozempic is on the list.

That means the federal government and the pharmaceuticals industry are about to go head-to-head once again. The Centers for Medicare and Medicaid Services negotiated prices for a first batch of drugs last year — something it could only do because of the Inflation Reduction Act, which passed in 2022. Those new prices go into effect in January 2026.

[READ FULL ARTICLE »](#)

## **How small businesses can have success with health care benefits in 2025**

Many businesses in the United States offer health insurance as a company benefit. According to the Kaiser Family Foundation, 53% of firms with three or more employees provide coverage for at least some workers, and 98% of firms with 200 or more employees offer health benefits.

If your company isn't currently offering health insurance as one of your small business employee benefits, consider starting in 2025. Offering health coverage could improve employee retention, make hiring workers easier, and create a healthier and more productive team.

The good news is that you don't have to spend a fortune or implement a complicated program to give your workers access to health care. Thatch's guide will explain how to offer a benefits program in 2025 to set your company up for success.

[READ FULL ARTICLE »](#)



**2025 CONFERENCES**

- Feb 3 @ 9am-5pm CAHIP 2025 Innovation Expo @Long Beach, CA
- Feb 6 @ 8am-5pm NAIFA-CA San Diego Business Owner Planning Summit @San Diego, CA
- Feb 11 @8am-3pm CAHIP Orange County Annual Sales Symposium @Lake Forest, CA
- Feb 23-26 NABIP 2025 Capitol Conference @Washington, DC

**FEBRUARY**

- Feb 11 @8am-3pm CAHIP Orange County Annual Sales Symposium @Lake Forest, CA
- Feb 13 @4:30-7pm CAHIP-LA February 2025 @TBD
- Feb 13 @2:30-4:30pm EPI: An ESOP Guide For The Perplexed @Costa Mesa, CA
- Feb 19 @11am-1pm EPI: Speed Troikas @Westlake Village, CA
- Feb 27 @11:30am-1:30pm EPI Tax Strategies: What To Do Between The LOI & Close @Norco, CA
- Feb 28 @1:30-5pm CAHIP SD 9th Annual Corn Hole Tournament @San Diego, CA

**VIRTUAL EVENTS**

- Feb 4 @10-11am CAHIP Industry Happenings – Ethics in the Senior Market – Zoom
- Feb 7 @1-2pm NABIP First Friday’s Meeting with NABIP President Alycia Riedl – Zoom
- Feb 19 @10-11am CAHIP NorCal February Member Meeting
- Feb 20 @8-9:30am CAHIP-LA February 2025 – Breakfast Bites
- Feb 26 @2:30-4:30pm EPI: Don’t Just Sell Your Business, Preserve It @LA, CA – Zoom
- Feb 26 @12pm EST, NAIFA Educational Webinar: Navigating the Medicare Maze
- Feb 27 @12-1pm NABIP New Member Orientation – Zoom
- Feb 27 & 28 @9am-12:30pm CalChamber HR BootCamp

**RECORDED WEBINARS**

- Benefit Mall November Compliance Webinar w/ Misty Baker
- Benefit Mall October Compliance Webinar w/ Misty Baker
- Benefit Mall September Compliance Webinar
- Benefit Mall August Compliance Webinar

**SAVE THE DATE**

- Mar 9 – 12 The ILTCI Conference @ Philadelphia, PA
- Apr 9 & 10 SHRM The AI+HI Project 2025 Conferences @ San Francisco, CA
- Apr 24 @11am-1:30pm NAIFA Pathway To Excellence Awards @Granada Hills, CA

**PARTNERS**

- Covered California: Important Tax Information: How to get a Small Business Credit
- IEHP: Health Education for Members Join no-cost health education classes just for IEHP members
- Pinnacle: Announcing Healthview, Refreshed: Simply A Better Experience
- Sutter Health Plan: Prioritizing Mental Wellness

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# **FEBRUARY IS**



**By CalBroker Magazine**



**F**ebruary is Black History Month, a time for Californians to celebrate the contributions of Black Californians. Looking back over the rich history of California spotlights the diverse roles Black men and women have played in business, entertainment, and social justice. From California's beginnings as an anti-slavery territory to the modern world of business, entertainment and sports, Black excellence is an intrinsic part of the state's history.

## **A Free State**

The history of Black people in California goes back to the 16th century. Early Spanish expeditions up the Pacific Coast included people of African descent. These free men helped establish missions and settlements in the region that would become California.<sup>1</sup>

The rancho system, later established by Spanish settlers, brought jobs to the territory but largely relied on forced Native labor and enslaved African labor. Legal slavery, however, ended in 1823, when California became a Mexican territory. The state constitution drafted in 1849, after the Mexican-American war, specifically prohibited slavery, a position the state retained when it joined the United States in 1850.<sup>2</sup>

Despite the prohibition on slavery, the new state drastically limited civil rights for non-white residents, including withholding the right to vote and the right to testify in any legal proceeding involving a white person. California also upheld fugitive slave laws.

## Early Civil Rights Progress

Black leaders convened four State Conventions of the Colored Citizens of California between 1855 and 1865 and organized formal campaigns to petition for legislative changes. Thanks to their work, the Civil Practice Act was passed into law in 1852, making the testimony of a Black person admissible in cases involving a White person, thus ensuring Black Californians could defend their own interests in court.<sup>3</sup>

In 1856, **Bridget “Biddy” Mason** struck the first blow against California’s position on fugitive slave laws. Mason, who was born into enslavement, arrived in California from Mississippi by way of Utah with Robert Marion Smith. Smith illegally enslaved Mason for five years before attempting to flee the state with Mason and other enslaved people. Authorities prevented Smith from leaving, and Mason petitioned for her own freedom. In the first ruling of its kind, a Los Angeles court freed Mason and 13 members of her family.

Biddy Mason went on to become financially successful and was among the first Black women to own property in Los Angeles. She was a noted philanthropist and helped establish the Los Angeles branch of First African Methodist Episcopal Church, the first Black church in Los Angeles.<sup>4</sup>

## Growing California's Economy

Like Mason, many Black individuals opened businesses and prospered during the rapid population growth that also grew California's economy. Black-owned mining companies such as the Horncut Mine and the Rare Ripe Gold and Silver Mining Company operated during the mid-1800s. A Black man named Frederick Coleman discovered gold in San Diego County in 1869, spurring new settlements in the southernmost part of the state.<sup>5</sup>

Another successful Black business owner was Frederick Madison Roberts. Roberts moved to California at the age of 6. A great-grandson of Sally Hemings and President Thomas Jefferson, Roberts was the first known African American graduate of Los Angeles High School. In 1912, after completing college, he founded the *The New Age Dispatch* newspaper and served as its editor until 1948 while also working in the family mortuary business. In 1918, he was elected to the California state legislature, becoming the first African-American elected to California's government.<sup>6</sup>

## Leaders in Entertainment and Sports

The entertainment industry in Hollywood brought another wave of growth to California, but Black performers found themselves typecast in supporting roles, often playing servants. Breaking that mold, Sidney Poitier was one of the first Black actors to gain mainstream acclaim. His first film role was in *No Way Out* in 1950, a story about racial hatred. He went on to act in and direct dozens of films, including *Lilies of the Field* in 1963. That role earned him an Academy Award, making him the first Black man to win an Oscar for Best Actor.<sup>7</sup>

In the world of literature, California native Octavia Butler was a science fiction author known for books including *Survivor*, *Kindred*, and *Parable of the Sower*. Butler was one of the few Black women in the white, male-dominated genre. Her books were early examples of Afrofuturism, stories that blended African American culture with elements of science fiction and fantasy. Butler's books would go on to win two Nebula Awards and two Hugo Awards. In 1995, she became the first science fiction writer to be awarded a MacArthur Foundation "Genius" Grant.<sup>8</sup>

Another Californian, Serena Williams, is one of the greatest athletes of all time. Williams and her older sister, Venus, grew up practicing tennis on public tennis courts in Compton. By the time she was 10 years old, Serena Williams was ranked number one in her age group on the junior United States Tennis Association tour. After making her pro debut in 1995, Williams steadily climbed in the rankings. In 2002, she reached the ranking of number one in the world and held that spot for the next 57 weeks. Before retiring from the sport in 2022, she racked up a record 23 Grand Slam titles and an Olympic gold medal. In addition, she is a UNICEF International Goodwill Ambassador, has opened two secondary schools in Kenya, runs her own venture capital firm, and has released clothing and jewelry lines.<sup>9</sup>

Black Californians continue to innovate in film, television, business, and technology. California draws some of the best minds from across the country, as well as encouraging creativity and excellence within the state. Future chapters in Black history are being written in the schools, universities, businesses, and film sets of California.

*“Black Californians continue to innovate in film, television, business, and technology. California draws some of the best minds from across the country, as well as encouraging creativity and excellence within the state.”*



# Be a Hero: Empower Your Clients with Non-Medical Benefits

By Kaleb Bledsoe

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**“ Today’s workforce is more diverse and has higher expectations than ever before. Employees aren’t just seeking jobs; they are looking for positions that offer financial stability, work-life balance, and opportunities for personal growth.”**

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**I**n a competitive job market, employers across many industries are still struggling to fill open positions. Meanwhile, workers are facing economic pressures such as inflation and wage stagnation, making it increasingly difficult for them to achieve financial security. As trusted advisors, we have the opportunity to offer solutions that enhance employee satisfaction while helping employers attract and retain top talent.

## The Current Landscape: American Workers Are Hurting

The COVID-19 pandemic took a toll on American workers, and the aftermath continues to impact them. Beyond the obvious health concerns, the economic fallout has been significant. Inflation, wage stagnation, and other financial challenges have made it difficult for many workers to get ahead. According to the 2023 Jobcase America@Work Report<sup>1</sup>, which surveyed over 4,000 employees earning up to \$75,000 annually, the struggle is very real:

- 40% say they can't meet basic needs with their take-home pay.
- 72% cite inflation as the biggest issue affecting their financial well-being.
- 45% report that their pay isn't keeping up with inflation.
- Less than 38% say they have the ability to save for unexpected expenses.
- Only 35% can afford to save for retirement.

These statistics highlight the ongoing challenges faced by American workers and underline the importance of offering comprehensive benefits that address their financial concerns.

## The Strategic Value of Non-Medical Benefits

While a strong health benefits package remains the cornerstone of any competitive offering, non-medical benefits have transitioned from being simple perks to becoming essential tools that can give employers a competitive edge. By offering these benefits, employers can address the diverse needs of their workforce without requiring significant financial investments. For employees, these benefits translate into more comprehensive coverage with fewer out-of-pocket expenses, freeing up their income for other essentials.

## Addressing the Needs of Today’s Workforce

Today’s workforce is more diverse and has higher expectations than ever before. Employees aren’t just seeking jobs; they are looking for positions that offer financial stability, work-life balance, and opportunities for personal growth. Non-medical benefits are a key component in meeting these expectations, and as advisors, we can guide our clients in creating benefits packages that resonate with their employees.

A 2023 MetLife Employee Benefit Trends Study found that 74% of employees consider benefits packages a critical factor in their job satisfaction<sup>2</sup>. This underscores the importance of offering a well-rounded benefits portfolio that goes beyond traditional health insurance.

## Key Non-Medical Benefits to Consider

When discussing enhancements to benefits offerings with clients, emphasize the following non-medical options:

### Dental and Vision Insurance

Dental and vision insurance remain foundational elements of any benefits package. They are highly valued by employees and can be offered at competitive rates. But to truly stand out, encourage your clients to consider expanding their offerings beyond the basics.

### Disability Insurance

Disability insurance is a powerful tool for providing financial security in the event of illness or injury. It offers employees peace of mind, knowing that they will have financial support if they are unable to work. According to the 2024 LIMRA report, 60% of workers are more interested in disability insurance than they were just a few years ago<sup>3</sup>. This growing interest makes it a must-have in any comprehensive benefits package.

### Life Insurance

Life insurance is another essential benefit that addresses the financial concerns of employees with dependents. A well-structured life insurance policy can provide financial support to families in the event of a tragedy, ensuring that they are not left in financial distress. The 2023 Life Insurance Barometer Study revealed that 44% of American households would face financial hardship within six months if the primary wage earner passed away<sup>4</sup>. Offering life insurance can provide employees with the security they need to protect their loved ones.

### Expanding the Benefits Portfolio: Innovative Ideas

Beyond these core offerings, there are additional non-medical benefits that can further enhance your clients' appeal to prospective and current employees:

### Mental Health and Wellness Programs

With increasing awareness of the importance of mental health, more employees are seeking employers that offer mental health support as part of their benefits package. Whether it's access to therapy, counseling, or wellness programs, these benefits can significantly impact employee well-being and productivity. The 2023 Mercer Health on Demand Survey found that 76% of employees consider mental health benefits critical when choosing an employer<sup>5</sup>.

### Financial Wellness Programs

Financial stress is one of the leading causes of employee dissatisfaction and turnover. By offering financial wellness programs, employers can help their employees manage their finances more effectively.

These programs might include budgeting tools, financial planning services, and debt management resources. The same Mercer survey reported that 70% of employees are more likely to stay with an employer that provides comprehensive financial wellness benefits.

### Identity Theft Protection

With the increased volume of data breaches and ransomware attacks, protecting sensitive employee data is more important than ever. Employers that manage data such as PHI, loan applications, and credit reporting are looking for solutions to protect both their employees and clients. New types of identity theft scams are also on the rise—a report released by Experian found that the identity theft category that saw the largest increase in the number of complaints for 2023 involved the creation of bogus government documents and/or false government benefits claims. These accounted for 102,205 complaints for the year, a 68% increase over the 60,845 reports fielded in 2022<sup>6</sup>. Services such as Identity Force can help protect client's sensitive data by monitoring for breaches and fraud, and alerting victims of changes in credit or accounts opened in the employee's name.

### Pet Insurance

Since 2020, BenefitMall has expanded its portfolio to include pet insurance options, and for a good reason. With more employees treating their pets like family, employers have noticed a growing demand for this type of coverage. According to the North American Pet Health Insurance Association (NAPHIA), nearly 4.4 million pets were insured in 2023, marking an 18% increase over the previous year<sup>7</sup>. This surge in pet insurance highlights a trend where employees are looking for ways to protect their pets' health as they would any other family member. Offering pet insurance is a great way for employers to show that they care about the well-being of their employees' furry friends. Companies like MetLife Pet, Nationwide Pet, and Pet Benefit Solutions are leading the way in this space, providing peace of mind for pet owners. After all, when employees know their pets are covered, they can focus more on their work and less on those unexpected vet bills.

### The ROI of Comprehensive Benefits Packages

Investing in comprehensive benefits packages, including non-medical options, offers a significant return on investment (ROI) for employers. Studies show that companies with well-rounded benefits packages experience measurable improvements in key business metrics:

**Reduced Turnover:** Companies offering comprehensive benefits see a 56% reduction in turnover rates compared to those with minimal benefits<sup>8</sup>. This not only saves on recruitment costs but also preserves institutional knowledge and team cohesion.

**Increased Productivity:** A 2023 study by the International Foundation of Employee Benefit Plans found that employers with robust benefits packages reported a 23% increase in employee productivity<sup>8</sup>. When employees feel secure and valued, they are more focused and engaged in their work.

**Higher Employee Satisfaction:** The same study indicated that 78% of employees are more likely to stay with their current employer if they are satisfied with their benefits package<sup>8</sup>. Satisfied employees contribute to a positive workplace culture and are more likely to advocate for their employer, enhancing the company's reputation.

By investing in non-medical benefits like mental health support, financial wellness programs, and disability insurance, employers not only attract top talent but also build a more resilient, satisfied, and productive workforce. These benefits pay dividends in the form of loyalty, reduced absenteeism, and stronger overall performance.

### Bottom Line:

The needs of today's workforce are evolving, and non-medical benefits are an essential part of meeting those needs. By guiding your clients toward offering comprehensive benefits packages, you help them succeed while reinforcing your position as a trusted advisor who understands the intricacies of the modern job market.

Take the next step in empowering your clients by reaching out to your local BenefitMall sales team. We are here to support you with the resources, expertise, and products you need to help your clients thrive. From quote capabilities and benefits administration support to pre- and post-enrollment assistance and our dedicated compliance team, we provide everything necessary to help you help employers build stronger, more resilient teams and provide their employees with the benefits they truly value.



**Kaleb Bledsoe** is the National Practice Leader for Ancillary Solutions at BenefitMall, where he helps brokers and clients choose the best ancillary insurance products, including disability, life, and dental insurance.

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# Which Health Plans Provide Best Coverage for Heart Disease

By CalBroker Magazine

**H**ear disease is the leading cause of death in the United States, so identifying and treating it is crucial. In 2022, one of every five deaths was related to heart disease. The right insurance can open up your clients to better cardiovascular specialists to diagnose and treat their heart disease. Californians with Medicare, MediCal, and private insurance can access some of the best cardiac care in the country. Understanding what different companies cover, along with regional prevention programs, arms you to help your clients make smart decisions about their coverage.

## What to Look for in a Health Plan

Regular screenings and disease management programs are essential to treat and prevent heart disease. When looking for plans to recommend to your clients, consider the following features and find out what the plan will and won't cover.

### Screenings

Make sure the plan covers regular screenings that monitor warning signs of heart disease. A good plan will cover cholesterol, blood pressure, and lipid panels. If your patients already have heart disease, they will need bloodwork more than once a year. Check coverage levels to determine whether a patient can get frequent tests or if they are only covered for an annual checkup.

### Prescription Drugs

Your clients with heart disease are likely taking multiple prescription drugs to manage their condition. These may include statins, beta-blockers, diuretics, and others. Look through each insurance policy to determine the level of prescription drug coverage and which medications are covered.

### Emergency Room and Hospital Coverage

Every year, more than 350,000 people have heart attacks outside of a hospital. If your client is one of these people, they will likely end up in the emergency room. Once their initial cardiac episode is under control, they may need hospital care to recover. A good health insurance plan will keep these visits from draining your clients' bank accounts.

### California Insurance Options

The Medicare Advantage Disenrollment Period (MADP) is fast approaching. Clients wishing to change their plan need to act quickly, so it's important to have some recommendations in mind. Here is how some common plans in California stack up for people with heart disease.

### Medicare

Your clients have multiple Medicare options. Each covers cardiovascular disease in different ways. Medicare Part A covers surgery for some heart conditions, including bypasses, cardiac procedures such as catheters, and hospital stays.

Medicare Part B, meanwhile, covers screenings, doctor visits, diagnostics, and cardiac rehabilitation.

### Medicare Advantage

Also known as Part C, Medicare Advantage plans offer the same benefits as Part A and Part B while also covering prescription drugs. Some of them cover preventive treatment programs such as smoking cessation.

In California, patients pay a maximum of \$199 in network for health services under the SCAN Classic HMO plan. There is no monthly premium and no copay, except for the standard Part B premium. SCAN Classic and SCAN Affirm both cover transportation, telehealth, fitness benefits, and worldwide health emergency coverage.

The SCAN MyChoice HMO does not cover transportation, so if your clients experience mobility issues, this may not be the right plan for them.

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## Before recommending a plan, see what it covers in terms of screenings, prescription drugs, and hospital visits.

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### Blue Shield of California

Blue Shield of California offers multiple options for people with heart disease. Your clients who choose this plan can receive care services such as heart surgery, catheterization, inpatient care, and rehab at any Blue Distinction Center.

Blue Shield of California also offers programs that help your clients make lifestyle changes and learn techniques to prevent, treat, and reverse their heart disease. These programs are available in person and virtually and teach your clients to eat well, manage their stress, and exercise. Blue Shield also offers support groups to connect your clients to others who understand what they're experiencing.

**This plan covers screenings and other risk assessments.**



### UnitedHealthcare (UHC) California

UHC California offers specific programs to help patients manage their heart disease. The company's Complete Care Dual Special Needs Plans (D-SNP) are available for people who are also covered by Medicare or Medicaid. If your clients aren't eligible for Medicare, UHC offers Chronic Special Needs Plans (C-SNPs) for people managing chronic conditions, including heart disease.

Both the D-SNP plan and the C-SNP plan cover screenings, prescription drugs, and hospital stays. UHC also offers the Heart Failure Disease Management Program. The company will match your client with a nurse to develop a personalized treatment plan that includes drug therapy and lifestyle changes that make it easier to manage heart disease.



### Sutter Health

Based in Sacramento, Sutter Health offers a variety of cardiovascular services to clients in Northern California. Programs include Heart Smart, a series of classes designed to educate your clients about preventing heart disease.

Sutter Health also covers diagnostics, treatment plans, and prescription drugs. This provider's service area is small, however. In-network providers are limited to Northern and Central California, so don't recommend this option to clients living outside the network.

### Where to Receive Heart Health Services

Once your client has their chosen insurance provider, they may not be sure how to find a medical provider for cardiac care. You can point them in the direction of the regional services of UCLA Health.



The UCLA Division of Heart and Vascular Services has been providing comprehensive cardiac care to patients all over the world for over 25 years. This organization offers everything from cutting-edge surgery to prevention programs. Its specialists focus on different conditions, including aortic aneurysms, cardiac arrhythmia, and hypertension, among others.

Your clients can choose from noninvasive tests and other diagnostic tools to give UCLA's team a clear idea of their condition and how to treat it.

UCLA Health accepts multiple insurance providers, such as Medicare, Medicaid, and multiple HMO and PPO plans. Students are covered under the school's Student Health Insurance Plan.

### In Closing

Heart disease is prevalent throughout the country, and many of your clients will be impacted at some point in their lives. By understanding their insurance coverage and treatment options, you can help them manage this condition.

Before recommending a plan, see what it covers in terms of screenings, prescription drugs, and hospital visits. Choose a provider that also offers prevention and treatment programs to help your clients manage their condition away from the hospital. Finally, make sure the plan doesn't consider heart disease a pre-existing condition that would prevent your client from being covered.

***Stay informed about insurance options and give your clients the resources they need to manage their health and help reduce the rates of heart disease.***

# Drugs like Ozempic may help lower 2nd stroke, heart attack risk

By Mohammad Ali Sheffeh



**P**opular diabetes drugs have been linked with a lower risk of experiencing a second stroke or a heart attack. About 12.2 million new strokes are diagnosed each year.

One in four stroke survivors will experience another stroke.

Stroke survivors are at an increased risk of developing major heart issues, such as heart attack.

A new study says that type 2 diabetes medications GLP-1 agonists and SGLT2 inhibitors may help lower a stroke survivor's risk of experiencing a subsequent stroke, heart attack, or death, compared to those who did not take these medications.

According to the World Stroke Association, one in four adults over the age of 25 will have a stroke during their lifetime, and there are about 12.2 million new strokes diagnosed each year.<sup>1</sup>

Previous research shows that one in four stroke survivors<sup>2</sup> will experience another stroke, and people who have a stroke are at a higher risk<sup>3</sup> of developing major heart issues during the first month after their stroke, such as heart attack — clinically known as myocardial infarction.<sup>4</sup>

Past studies show that stroke survivors can possibly decrease<sup>5</sup> their secondary stroke and heart attack risk through lifestyle changes — such as moving more, eating a healthy diet, and not smoking — and medications.<sup>6</sup>

Now a new study<sup>7</sup> recently presented at the American Heart Association's Scientific Sessions 2024 says that glucagon-like peptide-1 receptor agonists (GLP-1 agonists) — which include medications like Ozempic and Wegovy — and sodium glucose cotransporter 2 (SGLT2) inhibitors may help lower a stroke survivor's risk of experiencing a subsequent stroke, heart attack, or death, compared to those who did not take these medications.<sup>8</sup>

### Why focus on GLP-1 and SGLT2 drugs for stroke care?

For this study, researchers analyzed medical data for more than 7,000 adults who had an ischemic stroke — the most common type of stroke caused by a blood clot in the artery that brings blood to the brain — between January 2000 and June 2022.<sup>9</sup>

Researchers looked at whether or not study participants had been prescribed either a GLP-1 agonist or SGLT2 inhibitor medication after their initial stroke.

“GLP-1 receptor agonists and SGLT2 inhibitors are two types of medications often used to help people with diabetes manage their blood sugar,” M. Ali Sheffeh, MD, an internal medicine resident at the Henry Ford Medical Center in Warren, MI, research scholar in the Cardiovascular Department at the Mayo Clinic in Rochester, MN, and lead author of this study explained to Medical News Today.

“They also have benefits for heart and kidney health, which has led to their use in patients with certain heart conditions or those at risk of cardiovascular disease,” Sheffeh continued.<sup>10</sup>

“These drug classes have been studied over the last few years in randomized clinical trials and have shown better cardiovascular outcomes in patients with obesity, diabetes, heart failure, and chronic kidney disease,” he added.<sup>11</sup>

GLP-1, SGLT2 lower heart attack, second stroke risk in stroke survivors

After an average follow-up of three years, Sheffeh and his team found that stroke survivor participants taking either a GLP-1 or SGLT2 medication had a 74% lower mortality risk and 84% lower risk of having a heart attack, compared to those not taking these drugs.

And participants taking either medication also had a decreased risk of experiencing a secondary stroke, compared to those not taking them.

“The current guideline for stroke prevention recommends the use of blood thinners, controlling blood pressure, and cholesterol lowering medication in addition to lifestyle modification in order to decrease the risk of a second stroke,” said Sheffeh.<sup>12</sup>

“If our findings are externally validated, that might lead to changing practice and we might start prescribing these medications for patients with stroke to prevent future events,” he pointed out.

“The preventive role of these drug classes might be through their effects on cardiovascular disease risk factors. It's been shown that these drugs might lower blood pressure<sup>Trusted Source</sup>, improve cholesterol level<sup>Trusted Source</sup>, and control blood sugar levels. In addition to that, GLP-1 receptor agonists might decrease platelet aggregation and that will lower the risk for another stroke.”<sup>13</sup>



**Mohammad Ali Sheffeh** *Department of Cardiovascular Medicine, Mayo Clinic, Rochester, MN. Dr. Mohammad Ali Sheffeh is a medical professional specializing in cardiovascular medicine at the Mayo Clinic in Rochester, Minnesota. Dr. Sheffeh's academic and professional work is associated with Mayo Clinic's Department of Cardiovascular Medicine, where he collaborates with experts in diagnosing and treating heart-related conditions.*

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# Artificial Intelligence (AI) in Cardiovascular Medicine

By Mayo Clinic authors on PubMed,

a service of the National Library of Medicine

"People who receive heart care from Mayo Clinic's Department of Cardiovascular Medicine may benefit from access to the clinic's leading-edge research and expertise in AI cardiology to improve patient care."

## ***Bringing artificial intelligence (AI) into clinical practice***

Heart doctors and scientists work together to bring the benefits AI to people with diseases of the heart and blood vessels.

Mayo Clinic is a leader in the movement to bring artificial intelligence (AI) tools and technology into clinical practice to benefit people who have or are at risk of heart disease. The clinic's AI cardiology team is applying these new approaches to early risk prediction and diagnosis of serious or complex heart problems. People who receive heart care from Mayo Clinic's Department of Cardiovascular Medicine may benefit from access to the clinic's leading-edge research and expertise in AI cardiology to improve patient care.

AI is intelligence exhibited by machines. It touches almost every facet of modern life, including medicine. AI is being used at Mayo Clinic to program computers. The goal is to process and respond to data quickly and consistently for better treatment outcomes.

Uses for AI include detecting heart disease, treating strokes faster and enhancing diagnostic radiology capabilities. For example, a Mayo Clinic study applied AI techniques to a new screening tool for people with a

certain type of heart problem that has no obvious symptoms. The condition is called left ventricular dysfunction. The AI-assisted screening tool found people at risk of this condition 93% of the time. To put that in perspective, a mammogram is accurate 85% of the time. In addition, AI developed at Mayo Clinic is used in Apple Watch to detect a weak heart pump (low ventricular ejection fraction).

These technologies complement the knowledge of doctors. Ideally, by bringing together direct care and data analysis, AI cardiology allows doctors to spend more time with their patients and improves the shared decision-making process.

## **Some basics**

Artificial intelligence is the ability to make computers or machines learn to solve problems that would otherwise require human effort. Advances in computing power have made it possible to analyze large amounts of data quickly with consistency and accuracy. This has enabled health care scientists to apply AI to huge, complex data sets in a way that improves decision-making, diagnosis and treatment by detecting patterns in patient data.

The basic building block of an AI system is a "neural network." For example, a computer system is trained by ingesting and analyzing hundreds of thousands of sets of similar readings. It becomes experienced in looking at a focused problem, such as ECGs. The result is that an AI system can read a simple test, detect a heart condition and predict possible future problems.

Mayo Clinic leaders have identified several areas of opportunity for AI in health care. The clinic is well situated to advance AI because its long history of high-volume patient care has generated a massive database of historical genomes, microbiomes, ECGs, diagnostic images and other test results. That coupled with the clinic's strong culture of close collaboration among medical doctors, engineers and scientists is driving AI into health care in meaningful ways.

You can find a deeper look at computer neural networks and deep learning (strong AI) [here](#).



## From research to clinical practice

Cardiovascular medicine doctors and scientists at Mayo Clinic are combining AI with clinical practice for better care. Here are three examples that have moved from the research stage to use in the clinic:

- Helping people who have had a stroke. In emergency rooms, when people come in with a stroke called an intracerebral hemorrhage, they get a CT scan. That scan is examined by a computer trained to analyze CT data. This method has been shown to cut the time to diagnosis and limit brain damage.
- Preventing heart problems. Applying AI to ECGs has resulted in a low-cost test that can be widely used to detect the presence of a weak heart pump. A weak heart pump can lead to heart failure if left untreated. Mayo Clinic is well situated to advance this use of AI because it has a database of more than 7 million ECGs. First, all identifying patient information is removed to protect privacy. Then this data can be mined to accurately and quickly predict heart failure.

Detecting atrial fibrillation (AFib) sooner. AI-guided ECGs also are used to detect faulty heart rhythms before any symptoms are evident. A faulty heart rhythm also is called a atrial fibrillation. Innovation through collaboration

## A team approach

A doctor (right) works with an Electrophysiology Laboratory colleague to read a test result.

The collective effort of experts is driving the rapidly growing field of artificial intelligence in health care. At Mayo Clinic, several medical and surgical specialties have validated approaches to improve clinical care. These groups include cardiovascular medicine, neurology, oncology and radiology. Their advances are shared in the medical literature so that they can be adopted widely to benefit people everywhere.

These AI tools and techniques also play an important role in education. They are used by Mayo Clinic's medical students, residents, fellows and experienced surgeons to learn new or uncommon procedures. Mayo Clinic leads by holding artificial intelligence symposiums that bring together doctors and scientists to advance this science in health care.

## Research innovations in cardiovascular artificial intelligence

The Mayo Clinic cardiovascular medicine team was among the first specialties to rapidly develop and validate these new AI tools and technologies. Possible future uses still in development at Mayo Clinic include:

- Predicting risk early in conditions such as embolic stroke.
- Monitoring the heart and detecting arrhythmia in smart clothing projects.
- Developing AI technology compatible with smartphones and high-tech stethoscopes.

Mayo Clinic physicians, scientists and engineers continually advance the study and practice of artificial intelligence that improves health care. Find more about artificial intelligence at Mayo Clinic here.<sup>1</sup>

See a list of publications about cardiovascular AI by Mayo Clinic authors on PubMed, a service of the National Library of Medicine.<sup>2</sup>

## Research profiles

- \* Paul A. Friedman, M.D.
- \* Suraj Kapa, M.D.
- \* Francisco Lopez-Jimenez, M.D., M.B.A.
- \* Peter A. Noseworthy, M.D.

## Nationally recognized expertise

Mayo Clinic is top-ranked in more specialties than any other hospital and has been recognized as an Honor Roll member according to the U.S. News & World Report's 2024-2025 "Best Hospitals" rankings 3

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# HEART HEALTH: IS IT THE SUGAR, THE SALT OR THE FAT?

By Megan Wroe  
MS, RD, CNE, CLEC

**H**eat disease is the leading cause of death in the United States, and diet plays a critical role in preventing and managing it. Sugar, salt, and fat are often at the center of health discussions, but conflicting media messages can make it hard to know what's truly best for your cardiovascular risk. Let's take a closer look at these three nutrients, their roles in the body, and how to make healthier choices.

## Understanding These Nutrients

**S**ugar: Sugar provides quick energy for your body, but excessive intake has been linked to serious health issues like obesity, diabetes, and heart disease. Added sugars, found in sodas, desserts, and many processed foods, contribute to inflammation, a known risk factor for heart disease. While natural sugars in fruits come paired with fiber and nutrients, added sugars provide empty calories that harm heart health over time. Interestingly, of the three nutrients we are discussing here, sugar is the only one the body does not need at all – your heart and every other organ can work just fine without it.

**S**alt: Salt is essential for fluid balance, muscle contractions, and nerve function. However, when consumed in excess—especially from processed foods—it can contribute to high blood pressure, which puts stress on your heart. The source of salt matters: sodium from whole, natural foods is less harmful than the high levels found in processed snacks, fast food, and frozen meals. This is because of the processing involved. Ultra-processed salt is pretty much just sodium, where salt found naturally in foods and sea salts come packaged with other electrolytes that help the sodium do jobs within the body.

**F**at: Fat often gets a bad reputation, but not all fats are harmful and some are even beneficial for heart health. In fact, healthy levels of fats are vital for cell function, hormone production, brain health and blood flow. The key is the type of fat you consume. Unsaturated fats, found in foods like olive oil, avocados, and nuts, significantly support heart health, while trans fats, often found in fried and processed foods, increase the risk of heart disease. Saturated fats are a middle ground, where a little bit, especially from MCT sources, brings cardiovascular benefit, but too much can lead to arterial plaque.



**“SUGAR, SALT, AND FAT ARE OFTEN AT THE CENTER OF HEALTH DISCUSSIONS, FOOD PRESENTATIONS BUT CONFLICTING MEDIA MESSAGES CAN MAKE IT HARD TO KNOW WHAT’S TRULY BEST FOR YOUR CARDIOVASCULAR RISK.”**

## How Much Is Too Much?

### Sugar Recommendations and Risks:

The American Heart Association recommends limiting added sugars to no more than 25 grams (6 teaspoons) per day for women and 36 grams (9 teaspoons) per day for men. (Notice these are maximums, not minimums or recommended targets). However, the average American consumes about 77 grams daily, far exceeding the guidelines. Diets high in added sugar can lead to weight gain, increased blood pressure, and higher levels of harmful triglycerides, all of which contribute to heart disease.

### Salt Guidelines and Intake:

Current guidelines recommend consuming less than 2,300 mg of sodium per day (about 1 teaspoon). Yet, most Americans consume closer to 3,400 mg daily, with over 70% coming from processed and restaurant foods. This excessive intake can lead to hypertension, but when salt comes from natural sources like sea salt or vegetables, the impact on health is less severe. What’s also interesting is population-level research does not show conclusive evidence that eating over 2,300 mg of salt from foods is directly related to hypertension, meaning it may be more lab-based studies that inject pure sodium at the 2,300mg mark that create the risk. More research is also showing that it may instead be low levels of potassium (ie: fruit and veggies) that is the higher risk factor for hypertension rather than elevated sodium.

### Fat Recommendations and Quality:

Dietary fat should make up about 20-35% of your daily calories, with an emphasis on unsaturated fats. Omega-3 fatty acids, found in fatty fish like salmon, walnuts, and flaxseeds, are especially beneficial for reducing inflammation and improving heart health, but most Americans do not eat enough of these beneficial fats.

Most heart-healthy recommendations actually recommend omega-3 supplementation since the health correlation is so large. On the other hand, diets high in trans fats from ultra-processed foods increase heart disease risk by more than 20%.

## Common Misconceptions Debunked

**Salt and Fat Are Not the Villains:** For years, salt and fat have been demonized, but recent research shows that the quality and source matter more than the quantity. Natural salts and healthy fats from whole plant foods, fish and pasture-raised animal sources are all correlated with healthier cardiovascular markers, while diets high in ultra-processed foods that inherently have high levels of pure sodium and/or trans fats are the real culprits in circulatory inflammation.

**Sugar is a Hidden Hazard:** Despite less attention in mainstream media, sugar may be a more harmful nutrient for your heart than most people realize. High-sugar diets contribute to systemic inflammation, insulin resistance that contributes to blood pressure elevations, elevated triglycerides, and reductions in HDL (the healthy fat molecule). A JAMA study from 2013 showed that those who ate 25% of calories or more from added sugar were twice as likely to die from heart disease than those who ate less than 10% of added sugar calories.

### Dietary Cholesterol Should Not be Feared:

Dietary recommendations for cholesterol were actually erased from the list of concerns for Americans years ago, yet some of the first links in a google search on heart disease will still tell you to stay away from eggs. Let’s be very clear: dietary cholesterol does NOT create elevated levels of body cholesterol. It is instead excessive intake of saturated fat that creates cholesterol increases, which is why foods like shrimp and eggs that have relatively low levels of saturated fat but high levels of cholesterol, do not increase blood cholesterol levels at all.

### One Size Does Not Fit All:

Dietary needs are unique. An umbrella recommendation for low fat, low sodium eating will not create a lower risk of heart disease for all people. Instead, each person should assess their intake of fiber, saturated fats, added sugar and omega3s, while also taking a close look at physical movement and stress since these all play their own significant part in heart health.

## Final Thoughts

Dietary recommendations for heart health can feel conflicting and overwhelming. Rather than getting caught up in counting grams of fat or reading labels for the ‘low sodium’ sticker, focus on bringing in more real, unprocessed foods whenever possible. Make it your priority to get a minimum of 5 cups fruits and vegetables every day and to eat out no more than 1-3 meals per week. Once you get that baseline you can dig deeper into the sources of your animal products, adding your own sweetener instead of sweetened products, and finding easy homemade alternatives to some of your regularly processed food favorites. If food feels too overwhelming, start with exercise and get your 10,000 steps per day. Or practice breath work to improve your heart rate naturally. Any of these options will make an impact and your heart will thank you for it.

Interested in learning more about this topic? Check out our extended webinar recording on the [St. Jude Wellness Center YouTube Channel](#)

**Ready to learn how to breath intentionally for cardiovascular improvement? We’ve got an incredible 4-part series with our yoga therapist Dolly on Breath Work for Heart Health starting February 5. [Enroll by clicking the link here](#)**

St. Jude Wellness Center offers nutrition, fitness and stress resilience services to help optimize your health.

To learn more about services, programs and monthly free webinars on a variety of health and wellness topics, visit the Programs & Events page at [www.stjudewellnesscenter.org](http://www.stjudewellnesscenter.org)  
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**Megan Wroe, MS, RD, CNE, CLEC** manages St. Jude Wellness Center, an integrative wellness department of St. Jude Medical Center. St. Jude Wellness Center is located in Brea, CA and offers a variety

of nutrition, fitness and restorative programs and services for prevention and condition management such as PD.

Visit their website for more information:  
[www.stjudewellnesscenter.org](http://www.stjudewellnesscenter.org)

# FEW (BUT SOME) ADVISORS ARE USING LINKEDIN TO WIN NEW BUSINESS

**By Bill Cates, CSP, CPAE**  
President, Referral Coach International



**I**s a strategic presence on LinkedIn important to your business growth?  
**Yes, it probably is.**

**Do you need to spend a lot of resources with LinkedIn to be successful in this business?**

***No, probably not.***

The people making the most money with LinkedIn are the people trying to convince you to use them to either create content, run your LinkedIn activity, or both.

About two months ago, I was speaking with a colleague who had recently started helping advisors with their social media. When I mentioned to him that as of yet, I had met only a handful of advisors who could point to acquiring a new client or generating more business through their LinkedIn efforts, he said that he could.

When I asked him for specifics, he said that he had set up a system to help advisors post content – to be visible and create impressions. When pressed a bit further, he could only name one advisor who was using LinkedIn to post very creative and funny videos. While it worked for him, this was his unique ability that very few others might hope to emulate. Other than this guy, he couldn't name any advisors who were acquiring new clients, assets, or other new business as the direct result of their LinkedIn activity.

Can you point to a direct ROI from your LinkedIn activity?

If you answered “no” to the above question, you're not alone. I have met very few financial professionals who can demonstrate any clear return on investment (on dollars and/or time) from using LinkedIn.

**“Most financial professionals should have a great profile on LinkedIn. No matter how someone learns about you (through a referral or otherwise) if they do a Google search, the first result for you will likely be your LinkedIn profile.”**



Certainly, recognizing a team member, colleague, or even one of your clients (with their permission) has value.

### LinkedIn Prospecting –

One of my recent podcast guests called LinkedIn, “The new cold calling.” I’m sure you know exactly what he means by that. How many LinkedIn “cold call messages” do you get per day? Do you respond to many (or any)?

The financial professionals who seem to be having some success prospecting with LinkedIn have a

clearly defined target market and use their knowledge and experience to craft messages that occasionally garner the attention of others in that market.

Getting someone to pay attention to your message is all about relevant and compelling messaging. The narrower your target market, the more you are able to create relevant messages that catch the eye and compelling messages that move people to action.

### LinkedIn Connections –

Jackie Porter, CFP is a financial advisor based in Ontario, Canada. Jackie’s main target market is attorneys. She specializes in helping attorneys with retirement planning, wealth management, personal tax planning, and other related financial services.

Jackie has acquired new clients and new business by virtue of her LinkedIn activity – but it’s not because of direct prospecting or posting content.

While interviewing Jackie for a presentation I was giving to her national firm, Jackie told me this, “I am very active on LinkedIn. I am active with my clients and with my prospects. I make very few original posts. I just create business friendships with everyone by commenting on their posts and even sharing their posts from time to time.”

She went on to say, “Yes, even my attorney clients and prospects will interact with me on LinkedIn. I’ve earned new clients and new business directly through this activity.”

### Bottom Line

Can you attract more clients and be wildly successful without being super active on LinkedIn?

Yes!

Should LinkedIn play a role in your marketing plan.

Yes!

### What LinkedIn activity will produce tangible results?

Here are a few of my observations from watching our industry carefully, including interviewing and coaching many advisors on a regular basis:

#### LinkedIn Profile –

Most financial professionals should have a great profile on LinkedIn. No matter how someone learns about you (through a referral or otherwise) if they do a Google search, the first result for you will likely be your LinkedIn profile.

Therefore, make sure yours is complete and truly represents who you serve and/or are trying to attract.

#### LinkedIn Content –

Is it worthwhile to post content in the many ways LinkedIn allows you to post content? That’s up for debate. If you have a lot of LinkedIn connections – clients or otherwise – showing up in their feed from time to time, just to keep you top of mind is probably worth the effort.



**Bill Cates, CSP, CPAE,** is the author of *Get More Referrals Now, Beyond Referrals, and Radical Relevance*. Bill’s newest book, *The Language of Referrals*, has just been released and is available as a at Amazon in paperback, Kindle, and Audible.

Bill is a highly sought-after coach, consultant, international speaker, and virtual presenter.

CalBroker Readers can get free (and valuable) tools here:

[www.ReferralCoach.com/resources](http://www.ReferralCoach.com/resources)

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# Agents New to Medicare Sales Need to up Their MedicareSupp Game!

By Maggie Stedt  
C.S.A., LPRT

**M**any new agents entering the Medicare Sales arena are focusing on Medicare Advantage sales and are missing the opportunity and benefits of selling Medicare Supplement Plans (also called Medigap Plans). In the next few articles, we will take a closer look at this market and the coverages and ideas on selling. We will explore the various Guaranteed Issue Guidelines (GI) and Underwriting requirements. We will take a look at the history of the Medigap plans. Also, we will address the differences between Medigap Plans and Medicare Advantage Plans (MAPD) and who are the target markets. We will also address the variation in the plans and who is the most likely prospect for the various plans.

Why should you offer the Medigap Plans? They still continue to be a great opportunity to grow your book of business with over 52% of the Medicare eligibles in CA covered under these plans. Medigap covered individuals tend to stay on their plans for at least 10 years. Your commissions typically increase over the years based on the rates (percentage depends on the company). Many areas in California do not offer MAPD plans or have limited plan offerings. In addition, there have been a growing number of physician groups and networks that are no longer accepting HMO covered individuals. And, thanks to the California Birthday Rule (GI), you can review the plans with your clients annually to make sure that they are in the Medigap plan and company that best fits their needs! This offers an opportunity to provide additional products!

To help you educate yourself about Original Medicare and the Medigap Plans you should read and refer to the “Medicare and You” booklet and the “Choosing a Medigap Policy” booklet found on the [www.medicare.gov](http://www.medicare.gov) website. Each company also has its Sales Guidelines including the Guarantee Issue Guidelines and Underwriting requirements. Take advantage of the sales trainings that are offered!



To represent and sell Medigap plans you may have to have a separate contract from your MAPD/PDP contract. You must be appointed by the company with the state for you to represent the plans and remain in good standing. You are not required to take AHIP to represent these plans! However, a company may require specific trainings be completed prior to sales.

Here is a quick basic overview: Medicare Supplement Plans are insurance products that are designed to fill in the gaps that Original Medicare (Part A and Part B) does not cover. The individual must be covered under Part A and B to enroll in the plans and to continue to be covered under the plans. Medigap plans can cover some of the deductibles, copays and coinsurance amounts depending on the Medigap plan. Original Medicare coverage is primary which means that Part A and B pay first then the Medigap plan.

# “You as a new broker in this part of the Medicare market have a great opportunity! Start studying those Medicare booklets and talk to experienced agents.”

These plans will not pay benefits claims unless it is a Medicare covered expense. But they do pay for covered expenses if they are offered under the Innovative Plan benefits (see below)

The plans are standardized meaning the plans are lettered (A, B, C, D, G, F, K, L, and M). The lettered plans are the same from company to company except some companies offer additional benefits for vision and hearing and other add-ons. These plans are called Innovative plans (one company calls theirs Extra). Which plans the individual can apply for depends on when the individual enrolled in Medicare Part A and B, which plans the company is offering and the age of the Medicare covered individual. And, it also depends on the situation that applies to the person enrolling such as new to Medicare, loss of group coverage, loss of MAPD plan coverage and other situations.

The Medigap plans have a monthly cost and vary based on age and the county/zip code. In California the plans are typically age rated and do not offer different rates if a male or female. The plan rates can increase each year as the person ages and if the base rate for plan increases. Some companies can/will change the rates at the newly attained age and also when they increase the base rates. Some companies will only increase the rates once a year and incorporate the attained age rate change and the book rate. One pricing advantage is the offering of a New to Medicare discount that is typically applied for the first 12 months of participation. Some companies are offering household discounts as well! However, they do have some requirements that must be met such as the spouses must be on the same plan or it may depend if both are on a Medigap Plan offered by the same company or that there are other individuals in the house hold. It varies from company to company. Another cost to watch for is a policy issue fee that is required by a few companies as well.

One of the most attractive feature of the Medigap plans is that the covered individual is the freedom to choose any Medicare contracted doctor in the United States and its territories (such as Puerto Rico, Guam and the US Virgin Islands). Many aging in seniors find this an attractive benefit as they have various key doctors that are not in the same IPA or physician network.

Note that if the doctor (provider) was contracted with Medicare and no longer is, then the covered individual cannot submit claim to Medicare from that provider for reimbursement.

## Let's take a moment to compare the Medigap Plans and the MAPD Plans:

While the Medigap plan allows the covered individual to see any Medicare-approved provider without network restrictions, the Medicare Advantage plans require their enrollees to be assigned to a specific network of providers. MAPD plans often offer lower premiums but potentially higher out-of-pocket costs with additional benefits like dental and vision coverage;. So basically, a Medigap plan covers gaps in Original Medicare costs while Medicare Advantage bundles Original Medicare with additional benefits, but within a restricted network.

## The Pros of the Medicare Advantage (MAPD) Plans:

**No or Lower Premiums** – typically have lower monthly premiums when compared to Medigap plans

**Extra Benefits:** Many MAPD include prescription drug coverage, dental, vision, and hearing care and additional benefits such as transportation, over-the counter benefits, overseas emergency and urgent care and much more

**Potential Cost Savings:** Plans sometimes offer lower out-of-pocket costs for in-network care.

## The Cons of Medicare Advantage Plans:

**Network Restrictions:** MAPD (HMO) plans require the enrollee to stay within the plan's network of providers (may limit doctor choices)

**Potential for Higher Out-of-Pocket Costs:** Especially for out of network services

**Plan Changes:** Plan benefits can change or plans can withdraw from the market.

**Referral Requirements:** Most MAPD plans require a referral from the Primary Care Physician to specialists and for some services for the enrollee to access the care under the specialists.

## The Pros of Medicare Supplement Plans:

**Provider Choice:** Covered individuals have the freedom to choose any doctor or hospital that are contracted with Medicare.

**Consistent Coverage:** Coverage is predictable with minimal surprises regarding out-of-pocket costs.

**No Referral Needed:** The Medigap plan does not require referrals from the primary care physician.

## Cons of Medicare Supplement Plans:

**Higher Premiums:** Typically has higher monthly premiums compared to Medicare Advantage plans and they increase with age and the plan can increase the base rates overall as well

**Limited Extra Benefits:** The plans are designed to cover the gaps in Original Medicare, not additional services like prescription drug coverage, dental or vision or other benefits such a transportation. Overseas coverage is limited and only offered under certain plans.

There is so much to learn about the Medicare Supplement plans! You as a new broker in this part of the Medicare market have a great opportunity! Start studying those Medicare booklets and talk to experienced agents. There is a wealth of knowledge just waiting for you!



**Maggie Stedt**, recipient of the 2024 NABIP Spirit of Freedom Award, is a renowned advocate in healthcare and insurance. She is an Emeritus Member of the NABIP Medicare Advisory Group. A member of NABIP's Speakers Bureau, Maggie is also recognized at the Soaring Eagle Level in the Leading Producers Roundtable for her expertise and leadership in Medicare and legislative initiatives.

# BABY BOOMER IMPACT

By CalBroker Magazine



California's economy is undergoing a major shift as baby boomers retire, reshaping industries and creating workforce gaps. Key sectors like real estate, banking, retail, and small businesses are on the brink of disruption. Business ownership changes and closures are becoming more common, signaling a period of transformation.

The economic impact of the baby boomer generation is profound. While it presents challenges, it also opens the door for growth and new opportunities. By acting now, you can offer clients proactive guidance and help businesses adapt through financial strategies and future-focused solutions.

Let's understand the economic challenges of baby boomer retirements and turn this trend into an opportunity to help your clients build a secure, prosperous future.

## The Baby Boomer Retirement Wave

Born between 1946 and 1964, the baby boomer generation is retiring at a rapid pace. According to the U.S. Department of Labor, these people make up about 15% of the labor force. They influence key sectors like banking, home ownership, and small business ownership including insurance agencies.

From 2024 to 2027, approximately 11,200 boomers will turn 65 each day, which is over 4 million annually. This means one in five Americans will be 65 or older by 2030. While millions leave the workforce, others may continue working for financial stability or to stay active. This massive shift will leave a void in key roles and industry knowledge including the health insurance industry.

## The Economic Impact of the Baby Boomer Generation

Let's see how the large-scale retirement of baby boomers will impact industries and the economy, especially in California:

### 1 Workforce:

In California, the impact on the workforce from baby boomer retirements will be significant. As this generation steps away, the state may face a talent shortage, particularly in leadership roles. This can slow productivity and innovation, potentially disrupting various industries and the overall economy.

### 2 Housing and real estate:

With high mortgage rates and housing costs, many older homeowners plan to stay in their current homes. Nearly 80% of baby boomers surveyed by Redfin plan to age in place, which will decrease housing turnover. This could lead to higher prices and fewer available homes. Also, the demand for senior living and multi-generational homes that support aging needs will increase, further impacting the housing market.

### 3 Cars:

Although baby boomers are the most car-crazed generation, the demand for new cars may lower as they retire. This could impact auto sales, particularly luxury vehicles.

### 4 Retail:

According to a survey conducted by McKinsey & Company, dining out, groceries, clothing, and footwear will make up most retirement spending. Senior care products, including healthcare aids and mobility solutions, may also rise in demand.

## **5 Banking:**

Many boomers may be financially underprepared, lacking sufficient savings and facing the challenges of inflation. This can increase the need for retirement planning, long-term healthcare insurance, and estate services. Banks may have to focus more on these services while adapting to younger customers' digital banking preferences.

## **6 Travel:**

Boomers make up a significant part of the travel market, and their preferences may shift toward comfort-focused trips like cruises or all-inclusive resorts. The industry must then cater to these preferences to prevent a decline in travel.

## **7 Small Businesses:**

California's economy, with its high number of small businesses, will face significant changes as baby boomers retire. Many businesses will be sold, merged, or passed to younger generations, creating opportunities for growth and innovation driven by emerging professionals. Baby boomer trends tracked by the California Association of Business Brokers show that retiring business owners are set to transfer or sell \$10 trillion in assets over the next decade.

## **8 Healthcare:**

Retirement will increase demand for healthcare services, particularly for chronic conditions and long-term care. It will put additional strain on industries and services associated with retirement and healthcare in California. Healthcare providers will need to expand services to meet this growing demand.

## **Riding the Retirement Wave: Solutions and Opportunities**

Here's where you can step in to help clients dodge these economic challenges and protect their financial well-being.

### **Succession planning**

A key area to focus on is succession planning, especially for small business owners looking to retire. This approach helps you provide a smooth transition for baby boomer business owners and the younger generation taking over.

Solutions such as life insurance, buy-sell agreements, and key-person insurance can help protect the business and facilitate continuity. You can also create strategies that meet the financial needs of the retiring owner and the new leadership, ensuring valuable assets are preserved. With baby boomers stepping away from businesses, such planning can safeguard operation management and prepare the company for the future.

### **Financial guidance**

When younger generations step into leadership roles, you can offer them financial guidance, leadership training, and estate planning strategies. This will make sure they're prepared for the responsibilities of business ownership. Through personalized solutions, insurance professionals can help boomers and new leaders simplify complex transitions and build a stable future.

### **Retirement planning solutions**

As an insurance professional, you can help clients secure their retirement with tailored solutions like IRAs and 401(k)s, maximizing their savings with the right investment options. Annuities offer a steady income stream so retirees don't outlive their savings. You can further customize these to meet each client's financial goals.

## **Long-term care insurance**

The growing older trends highlight an increasing demand for insurance solutions tailored to seniors. Insurance professionals are well equipped to offer financial security and healthcare solutions for senior clients, helping them enjoy a comfortable retirement. Products like long-term care insurance address aging healthcare needs, covering services like in-home care, nursing home care, and assisted living. These solutions can ease the financial burden of aging-related healthcare costs.

## **Health and wellness coverage**

Insurance professionals can help baby boomers choose the right Medicare plan to cover gaps in coverage. Critical illness coverage can also provide financial protection for retirees facing major health challenges. This will help baby boomers avoid unexpected medical expenses.

## **Supporting the Change**

The baby boomer retirement wave is transforming industries, but with change comes opportunity. While gaps in leadership and business ownership may arise, this shift presents a chance for insurance professionals to step in and offer valuable guidance.

By proactively assisting clients through succession planning and future financial strategies, you can help businesses and families adapt with ease. With customized strategies, you can position yourself as a trusted advisor, helping clients confidently traverse this generational transition.

**"The economic impact of the baby boomer generation is profound. While it presents challenges, it also opens the door for growth and new opportunities."**

# Baby Boomers A Growing Challenge



By CalBroker Magazine

**“In California, adults aged 50+ are the fastest-growing group in the safety-net care system, many of whom are low-income and face complex health and social needs.”**

Approximately 10,000 Baby Boomers (those born between 1946 and 1964) are turning 65 every day. As a result, the healthcare industry faces significant challenges, including workforce shortages and the rise of aging diseases due to older age.

Let's discuss how the healthcare system can adapt by leveraging technology, innovation, and workforce evolution to meet these unprecedented demands. This information can empower you to navigate these changes and support clients in an era of increasing healthcare demands.

## **The Aging Population: A Growing Challenge**

The Baby Boomer generation is aging rapidly, with all Boomers set to be 65 or older by 2030. In California, adults aged 50+ are the fastest-growing group in the safety-net care system, many of whom are low-income and face complex health and social needs. This trend is driving greater demand for healthcare services, especially for chronic conditions like diabetes and heart disease.

Simultaneously, the healthcare workforce is shrinking as many professionals from the same generation retire. By 2040, the proportion of Californians aged 17 and younger is projected to drop by 5 percentage points. A comparable decline in the working-age population will result in fewer contributors to the increasing healthcare costs, pension benefits, and other public programs.

The dual challenge of increasing patient demand and a shrinking provider workforce calls for innovative strategies to guarantee access to quality care for all. Analyzing the many facets of this complex issue can help in identifying practical solutions.

## Technological Advancements in Healthcare

Historically, safety-net providers haven't focused on this older demographic. To compensate, the California state government has crafted the California Master Plan for Aging, which takes a strategic and thorough approach to accommodating the challenges of an aging population.

California's community health centers and public hospitals are uniquely equipped to offer customized, integrated care to older adults with complex conditions. These providers serve diverse low-income populations and are poised to meet the evolving needs of this growing group. Through the use of cutting-edge technology, California's healthcare system is effectively supporting its senior population. Here are examples of coordinated services that extend beyond traditional clinical care.

### Telehealth

Telehealth enables remote consultations and monitoring. It has recently emerged as a vital tool, especially during the COVID-19 pandemic. For older adults with mobility issues or those living in rural areas, telehealth provides access to care without the need for travel. Video consultations, remote monitoring devices, and online health platforms can reduce hospital visits while improving patient outcomes. Artificial Intelligence (AI)

Machine learning algorithms analyze medical images, predict disease risks, and recommend personalized treatments. AI-powered systems can identify early signs of heart or brain diseases and cancer, allowing interventions before conditions worsen. Thus, AI is revolutionizing healthcare by enhancing early diagnosis and treatment. This proactive approach improves patient outcomes and reduces the burden on healthcare providers.

### Tech Modeling of Treatments and Genetics

Advancements in genetic research and tech modeling are paving the way for personalized medicine. For example, gene therapy is becoming a promising option for inherited diseases, offering hope to many families. Healthcare professionals can also tailor treatments to individual needs by analyzing a patient's genetic makeup. This boosts therapeutic efficacy and minimizes side effects.

### Evolution of Younger Healthcare Professionals

As experienced healthcare providers retire, California's healthcare system is seeing a change, with fresh talents stepping in to fill the gaps. These new providers are key to handling the rising needs of older adults without compromising the quality of care.

## Empowering the Current Workforce

Nurse practitioners and physician assistants are now taking on expanded roles. These professionals provide primary care, manage chronic diseases, and even perform minor procedures. Such support staff is critical to resolving physician shortages, particularly in underserved areas.

Advanced training allows NPs and PAs to deliver high-quality care, often at a lower cost. Encouraging more students to pursue these careers and providing opportunities for professional growth will be essential in meeting the growing demand.

### Inspiring the Next Generation

Healthcare organizations and educational institutions must collaborate to attract younger professionals. Initiatives like loan forgiveness programs, scholarships, and mentorship opportunities can make healthcare careers more appealing. Fostering diversity in the workforce allows patients from all backgrounds to receive culturally competent care.

### Updates in Healthcare Infrastructure

After tackling workforce challenges, the logical next step is exploring how the healthcare support system can evolve to meet the unique requirements of aging residents.

### Expanding Care Facilities

As the demand for senior care increases, healthcare systems must adapt their facilities to meet the unique needs of older adults, including specialized services and accessibility features. This includes adding more senior-friendly spaces, providing mobility aids, offering services such as memory care and chronic disease management, and investing in technology to improve patient monitoring and care coordination.

### Offering Community-Based Care

Neighborhood support initiatives, such as home health services and adult daycare centers, allow seniors to receive care while maintaining independence. These programs can reduce hospital admissions and lower healthcare costs, making them optimal care solutions for patients and providers.

### Emphasizing Preventive Care

Vaccinations, regular screenings, and lifestyle counseling can prevent or delay the onset of chronic diseases. Educating the elderly population about the importance of preventive care and offering accessible services will play a significant role in maintaining their health.

## Innovations in Prescription Medicine

The pharmaceutical industry is developing new medications for acute and chronic conditions. From drugs that slow the progression of Alzheimer's to advanced biologics for autoimmune diseases, breakthroughs in pharmaceutical therapies are improving the quality of life for many seniors.

Digital pills fitted with sensors are helping patients adhere to medication regimens by sending reminders and tracking doses, which results in better health outcomes.

### Policy and Advocacy for Systemic Change

Addressing the challenges posed by an aging society requires robust policy support. Increased funding for healthcare training programs, investment in telehealth infrastructure, and incentives for innovation in medicine and technology are crucial. Advocacy groups are striving to make sure seniors have access to affordable care and resources.

### A Collaborative Future

Providers, policymakers, tech developers, and communities must work together to create a sustainable system that meets the needs of Baby Boomers. Embracing innovation, supporting a new generation of professionals, and prioritizing patient-centered care will help the healthcare industry rise to the occasion.

This shift offers significant opportunities to stay ahead of the curve. Understanding the evolving landscape of healthcare, including emerging technologies and new treatments, allows you to offer tailored solutions to your clients. This can improve customer satisfaction and retention in the long run. Furthermore, as the healthcare system becomes more complex, your expertise will be invaluable in guiding clients through these changes, positioning you as a trusted advisor in the industry.

# HOW TO NOT RUN OUT OF MONEY AFTER SELLING YOUR BOOK OF BUSINESS

By Phil Calhoun MBA,

Contributors: Danniell J. Wexler and Anthony Di Bardino



**W**orking with business owners to plan for their future is a highly personal process and with Baby Boomers owning 70% of small businesses the “industry” is huge. Every health insurance professional is a business owner when they build their book of business. Health brokers also have personal needs and the typical concern for brokers centers on decisions as to when and how to sell their commissions and not run out of money in retirement.

When we start the exit planning conversation, this is when health brokers express a concern about running out of money in retirement. Without a way to address this concern the planning process either stops or results in seller’s remorse at some point. This article will focus on the advanced planning financial solutions available to sellers that help to personalize retirement income needs and address the impact of taxes. Our **Commission Solutions Team** includes tax and financial planning experts who work with our planning clients interested in developing a plan that successfully addresses maximizing income in retirement.

*Danniell J. Wexler states that when working with health insurance brokers, we outline the opportunity to build exit plans that account for all retirement income including the sale of their health insurance commissions. Given the concerns about retirement income, we apply solutions focused on how not to run out of money in retirement.*

My experience may help health brokers. After selling an insurance agency ten years ago to my business partner, then acquiring over 12 health books of business in the past 8 years, and most recently coaching thousands of active health brokers to protect, grow, and sell health commissions, I have personally experienced the benefits of working with subject matter experts in tax and financial planning. Based on this success, our **Commission Planning Team** includes tax and financial professionals who are available to work with health brokers to help move through the planning process and build exit plans that consistently meet each broker’s goals. I was fortunate to have Danniell J. Wexler and Anthony Di Bernardo assist me through my planning work and these experts are two of our top advisors on the **Commission Solutions Team**.

*Anthony Di Bernardo suggests that Paradoxically many times brokers who look to sell their health commissions will experience both an increase in income, often paid out over several years, and a reduction in income post the payout period of their business. Given this event, there is a need to find solutions to maximize net income in retirement so the commission planning process can continue. Advanced planning enables a broker to plan ahead to address taxes and asset maximization. The goal is to solve the running out of money in retirement concern. We have found that a number of advanced planning tools fit nicely for health insurance professionals, the same tools we use with owners of medium and large sized businesses.*

## **“Note to all Active Brokers: Take the time to learn about advanced planning tools, begin to implement the ones you see are a fit for you now, and always complete a plan to protect your commissions.”**

For health brokers looking to sell their book of business, they often need to address these three areas:

- 1** Sell for the maximum amount but also consider ways to enable you to keep as much as possible after taxes;
- 2** Build a comprehensive plan for retirement income which includes the proceeds from the sale of your book of business and how to maximize your personal financial assets in retirement; and
- 3** Act to implement the plan designed with input from experts to include the use of advanced savings and estate planning tools that will position you with tax efficient income in retirement reaching the goal to pass on your wealth, protect your income and assets from creditors, and when staying active protect your health commissions.

*Anthony Di Bernardo says Note to all Active Brokers: Take the time to learn about advanced planning tools, begin to implement the ones you see are a fit for you now, and always complete a plan to protect your commissions.*

### **Sell for the Maximum**

Selling for the maximum amount can be summed up this way for the majority of health brokers-- Your total commission income is the value of your book of business. Buyers want to see total commission revenue for the past three years and for the current year to date revenue to see any trends. The number of clients, and especially new clients, is another trend impacting the value of the book of business. With no other unique revenues or enhancements, annual revenue is the valuation of a health book of business. Enhancements or reductions to a revenue only valuation method could be when there is an excellent CRM or lack of, proven marketing or referral programs that are quantifiable, repeatable, and transferrable, and employees who stay post sale and bring measurable value to the buyer with their experience and performance track record.

Commissions transferred from Seller to the Buyer are the basis of the payout to the Seller. Each month the total commissions received for the Seller's book of business is used for the monthly payout to the Seller. The percentage split of the monthly revenue received by the Buyer as outlined in the purchase agreement will be set at 50% or lower and be paid over the payout period of time. In many cases, Medicare and Group business have a payout set at 50% for six years. Using a multiple of revenue is the basis of a tax efficient sale. (Three times works well for Group and Medicare. IFP is more risky and of less value so Two times is common).

*Danniel J. Wexler offers that For Sellers with a corporate structure, buyers usually will not want to acquire an LLC or S-Corp. But Sellers can work with tax advisors to apply post sale expenses to the payouts received from their buyer which can help them with their tax planning.*

### **Retirement Income Planning**

Working with tax and advanced financial planners, Sellers will often gain more income.

*As Danniel J. Wexler often says, “It is more about the net after tax amount a Seller keeps, than the total amount paid to a Seller.”*

Professionals in planning develop strategies with our broker clients that build a comprehensive plan to maximize income in retirement while also applying tools to reduce taxation. This is good planning but many times opportunities are missed and Sellers never learn what could have helped.

*Anthony Di Bernardo shares how, “Advanced Retirement Planning is designed to avoid running out of money in retirement and involves a combination of careful budgeting, smart investing, strategic decision-making, and the use of financial tools that fit your needs. We work with actionable steps to clients achieve financial security during retirement.”*

### **Implement Your Plan**

Procrastination is your enemy especially when it comes to planning. So as soon as you can, you can put your well-developed plan in writing and execute it. If you feel you will stay active for several years, we encourage you to use a Commission Protection Plan. For commission planning when staying active you can review our Tips to Find a Successor and other resources on our website. Since a Successor is critical when building your commission protection plan start here. If you have a business partner or a key employee, this solves the successor search as you will have them fill this role. Consider how you will fill their Successor role for them if they have commissions. If you need to find a Successor we can help.

*Anthony Di Bernardo states that, “Time is your friend while you have it and your enemy when you don't.”*

For the tax and financial planning work and specifically for how to not run out of money in retirement after selling your book, our subject matter experts are available. The first step is a fifteen-minute call to ask questions and then decide which expert you want to engage to help build your plan. This step is often done while the commission plan step is under construction but can be done after the commission plan work is completed as well.

*Danniel J. Wexler shares, “While every health insurance professional may have similar tax and planning concerns, specific solutions are often highly individualized as the solution needs to address each person's unique needs.”*

## CASE STUDIES

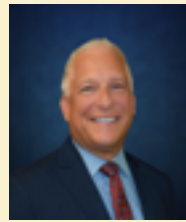
Joe found a Buyer for his health commissions and then focused on his plan on what to do post sale. He decided to grow a new business working with clients on long term care insurance, so we helped connect him with LTC insurance experts and move through the learning curve on long term care. Our advanced financial planning team then applied personalized tools designed for Joe to enhance his investments. He decided to move his qualified savings to a more tax efficient plan, he agree that his life insurance was no longer a fit and sold his policy and then worked with advanced life insurance strategies to other address his income needs and gift his family the policy. Then Joe created a more tax efficient pool of funds to access in retirement, repositioned his mutual funds to a balanced position factoring in risk and providing series of buckets to maximize funds and enable safe and solid withdrawals so he will have income throughout his life. Joe also started a plan to gift his money to his children and grandchildren. Overall his planning reduced his tax on social security income. With Joe's concerns about retirement income addressed we consulted with Joe and his Buyer as we worked through the deal points of the sale and moved to develop the *Purchase Agreement*, the *Commission Transfer Plan*, and the *Client and Commission Retention Process*.

Evelyn worked with her employees to buy her out. The payout for her plan went longer, a total of ten years. The plan was designed with input from our team of tax and financial specialists and includes incentives for employees staying, bonuses for meeting performance points for the retention of clients, and greater incentives for new business and revenue growth. From the plan we developed Evelyn received more income from her business, took regular quarterly distributions, and our experts implemented a tool she was able to use to have her company fund a new tax efficient retirement plan. She gained expert advice from our tax and financial team and has a more comprehensive exit plan covering her business and personal assets. Her plan provided a way to strategically sell some of her real estate. She plans to exchange some of her real estate for a home for her daughter and grandchildren and has enough to also acquire a nice duplex to live in (downsizing to single story) through the exchange and will be positive on the rental income less her duplex expenses. She also gifted to her grandchildren for college tuition and helped her local church with remodeling via planned charitable contributions. Her advisors factored in her social security, IRMMA, and other tax-based implications to reduce these expenses and taxation. Evelyn plans to travel more and take longer trips as her employees gained confidence and experience managing the business. With reference to her referral relationships in place Evelyn also enjoyed increases in her compensation and payout as the business reached higher net revenue targets. We also provided Evelyn with a customized [Commission Protection Plan \(CPP\)](#) with her key employee as the Successor. Her [CPP](#) addressed the timing she desired for her commission payout period, who gets paid should she pass away during the payout, and how the payout works as she gradually retires.

Planning is vitally important. When staying active in the health insurance business it is important to protect your commissions. Our solution for active health brokers is the [Commission Protection Plan](#).

*Special thanks to Anthony and Danny for their contributions as subject matter experts in the legal and financial industries to address advanced planning with our clients and subscribers through this article.*

**To learn more about commission planning options go to [www.commission.solutions](http://www.commission.solutions)**



**Danny Wexler, ESQ**

- USC School of law graduate and was admitted to the California Bar in 1988
- Estate Planning Practice for 20 years
- WORTH Magazine Top 100 Estate Planning Attorneys
- Co-author of Estate Planning for Doctors Business Succession Planning



**Anthony Di Bernardo**, is co-founder and CEO of Flexible Insurance Plans, Inc. and has served in the financial services industry since 1987. This company is responsible for providing support to over 50 CPA firms in the western US. That includes insurance, investments, deferred compensation plans, retirement and estate planning, business planning, charitable giving, tax and financial planning strategies. He has successfully developed over 3,300 personal clients that have implemented these strategies, has over \$3 billion in force life insurance benefits, and over \$650 million assets under management. Currently, he sits on several Foundation boards whose focus is Charitable Giving and enjoys mentoring financial services representatives. Anthony is the recipient of the Million Dollar Round Table's highest honor the past 30 years: "Top of the Table".

Anthony is also the President of Strategic Insurance Designs, Inc (DBA is Strategic Designs Insurance Services – SDIS) which provides training, support and services to business banks and credit unions in the western US. His role is to provide expertise in defined benefit pension plans and estate planning to business bank clientele. The emphasis of this practice is to analyze tax efficiencies, and offer financial planning solutions that make economic sense.

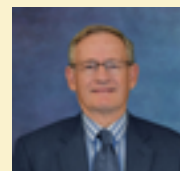
Anthony received his BA in Economics from the University of Southern California. Prior to his career in financial services, he was a restaurant entrepreneur and managed a computer operations division for a Fortune 500 company. He lives in Mission Viejo, CA with his family of 8...

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Phil's book,

**"The Health Broker's Guide:**

**To Protect Grow and Sell Commissions"** is available free at

[www.healthbrokersguide.com](http://www.healthbrokersguide.com)

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