

# Role of the Broker

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# Marketing

- Websites
- Quoting
- Social Media
- Direct Mail
- Networking Groups
- Civic and Religious Organizations
- Word of Mouth
- Community Involvement
- Client Appreciation/Building Relationships

# The Purchasing of Insurance

- Educating the consumer about the need for insurance.
- Educating the consumer about what insurance does and does NOT do.
- Earning the consumers trust and confidence enough to tell you their health issues and concerns
- Engaging the consumer to act on a potential unknown as in “what if...”

# What Consumers Ask

- How much does it cost?
- Is this an HMO or PPO?
- Is there a deductible?
- If so, what is the deductible?
- What are the co-pays?
- Does my doctor take it?
- Are my drugs covered?

# What Good Brokers Really Do

- Look at over 200+ plans for individuals and 300+ for employers
- Explain what is part of the deductible and what is not.
- Provides information on whether deductible is embedded or aggregate
- Will there be coverage for a child studying in another state or abroad?
- What is their real stop-loss?
- Explains how maternity coverage works...”global billing”
- Lays out how deductibles operate for prescriptions
- Find out if they need maternity coverage (although with new mandates this won't be a problem, although we will have to explain why all plans cover it like in Group)
- Confirms if their doctor / hospital is “in-network”
- Sets out the tax advantages of certain plans over others
- Asks whether coverage needed for durable medical equipment.
- Find out if chiropractic and acupuncture coverage is desired
- The out-of-network benefit really means...
- How much it costs.
- Explains what is considered “preventive” or “well-child” care
- What is the underwriting and eligibility process
- Explains when the plan normally have rate adjustments and what they might look like.
- **THIS IS DONE PRIOR TO THE PURCHASE**

# After they Enroll

- Follow up with carrier to make sure information is being processed timely without mistakes
- Make sure the client knows to respond to carrier request for more information if requested
- Make sure the client received their ID cards and EOC.
- Make sure the client understands the billing and frequency

# The choosing and enrolling was the easy part...what happens next...

- Help client understand their EOB from carrier
- Help client understand their bill from providers / hospital
- Go through claim with client to make sure there are no mistakes
- “We had an emergency while we were out of town”...yikes, now what?

# For Employer Sponsored Plans

- Very often consult the employer on how to properly set up their business entity to be eligible for the benefits in the first place.
- Determine Employers eligibility and participation requirements
- Prepare master application, supporting documents and employee enrollment.
- Hold employee enrollment and Open Enrollment meetings every year.
- Negotiate R.A.F.s and rates with carriers every year
- Provide full time support to client's employees on benefits questions, claim or coverage resolution.



# Continued...

- Act as key resource for clients by notifying them of changes in state and federal laws on health insurance, tax or employment related issues that will directly impact their business.
- Provide customer support throughout the plan year such as enrollment changes, claims and insurance identification cards.
- Provide COBRA and Cal-Cobra (employers with less than 20 employees) support for clients.
- Provide documentation such as summary plan descriptions for employee and other compliance issues (PPACA, COBRA, HIPAA, ERISA and Privacy).