



BROKERS MAKING A DIFFERENCE

Health Insurance Agents Help Consumers and Employers
Secure Affordable Health Insurance



CALIFORNIA



National Association of Health Underwriters
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Personal Testimonials on Why Brokers Make a Difference

For more than 85 years, professionally licensed health insurance agents, brokers and consultants have provided valuable healthcare financing services to individuals and employers. Professional agents have extensive knowledge about health insurance plan design, benefits, and pricing. Many small employers can't afford to have this level of expertise in-house, nor do they have the time to administer a comprehensive, compliant benefits package for their employees.

In fact, the Congressional Budget Office (CBO) has reported that agents and brokers often “handle the responsibilities that larger firms generally delegate to their human resources departments — such as finding plans and negotiating premiums, providing information about the selected plans, and processing enrollees.”

With HIPAA, COBRA, ERISA, and federal and state tax requirements to contend with, not to mention all of the new requirements stemming from ACA, professional agents spend a great deal of time helping their clients understand the regulations, complex products and compliance issues.

Health insurance customers who use agents report being satisfied not just with their insurance, but also with the work performed by their agents – especially when it comes to the agent's role in finding the right policy.

A recent Kaiser survey found that brokers and agents have a 92 percent approval rating when helping healthcare consumers in the new marketplace.

Professional agents work extremely hard and need to be very knowledgeable in order to stay abreast of the rapid changes in the healthcare system. It would be very costly for a governmental agency in some far off location to match the service and value agents bring to their clients, and it would not be able to replace the personal relationships agents develop with their clients.

Ongoing Support from an Agent

Individuals and business owners typically don't pay any more for employee benefits purchased through an agent or broker than if they purchased the coverage directly from an insurance company. Insurance carriers set aside a small portion of the premium to pay brokers a commission, which covers not only the selling of the plan but also much of the servicing required. In today's declining commission environment, agents spend more time than ever before servicing their clients – a testament to their commitment and dedication.

Agent Associations

NAHU is the only national association working solely on behalf of health insurance agents and benefit professionals. NAHU requires each of its members to always make healthcare coverage recommendations with the customers' best interest in mind.

For more testimonials on NAHU members helping individuals and employers find appropriate health insurance, please go to www.brokersmakingadifference.org.

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"I stumbled on Phil Lee's agency online, and called him after we got a huge premium increase. In a few days we were able to settle on a different insurance provider who met our financial budget goals.

"Phil and Mercedes know the industry very well. They stay current on all trends and healthcare policy offerings and developments. In a rapidly changing medical coverage world, with regulations being dictated almost by the day, the insurance landscape is changing rapidly.

"After almost 30 years of buying healthcare coverage (mostly with disappointment at every step) we feel like we've found an "agent to keep". Thanks Phil and Mercedes!"

Larry P. (Client)

"I do not know how anyone thinks that the general public can easily choose from and understand the complexities of the different health plans and lines of health coverage that are available. Our client base so appreciates the service that we provide to them that we have often heard, "We cannot do this without you" and "You cannot die until I do because I would not know what to do without you." We receive thank you notes, flowers, referrals etc. based on the services that are provided by my office. The public is inundated with so much information that they need a professional to work through these issues for them. Additionally, many people are not internet savvy and thus are unable to research these kinds of issues on their own, especially seniors with Medicare Part D.

"Brokers provide a very valuable service to the public by informing clients of the health coverage that is

best suited for them."

- Barbara McClaskey (Broker)

"Before getting back into private practice in 2008, I had spent the prior 15 years as an executive with some of the nation's top insurers. During that time, I had spent considerable time and energy pushing agents and brokers to sell to the uninsured, indicating it was an opportunity as well as a responsibility. In my short tenure back into private practice, I have focused on the uninsured. A full two-thirds of my new group business written in the last 10 months was for either previously uninsured or for those uninsured due to lost coverage.

"We can do well by doing good. The big numbers are nothing more than a compilation of all the little numbers we encounter every day. The bottom line is this: We can make a difference."

- Brian T Sullivan
(Broker)

"Imagine having your first baby and paying a few thousand dollars to the hospital and to the OB/GYN along with all the other expenses. You

have met what you've been told was your maximum out of pocket, only to get another bill for thousands of dollars. This is exactly what happened to my client. The bill was \$6,000 from the Anesthesiologist alone. Their office was billing the client asking for payment even when they were not entitled to it. You can imagine how happy these new parents were when I called them and told them the doctor was going to accept the out-of-network payment from the insurance carrier as payment in full. Well, I can tell you, I was over-joyed to give this couple the news and they were very grateful for all my assistance.

"Licensed health insurance producers (agents and brokers) provide a wide range of services for both individual consumers and the business community.

Producers interface with insurers, acquire quotes, analyze plan options, and consult clients through the purchase of health insurance... It is essential that [policymakers] recognize and protect the indispensable role that licensed insurance professionals play in serving consumers."

-The National Association of Insurance Commissioners



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"As agents, we help our clients resolve claims issues, including writing letters to doctor's offices, hospitals and insurance carriers. We compile documentation to help resolve claims. We resolve billing issues daily, explain plan designs and options to employees and individuals. As agents, we help COBRA-eligible beneficiaries with coverage following the loss of a job. Approximately 80% of our job is after the sale. We need the legislators in Washington, D. C. to understand our role as outlined above, and the invaluable service we provide."

- Imogene Chariton (Broker)

"When shopping for individual insurance it was nothing but total frustration due to Obamacare. We lost our plan, and we lost 95% of our doctors during the year. We only had two doctors that ended up taking our plan. I had done my homework and checked with the insurance company December 2013 and with our individual doctors. I was all set, or so I thought.

"During 2014, little by little, we lost doctor after doctor. I could not depend on my insurers' websites, as the doctor lists were wrong and calling the insurance company directly was a total disaster; nobody knows anything. It took hours on hold to speak to the insurance company.

"This year during open enrollment I knew I had enough! I knew I needed to use an agent. I did so. They went over and above what I expected. They reviewed some options for me, reviewed different insurance companies, researched all my doctors and hospitals I may use during the year and helped out with other issues. I could not have done it without Craig Gussin and his team.

"Obamacare is like the tax code. Nobody understands it. It is thousands of pages long. I figured that a broker would have experience with all the various companies and their plans, as well as any issues with certain plans and insurers. Please do not eliminate brokers from this tedious, frustrating issue. We need them. I knew I was unable to do this alone



after last years total disaster. We are in this problem due to government bureaucrats by "we need to pass it before we know what's in it"."

- Karen Binns (Client)

"We have been with Lee Insurance Services for over 10 years. They have always been prompt, professional, efficient, and knowledgeable. With the fast-changing rules in the insurance industry and wide range of information online, our family relies on Lee Insurance Services to guide us to the right direction and making the best choices from time to time. We appreciate Mercedes, especially, as we have been working with her most of the time, for her patience and quick responses. Their website application system makes the new application process easy for us. I personally do not want to waste time with other insurance companies."

- Anonymous (Client)

"I just hung up the phone with a mother in Idaho who was crying over the cost of insurance and by the end of our conversation, she had hope for her family.

"The information provided through The Education Foundation has been the saving grace for many of our clients this year. In my 20 years of doing business in our industry, never have I visited with so many people who are not covering dependents because of job loss or simply the cost.



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"For example, a colleague of mine had a 31-year-old future son-in-law hospitalized and needing a quadruple bypass with no coverage. We provided information and secured help and the person was relocated to a hospital that would render care. The cost share was still 40% and more than the patient thought he could afford on a \$15-per-hour job.

"End result: the patient actually received the care needed, although the first and second treating small local hospitals had surgeons refusing to treat based on the fact the person had no coverage. We truly saved a life!

"You are a pioneer in our industry and I personally want to say thanks to NAHU for making my life a little easier! You've made a difference in our industry but more importantly, in the lives of many Americans."

- Tomi Winn (Broker)

"It is a fact that the majority of consumers are not insurance experts, and they need to have someone who is on their side to help them figure out the complicated terms and conditions of insurance products, not only during the buying process, but when they have to use the benefits of the policy.

"We help our clients on a regular basis to understand and communicate with insurance claims departments and providers to get their rightful benefits. We are sure that without our help, many of these clients would have to pay hundreds or thousands of dollars more out of their pocket, or waste several more hours of their time to get their rights protected.

"If consumer protection is a factor in any health reform, then there is no better way to protect the consumer than to have experts on their side. It is true that brokers make commissions on writing health insurance policies, but they earn every penny of that money in helping the consumer to choose the most competitive health insurance policy, and helping them get their rightful benefits during the claims process."

- Vic Vartanian (Broker)

"Jane had been insured with us for more than two years. She and her husband had moved to Arizona and started a small business. We had been their agents from the beginning. One day, Jane called to say she had submitted for pre-approval an expensive medication (\$15,000 per treatment) and it had been denied. I spoke to her and researched the issue. It seemed clear that it was medically necessary and had been recommended by Mayo and two other reputable medical providers. I felt it must have been an oversight and submitted an appeal.

"The appeal was denied and now Jane was becoming critically ill and was told she might not live without the treatment. I got a HIPAA release and called the chairman of the board at the insurance company. I explained to them the concept of choosing the hill you really want to die on and that this was not that hill. I received a call from the CEO's assistant telling me the treatment had been approved and that Jane



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should begin immediately. Jane is alive today, two years later, and [she and her husband] are still clients of ours.

"As I was curious, I asked the assistant why the treatment had been denied. She told me the original request had been denied as the treatment was not seen as being efficacious in this situation. The appeal had been sent to a physician who turned out to not be qualified and he had used information that was several years old. When I had called, I had included research that was recent and addressed the best new treatment for her condition. They changed claim procedure, fired the outside consultant and moved the claims supervisor to a new position.

"This was a quality company that had not updated procedure. This was not a malicious mistake and they did the right thing in rectifying it. My staff made the difference when they did the research and stayed with the claim until it was settled. Had this been Medicare, Jane would have died while waiting for them to answer the phone, let alone dealing with the claim issue.

"Good agents make a difference every day in the real lives of people. When it comes to insurance, our clients know that we work for THEM, and our value cannot be understated."

- Bill Weaver (Broker)

"Yesterday, I had an 84-year-old woman in my office who lost her husband two months ago. She came to me looking for a policy through Secure Horizons. Turns out she had a group plan with Secure Horizons through her husband's employer that was better than what I could offer. However, through errors, she was un-enrolled. We spent an hour on the phone with Secure Horizons and put her back on her group plan. She wanted to pay me for my time, but I told her to just refer me to her friends."

- Anthony Halby (Broker)

"A client of mine referred Todd to me for help. As a sole proprietor, Todd has an individual plan for himself and his family. A medical condition shared by him and his son is kept under control by extremely expensive home injectables and with the current economic landscape, they weren't sure what to do. Once we understood their pharmaceutical needs, the key was in determining an allowable plan transfer with the lowest out-of-pocket maximum that had the same drug coverage as his current plan. With some explanation and after walking him through numerous scenarios, Todd came to understand that the solution was an HSA-compatible plan. The plan transfer was not a simple one, however, because the coverage for his complex treatment plan could not be easily determined from the scant benefit summaries and misinterpretation was simply not acceptable. On

many conference calls, even at a supervisory level, our detailed questions baffled the carrier's service and membership department, but with persistence and attention to detail, the

results were quite rewarding."

- Jeff Bader (Broker)

"Please accept this letter as my way of stating the importance of our company's health insurance Broker. Each year as we begin to come close to our open enrollment period, I can always count on our broker, Paula Wilson, to come to the table with several options, companies and prices for us to look at.

"The thought of not having this type of personal service or even worse, the thought of having to find the time to shop for these services myself, along with obtaining the expertise to navigate the insurance field, is nothing short of terrifying.

"Paula has always been available to all of my employees if they were having a problem with their coverage and she has always been happy and quick

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to respond. She is also a huge help to me in dealing with sometimes uncooperative health care providers. You just can't replace human relationships with a voice on the telephone. It is a full time job handling the daily payroll and human resource duties for my company and I don't believe that putting extra undue and unnecessary pressure on a single individual is good for anyone, especially when we are talking about health care issues.

"I believe that it is in our country's best interest to have businesses compete for the business of their clients because it brings about better customer service, honesty and pricing. I also feel that the government itself seems to have quite enough on its plate to be anywhere near effective in handling that job as well as agents do. Brokers are providing a service for those who choose to use and pay for that service and for those that choose not to use them there are other options available.

"I appreciate that the purpose of any type of reform is to improve what is assumed to be a flawed system. Our broker for insurance offers our business an asset that, quite honestly, I don't feel the government is able to handle. I wouldn't pay for sub-standard service and I'm really just not interested in the offer that is currently being presented as an alternative."

- Ramona Tire, Inc. (Client)

"When we became the agents for Chris' business we told her she was not hiring us to do quotes, she

was paying for our advice and service. Over the next many months we worked with her employees and managed the various service issues that came up. And then Chris became pregnant, which was considered high-risk because she has lupus.

"Any agent can get quotes and any insurance company can promise to pay claims but the real test is when somebody really needs help. In Chris' case it was matter of life and death.

"Having lupus, Chris knew that at some point in her pregnancy she was going to have to go off her medications. That day came, and she became so

sick they had to take the baby almost two months premature. I went to the hospital and held her hand while she asked that I take care of her employees if this did not work out. Chris died that night.

"When Chris died, it meant her coverage would cease at the end of that month for the baby. I called Blue Cross Blue Shield and told them I was going to use HIPAA and put the baby on their coverage. The people at Blue Cross contacted the hospital to assure them the baby would have continuous coverage, and they facilitated the coverage change and claims payment.

"When the renewal came up, Chris's sister who now ran the company insisted that the group be moved to Blue Cross no matter what the cost might be. We made that move and they are still with Blue Cross.



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"I tell you this story because I know what a difference a good agent can make in someone's life."

- Bill Weaver (Broker)

"I have worked with Paula Wilson for more than 18 years and at two employers."

"At my previous business, as one of the owners, I needed an insurance representative who would provide not only good information for determining plans and employee benefits, but who would assist me in administering our plan appropriately. As an owner of a company with about 15 employees, I could not hire a plan administrator and had little time or ability to deal with individual employees and their concerns."

"When one of my staff had a toddler with a seizure condition that was beyond the expertise of her pediatrician, Paula worked directly with the parents to arrange for appointments with specialists at UCLA and to verify the insurance coverage each step of the way. Her attentiveness eased the parents'—and my—minds during a very difficult family time."

"Whenever we had a question about coverage, about procedures, about unpaid bills, we simply gave Paula a call and she worked directly with the employees to resolve their problems."

"In 2001, I sold my business and moved to Lancaster and took a job as an administrator at a small private school with about 60 employees. After a year, I recommended to my boss that he interview Paula as a replacement broker. Her record of service at my previous business had impressed me greatly. Paula comes to our location twice a year, once to review plans and once to present to our staff. After she has met with staff and established our program for the year, she always makes herself available to talk with individuals about family concerns and special circumstances. She is always just a phone call away for any employee with questions, problems or concerns."

"Paula Wilson sends regular monthly, and sometimes weekly, bulletins on changes in the insurance industry, laws and expectations and keeps our business office well informed on any issues that affect our coverage or the administration of our plan."

- Karen H. (Client)

"I help my clients daily by assisting them in estimating the cost for new employees and their dependents. I send them worksheets with the rates for different plans and the benefits, explain the benefits for the different plan choices and compare the rates to the plans to make sure it meets each employee's needs. I also assist with the enrollment of new employees by forwarding the applications and having the applications sent to my office where my staff reviews them for completeness before we forward to the carrier. In addition, we follow up with the carriers to make sure the employees have been added to the correct plans on the correct date they are eligible."

"Most recently, I have been in contact with all of my group clients to assist them with terminating employees during layoffs and letting them know about the new ARRA laws so that they can contact



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their COBRA administrator or administer themselves. In addition, I have been pointing those without an administrator to the Department of Labor website to print the new notices to send to all employees who have been terminated since 9/1/08. In addition to this, I have assisted many small groups in changing their plans off of their renewal anniversary in order to cut costs during these difficult economic times.

"Each year, when the anniversary date occurs, I present each of the companies that I work with a complete proposal outlining their current plans and comparing them to all of the other carriers' plans to find the best fit for their business at that time. I analyze their situation and make recommendations based upon the employers and employees criteria to find the best plans or combination of plans for their business.

"If the employer decides to make a plan switch, we conduct employee meetings to explain the new benefit plans and enroll each employee on the new plans. We collect the employee and employer applications and DE-6 forms and other requirements from the employer and review them for accuracy. We contact the employer for any additional items that were not submitted and send to the carrier. Then we follow up with the carrier to make sure everything is complete for the issuance of the new contract. In addition, during these changes, there are often issues with an employee or employees not receiving an ID card in time or needing to access the correct provider under the new plan. Perhaps there is an issue with the new carrier not billing correctly and we assist with straightening the bill out. Sometimes the old carrier does not cancel at the correct date or close the claims correctly because the wrong termination date has been input into the claim, and we then work to fix these issues.

"If any of the employees have issues with claims, I call the membership department for the carrier and work with them to resolve any issues. If there is an issue with billing, my staff and I contact the carrier to correct the bill for the client's benefit.

"I have been in this business for 30 years and am a professional. Quality service is the name of the game and the reason I retain 95% of my clients on an annual basis. My clients are my business. They are the most important thing to me. I value each and every one from the smallest to the largest and work each and every day to make sure they are satisfied with the plans, rates, and services they receive from my agency."

- Robert R. McIsaac (Broker)

The Congressional Budget Office (CBO) has reported that agents and brokers often handle the responsibilities that larger firms generally delegate to their human resources departments—such as finding plans and negotiating premiums, providing information about the selected plans, and processing enrollees.

"Several times a month, I am contacted to resolve a bill that seems inaccurate. Sometimes there is a coding error that can be changed easily. However, I am currently working on a coding error that has yet to be resolved in eight months.

"I often receive calls from clients stating that they are simply overwhelmed by the explanation of benefits and the billings from providers. I will simply take the information, simplify it, and tell the client which bills to pay. The most complicated resolution involved multiple procedures at UCLA over a year. There were hundreds of bills and EOB's that I placed on an Excel worksheet and resolved to the client's satisfaction.

"Sometimes we pursue resolutions for months that should have been handled by the carrier in a day. One client placed her Primary Care Physician's (PCP) name and proper code on her application. The carrier made a mistake and assigned her to a medical group miles away from her home. She was on a Point-of-Service plan and was charged a co-pay each time she visited her PCP and did not realize



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she was being covered under the PPO portion of the plan. When she required testing, the deductible of her plan was charged and only a percentage of the bills were paid. This resulted in over \$4,000 worth of bills that should have been covered under the HMO portion of the plan. I made two appeals (both rejected) explaining that the carrier had made a mistake when assigning the PCP. Finally, working through an executive at the carrier, the client's PCP was changed and the client's bills were reversed.

"In closing, I have enjoyed my career in health insurance. I have also been a Peace Corps volunteer and a community volunteer. There are many experiences for which I am grateful, but it is helping people access and pay for health care that has given me the greatest degree of satisfaction."

- Stephen W. Graeber (Broker)

"For over 25 years, English and Company has continued to service, implement and communicate the latest trends, designs and products to small businesses throughout California. Our personal services along with our loyal clients have been our foundation. Over the years, our clients have seen the latest in providing benefits at the most valuable and affordable manner possible due to English and Company's communication and servicing.

"At all times, the interests of the clients have come first. If I had not stayed in close contact through newsletters, phone calls and periodic visits, most of these business clients may have sought other avenues without the personal services English and Company provides each and every day. Minimum annual renewal reviews cover employee communications, allowing each employee personal time to make sure they understand the best methods for cost containment, utilization, understanding how to get the best quality from their health care plans, and gives them a chance to ask questions and have access to our personal toll free number."

- Mary Anne English (Broker)

"When I have my first appointment with a new client who owns a business, I always say: "Let's draw a

line in the sand. I don't want you in the insurance business and you do not want me in yours. The only paperwork I will ask of you is to pay your monthly premium each month and I will take care of your new employees being added on to the plan. When you have an employee who is leaving I will take care of the necessary paperwork and make sure the Cal-COBRA or COBRA paperwork is complete. By doing all of this, you (the employer) do not have to worry about the insurance paperwork for your employees and you can continue to run your business without any hassles.

"When I am enrolling a new employee to the plan, I will fully explain the benefits and value of the plan



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don't just sell the plan; I am there to service it always. At the time of the yearly renewal, I am there to ensure the benefits are being accessed correctly and that the benefits are priced competitively. If they are not it is time to shop around for benefits that are more cost-effective. My first concern is always the employer, not the insurance carrier.

"I have found, in 35 years, that most people look at insurance as a foreign language and they want me as their translator. They trust me and the services that I represent. The agent does matter!"

- Jerry Abels (Broker)

"I make a difference in the lives of my clients every day. I have been an insurance agent since I was 22 years old, and I am now 48. My primary focus used to be property and casualty products, but over the last 10 years, I have concentrated on health insurance. I love helping people and that is why I love my job.

"In California, there is guaranteed health coverage for employers with at least two full-time employees, but most businesses are not aware that this guaranteed coverage exists. I am a strong advocate in assisting people with setting up small group plans. So many satisfied customers have told me that they never knew of the guaranteed-issue law in California and are so grateful to have an experienced agent to work with.

"In addition, with so many flexible options for small groups, the employees and their dependents can choose the plan that is right for them. I think the majority of Americans want choice when it comes to health care, and in California, that is what an agent can offer...choice! I have had so many people research insurance plans on the Internet only to come in my office and say that they need an agent to help determine the best plan for their needs. That is what an agent does...we help people and guide them through the process. Agents and brokers are a vital tool in the health care system."

- Jeff Kane (Broker)

and explain how to get the 'best bang for his/her buck'. For example, when getting your preventive work done, do it at the beginning of the year so if they find anything wrong, you will have the balance of the year to meet your deductible and your coinsurance. If you wait until the end of the year and they find something wrong and the treatment goes past December 31 into the next year, you will have two deductibles and coinsurance. By doing it this way, you can potentially save yourself a lot of money.

"In some ways, I am the employer's human resources person off-site and payroll. I often receive calls from the employer asking me how to handle an employee situation and I do my best to give them good advice. I



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"I am a health/life insurance broker specializing in individual/group health insurance, life insurance, and Medicare Advantage/Supplement plans. As an independent, non-salaried broker, I am free to recommend the products of any company I choose. I am very comfortable in this role as I much prefer teaching/consulting to "selling" one product or company. This business model also creates the incentive to build honest, long-term relationships with clients. I am in the trenches every day trying to find my clients the best possible health insurance options – be they private or public.

"The American health care system truly needs competent brokers in the field. We are vital middlemen who play many essential roles in our interactions with consumers, underwriters, doctor's offices, etc. But our primary role, or "talent," if you will, is the ability to communicate complicated information in a manner consumers can understand. There is an absolute necessity for a qualified field rep who can help the public wade through the complex web of information, regulations, and bureaucracy that epitomizes both private insurance and government Medicare.

"I am a vital link in the health care system. I am the oil that makes the machine run. I have strong general knowledge of all its parts and thus can create more open, efficient communication between them. The relationships I have formed with knowledgeable, intelligent people at insurance companies, physician's offices, and the state/federal government

gives me the ability to quickly and effectively solve client problems with better long-term satisfaction for all. Trust and professional respect are the qualities that make these relationships work and allow creativity and common sense to reign over stifling bureaucracy and unbending regulation. Without these relationships, my clients and I would feel much more like numbers dealing with other numbers in these big organizations. Consumers need objective, personal liaisons that have their interests at heart and, most importantly, can make the health care process a little easier for them.

- Rick Bruner (Broker)



"Just wanted to thank you for your time and patience with me on Friday. What an amazing job! All your efforts and detailed explanations are appreciated in helping me understand. Now, for the waiting part. Again, thank you!"

- Teri (Client)

"Thank you very much for your incomparable assistance allowing me to choose the best match in carriers. Your office team members have always been extremely professional and pleasant to work with. Thank you for being there for me every year!"

- Chris H. (Client)

"A while back I was doing an enrollment meeting for an agent and one of the employees had questions about covering his adult son on his plan. After some investigating, I found the son was 40 years old and disabled. When I asked why the son would not just enroll on Medi-Cal, the dad explained how both he



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and his son had tried several times but could not get anywhere.

"I gave him my cell and promised to help enroll his son through the Covered California website when I got back in my office. Over the course of a few days of gathering the needed information, I did upload his son in the system and successfully submitted him to Medi-Cal. Roughly 30 days later, his son received ID cards and began to receive the needed care through the Medi-Cal system. He later sent me this letter"

'I want to take time to write you a letter of real appreciation for helping my son in his MediCal application. This was after he had tried to get help unsuccessfully due to MediCal employees' misdirection which you set straight for us. Dave, your advice was accurate and enormously helpful.

'I personally have had a poor image of insurance at some levels, particularly with my independent business health insurance years ago. But, you have certainly made a difference in a positive direction with my image of insurance representation, especially since nothing financially was paid to you.

'Please forward this to appropriate agency or agencies and let them know through MediCal, my son has been able to get much needed prescription medication. Also, the encouragement that some help is available helps a lot.'

- David Fear Jr. (Broker) and Ray Simmons (Client)

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