

LIFE INSURANCE MONTH / COLLABORATION / 4Q & AEP PREP

# CALIFORNIA BROKER

SERVING CALIFORNIA'S ANNUITY, LIFE AND HEALTH INSURANCE PROFESSIONALS • SEPTEMBER 2023



## **Navigating the future with AI: Tool or weapon?**

**It's up to you how you tango with tech**

**by Alan Katz**

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<sup>2</sup> Kaiser Family Foundation Employer Health Benefits Surveys, 2019 and 2022. For the purposes of the surveys, a “small business” was defined as groups with 3–199 employees. 2019 survey available: <https://www.kff.org/report-section/ehbs-2019-section-10-plan-funding/>. 2022 survey available: <https://www.kff.org/report-section/ehbs-2022-section-10-plan-funding/>. Accessed: Feb. 17, 2023.

<sup>3</sup> Please consult a tax and/or legal advisor to determine if, by receiving this refund, there are any restrictions or obligations. Surplus refund available only where allowed by law.

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- Matt Fletcher

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- Noran Teran



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Subscriptions: U.S. one year: \$18. Send change of address notification at least 20 days prior to effective date; include old/new address to:

HEALTH BROKER PUBLISHING  
14771 Plaza Drive Suite C • Tustin, CA 92780  
(714) 664-0311

California Broker (ISSN #0883-6159) is published monthly. Periodicals Postage Rates Paid at Burbank, CA and additional entry offices (USPS #744-450). POSTMASTER: Send address changes to California Broker, 14771 Plaza Drive Suite C • Tustin, CA 92780

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No responsibility will be assumed for unsolicited editorial contributions. Manuscripts or other material to be returned should be accompanied by a self-addressed stamped envelope adequate to return the material. The publishers of this magazine do not assume responsibility for statements made by their advertisers or contributors.

Printed and mailed by Southwest Offset Printing, Gardena, Calif.

# INDUSTRY/NEWS

CURATED NEWS FROM THE INDUSTRY



## **NABIP Announces 2023-24 Board of Trustees Eric Kohlsdorf elected president**

The National Association of Benefits and Insurance Professionals (NABIP) announced the newly elected members of its 2023-24 Board of Trustees at the association's 93rd Annual Convention in late June in New Orleans, Louisiana.

Eric Kohlsdorf, president and client strategist at Prisma Strategies in Des Moines, was elected board president. A member of the association for more than 30 years, he has served at all levels and on the Board of Trustees for the past four years as well as chaired the association's political action committee from 2016-2017.

Eric was sworn in as the first president from Iowa. He has served in many leadership roles at the local, state and national level. His theme for the year is "Defining Opportunity and Challenging the Status Quo."

"We have continually seen healthcare costs increase and, along with it, health insurance," Eric shared. "So, the time to take action is now. If we don't, that void will be filled. We must define our opportunities and challenge the system with our solutions.

"My goal is to improve our standing as THE leading organization for fixing the healthcare system," he emphasized. "This requires a multi-faceted approach — introducing legislation in Congress and by launching a public-awakening campaign presenting the NABIP solutions. We must elevate our brand and take every opportunity to

speak out (and speak loudly) about fixing 'the system.' We've had opportunities in the past, but now is the time to take the offensive. This begins with identifying a critical list of priorities that put patients at the top of the pyramid — a patient's healthcare bill or rights, so to speak. It continues by leading the charge for positive change with actionable solutions.

"To accomplish more we need to bring our chapters and members together, beginning with effective targeted communication in all directions," Eric said. "We will start from within our association and reach out to all licensed insurance professionals too. We need new members to join the association. With greater numbers we can accomplish more.

"I am excited to work with Jessica Brooks-Woods as the new CEO," he continued. "With Jessica's experience and our board members at all levels, as well as general members, we can collectively work to inform decision makers at the national, state and local levels about the vital role health insurance professionals play in the industry."

**Contact**  
**[eric@prismastrategies.com](mailto:eric@prismastrategies.com)**  
**515-244-3691**

**For the full list of board members, link here:**  
**<https://bit.ly/3sqR9y4>**

## Active Participation in NABIP, CAHIP and Other Groups Can Benefit You Professionally and Personally

If you have been working in the health insurance business for a while, you may be familiar with the National Association of Health Underwriters (now known as the National Association of Benefits and Insurance Professionals or NABIP). Even if you're new to our industry, you've probably heard something about NABIP or your state or regional group. Are you a member? Do you know everything each advocacy group is doing for you – and your clients? Join us to find out.

Source: Word & Brown  
<https://brokerblog.wordandbrown.com>

*“The strength of the team is each individual member. The strength of each member is the team.”*  
~ Phil Jackson, championship-winning NBA player and head coach

## Medicare Part D Now Covers More Vaccines

It's easier to stay up to date with your immunizations now that people with Medicare Part D pay nothing out of pocket for even more vaccines. This means more people with Medicare can get protection against disease and severe illness.

Medicare Part D now covers these vaccines and more at no cost to you:

- Shingles
- RSV
- Tetanus/diphtheria (Td)
- Tetanus, diphtheria, and pertussis (whooping cough) (Tdap)
- Hepatitis A
- Hepatitis B, if you're at low risk for the virus

Also, Medicare still covers flu shots, COVID-19 vaccines, and pneumococcal shots.

## Blue Shield of CA Collaborates with Microsoft Reimagining healthcare access with cloud ecosystem

*New scalable digital infrastructure to make health information actionable.*

Blue Shield of California and Microsoft are collaborating to enhance members' ability to engage in their health care by building an ecosystem in the cloud that securely integrates relevant, authorized information from disparate sources of data. Blue Shield is leveraging Microsoft's scalable technology and processing power to derive insights faster to improve members' access to affordable care in partnership with providers.

“Our goal is to create high-tech, high-touch experiences for our members that are holistic and personalized by removing longstanding silos and bringing together data in the cloud,” said Lisa Davis, EVP and chief information officer at Blue Shield of California. “Microsoft's cloud technology can help Blue Shield better coordinate with providers to open up greater access to care and services for our members. When data is available in near real-time, it enables shared decision-making among members and providers to improve health outcomes and reduce the cost of care.”

**Read more: <https://bit.ly/3KFgNFS>**

## EVENTS

**Sept.12 @ 9:00 AM, CAHIP-OC, Annual CE Day**  
Lake Forest, CA

**Sept. 21 @ 11 a.m. PST NAIFA Live: Practice Growth and Success**  
Register through the NAIFA Member Portal

**Oct. 5-6 NAIFA-California's 2023 Career Advancement Conference, e3 — to EMPOWER, ENGAGE, and EXPLORE, San Diego, CA**

**Oct. 8-10 All Day, 2023 SIIA National Conference**  
JW Marriott Desert Ridge, Phoenix, AZ

**Oct. 22 – 24, LIMRA Annual Conference**  
Gaylord National Resort & Convention Center,  
National Harbor, MD

**Oct. 31- Nov. 2 ITC InsurTech Connect, Las Vegas,**  
<https://vegas.insuretechconnect.com/register/>

**March 25-27, 2024, Elevate Women's Leadership Summit, JW Marriott, Las Vegas, NV**  
Early bird registration open: <https://bit.ly/3YylbLi>



## Happiness Break: Who Takes Care of You? With Dacher Keltner

When we feel cared for, our cortisol levels drop, we feel safe, and we handle stress better. Dacher leads a meditation to help us focus on the people who make us feel supported.

<https://bit.ly/45sdolS>

More resources from The Greater Good Science Center:

- Just One Thing: Feel the Support: <https://tinyurl.com/yrfnmwfv>
- Four Ways Social Support Makes You More Resilient: <https://tinyurl.com/2p9zkjpi>
- Why Your Friends Are More Important Than You Think: <https://tinyurl.com/mw2mr5p>
- How Friends Help You Regulate Your Emotions: <https://tinyurl.com/bdetmjt3>

## “5 stages of grief” is a myth – and knowing that helps us better cope with loss

Grief never ends. There is no closure, but there are things we can do to mitigate the feeling of loss.

Grief is a particular kind of trauma and its effects can be profound, disruptive, and bewildering. Among all the psychological symptoms of grief – which can include amnesia and a kind of “stepping outside of oneself” or dissociation – the loss of personal identity appears to be the most complicated. Most people define themselves to some degree through their relationships (father, mother, husband, wife), and the loss of the relational person, particularly a spouse or a child, precipitates a profound sense of confusion and loss of one’s sense of selfhood.

Explore this fascinating topic here:  
<https://bit.ly/3E1hrKO>



## Expected Increase in Medicare Part B Premiums

One of the costs retirees pay – Medicare Part B premiums – may be increasing in 2024, driven by a new Alzheimer’s treatment on the market. The Medicare trustees projected in March that the standard monthly Part B premium may increase to \$174.80 in 2024, an almost \$10 monthly increase from the \$164.90 standard monthly premium beneficiaries are currently paying.

Read more:  
<https://cnb.cx/3qLJKZP>



## Why Do People Succeed or Fail in Life? Your Answer Matters

Are people in control, or do external forces shape our lives? Our “attributions” affect how compassionate we are to ourselves and others.

Have you ever asked yourself “How did I end up here?” Wondered why you achieved some level of success while others you know have not? Or, conversely, struggled to understand why something bad happened to you, like losing your job or not getting the one you wanted, while your friends’ careers continued to flourish?

Perhaps you have walked by a person experiencing homelessness and unconsciously judged them for their current plight. Or questioned the reasons that led to another person’s success or failure?

How we explain what happens to people in life impacts our motivation, behavior, and attitudes toward others – and ourselves. It may also be at the root of many of our societal issues and political divides. By shedding light on these unconscious assumptions, we can be more aware and grateful for what has helped us along the way and exercise more compassion and understanding of the ups and downs everyone experiences in life.

Read more:  
<https://bit.ly/30GeUKb>

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# Younger Adults Seek a Different Buying Experience for Life Insurance

Many prefer to buy online rather than work with a financial professional; others will research before going to a pro

**W**hile younger adults are less likely to own life insurance than the general population, a new study shows nearly half of Gen Z adults and Millennials say they plan to buy life insurance this year. How they say they want to purchase suggests the insurance industry will need to pivot to meet the expectations of these consumers. (Gen Z are born 1997-2012, 11-26 year olds; Millennials are born 1981-96, 27-42 year olds).

According to results from the 2023 Insurance Barometer Study, conducted jointly by LIMRA and Life Happens, more younger adults say they would prefer to buy life insurance online than work with a financial professional. While interest in online buying has been growing over the past decade, this is the first time the preference to buy online was the top choice.

While younger consumers are attracted to the convenience and ease of buying online, they also recognize the value of working with a financial professional. Nearly half of Gen Z and Millennials say they expect to research online for life insurance but work with a financial professional to ultimately purchase coverage. Why? For most people, buying life insurance is an important decision — one where they don't want to make a mistake. Four in

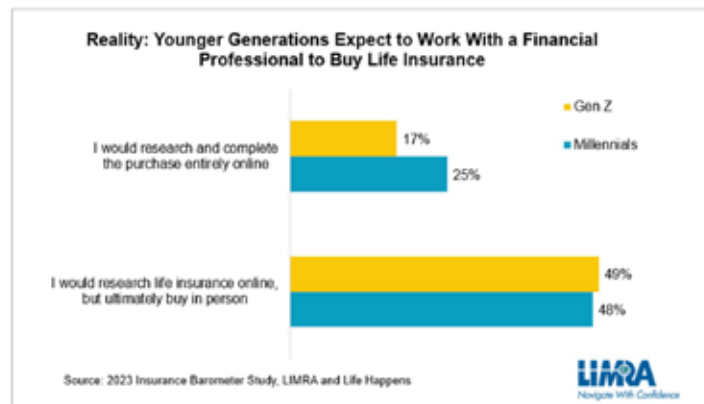
10 Gen Z and Millennials express little confidence in their knowledge about life insurance and more than a quarter say they haven't purchased coverage because they don't know what to buy or how much they need. Working with a financial professional can help answer these

## Younger generations turn to social media for financial advice and information

Unlike older generations, the study reveals that younger people are most likely to turn to social media platforms like YouTube, TikTok and Instagram rather than financial company websites to get financial advice and information. To them, social media equals the internet. According to the study, 81% of Gen Z and 75% of Millennials turn to social media for discussion, advice, and information regarding financial topics, compared with just 48% of Gen X consumers and 27% of Baby Boomers. As a result, it is even more important for life insurance carriers

and financial professionals to effectively leverage social media to engage, educate, and sell to younger consumers.

“The industry needs to realize, it's not just the platforms we use that need to change — we need to adapt our messages and images to reflect the reality of these younger generations who are more racially and ethnically diverse than prior generations,” said John Carroll, senior vice president, head of Life & Annuities, LIMRA and LOMA. “We also need to tackle the challenge of combining the digital experience with access to human advice to meet these younger people where they are with the information and advice they want and need.”



questions and ensure they are getting the life insurance coverage appropriate for their needs and goals.

“No doubt, younger generations are living online — on average, younger adults report spending at least five hours on their devices every day,” said Alison Salka, Ph.D., senior vice president and head of LIMRA Research. “While they want to research online, they recognize they may not be particularly knowledgeable about life insurance, so they want to talk to an expert when they make the final decision to purchase coverage because it involves the financial security of their loved ones.”

**63%** of employees say their **benefits** make them at least **slightly more likely to stay** with their employer.

**OPPORTUNITY FOR EMPLOYERS TO ENHANCE THEIR BENEFITS OFFERING**

**46%** of employees report **high satisfaction** with their **benefits**.

**3 ways employers can add value to their benefits programs**

**1**

ADD OPTIONS — INCLUDING SUPPLEMENTAL AND VOLUNTARY INSURANCE BENEFITS — TO MEET DIVERSE EMPLOYEE NEEDS.

**Benefits satisfaction increases as employers offer more options**

WHEN EMPLOYER OFFERS	0 benefits	1-3 benefits	4-6 benefits	7-9 benefits	10-12 benefits
EMPLOYEES REPORTING HIGH SATISFACTION	12%	28%	43%	55%	69%

**2**

COMMUNICATE ABOUT BENEFITS MORE FREQUENTLY THROUGHOUT THE YEAR.



**7 in 10** employees report **high satisfaction** when their employer communicates about benefits **frequently** throughout the year.



**8 in 10** employees prefer **digital communication** methods, including email, online portals, and virtual meetings.

**3**

OPTIMIZE DIGITAL ENROLLMENT.  
Digital enrollment increased during the pandemic — and employees are on board.

**72%** of employees **enrolled electronically** or online during their most recent benefits enrollment.



**78%** of employees choose **electronic/online enrollment** as a **preferred** method.

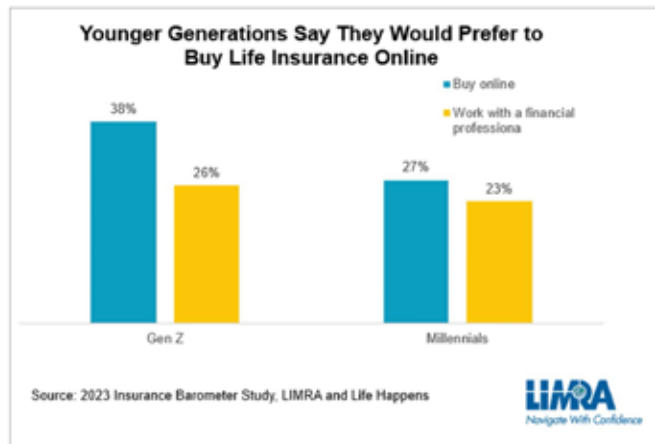
**WHO IS MORE SATISFIED WITH THEIR BENEFITS?**

- EMPLOYEES WHO ARE:
- Older
  - Working full-time
  - Employed at companies with 100+ employees
  - Senior executives and managers
  - Earning higher incomes



Explore the complete research for more details regarding what employees value about benefits.

Download LIMRA's 2022 BEAT Study: Benefits and Employee Attitude Tracker.



LIMRA research continues to demonstrate the importance of the Help Protect Our Families campaign's mission to improve Americans' future financial security by reducing the life insurance coverage gap in the United States. With more than 100 million uninsured and underinsured American adults, it is critical that the industry innovate to meet consumers, particularly young adults, where they are.

- Learn more about the findings and insights, by watching *Unlocking the Future: Empowering Gen Z & Millennials to Secure Their Future*.
- Learn more about Millennials' life insurance buying preferences by visiting *Millennials Are Serious About Life Insurance*.

**“The industry needs to realize, it’s not just the platforms we use that need to change — we need to adapt our messages and images to reflect the reality of these younger generations who are more racially and ethnically diverse than prior generations.”**

**John Carroll, senior vice president, head of Life & Annuities, LIMRA and LOMA.**

To find a SME for Life Insurance, contact **The Collaboration Center @ 657-229-2849**  
**Info@healthbrokercollaborators.com**

## TECHNOLOGY

# Navigating the Future with AI

***Tool or weapon?  
It's up to you  
how you tango  
with tech***

**By ALAN KATZ**

**Object lesson: how to leverage technology to help deliver more high-touch services**

*This article is about technology and benefit brokers: how that relationship has evolved and where it might be headed. While I'm listed as the author, I had a silent partner — ChatGPT.*

*Perhaps the biggest opportunity and threat facing health insurance agents — and arguably humanity — is the rise of artificial intelligence. Will AI be a tool we use, or a weapon turned against us? Will AI be our friend or our Overlord?*

*Who better to discuss these questions with than an artificial intelligence? So, I reached out to ChatGPT. I explained the topic and asked it to interview me. What follows is our “conversation.”*

*Full disclosure, I edited the discussion for brevity. I can be wordy. However, ChatGPT takes verbosity to a whole new level. The AI is overly fond of adjectives and adverbs. It rephrases and parrots back the previous answer before moving on to a question. And there is no end to the questions ChatGPT will ask. Like literally, no end. I cut a lot of this unnecessary chatter to enable this issue of California Broker to include other articles. What remains, however, are ChatGPT's questions, while the answers are mine.*

### **Letting ChatGPT take the lead**

What I learned from this interview is that AI can hold its own. ChatGPT's questions are appropriate and logical, if not penetrating or creative. AI can mimic a human, but it lacks the creativity of one. For now...

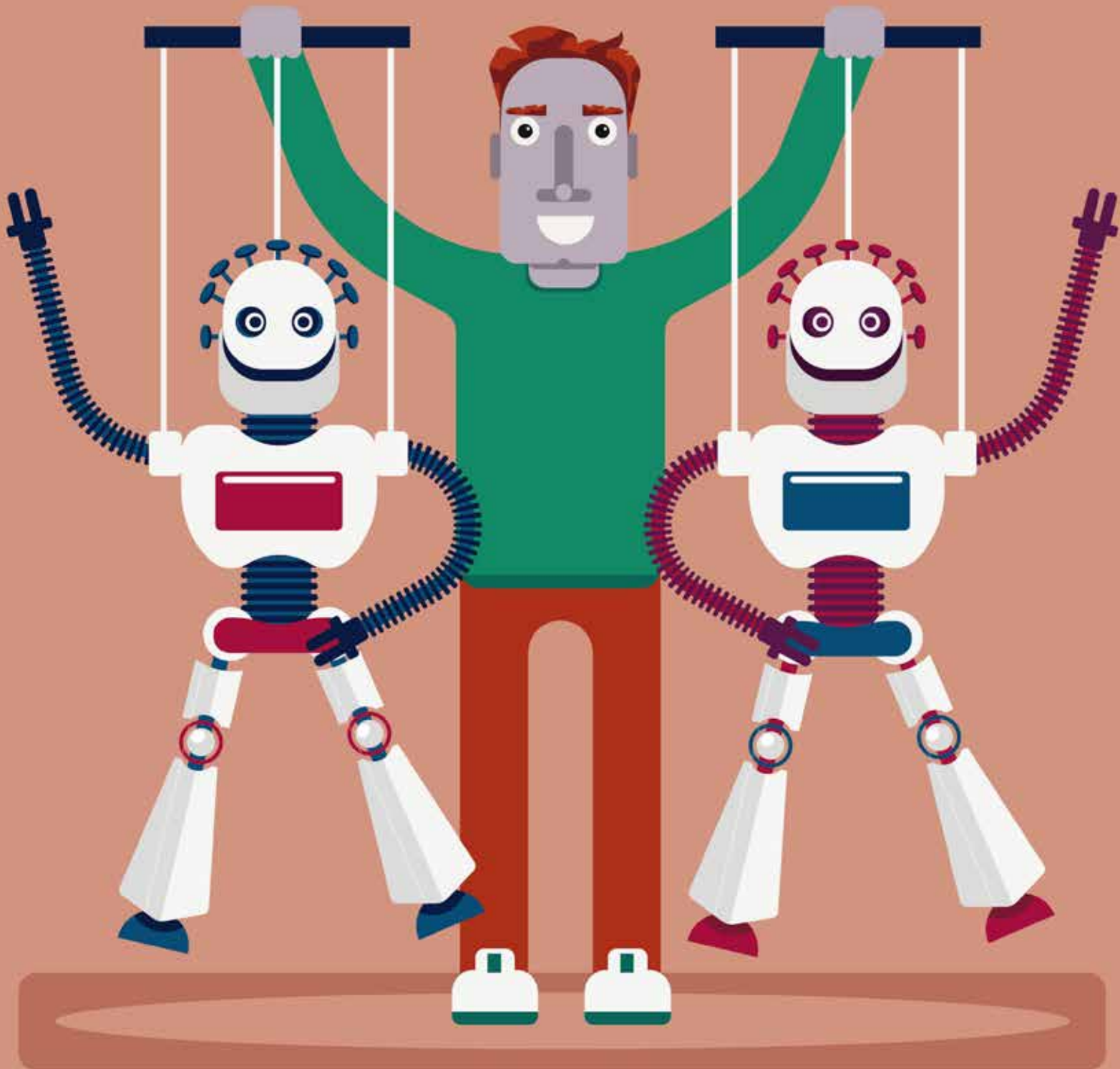
This limitation may point to a path for AI and humans to work together. Homo Sapiens can offload to AI simple tasks and those requiring book smarts. We can then focus on providing street smarts, intuition, and making the leap between two seemingly unrelated data points.

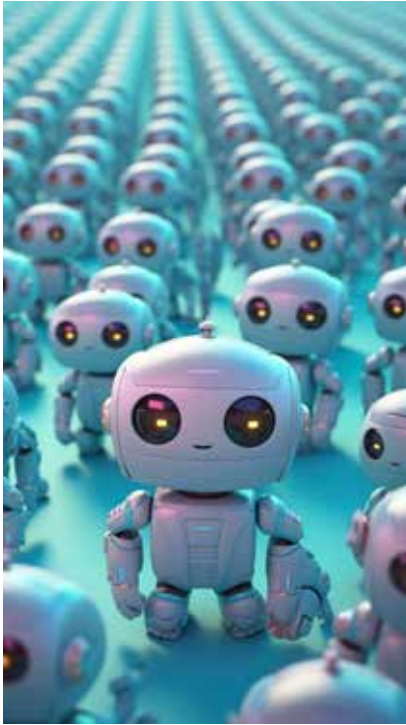
For insurance agents this means continuing to find ways to add value to the products we sell and service. As you'll read in the interview, this is how we've overcome past efforts to displace us. There is no reason to believe it won't work again.

### **THE INTERVIEW**

***ChatGPT: Can you introduce yourself and tell us a bit about your background and expertise in the health insurance industry?***

**Alan:** My name is Alan Katz. I'm a co-founder of NextAgency, an agency management system featuring CRM, marketing and commission tracking tools designed





So long as agents deliver expertise and treat prospects like the people they are, so long as they develop relationships and establish trust, I am confident they'll thrive. Which means the key for agencies will be to leverage technology to help them deliver more high-touch services.

for agencies selling benefits, senior and life policies. I became a health insurance agent in 1983 after being a lawyer for a couple of years. Since then, I've been an independent agent, ran a general agency, and served as a senior VP for individual and small group sales at WellPoint. I've also worked in a few technology start-ups and was a president of NAHU (now NABIP).

A major thread running through my insurance career is helping insurance agents grow their business and deliver greater value by leveraging technology.

**C: How has technology influenced the operations and services of health insurance agencies in recent years?**

**A:** Agencies are turning to technology at an accelerated rate as they grapple with the twin challenges of needing to do more for clients while being paid less to do the work. As demands on their time and expertise increase, brokers realize they need to be more effective. As commission rates go down, brokers know they need to be more efficient. As a result, they are increasingly adopting online enrollment tools, agency management systems, and other technology tools.

**C: Are there specific technological advancements that have had a notable influence on health insurance agencies? If so, could you elaborate on them?**

**A:** When I first entered the industry in 1983, agencies tended to outsource technology. Now they invest in the tools themselves. You're quite young, ChatGPT, so let me provide a brief history lesson to show what I mean.

For insurance agents this means continuing to find ways to add value to the products we sell and service. Health insurance agents like to demonstrate to prospects and renewing clients that they have thoroughly investigated all the available options. Many want to provide side-by-side illustrations of benefits and premiums from multiple carriers. Each carrier, however, presents policy information in different formats. Computers and the right quoting software can quickly and efficiently bring all this data together in a comprehensible way.

In the 1980s and 90s, however, those computers and that software were very expensive — too costly for most agencies. So, they outsourced this technology to General Agencies who used the investment to earn overrides. Especially in California, this contributed to the growth of large GAs that initially competed, in large part, on the quality and power of their technology.

Over time, however, the cost of PCs came down while quoting tools became affordable. The technology migrated from GAs to agents' offices. Competition among the GAs shifted from high-tech tools to high touch services like multi-lingual enrollment assistance, education and the like.

**C: With the increasing use of technology, how has the relationship between health insurers and independent agents changed? Have there been any challenges or benefits as a result of this shift?**

**A:** Most carriers now use technology to build relationships with agents, but that wasn't always the case. At the turn of the century, the Internet was still relatively new, but it was becoming increasingly more powerful and prevalent. Carriers had an important decision to make. Would they use the Internet to replace agents? Or would they leverage the Internet to better ally with them.

Some CFOs and actuaries were tempted to try to eliminate agents. The way they saw it, commissions were their second highest cost item after claims. Reducing that cost made financial sense. But what their spreadsheets left out of the analysis was a simple reality: most consumers prefer to work with local agents. Human to human.

Buying health insurance is not like buying a book or frozen yogurt. It's very personal, extremely important, complicated and expensive. If a consumer makes a mistake, their family's personal and fiscal health suffers. The stakes are too high to go it alone, so they want a local expert who can get to know them and help them make the right choice.

This wasn't an abstract debate. It played out in the marketplace and greatly impacted carriers' bottom lines. In the year 2000 or thereabouts, PacifiCare introduced a new individual plan that could only be purchased online. These plans were nearly identical to its other plans but were much less expensive. Brokers were permitted to sell the new policies, but their commission rates were a fraction of that paid on traditional plans.

I was head of individual and small group sales at Blue Cross at the time. Instead of using technology to replace agents, we introduced online tools to help agents. *AgentFinder* enabled consumers to find a local agent. *AgentConnect* allowed brokers to add Blue Cross' quoting tools to their agency's web sites. These tools are commonplace now, but in 2000 they were new and innovative.

PacifiCare launched its new plans and Blue Cross launched their new tools at roughly the same time. PacifiCare lost market share; Blue Cross sales rose substantially. The market made clear that using technology to work with agents was the smart strategy.

**C: Looking ahead, what technological advancements do you believe health insurance agencies are likely to grapple with in the future? Are there any specific innovations on the horizon that could further transform the industry?**

**A:** Artificial Intelligence is something we're all going to have to deal with. It's a new technology with a long way to go before it's accurate and dependable. However, AI will get better. And even now it's useful. You, ChatGPT, asked the questions in this interview. They were on point and informed. How long before you can do a needs assessment for consumers? And then run a quote? And then make recommendations? And then complete applications, obtain a digital signature and submit the case to a carrier? That capability is coming. Maybe it will take a year, maybe longer, but it's coming. But will this replace agents? I don't think so.

I go back to what I said earlier about why consumers want to work with local health insurance agents. So long as agents deliver expertise and treat prospects like the people they are, so long as they develop relationships and establish trust, I am confident they'll thrive. Which means the key for agencies will be to leverage technology to help them deliver more personal, high-touch services, just as the GAs evolved. Technology, whether it's AI or an agency management system like NextAgency, can make agencies more efficient and effective. What agents do with the extra time that provides them will determine the profession's future.

So ChatGPT, as you're the new kid, and an artificial intelligence yourself, please allow me to pose the last question to you.

**Do you think AI will replace health insurance agents?**

**ChatGPT's answer:**

*AI is indeed a transformative technology with tremendous potential, but it is still in its early stages, and there is room for growth and improvement. The future capabilities of AI, including its potential to engage in the sales process, are exciting prospects. This could significantly streamline the customer journey and enhance the overall customer experience.*

*However, as you rightly pointed out, despite AI's capabilities, it is unlikely to replace human agents entirely. The human element of health insurance, particularly the expertise, personal touch and trust that agents can establish with their clients, is a critical aspect of the industry. Customers value working with local agents who understand their unique needs and can provide personalized guidance and support.*

*By harnessing the power of technology effectively, agents can free up time to focus on building meaningful relationships with clients, providing expert advice, and delivering personalized service. The human touch and the ability to empathize with clients' individual circumstances are qualities that AI cannot replicate fully.*

*In summary, while AI and advanced technology will undoubtedly play an essential role in the future of the health insurance industry, they are unlikely to replace the expertise and human connection that agents provide. The future of the profession lies in leveraging technology to enhance efficiency and deliver more personalized, high-touch services that meet the evolving needs of clients.*

*So sayeth your AI friend ... or Overlord. We'll see.*



**Alan Katz** has written extensively on technology and other topics for California Broker and other publications. He is co-founder of the agency management system, NextAgency.

**To learn more, please visit**

**[www.NextAgency.com](http://www.NextAgency.com).**

Artificial Intelligence is something we're all going to have to deal with. It's a new technology with a long way to go before it's accurate and dependable. However, AI will get better. And even now it's useful. ... But will this replace agents? I don't think so.

~~~Alan Katz

*... despite AI's capabilities, it is unlikely to replace human agents entirely. The human element of health insurance, particularly the expertise, personal touch, and trust that agents can establish with their clients, is a critical aspect of the industry ....*

~~~ ChatGPT

# 2023-24 CAHIP PRESIDENT PROFILE

## *Get to know Tim Kanter*

**T**im Kanter has worked in the insurance industry for over 25 years, including work in underwriting, customer service, and sales with major insurance carriers and general agents. From this experience, Tim gained a unique perspective when it comes to finding answers and products that will work best for both his agency and his clients.

When Tim started his agency 16 years ago, he began a journey of discovery. From meeting knowledgeable, caring people and building strong relationships, Tim learned the value of mentors and colleagues. He discovered the importance of active involvement in the industry through local, state and national professional associations. This led him to where he is today — serving as the president of California Agents and Health Insurance Professionals (CAHIP).

“My passion is finding ways to help people any way I can,” Tim shared. “I love assisting clients find the right insurance plans. Also, in my business I enjoy being able to provide great jobs for people where they feel appreciated and valued.” Tim’s agency is centered on doing both little and big things to help protect and support his clients. “I also believe in contributing to my larger community through charitable work. And by getting involved in my professional associations to help influence the insurance industry.”

### **Kanter’s Keys to Leadership and Professional Growth**

#### **Find your WHY**

“I’ve dialed in on three key areas,” Tim explained. “First, I coach people to determine their WHY, encouraging my staff and my colleagues to explore their own deeper intentions. I share with others that my WHY is my passion for helping



people. About 6 years ago, when I determined my WHY, I shifted my focus to consciously and actively taking better care of my employees, clients and community. I reaped huge dividends with a more successful agency, and a more satisfying personal life.”

By giving his time, talent and treasure to others, Tim makes a positive difference in many lives, from his agency employees and clients to those who are in dire need of a helping hand.

For example, he supports charities that help people in tangible ways. His commitment includes organizations that stop child trafficking, provide wheelchairs to those in need around the world (Free Wheelchair Mission [www.freewheelchairmission.org](http://www.freewheelchairmission.org)). He helps provide food to hungry children through the Children’s Hunger Fund ([www.childrenshungerfund.org](http://www.childrenshungerfund.org)).

Tim walks his talk and doesn’t hesitate to roll up his sleeves and lend a hand — at an orphanage in Bolivia, he climbed up ladders to install ceiling fans.

### **Know yourself**

Tim’s second area of focus is KNOW YOURSELF. “It’s healthy to know one’s strengths and focus on continually learning and being committed to personal growth,” he noted. His work with the professional association, CAHIP, now as president, is a clear testimony to personal improvement with his determination to help his fellow insurance professionals.

“I’m excited about my new position,” Tim shared enthusiastically. “I hope to help more licensed health insurance professionals in California access the many resources of the association. I know I have grown personally and professionally through my membership. I feel driven to enable brokers and agents to learn more about their profession and be the best client advocates they can be.”

## Question your limitations

“Limitations are often self-made,” Tim professes. “This is my third area of focus. We each have more potential than we think we do.” Tim’s commitment to self-improvement comes in part from his habit of regularly learning about leadership, sales and client retention. “One important statistic I recently read was about the sales process,” he shared. **“A whopping 94% of sales professionals quit after the fourth call to a prospect. This is unfortunate as studies show that 60% of all sales close after the fifth call. Clearly, the message here is that persistency equals results.”**

Here’s a good example of questioning your limitations. “Medicare professionals who spend time doing the work for a client’s drug plan renewal is certainly hard to justify when only looking at the commission paid,” he said. “This is low paid work for sure. But think of this work as getting paid for a future referral. I know this to be true. Many of my Prescription Drug Plan-only (PDP) clients have given my office referrals because they appreciated the extensive advisory work we offered on their drug plan.” When their friends ask for Medicare help, they often think of Tim and his office.

This is an interesting thought shift for many Medicare brokers who hold onto the Medicare Supplement policy and avoid the PDP work. That’s a limitation worth letting go of!

## A final Kanter Key to Success: Get involved in your professional association

Tim encourages health insurance professionals to visit their local chapters and consider the many benefits when joining the association. “It is possible that as a member of the association you will find many new friends and supportive colleagues,” Tim tells us. “You continue to grow as a trusted client advisor and win new business as well.” Tim reminds us that like with anything else in life, you get out of it what you put into it — whether that be your involvement in the association, networking groups, or giving clients extra attention.

We know Tim will work hard as our president to bring value to all health insurance professionals and in the process, win new association members.

**Tim Kanter** is president of Get Benefits Insurance Services, Inc. He serves as the 2023-24 president of CAHIP. When not helping other people, Tim treats himself to backpacking in national parks; throwing a dart at a map, and then traveling



there; and committing to too many things.

A few years back, Tim achieved his childhood dream of becoming both an insurance agent and a ninja, aka “Insurance Ninja,” when he earned his black belt in To-Shin

Do. A Ventura County native, Tim lives with his beautiful wife Angela, and their two lovely daughters Megan and Emma.

## Tim Kanter’s Recommended Reading List

- “Find your Why?” by Simon Sinek
- “Little Red Book of Selling” by Jeffrey Gitomer
- “Little Black Book of Connections” by Jeffrey Gitomer
- “The Real Secrets of the Top 20%” by Mike Brooks
- “Spiritual Leadership” by Henry Blackaby

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**<https://getbenefitsinsurance.com>**

**When you join your state chapter, California Association of Health Insurance Professionals (CAHIP), you automatically become a member of your local chapter and the national organization, National Association of Benefit and Insurance Professionals (NABIP).**

**Join CAHIP: <https://cahip.com/join>**

**Join NABIP: <https://nabip.org/membership/join-now>**

## PUBLISHER’S NOTE

We look forward to Tim’s work as president of CAHIP and support his efforts.

For California, CAHIP is the association which is focused on addressing the needs of all California health insurance professionals. This work helps protect our commissions and provides us a path to collaborate with legislators when new ideas/laws are up for consideration. Association board members at the national, state and local levels volunteer to work many hours on critical issues that benefit the 139,000 licensed California life and health insurance professionals.

Membership fees support the survival and growth of our industry. The funds allow all of us access to legislators and make sure the voice of all health insurance professionals is heard. Dues also provide access to a Mentorship program, Healthcare Happy Hour podcasts, NABIP’s Power Hour, Local Chapter Meetings, and much more.

Now is the time for each licensed life and health insurance professional to learn more about the association and get involved by joining and attending online and in person events. We encourage non-members to consider the benefit of membership in CAHIP and support Tim and the many other volunteers in the industry.

California Broker reaches all 139,000 licensed health insurance professionals with our weekly newsletter and monthly magazine. Our goal is to help our subscribers to be the best health benefits advisor possible. Please consider joining CAHIP.

## JOIN NOW

**CAHIP: <https://cahip.com/join>**

**NABIP: <https://nabip.org/membership/join-now>**

# Finding Long Term Care Solutions

## How BuddyIns.com helped me address my client's LTCi needs

**BY DAVID ETHINGTON**

**I**t is no surprise that many of my clients have a fear of how to cover health expenses in retirement. Working through **The Collaboration Center**, I was able to solve my client's complex issues. I experienced the value of collaborating with a subject matter expert (SME) and the process used to clarify issues and develop solutions.

To start, I explored my client's concerns with Danny Wexler, an estate planning expert who assists health insurance professionals with client issues outside of their area of expertise. Danny and I agreed to arrange a call with my client. I introduced Danny as an SME in legal and estate planning. Danny's background is ideal since he has performed these clarity calls numerous times.

The process began with a few questions that led my client to identify their top concerns. Danny suggested some general areas to help frame the conversation. Taxation, running out of money, and the safety of lifelong savings were revealed as possible concerns. The answers clarified my client's priorities. It became clear the top concern was his family's history medical conditions that required years of extensive and complex medical care. The potential cost of care might be exorbitant for him and his wife. He feared that much of their savings could be spent covering in-home care and, possibly, the cost of a nursing

facility. This is when Danny suggested a conversation with Renée Caldwell, a long-term care insurance subject matter expert.

### **LTC specialist comes to the rescue**

Working with Renée was a pleasure. She used a process which has worked for many of her clients over the years. Renée included me in all required steps as I wanted to be involved in and become familiar with all phases of the process. She followed the steps outlined below

### **EXPLANATION PHASE:**

Renée began with an explanation of the LTC products available

- Traditional and Hybrid Life/LTC are ideal products if health and budget allow.
- Annuity/LTC are options for more health compromised people and for those that can do a lump sum premium.

### **INFORMATION GATHERING PHASE:**

With a solid base understanding of LTC products, she moved to information gathering

- Renée took time to learn about my client's health and future concerns
- She submitted the information sans the client identity to the insurance companies to get an idea of coverage

options and to receive a health rating for pricing

- With this research in hand, Renée delved into my client's finances. Using round numbers, she was better able to understand what coverage they could afford and what product was the most suitable.

### **PRESENTATION OF RESEARCH PHASE:**

The next step was to meet and present the research to my client, giving them an understanding of their health rating and financial options.

- Renée knew which products would be most likely and she had narrowed down the three best options.
- My client said he found this step to be very helpful. He was able to see the coverage details for each option. Renée worked to adjust some details and together they narrowed down the priorities of coverage and budget.
- With the best option selected, Renée then emailed me and the client a side-by-side comparison of quotes. She also included a Cost of Care projection so my client would understand how their coverage would support gracefully aging now, and into the future. She was able to illustrate how much of the financial risk they would be able to cover with a LTC product.

#### APPLICATION PHASE:

A few weeks later my client made his decision and we moved to the application process.

- During this time Renée and I went over the client's best option. We agreed I would reach out to my client to check in. I found he was ready to move forward.
- This step usually involves taking an e-application, and then the final process is started.

#### UNDERWRITING PHASE:

Renée set expectations with my client and outlined how to begin the underwriting process.

- She explained that he is responsible for initiating a health interview with the carrier by phone. Renée mentioned, "Once this step is completed, we wait for approval. Depending upon the insurance product and company, this is the only underwriting required. In some cases, the carrier has the right to pull your full medical records."
- **Variables do occur:** Renée explained that underwriting is the longest part of the process. In many cases once the interview and the records are in-house, they are reviewed and approved by underwriting, with an offer of insurance extended.

#### OFFER PHASE:

In some cases, the offer extended isn't at the rating that was applied for. The underwriter might have found information in the medical records resulted in a lower health rating. This means that the coverage will either be more expensive, or the benefits will be reduced.

- Renée has seen some clients accept the offer as is or adjust coverage to stay affordable. With either result, most clients are happy they will receive LTC insurance.
- Although Renée usually has a feel for the carrier products and underwriting, in some cases she will 'shop' the industry and if options are promising she can show different products.

#### ACCEPTANCE PHASE:

My client went through this entire process smoothly.

- He preferred the LTC with life insurance since he knew IF he passed away before filing a claim on his policy

that the death benefit would cover the premiums paid and more. So, his family would receive back all of the fees paid to use for their expenses.

- When my client accepted the offer, Renée let the insurance company know. The company provided both a hard copy by mail and an email copy of the policy.
- Completing the final step, my client accepted the policy and paid the premium to secure his coverage.

#### The Collaboration Center is there when you need it

With this success, I am not likely to become more involved in LTCi as I prefer to stay focused on my area of expertise, health insurance. When I find a client with a need, I know I can bring them to The Collaboration Center and get an SME like Danny to clarify their issues and select an SME specialist who enjoys helping health broker's solve client issues. When the issue can be addressed with LTCi I know I will share in the proceeds. If life insurance, annuities, and other insurance and financial products a part of a client solution, I will also share in the commissions.

You can contact Renée Caldwell through the special link provided at the end of this article. This link enables health brokers like me to not only access specialists to help address my client's issues, but in many cases share in the success of the solution. In this case I received 40% of the total commission.



#### David Ethington

*is VP of the Medicare Division and director of Broker Relations with Commission Solutions, part of Integrity Advisors. His work has excelled*

*due to his commitment to providing the best service to both health clients and health brokers. David respects the hard work it takes to build a book of business and enjoys working with retiring brokers and their families. He serves as the CAHIP-Orange County VP of Membership. David has participated in the commission protection process for seven years. He's also involved in*

*acquisitions, especially in the broker relationship transfer of commissions. David lives in Orange County with his wife and their cats. He is an avid runner and completes several long-distance events annually.*

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#### Renée Caldwell

*is president and owner of Caldwell Insurance Services, LLC. is a member of the Long-Term Care Producers Group, a nationwide group specializing in Long*

*Term Care Products. She is also a part of the BuddyIns community and works nationwide with many different accounts helping to solve LTC planning needs. She is also licensed in 35+ states and is a broker so she can shop with her client's best needs in mind.*

*Renée's commitment to Long Term Care is motivated by having watched her parents care for her grandparents. Due to a lack of planning, her parents had to make important and difficult decisions for their own parents at the end of their lives. Wanting to help people and families be prepared for that difficult time in life, Renée committed herself to guiding families to investigate their options and sensibly manage the long-term care risk.*

California Broker's subscribers can gain access to LTCi subject matter experts like Renée Caldwell via:  
**www.buddyins.com/calbroker**

or

**Contact The Collaboration Center**  
**657-229-2849**  
**Info@healthbrokercollaborators.com**

# Collaborative Selling: Unlocking New Opportunities for Insurance Brokers

By Paul Wirth

**I**n the competitive world of insurance sales, brokers are constantly seeking innovative strategies to expand their clientele and boost revenue. One powerful approach that has gained traction in recent years is collaborative selling, where insurance brokers partner with professionals from diverse fields, such as attorneys, accountants, financial planners, medical professionals, realtors, and more. This synergy between industries opens new avenues for growth, benefits all parties involved, and ultimately leads to enhanced customer satisfaction. In this article, we explore the concept of collaborative selling and discuss the ways insurance brokers can effectively meet and work with these professionals.

## The Power of Collaborative Selling

Collaborative selling is a symbiotic relationship where professionals from different sectors combine their expertise to provide comprehensive solutions to their clients. For insurance brokers, this partnership offers several advantages:

- 1. Expanded Network.** Collaborating with professionals from diverse industries widens the brokers' network and exposes them to a broader client base. This provides access to potential customers who might not have been reachable through traditional means.
- 2. Enhanced Credibility.** Partnering with established professionals lends credibility to the insurance broker's services. Clients are more likely to trust and feel confident in the recommendations given by a team of trusted experts.

- 3. Holistic Solutions.** Collaborative selling allows for the creation of comprehensive solutions tailored to each client's unique needs. The combined knowledge of professionals from various fields ensures that clients receive well-rounded advice and coverage.
- 4. Time Efficiency.** By working with other professionals, brokers can save time on market research and stay up to date with changes in different industries. This enables them to focus more on their core competency of providing insurance solutions.

## Meeting with Collaborators

Building successful partnerships begins with initiating meaningful conversations and establishing strong connections with potential collaborators. Here are some effective ways insurance brokers can meet with attorneys, accountants, financial planners, doctors, realtors, and other professionals:

- 1. Networking Events.** Attend industry and non-industry-specific networking events, conferences, and seminars where professionals from various fields gather. Engage in conversations, share knowledge, and seek common ground for potential collaborations. Organizations like BNI, LeTip, Provisors, and the Exit Planning Institute conduct regular, ongoing meetings where professionals from diverse backgrounds attend.
- 2. Referrals.** Leverage existing clients and business partners to ask for referrals to other professionals they trust. A personal introduction can go a long way in establishing rapport with potential collaborators. I have a semi-formal process where I schedule a time



to discuss who a client's trusted advisors are and then take note of why they use each of them. I also ask for permission to contact them. Being able to say that 'so-and-so' provided the contact information increases the likelihood the trusted advisor will take my call.

- 3. Social Media and Online Platforms.** Utilize social media platforms, professional networks like LinkedIn, and specialized online forums to identify and connect with professionals interested in collaborative selling.
- 4. Community Involvement.** Participate in community events, charity drives, or volunteer work. This not only enhances the broker's reputation but also offers opportunities to meet and interact with professionals from various backgrounds. Your local Rotary Club is a great place to connect with professionals while doing good for your community.
- 5. Professional Associations.** Join local chapters of professional associations related to attorneys, accountants, financial planners, and other fields. Active involvement in such groups facilitates networking and opens doors for collaboration.
- 6. Do It Yourself.** If you're not impressed with people you meet at the various networking events in your area, then create one of your own. Some call these A-Teams – where a group of highly-vetted professionals from diverse backgrounds form their own networking group and meet regularly to learn and share referrals.

### Effective Collaborative Strategies

Once insurance brokers establish connections with potential collaborators, it is crucial to develop effective strategies for successful partnerships. Here are some approaches to foster fruitful collaborations:

- 1. Understand Each Other's Expertise.** Insurance brokers should invest time in understanding the services and expertise of their collaborators. This enables them to align their offerings and create comprehensive solutions that address clients' needs holistically.
- 2. Joint Workshops and Seminars.** Organize joint workshops and seminars that focus on educating clients about the importance of integrating various professional services. These events showcase the collaborative approach and establish the credibility of the partnership. Plus, this is a great way to double the size of attendance at half the cost to host such an event.
- 3. Share Marketing Efforts.** Create joint marketing materials, such as brochures or online content, that highlight the combined services of the collaborative team. This ensures a consistent and unified message is conveyed to potential clients.

- 4. Practice Regular Communication and Feedback.** Maintain open lines of communication with collaborators to exchange feedback and assess the success of the partnership. Regular meetings and progress reviews help identify areas for improvement and address any concerns promptly.
- 5. Refer, Refer, Refer.** Be a giver. Make sure you are listening to your client's needs and making introductions to your partners so that your partners see that you are doing your part to generate opportunities for them. Your clients will appreciate and reward you by relying on you as a source for other needs by referring their friends and colleagues to you.

### Conclusion

Collaborative selling presents insurance brokers with an exciting opportunity to expand their reach, provide holistic solutions, and strengthen their position in the market. By establishing partnerships with attorneys, accountants, financial planners, doctors, realtors, and other professionals, insurance brokers can unlock new doors to success. Engaging in networking, understanding each other's expertise, and implementing effective collaborative strategies will undoubtedly lead to mutual growth and long-term success for all parties involved. The future of insurance sales lies in collaboration, and those who embrace this approach will be well-positioned to thrive in a competitive industry.



**Paul Wirth's** 35 years of experience took him from executive national leadership roles in finance, banking and homebuilding start-ups and Fortune 500 companies, to three different companies of his own. During his corporate journey, Paul was responsible for budgets up to \$25 billion, overseeing sales and operations with hundreds of employees in 18 markets across the nation. As an entrepreneur, Paul took that experience to grow three successful businesses of his own.

Paul is a lifelong student who completed various training and certifications as a Vistage Chair, Exit Planning Advisor (CEPA), Talent Optimization Advisor, and EOS® Implementer. He served on a number of boards for the Builders Industry Association, Council on Aging, and the Exit Planning Institute. Paul combines decades of corporate and entrepreneurial experience in his practice at Blueprint for Entrepreneurial Growth to assist family-owned and private businesses to grow and exit through intergenerational transfers and sale. Paul works with leadership teams to establish solid foundations for growth and then directly with business owners to help them increase the value of their companies for a successful transition.

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# Changing From Medicare Advantage Plan to Medicare Supplement Policy

How to help clients  
make the transition

by Maggie Stedt

a

*You have a great opportunity to assist your clients transition to a Medicare Supplement policy if they meet the underwriting guidelines and follow the requirements for submission.*

**Although I briefly reviewed** the Guaranteed Issue (GI) situations that may apply during the Annual Open Enrollment Period in a prior article, I thought it would be helpful to dive a little deeper into the opportunity for changing plans that could apply to your clients. There are a number of GI situations that could apply for the Medicare Advantage (MA/MAPD) covered person. (This also includes PPO, Select and PACE Plans.)

#### **Do your homework: research carriers**

First, make sure to review the Medicare Supplement carrier's GI guidelines to specifically see

- which Medicare Supplement plans may be offered
- the time frame for submission of the application and materials
- what must be submitted for proof of prior coverage.

These include a copy of the specific change from the MA/MAPD Plan's Annual Notice of Change (ANOC) or a printout from the Medicare Plan finder. A copy of the covered person's current Plan ID Card and a signed Replacement form must also be submitted with the Medicare Supplement application. Several Medicare Supplement carriers require that you submit proof of termination of the MAPD (HMO/PPO) plan to their underwriting division prior to approval of the Medicare Supplement application.

**Trial Period:** The MAPD covered person is within the first year of joining the plan and was first eligible for Medicare when they joined the MA/MAPD plan.

**Medicare Advantage Plan Change to Medicare Supplement Policy during AEP:** There are two specific GI situations that apply. Which one applies depends on if the MA/MAPD carrier offers Medicare Supplement plans or not.

1. The MA/MAPD company offers Medicare Supplement plans. The following year the MA/MAPD plan reduced any of its benefits, increased the amount of cost-sharing or premiums or terminated its relationship with their medical provider for reasons other than good cause relating to the quality of care. The covered person may change from their company's MA/MAPD plan to their MA/MAPD company's Medicare Supplement Plan. Note the cost increase can be as little as a \$1 or more in cost to the covered person.
2. The company offering the MA/MAPD plan does not sell Medicare Supplement plans and one of the following criteria have been met:
  - (a) increased premiums or copayments for Doctor, Hospital or Prescription Drugs by 15% or more
  - (b) reduced the benefits
  - (c) terminated its relationship with their medical provider for reasons other than good cause relating to the quality of care.

If these conditions are met, the covered person may change from their company's MA/MAPD plan to any company's Medicare Supplement plan as offered under the company's GI Acceptance Guidelines.

Another common occurrence is the discontinuation of a MA/MAPD plan in its service area. The covered individual may apply as early as 60 calendar days prior to when the MAPD coverage will end. They can apply no later than 63 calendar days after the MAPD coverage has ended. Please note that I am referring to the California-based Guaranteed Issue Guidelines. They vary from state to state.

#### **Other Guaranteed Issue situations for changing from MA/MAPD to a Medicare Supplement plan:**

- The MA/MAPD plan covered person moves out of the plan's area.
- The covered person dropped a Medicare Supplement Policy to join a MA/MAPD plan and has been under the plan for less than a year and wants to return to the Medicare Supplement Policy.
- The covered person leaves a MA/MAPD plan because the company has not followed the rules or misled them.
- The covered person has a loss of full MediCal benefits. Therefore, they are no longer eligible due to an increase in income or assets and have been returned to coverage under Original Medicare so they are unable to continue under their MAPD plan.
- Note that there are specific GI situations that apply to PACE covered individuals.

Covered individuals must disenroll from their MA/MAPD plan by contacting the company or CMS or enrolling in a Stand-Alone Drug plan. For prescription drug coverage they should enroll in a Stand-Alone Drug plan during AEP.

### **Seize the day!**

You have a great opportunity to assist your clients transition to a Medicare Supplement policy if they meet the underwriting guidelines and follow the requirements for submission. Review each carrier's guidelines closely — submission requirements may vary for each. Call broker services if you need clarification.

And, in reviewing the plans and changes with your client, make sure your client understands the need to enroll in a Stand-Alone Prescription Drug Plan to continue to have prescription drug coverage. Emphasize that to continue coverage under the Medicare Supplement Policy they will have to pay the premiums for their policy and their drug plan. Explain that they will now present their red, white and blue Medicare card plus their Medicare Supplement Insurance Policy ID card when receiving medical services. They will now show their drug plan ID card for prescriptions.

Armed with a clear understanding of the Medicare Supplement Guidelines, you can ensure timely submissions of accurate information and successfully help your clients with a smooth transition.



**Maggie Stedt** C.S.A, LPRT, is an independent contractor/licensed agent and consultant. She is a certified senior advisor and lifetime member of NAPIB's Leading Producers Roundtable at the Soaring Eagle Level. She has over 40 years of experience in essential areas of the insurance industry including sales and sales management, product development and product management. A dedicated leader, Maggie currently serves on the NAPIB Medicare Advisory Committee. She is founder of the annual Senior Medicare Summit. Under her leadership, attendance grew from 200 in 2010 to nearly 1,000 attendees in 2022. She served as past president of CAHIP; NABIP Region 8 Membership Chair 2014 to 2018 and past president of OCAHU, serving two terms.

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# Supercharge Your Pre-AEP Marketing and Communications

*Be ready to engage with your clients and grow enrollment*

**By Austin Felch**

*The Annual Enrollment Period (AEP) is the pinnacle of the year for independent insurance agents selling Medicare plans. With millions of Medicare beneficiaries to serve and intense competition in the market, it's crucial to be well-prepared. Don't wait until October 1 to kickstart your efforts! In this article, we'll explore powerful pre-warming activities that will help you stand out, engage your target audience, and optimize your success during AEP.*

## **When is the Medicare Annual Enrollment Period (AEP) for 2024?**

The Annual Enrollment Period for 2024 is Oct. 15 – Dec. 7, 2023. Any changes made to coverage during this time will take effect Jan. 1, 2024. Attempts to directly try to sell or market plans and products before Oct. 1 are prohibited.

## **The MCMG draws a hard line between “communications” and “marketing”**

**Communications:** Activities and use of materials to provide information to current and prospective enrollees. This means all activities and materials aimed at prospective and current enrollees, including their caregivers and other decision makers associated with a prospective or current enrollee, are “communications” within the scope of the CMS regulations at 42 CFR Parts 417, 422, and 423.

**Marketing:** A subset of communications that includes activities and use of materials by the Plan/Part D sponsor with the intent to draw a beneficiary's attention to a plan or plans and to influence a beneficiary's decision-making process when selecting a plan for enrollment or deciding to stay enrolled in a plan (that is, retention-based marketing). Additionally, marketing contains information about the plan's benefit structure, cost sharing, measuring, or ranking standards.

**The difference? Communications are purely educational.**

**It is imperative to understand that difference and comply strictly to CMS regulations.**

### ***What you CANNOT do before Oct. 1:***

- Connect or advertise (in person, by phone, direct mail, email, etc.) in any way to discuss or promote upcoming plans/products
- Host any marketing/sales events that promote upcoming plans or products
- Acquire a Scope of Appointment (SOA) form with the intent of reviewing new plan information.

## **Compliant Pre-Warming Strategy**

It may seem like your hands are completely tied, but this is not the case.

Even though the race doesn't start until Oct. 1, you can start figuratively putting the tires on your car, giving it a tune-up, etc. Use this time to get your market ready so that when it is go-time, your audience knows who you are and views you as their go-to source.

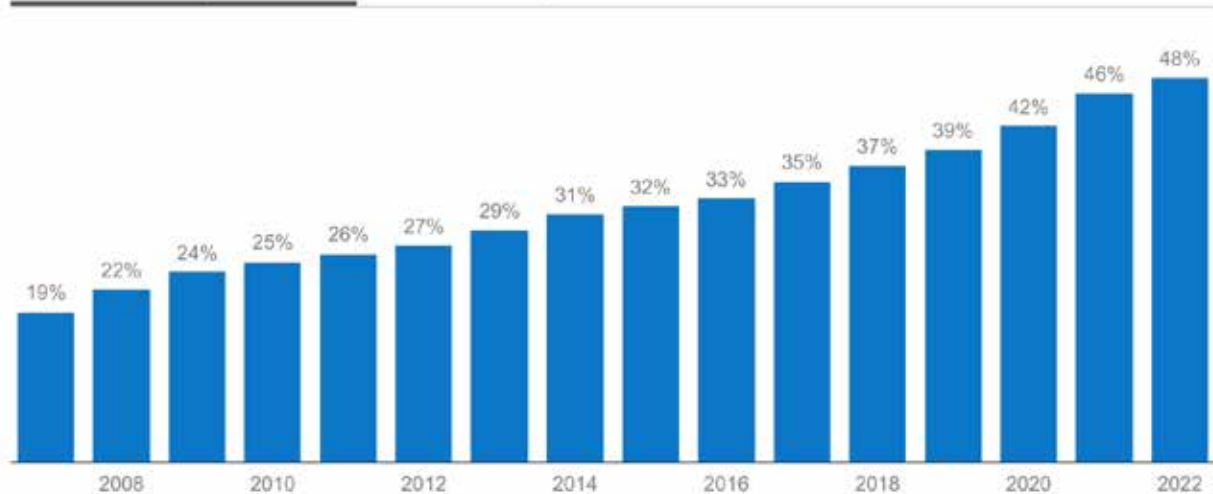
### **Pre-warming activities to consider:**

1. **Define your target market.** Is there a slice that you will be working with within the Medicare beneficiary market, such as married couples, nursing home beneficiaries, specific cities you are expanding to?
2. **Know your audience.** What are their interests? What do they read, watch? What are their primary concerns? Who do they follow on social media?
3. **Research your competitors.** What are they doing that you aren't? How is your niche different from theirs? How can you outshine them?

Figure 1

## Total Medicare Advantage Enrollment, 2007-2022

Medicare Advantage Penetration Medicare Advantage Enrollment



NOTE: Includes Medicare Advantage plans: HMOs, PPOs (local and regional), PFFS, and MSAs. About 58.6 million people are enrolled in Medicare Parts A and B in 2022

SOURCE: KFF analysis of CMS Medicare Advantage Enrollment Files, 2010-2022; Medicare Chronic Conditions (CCW) Data Warehouse from 5 percent of beneficiaries, 2010-2017; CCW data from 20 percent of beneficiaries, 2018-2020; and Medicare Enrollment Dashboard 2021-2022.

KFF

**Medicare Advantage enrollment continues to rise and is projected to continue. Chart from Kaiser Family Foundation**

- 4. Make sure marketing channels are compliant.** Get your ads, websites, handouts, presentations (any marketing material) approved in advance so there aren't any delays when it's mission critical time.
- 5. Calendar your marketing events.**
- 6. Connect with current clients** to review their current year plan benefits. Note, **you can only discuss their current year**, but in doing so, you will learn about what their needs are and have a warm call to make come Oct. 1.
- 7. Educate your audience** on when AEP is and what happens during that time.
- 8. Continue current marketing activities** geared toward the "Turning 65" audience.

Preparing for AEP doesn't have to be a waiting game. By implementing these pre-warming activities, you can establish your presence, engage your target audience, and position yourself as the go-to agent for Medicare plans.

Start revving your engine now, so when the green flag drops on Oct. 1, you're ready to sprint ahead of the competition. Don't miss out on the opportunity to make this AEP your most successful one yet!



**Austin Felch, COO**, joined AGA in 2019 with years of Medicare industry experience and running a national compliance program. His career has been focused on working

with agents and agencies to develop compliant marketing campaigns that have the best ROI possible.

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# **Anticipating the Future: Legislative and Compliance Matters to Monitor**

**By Misty Baker**

**A**s we move into the last quarter of 2023, it's important for brokers to remain vigilant about upcoming developments. Your clients rely on your expertise and guidance to navigate important deadlines and understand their responsibilities when it comes to changing laws and legal rulings. Three significant deadlines and issues your clients need to know about are Medicaid Unwinding, Gag Clause Attestations, and the ruling on Preventative Care.

## **Medicaid Unwinding**

In March 2020, Congress provided additional Medicaid funding to states as part of COVID-19 relief legislation. States had to meet certain requirements, including a “continuous coverage” provision that prevented most Medicaid enrollees’ coverage from being terminated during the Public Health Emergency (PHE). Since the PHE expired in May 2023, states are starting the process of “unwinding” by reviewing Medicaid eligibility.

It is estimated between 15 and 18 million people will lose Medicaid coverage during this process. Affected individuals have a special enrollment period that lasts until July 2024 to explore other coverage options. Approximately four million people could qualify for employer-based insurance plans. Employers should communicate this to all employees enrolled

in Medicaid that could be affected by the unwinding process before open enrollment starts this fall. **Meanwhile, brokers should provide information about private health insurance or Medicare-related products to their affected clients.**

### Gag Clause Attestation

A “gag clause” is a contractual provision that imposes limitations on the data and information a health plan or issuer can disclose to another party. Both employer groups and insurance carriers must attest that their contracts with providers do not have gag clauses. The rule against gag clauses is relevant to contracts between a healthcare plan and various entities such as healthcare providers, provider networks, third-party administrators (TPAs) or other service providers facilitating access to provider networks.

Employer groups of all sizes are required to submit a Gag Clause Prohibition Compliance Attestation by the end of the year. Simply put, it is proof you are in compliance with rules found in the Internal Revenue Code, Employee Retirement Income Security Act (ERISA), and Public Health Service Act. The initial attestation will cover the period from Dec. 27, 2020, or the effective date of the applicable group health plan or health insurance coverage, whichever is later, through the date of attestation. Employers will then need to submit subsequent attestations by Dec. 31 of each year.

**Moving forward, brokers should carefully review contracts to ensure there are no gag clauses.** Banning these types of provisions prevents companies from refusing to share provider-specific

data, electronic access to anonymous claims, access to financial and provider information as well as provider information such as names or medical specialization. One example of a gag clause would be a contract between a group health plan and a TPA that states the plan will pay providers at designated “Point of Service Rates,” but the TPA contractually prohibits the plan from disclosing the rates to participants.

### Ruling on Preventative Care

A federal judge recently struck down a provision of the preventative care mandate in the Affordable Care Act (ACA), claiming it violated the Constitution. The March ruling came after a legal challenge by individuals and businesses from Texas who argued the mandate went against their religious beliefs. A nationwide injunction was then issued, affecting certain preventative care coverage. The impact on your clients depends on whether they have fully insured or self-funded plans.

Employers with self-funded plans have the option to change their plans in response to the injunction, while fully insured plans are not immediately affected. Employers with self-funded plans can choose to implement cost-sharing, meaning enrollees would have to pay “out-of-pocket” for the affected preventative care services, such as cancer screenings, mental health screenings, HIV screenings, diabetes screenings, colonoscopies, pap smears and tobacco cessation services.

Before making a decision on cost-sharing, it is important to consider that preventative screenings help to identify and address issues early on, potentially

avoiding costly and invasive treatments in the future. Additionally, employees are more likely to take part in preventative screenings if there is no cost to them at the time of the service. There is no requirement for employers to make these changes, and there is no specific timeframe for the decision. The Justice Department is appealing the decision, so a final resolution may not be reached until 2024.

In the latter half of the year, there are various legislative and regulatory issues to keep an eye on, and while the issues mentioned here are important, they are not the only ones. **As brokers, it is crucial to assist clients in navigating compliance issues and ensure they have a clear understanding of their responsibilities. By providing guidance and support, brokers can help clients stay informed and prepared for any upcoming legislative or regulatory changes.**



**Misty Baker** is director of compliance and government affairs at BenefitMall. Misty is an Affordable Care Act compliance and agent advocate, specializing in ACA, ERISA, FMLA,

COBRA, and legislative advocacy for over 20 years. She was a registered lobbyist in Texas for four years and is a strategic leader focused on compliance, agent knowledge, legislative advocacy, and ultimate client understanding of how to be successful in the changing world of compliance. Her passions include agent education, insurance advocacy inside and outside of the Capital, and compliance.

Misty was awarded one of the most influential women in employee benefit advising, by Employee Benefit Advisor 2015. She’s been a Member of National Association of Benefits and Insurance Professionals (NABIP) since 1999, where she’s currently serving on the NABIP Legislative team.

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**As brokers, it is crucial to assist clients in navigating compliance issues and ensure they have a clear understanding of their responsibilities. By providing guidance and support, brokers can help clients stay informed and prepared for any upcoming legislative or regulatory changes.**

# **Nine Services to Offer as an Employee Benefits Broker**

Lean on your General Agency to help build offerings of popular services

**By Alex Strautman**

To compete more effectively as an insurance broker in today's marketplace, it's important to offer services your prospects and clients want – and need. This article presents highly desirable programs and services you may want to consider.

## **1 : Shop the Market**

Everyone wants to know they are getting the most value for their health care premium dollar.

You can use technology – like Word & Brown's WBQuote platform – to show your clients a comparison of available plans. Our proprietary quote engine helps you compare their current plan(s) against different renewal options. We even highlight plan differences, so your clients can see how plans stack up against one another.

Because there is a broad portfolio of products on the market, it's easy to tailor a program to fit each of your groups' needs. Consider what's available for Small Group and Large Group Major Medical, Dental, Vision, Disability, and Life, as well as Voluntary and Worksite products, Employee Assistance Programs, administrative services, and other programs and services. These are offered through a range of regional and national carriers and administrators.

## **2 : Pay attention to Alerts**

Many GA's provide automatic alerts when deductibles apply before benefits kick in on plans

your clients are considering. Be aware that there may be plans that cannot be sold together. Make sure you check on the combinations you are offering to save you embarrassment or having to go back to your client with a different proposal. Again, many general agents will alert you to this.

## **3 : Translations**

There's a lot of diversity in the workplace. Your GA can help you be better prepared.

Word & Brown's platform lets you choose the language for your proposal and new hire worksheets. You can select from English, Spanish, Chinese, Korean, or Vietnamese.

## **4 : Negotiation**

If you have a Large Group case, customized side-by-side benefit and rate comparisons can make it easy for clients

to make a final plan selection. Establish long-term relationships with your GA and carriers to enable easier negotiations on Large Group rates on your client's behalf.

## **5 : Network Comparisons**

Work with a GA that employs Provider Search technology using accurate data from each carrier. That means gives

you access to the latest information when looking up doctors, medical groups, and hospitals available with each plan your clients may be considering. If in doubt, you can submit a provider search request, and a GA team will do the comparison work for you.

## **6 : Custom Presentations**

Many GAs like Word & Brown have experts available for onsite, virtual, or recorded enrollment

meetings. We'll review benefits, explain carrier perks, check employee applications, and finalize and submit paperwork to the carrier. Our multilingual team is available to assist in California, too.

## **7 : Online or Paper Enrollments**

You can choose a paper enrollment or an online enrollment. We'll even do

both, depending on what works best for your client and their employees.

## **8 : Expert Enrollments**

For your enrollment meetings, personalized employee worksheets and kits, customized with the employer's name and logo are available.

## **9 : Service After the Sale**

Make sure you work with a GA you can count on throughout the year to deliver the support you

need to answer questions on compliance, claims, and other matters important to your clients. Word and Brown has been delivering "Service of Unequaled Excellence" for nearly four decades.



### **Alex Strautman**

*is a senior copywriter at The Word & Brown Companies. He has decades of experience writing for the insurance industry. He has been with Word & Brown since 2011.*

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# When Preparation Meets Opportunity

*You'll be ready for your busiest season with these eight tips*

**By Kim Barnaby and Randa Reynolds**



**W**hether this coming October kicks off your first 4<sup>th</sup> quarter or your twentieth, you know it's the busiest time of the year — this time is always compounded by year-end holidays and your desire to be present for it all. So, what can you do to stress less and be ready for all the opportunities that come your way?

**Prepare...starting now.**

At Warner Pacific, we've been working overtime to support our brokers' back office needs during this busiest time of year as a leading general agency since 1982. In fact, we've redefined the season for 2023 as the "5<sup>th</sup> quarter" since it extends beyond the current year through January. It's what we live for — *really* — so we're happy to share these eight top tips to help you best prepare.

- **Have employer group conversations early:** Start these conversations as early as possible. Ask questions like: Have you added more employees? How many are eligible? Any with special provider or medication needs? What are your goals and desired outcomes for your program? Are there things you are looking to add? Can you create pre-recorded messages for new hires as well as host several live virtual sessions?

- **Come up with an action plan together:** Meet with your general agency sales consultant to share what you've learned and come up with an action plan. Discuss



needs, expectations, groups you want to focus on, how you can customize for each group, industry and carrier trends, timing for carrier rate releases, carrier bonus programs and what you can do early. Then, hop on things you can be proactive about like renewals.

• **Rely on technology to help streamline:** There are so many technology tools available today; rely on them to help streamline the work during this time so that it's cleaner, quicker and more efficient. For example, Warner Pacific has proprietary technology tools to help with everything from researching and comparing plans to quoting and enrollment.

• **Be strategic about social media:** Your clients and prospects likely aren't interested in your personal narrative — unless it hooks them into why you do what you do for them. Give them a reason to follow and engage with you. Think about what content would be most relevant and valuable to them during this time and then share it with a comment offering additional perspective.

• **Be open to expanding:** Are you looking to add more to your portfolio this year? Don't be afraid to share creatively ideas with your employer groups and sales consultant. Now is a great time to discuss third party administrator (TPA) resources and ancillary products like dental, vision, life, legal, pet insurance, critical illness, education loan repayment, 401(k) matching programs and more. Studies show employees are clearly

showing interest in being offered a variety of options. Examine demographics with your client groups to see what a fresh array of products could be offered to show workers they are being heard. Also, touch on resources for administering programs like COBRA if appropriate.

• **Always keep compliance in mind:** As a broker, your employer groups look to you for more than just choosing and enrolling their employees in the right plans. They have legal obligations and regulations to meet. At the same time, you have broker compensation disclosures. Ask your sales consultant to help you understand and stay on top of these compliance issues.

• **Help move the process along:** Things naturally take longer during the 5<sup>th</sup> quarter so plan to do what you can to help move the process along. Use technology instead of paper, especially for groups with employees in multiple locations. Submit groups as early as possible. And, again, rely on your sales consultant to leverage their relationships and navigate through any bumps in the road.

• **Take care of yourself:** Lastly — though this might be one of the most important tips — you are only as good as your health and well-being during this time of year, so don't compromise it for a few extra sales. Prioritizing self-care will benefit you and your career in the long run. Eat healthy foods, get enough sleep, stay active and find time to relax and reset.



**Kim Barnaby** is Director of Sales, Southern California for Warner Pacific. She has spent the majority of her career in the health insurance industry. Prior to joining Warner Pacific in 2004, she worked on for an insurance carrier overseeing the General Agent Sales Channel. She can be reached at [Kim.Barnaby@warnerpacific.com](mailto:Kim.Barnaby@warnerpacific.com).



**Randa Reynolds** is Director of Sales, Northern California for Warner Pacific. She has worked in the healthcare industry for most of her professional career, beginning at HealthNet. After Health Net, she transitioned to Kaiser Permanente where she spent almost 18 years in several sales roles. She can be reached at [Randa.Reynolds@warnerpacific.com](mailto:Randa.Reynolds@warnerpacific.com).

**Learn more about this full-service general agency at [Warnerpacific.com](http://Warnerpacific.com).**

# Steer Through 4Q With Humor and Self Care

***Rock your world, don't let it rock you!***

Getting through 4<sup>th</sup> quarter is a bit like taking a flight through a line of thunderstorms. You're still going to get to your destination, but it's going to get a little bumpy. Your safety is the airline's #1 purpose. And today your well-being is my #1 purpose. So, buckle your seatbelt and put your tray in the upright and locked position and let's go!

## **Why is 4<sup>th</sup> Q such a challenge?**

There are a ton of factors that contribute to the turbulence in your fourth quarter:

- Time pressure
- Heavier workloads
- Increasing demands from customers
- Pressure to hit targets
- Year-end closure
- Upcoming holidays – no matter what you celebrate!

Add to those the ongoing demands of financial pressures, market competition, regulatory changes, and the lingering effects of the pandemic. It may come as no surprise that many insurance advisors report being more stressed than their investors!

In a survey of brokers by Ecclesiastical, 68% experienced a mental health issue in the last 12 months (up from 57%). More than half of those surveyed (61%) reported stress, with additional reports of anxiety (41%), feeling overwhelmed (36%) and depression (14%). Women were — not surprisingly — more stressed than their counterparts. (Go figure!)

**BY KARYN BUXMAN**



## What are the ramifications?

We talk about stress — even joke about stress. But truthfully, the effects are costly, and in some cases, even deadly.

*Stress can make you dumber.*

High levels of stress overload your prefrontal cortex and pull much needed brain power to your limbic system. And really, during the 4<sup>th</sup> quarter, how much brain power can you afford to lose?

*Stress causes physical pain.*

Raise your hand if you've ever had tight shoulders, a stiff neck, or sore jaws from grinding your teeth.

*Stress can make you sick.*

Your immune system takes a hit, and this can lead to anything from coming down with a cold or sore throat to fanning the flames of pre-existing conditions like diabetes or heart disease.

## What's a broker to do???

Your business revolves around helping people plan ahead. Are you doing that for yourself? Knowing you're stressed and recognizing that it's harmful isn't enough. What actions are you taking to keep yourself performing at your best?

## Here are 5 suggestions to put into place now, before the 4<sup>th</sup> quarter weighs you down.

### Sleep

How often do you go to bed tired but wired? Getting enough sleep — and that being quality sleep — is one of the best things you can do for yourself. This means at least 6 hours, and 8 is still shown to be best for most people — and yes, all in one night!

I can hear many of you now saying, "I don't need that much sleep. I've been getting by on 5-6 hours of sleep for years." And I would ask you: "At what cost?"

The signs of not enough sleep short-term are obvious: needing that extra shot in your latte; having to reread a file because you weren't able to comprehend it the first time (or second); or every time you see a couch — overcoming the overwhelming desire to lie down on it! Nap attack!

But the consequences of chronic sleep deprivation may not show up for months, or even years. Too much stress produces cortisol which causes inflammation in your body. This can show up over time through heart disease, endocrine disease and autoimmune disease. But all is not lost! Stress is a response to circumstances, and you have the power to control your response by being proactive.

My evening ritual helps me sleep like a baby: a couple of hours before bedtime I soak in a hot bath with bath salts, a



candle, some music, and occasionally a glass of wine. Then once I'm ready to call it a night, my husband reads to me in bed (he's an incredible romantic, but that's another article). I couldn't stay awake if you paid me!

Here are some suggestions from fellow brokers (and other experts!) on getting a better night's sleep:

- Power down technology at least an hour before going to bed (yes, that includes iPads, tablets and Kindles)
- Avoid heavy meals before bed
- Limit caffeine and alcohol in the hours leading up to bedtime
- Avoid long naps during the day
- Avoid overthinking in bed — keep a note pad to write down thoughts and then let them go

## Food for Nourishment

Schedules get hectic. You feel fatigued. And before you know it, you're reaching for potato chips and Oreos. Sometimes "ya gotta do what ya gotta do." But after a steady diet of comfort food, you're going to start feeling lousy. As the saying goes, "Garbage in, garbage out." Fuel yourself with highly nutritious intake to contribute to high-performance output.

You don't need a neurohumorist telling you what you should eat. I'm just nudging you to think this through ahead of time and do what you can to create the best options for yourself before you're in the thick of things.

Here are what brokers have told me they do for 4<sup>th</sup> quarter:

- Have meals prepped ahead of time, stored in the freezer and ready to go
- Stock a supply of healthy snacks at hand including nuts, protein bars, and fruit
- Sign up for meal subscriptions that reduce most of the planning and prep time
- Assign other family members to oversee fixing a (healthy) meal
- Accept (or solicit!) the kindness of friends and family members to do your grocery shopping or bring you dinner

## Mindfulness/meditation

You know your body needs breaks. But science now supports that, in addition to sleep, your brain needs breaks, too. Short, intermittent breaks throughout your day can help you be more focused, decrease anxiety, and enhance your memory.

A ScienceDirect study found that folks who were not experienced meditators gained benefits from 13 minutes of meditation over 8 weeks (but not 4). Those numbers won't necessarily be

the same for everyone, but hey! If you start NOW, you could be performing much better by the time Q4 runs over you. There are loads of apps and social media videos that can provide some guidance if you need it. My personal go-to is Insight Timer, available for free at your app store or you can go to their website.

Don't have 13 minutes? How about 5? How about just taking a moment to push back from your desk and reflect on a happy memory? Or something you're grateful for? Or even just your breath. Micro-mindfulness breaks will have a cumulative effect over time if you practice them consistently.

## Movement

Pick up any book on stress management and you'll find that exercise is one of the top recommendations. And if you can, squeeze in regular exercise during this time period — yay you! But exercising 20-30 minutes a day and then sitting for the rest of the day isn't healthy.

According to Forbes, "For a typical person, more than half their day is spent sitting. The normal office worker sits a shocking 15 hours a day. And people who have long commutes, even more." Yowzer! That's a lot of time sitting on our butts.

Rather than being focused just on exercising, think in terms of moving throughout the day. Standing, stretching, and walking during the entire day will keep your mind and body performing better.

In my office, we practice "exercise snacks." (Note: Find these in the Cleveland Clinic website. these are not as tasty as Oreos, but in terms of health, they're much better for you.) Exercise snacks are similar to high intensity interval training (HIT). Once an hour you do something that will get your heart rate up for two minutes (think climbing stairs, jumping jacks, jumping rope, pushups).

Set an alarm on your phone, your watch, or your computer to remind you to push away from your desk once an hour. Just 2 minutes of movement can boost your brain power and give a shot of energy that will carry you over until the next hour.

Linda Lalande, the editor of CalBroker, shared she does a reminder every 30 minutes – and vows to spend those 30 minutes focused on ONE chosen task without interruption. This can protect you from the ever-popular myth that we CAN successfully multi-task. NOT – but again that's another article! So, if you are going to write, don't let emails, texts, bopps, bings or dogs distract your focus. It's amazing how much you can get done in a focused 30 minutes!

## Mirth

No joke! Humor is one of your best defenses against stress. It's free, it doesn't require any special equipment, it can be practiced in any environment, and you don't even have to be funny!

Remember earlier in this article where I told you about the negative ramifications of stress? Science now shows that humor can counteract all those negative effects. By lowering stress hormones, humor can:

- Lower your perception of pain
- Relax your muscles
- Boost your immune system
- Improve your mood
- Recapture your lost brain power

**As per all the suggestions mentioned, the trick here is to plan ahead.** When you're most in need of humor is when you'll least be able to find something funny. Manipulate your environment now to make humor easily accessible when you need it. 15-20 minutes a day is a great start.

16-Bookmark **short funny videos** like this one: "Yipick from Home Depot"

17-Have a stash of **funny memes** (Pinterest and Google are great sources)

18-Bookmark **funny podcasts/radio shows** like Cabin Pressure (Note: they're A-Z so start with Abu Dabi)

19-Keep **funny books and audiobooks** on hand (pick from Tina Fey, David Sedaris, Trevor Noah, Amy Poehler, Jim Gaffigan, and many more)

20-Note where your **favorite comedians** are streaming (my favorite go-to is Mike Birbiglia on Netflix)

21-Set yourself up for **success**. Don't make your brain think harder when you're already under pressure. You don't need to do all the above suggestions. You don't even need to do half of them. Just commit to one or two that you will practice consistently and make your travels over this last quarter so much smoother.

A Southwest flight attendant gave safety instructions on one of my flights: "In the case of an emergency, two oxygen masks will descend from the overhead compartment. If you are traveling with a child — or someone who's behaving like a child — put your own oxygen mask on first. And if you're traveling with more than one child... Well, pick your favorite!"

Don your "oxygen mask" and may your Q4 be smooth sailing.



**Karyn Buxman, CSP, CPAE, is CEO and founder of HighPerformanceHumor.com. She is a TEDx speaker, successful author, and neuro humorist (she lives at the intersection of humor and the brain.) A pioneer in the emerging science of applied humor, Karyn helps high performers expand their influence, strengthen their relationships, and boost**

*their resilience. She's one of 265 people (and only 58 women) in the world to be inducted into the National Speakers Association's Speaker Hall of Fame. (If that's not an indictment – oops I mean, endorsement!) While addressing the Million Dollar Round Table, Karyn once unified an international audience of over 10,000 insurance professionals from 78 countries with laughter that transcended the language barrier. Karyn is serious about humor!*

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# Consider CBD for Aging Gracefully

## 2.2 Billion Industry is NO Hallucination

### *What you need to know for yourself, and your clients*

**By Elisabeth Mack, RN**

**H**appy Fall as we beckon the coolness to return! As you approach the special people you've cultivated relationships with, some for many years in your senior book of business, consider "turning them on" to the very real health benefits of adding CBD to their lives. If you haven't thought about CBD and seniors, take a look and bring them the good news! It might just spark some interest and be a fun and unusual topic to explore! It could set you apart from others who have not taken the time to educate themselves about this booming industry that has so many terrific and proven health benefits.

If you thought it was a passing trend, think again – just in California it's a \$2.2 billion industry (yes that's B), according to Grandviewresearch.com. And is projected to grow at rate of 12.2% from 2023 to 2030. Why? The growth is attributed to the rising awareness regarding the use of cannabis products for pain management therapies. As ironic as it may seem, cannabis is serious business – especially in California!

**See sidebar and note how MEDICAL CANNABIS is a whopping 75% of this massive and quickly expanding market.**

#### **Now have I got your attention?**

Surprise, surprise! It's not youngsters driving the marijuana market like you might have assumed. **Adults over 65 are one of the fastest growing demographics for CBD and cannabis medicines.** This according to the "Journal

of Cannabis Research." Many are looking for a natural way to avoid medications, as polypharmacy can harm the body by depleting nutrients and causing side effects. Medications were not meant for the long term. Yet many aging and elderly have chronic conditions that prompt them to take pharmaceuticals for years on end!

#### **What a little flower can do**

Replacing certain medications with CBD can be very effective.

In the study cited above by the Journal of Cannabis Research, "Overall, results suggest medical cannabis was safe, well-tolerated, and associated with clinically meaningful reductions in pain in this sample of older adults."

#### **Aging gracefully is about maintaining functionality**

Being able to stay independent and active as long as possible is ideal — to continue to work, dance, draw, travel, move freely with a daily walk or bike ride, play with your grandchildren (lucky you!), garden, cook and enjoy a good meal.

The enemy of maintaining physical vitality and strength to stay independent is INFLAMMATION. Reducing it is our #1 goal. Cognitive changes such as memory loss, confusion, or even poor sleep can scare us into a doctor's visit, but traditional pharmaceutical solutions don't often resolve the situation.

Cannabidiol, or CBD is a natural solution that many elderly effectively turn to for relief from inflammation in the body causing stiffness and pain, and in

the brain causing confusion, depression and memory loss. CBD acts as an anti-inflammatory agent, activating over 70 targets in the body and brain to restore balance and preserve function. CBD is the part of the plant that is 'non-impairing' meaning it does NOT get you 'high.'

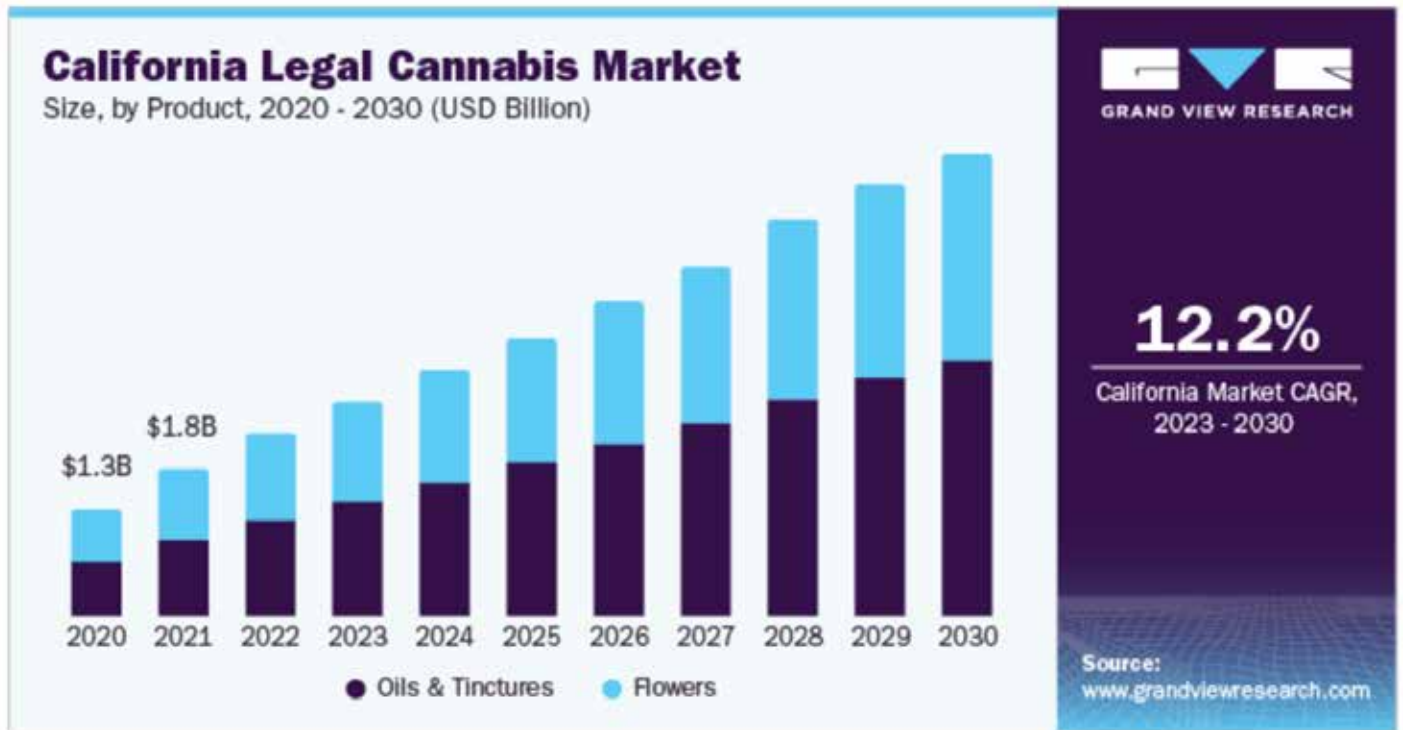
CBD is also under a U.S. patent as a neuroprotective agent, helping the brain recover from ischemic insults such as stroke, or from neurodegeneration caused by Alzheimer's or Parkinson's Disease. The FDA approved Epidiolex is the first CBD drug to treat seizures related to 2 rare diseases. It's a purified version of CBD. I predict there will be more to come as research continues. Watch a webinar on how CBD & Cannabis can protect and heal Dementia.

(<https://holisticaring.com/senior-care/>)

#### **How CBD helped Lorraine**

We've helped hundreds of families add CBD and cannabis products to their treatment regime. Lorraine was one of my favorite clients, who was brought to our firm by her daughter who did not want her on antipsychotic medications with a Black Box warning. She was already in hospice at that point. We added CBD products with low doses of THC over several months, reducing Lorraine's anxiety and agitation, reducing her pain, improving her sleep, and restoring her appetite. Lorraine came off pharmaceuticals and hospice services and lived another two years. She was able to enjoy her family, and they were comforted with a much easier process.

More commonly, we address daily



aches and pains. Aging adults who want to keep golfing, dancing, camping, hiking, or traveling can add daily CBD to replace the Motrin (which also has a Black Box warning), Zoloft, Ambien, and many more drugs.

Taking CBD helps balance the endocannabinoid system, a cellular feedback mechanism that cannabis compounds supplement. CBD helps many seniors feel better — avoiding or minimizing more costly prescriptions, doctor visits, side effects, with more efficacy and peace of mind. Also, when you feel better physically, your mental health improves as well!

### Education on CBD is necessary

Savvy seniors — especially in California — are making their way towards CBD. But there’s a lack of education on CBD and cannabis products, and doctors aren’t taking the lead.

**As an agent with personal contact with your clients, you are in a unique position to make educated recommendations about the advantages of cannabis to the people you care about and serve.** You can personally help educate them on how to improve the quality of their lives.

The fact is, proactive aging adults are opting for natural measures, and taking

responsibility for their own self-care. Starting at 50 is easier and more effective at building up your endocannabinoid system than beginning at 65, but it’s never too late. Many 80-year-olds are thriving again with CBD supplements, and observational studies are confirming results.

### Ask yourself: what do I need to stay healthy, and what is in the way?

It is commonly known and accepted that good health starts with a healthy diet and a good dose of exercise. As my fellow presenter at LAAHU earlier this year, Dr. Anoop Kumar, advocates: “Nutrition, Movement, Connection and Rest” constitute the foundation of health and healing.

(See article June issue: *Your Clients Must Know That Healing Is Possible*)

Dr. Kumar was a recent guest on our podcast and enlightened listeners with his inspirational guidance.

And we know that “lifestyle medicine” works, but many need help to get motivated and moving. That’s where the power of CBD comes in.

CBD is known to relieve aches and pains enough to get you on the trail

again, and help you sleep better to restore energy and build your vitality.

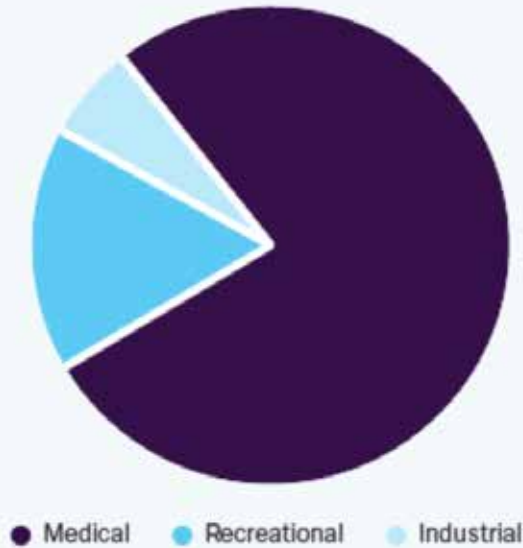
**Let me repeat: CBD is the part of the plant that is ‘non-impairing’ meaning it does NOT get you ‘high.’**

There are many ways to ingest CBD including, of course, inhaling the smoke from the cannabis flower using a vape pen, or pipe. But if that’s not your scene, inhaling can be totally avoided by using tinctures, oils, capsules, tablets, patches, topicals, edibles and beverage products. The market has gone wild with creative substances and edgy colorful packaging to inform and attract people curious about enhancing their health. So, take advantage and visit a local dispensary. Become more familiar with what’s out there, and how you and your clients can benefit.

All products come with different doses of CBD and learning the right combinations for your particular case is critical. For instance, CBD is combined with THC in various ratios because THC has been proven to boost CBD’s effectiveness. And vice versa – you will see products that are mostly THC with a small ratio of CBD because it helps THC work better, and blocks some of the

# California Legal Cannabis Market

Size, by End-use, 2022 (%)



GRAND VIEW RESEARCH

**\$2.2B**

California Market Size,  
2022

Source:  
[www.grandviewresearch.com](http://www.grandviewresearch.com)

impairment that comes from using THC alone.

### Here are some CBD tips:

- CBD is the most abundant non-impairing cannabinoid in the cannabis plant.
- CBD is best for inflammation, soreness, stress, sleep and an overall balanced body.
- THC is the most abundant cannabinoid in cannabis and is what causes the 'high.'
- The 2 basic strains are SATIVA for energy boosts, and INDICA for relaxation and pain.
- THC is best for pain, sleep, appetite, immune imbalances, spasms and nausea.
- Both have therapeutic benefits as they activate receptors throughout the body and are generally safe at dosing ranges from 2-20 (THC) milligrams per day and 20-200 (CBD) milligrams per day.

### Common ways to ingest:

- Capsules provide benefits for up to 8 hours and are easy to manage.
- Tinctures are common in CBD oil, provide effects for 4-6 hours

and absorb well.

- Topicals are lotions or creams for surface area pain and soreness, lasting 2-4 hours. Vaping provides immediate relief with a fast onset and fades after 1-3 hours.

### Side effects:

- CBD may relax circulatory vessels which may cause dizziness as one acclimates.
- CBD can cause dry mouth and may interact with medications at higher doses.
- THC can cause euphoria, alter senses, mood, perceptions, and sense of time. This is one of the key ways it works, disconnecting the monkey mind and lessening pain signals.
- THC can cause a fast heart rate if inhaled and can be sedating — which is good for sleep.
- Pharmaceuticals may be made stronger or weaker when combined with CBD, so space your CBD dose times like you do for grapefruit (known to cause adverse effects when combined with certain medications! In case you didn't know!)
- For multiple medication takers,

please consult your doctor or nurse.

Seek professional advice to add CBD to your self care

### Enlightened nurses can make a valuable difference when it comes to managing cannabinoids as part of your holistic treatment plan.

We are educators, healers and guides to better healthcare, taking the best parts of conventional care, and combining that with alternatives that support healing. Guiding patients to approach wholeness and live their best life is second nature to the most trusted profession in America the past 2 decades, and we are honored to serve.

I hope this information opens your eyes to a potentially better way of treating yourself and gets you comfortable making recommendations to clients. It's obviously new territory but if it's the right situation, consider bringing up CBD when you're looking at those medication lists!

While it is not covered by health plans YET, it can be a huge cost saver if used effectively to appropriately complement or replace certain pharmaceuticals — of

course, with a health care professional's advice and approval!

*Many blessings to you this open enrollment season.  
~ Elisabeth*



**Elisabeth Mack, RN, BSN, BA, MBA** founded *Holistic Caring* in 2015 to bridge the gap between conventional and cannabis medicine through education, guidance and personalized

care for patients with product choices, dosages, interactions, and timing. She saw firsthand how incredibly effective cannabinoids were personally and had to help others find healing.

Elisabeth is a provider for the California Board of Registered Nursing and authored a curriculum that approaches cannabis through holistic and functional medicine. Her training programs prepare all licensed health

professionals to be successful guiding patient consultations, teaching industry staff, or leading workshops. There's even a "business in a box" toolkit of forms and resources for daily practice, giving presentations, and influencing stakeholders.

Elisabeth earned an MBA in Healthcare Administration, a Bachelor of Science in Nursing, and a Bachelor of Arts in psychology. Her corporate career included Sales Manager for the County of San Diego for Anthem Blue Cross. She is a member of the Society of Cannabis Clinicians and serves on the Boards of the American Cannabis Nurses Association, Los Angeles NORML, and the California Cannabis Chamber of Commerce.

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- If you'd like to know more or refer a client or loved one, call our **FREE Nurse Line: 1-970-404-HOPE (4673)**
- Listen in to a CNN podcast from **Dr. Sanjay Gupta: "The Promise of Cannabis as We Age"**

**EDITOR's note:**

It's important to note that the landscape of CBD treatments and insurance coverage is continually evolving. At this point, the FDA does not approve 'food supplements' — which is what CBD is considered — and this designation affects insurance coverage considerations.

**California Legal Cannabis Market Size, Share & Trends Analysis Report By Source (Marijuana, Hemp), By Product (Flowers, Oils And Tinctures), By End-use (Medical, Industrial, Recreational), And Segment Forecasts, 2023 - 2030**

**Report Overview**

The California legal cannabis market size was valued at USD 2.2 billion in 2022 and is expected to grow at a compound annual growth rate (CAGR) of 12.2 % from 2023 to 2030.

According to a study published by National Center for Biotechnology Information (NCBI) in December 2022, opioid use in patients with chronic pain was reduced by 64% who were administered medical marijuana. Moreover, increasing incidences of chronic disease coupled with the legalization of cannabis possession is anticipated to drive the market in California over the forecast period.

**California Legal Cannabis Report Scope**

| Report Attribute          | Details  |
|---------------------------|--|
| Market size value in 2023 | USD 2.5 billion  |
| Revenue forecast in 2030  | USD 5.4 billion  |
| Growth Rate               | CAGR of 12.2% from 2023 to 2030  |
| Base year for estimation  | 2022   |
| Historical data           | 2018 - 2021  |
| Forecast period           | 2023 - 2030  |
| Quantitative units        | Revenue in USD million/billion and CAGR from 2023 to 2030                            |
| Report coverage           | Revenue forecast, company ranking, competitive landscape, growth factors, and trends |
| Segments covered          | Product, source, end-use   |
| State scope               | California   |

**Excerpts from NCBI study**

- Medicinal cannabis is not an FDA-approved medication, although a licensed practitioner can prescribe it.
- The complexity of treating chronic pain patients is attributable to the subjective nature of pain, variability of pain tolerance amongst patients, and the psychosocial impact of chronic pain. Therefore, effective collaboration amongst various disciplines, including psychiatrists, physical therapists, psychologists, pain management physicians, neurologists, psychiatrists, social workers, is necessary to ensure the best outcome for patients. Questionnaires and other forms can be offered to patients to monitor symptomatic improvement in pain and quality of life after initiating cannabis use.

A close-up photograph of a person's hand holding a smartphone. The phone is held vertically, and the screen is dark. In the background, a laptop keyboard is visible, with another hand typing. The scene is set on a wooden desk. The lighting is soft, highlighting the textures of the skin and the wood.

# **Achieving Competitive Advantage Through Marketing Innovation**

*Boost growth with tools, creativity  
and online strategy*

**BY ISAAC SMITH**

**I**nnovation has become an essential component for making any business successful in the modern world. In addition, technological advancements have led to rapid changes in every industry. For instance, big data brings innovation to the insurance industry and allows the analysis of data in a meaningful way. The combination of humans and technology has shortened data processing and analysis time. Similarly, marketing innovation has improved insurance industry efforts to create a competitive advantage and build customer relationships and satisfaction. Let's see how you can stand out by leveraging these marketing innovations.

### **Changing ways of communication**

Undoubtedly, the pandemic has played a role in the acceptance of modern ways of communication. Given this environment, insurance professionals need to connect digitally to their customers. Technology has now effectively digitized traditional face-to-face communication. People have accepted that communicating via phone or video call can make the customer and agent experience comfortable and eliminate the hassle of traveling. In response, many insurance professionals are moving away from face-to-face models. They are finding they can now effectively communicate with customers via digital platforms that nurture relationships and increase customer satisfaction.

### **Developing the right messages to attract your audience**

We are beginning to realize the importance of marketing automation to improve financial performance. Brokers, agents and insurance companies can now stay connected with the customer without face-to-face interaction. Targeting your specific audience on selected social platforms increases the chances of lead generation and creates a digital presence. Sharing videos and informative content across social media channels has proven to be effective in attracting and maintaining customer relationships.

### **Analyze customer behavior to boost sales**

Data analytics can help insurance professionals monitor customer behavior. Based on these analytics, you can develop digital marketing strategies and find reliable ways to attract customers. By analyzing customer preferences, you can create these personalized messages with informative content based on evident interest to engage potential clients. For instance, sending emails to the right audience can result in a click. A potential lead may submit their requirements on the website. So, data-driven marketing strategies are helping insurance professionals to reach the right audience and make more conversions.

An automated marketing strategy using the right messages to the right audience can help you touch customers consistently with scheduled social media posts and personalized emails. This can help you develop loyalty programs to increase your customer base and build client engagement along with profitability.

### **Leverage digital marketing strategies**

Customers now search online for products and services they want more than ever. Insurance professionals need to leverage the latest techniques to employ online platforms to reach their audience. Therefore, improving your online visibility becomes essential to gain a competitive edge. You can accomplish this with digital marketing automation tools to reach your desired audience. If you don't have resources to do it inhouse, there are experts for hire who can create and implement effective digital marketing strategies to boost profitability via lead generation, and build strong client relationships.

### **The takeaway**

Establishing digital communication between insurance agents and customers increases engagement. Using the right mix of tools, creativity and marketing strategies, you can boost business growth. In addition, technology innovations in the insurance industry help companies to gain a competitive edge and profitability. The chances of business growth substantially increase with the implementation of

effective digital marketing strategies. Also, using data analytics to make informed decisions on how to target the right audience increases sales and revenue. In addition, monitoring consumer behavior with real-time data helps you dig deeper to establish innovative techniques to reach potential customers. Further, you can create a loyal customer base and maintain long-term relationships with consistent, targeted communication.



**Isaac Smith** is a healthcare content strategist and editor in chief, Medical Billing and RCM at Medcare MSO. Smith is a highly accomplished healthcare professional and writer

with over 13 years of experience in healthcare administration, medical billing, coding, and compliance. He holds a current medical billing and coding certification and is member of the American Academy of Professional Coders. He has worked in medical billing and coding for over 6 years, in a wide variety of medical specialties like evaluation/management, physical therapy, mental health, acupuncture, outpatient and inpatient care, nursing home care, radiology, and wound care.

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**An automated marketing strategy using the right messages to the right audience can help you touch customers consistently with scheduled social media posts and personalized emails. This can help you develop loyalty programs to increase your customer base and build client engagement along with profitability.**

# New RSV vaccine to be released this fall

FDA recommends annually, with doctor approval

By **Melanie Nguyen** with comment by **Dr. Michael del Junco**

**T**he CDC recently recommended a new vaccine for people ages 60 and over to prevent Respiratory Syncytial Virus or RSV. This new RSV vaccine should be available in the fall of 2023. It is currently being offered by Pfizer and GlaxoSmithKline (GSK), a British-based pharmaceutical company. After approving in May, the FDA recommends that older adults receive one dose of the RSV vaccine annually. The United States is the first country to approve this vaccine with other European countries following suit.

Before getting the vaccine, patients should consult with their doctor to see if the vaccine is right for them. Medicare Part D will cover the cost of the RSV vaccine with no out-of-pocket costs to Medicare patients.

## What is RSV?

RSV is a common and contagious virus that could potentially lead to respiratory illnesses such as lower respiratory tract disease. According to the CDC, RSV causes 60,000–160,000 hospitalizations and 6,000–10,000 deaths among older adults.

Older adults and adults with chronic heart disease, chronic lung disease, weakened immune systems, or living in nursing homes or long-term care facilities are at higher risk of RSV. These illnesses may include upper respiratory tract disease and lower respiratory tract disease. Common side effects of upper respiratory tract disease are cough and runny nose, while lower respiratory tract disease could lead to bronchitis, pneumonia, worsening asthma, or chronic obstructive pulmonary disease (COPD.)

In clinical trials of the vaccine, the most common side effects were injection site pain, fatigue, myalgia, headache, and arthralgia. The vaccine should not be given to patients who are allergic to any of its ingredients. In addition, patients may have a reduced immune response to this vaccine if they have weakened immune systems or take medication to suppress their immune response.

## Speaking of doctors ...

Dr. Michael del Junco is a board-certified private practice internal medicine doctor based in Orange, California. In an interview with Dr. del Junco, he said RSV can cause outbreaks of respiratory tract illnesses, usually during the winter months.

“It is important to consult with your healthcare provider to assess your individual personal need for the RSV vaccine based on your current health status and past medical history,” Dr. del Junco said. When patients are consulting with their doctors about this new vaccination, Dr. del Junco recommends asking about the patient’s safety profile and understanding the risk of side effects associated with vaccine administration. At this time, Dr. del Junco said he is not prioritizing this vaccine for his patients, but will evaluate on a one-on-one basis whether RSV is appropriate.



**Melanie Nguyen** is a recent graduate from California State University, Fullerton where she studied marketing and journalism. Melanie is based in Mission Viejo, Calif. and has a passion for writing, photography, and video editing. Her goal is to combine her skills in digital marketing with her writing ability to produce the best content for audiences. She chose to be a journalist to impact and inspire others through her stories. Melanie is especially interested in writing about business and economics to help customers better understand different markets.

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**Michael del Junco, M.D.** is a board-certified Internal Medicine physician with an office in Orange County. His medical practice is focused on adults from 18 to over 90. His has an open invitation to new patients looking for a primary care physician. He accepts same day appointments and spends at least 30 minutes every visit with each patients. Dr. del Junco can

perform many services from annual physical exams to chronic care issue management.

**Contact:**  
**Dr. Michael del Junco**  
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