

It's a Health Revolution!

2025 Health Revolution Tour

Clay Peek

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PEEKTRAINING.COM



Speakers



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Peek Performance Insurance

Speakers



Chet Marko

Owner

**Stokes & Marko LLC (dba
Smart Choice Benefits)**



Erik Knutson

COO

Peek Performance Insurance



David Poston

President/ICHRA

Poston Health LLC

I'm Clay Peek

*Peek Performance leads the nation in
ACA sales training.*

- Since 1996
- Clay's actually "*Done it*" selling 1000 lives a year his first 10 years in the business
- An incredible team to lead you toward training, tools and personal assistance in business
- Strong Commissions and even Stronger Business Development
- We'll help you build your own team!



Today's Agenda

- 9:15 AM – 9:30 AM – Coffee and Registration
- 9:30 AM – 9:55 AM – “***Why ACA/Health***”
- 9:55 AM – 10:30 AM – *Selling ACA **all year long w/o an HRA***
- 10:30 AM – 11:00 AM – ICHRA Overview
- 11:00 AM – 11:45 AM – **4 Health Tools**
 - *PSM, Sedera, UHO, Physician's Mutual*
- 11:45 AM – 12:00 PM – **CMS Update**
- 12:00 PM – 12:15 PM – **Agency Building**
- 12:15 PM – 12:30 PM – Q & A

Scan this code to access all of the helpful tools, links and resources mentioned today.

- Training Materials
- Webinar registration links
- Contract Request Form
- PeekTraining.com Portal
- Agent Care Team contact
- *Links to more info on specific topics discussed today*



SCAN ME!

SESSION 1:

Why ACA?

JON EVANS/DAVE SCHLARB

PEEK PERFORMANCE

peektraining.com



Why ACA?

Clay Peek, Jon Evans, Dave Schlarb
Peek Performance Insurance

www.peaktraining.com
877.612.7317 or marketers@ppisales.info



Who is “ACA Clay”?

Husband, Father and Grandfather

Clay Peek has been married to Debbie for 44 years. 6 Kids, 17 Grandkids ... To date!

Christian Ministry

Clay has served in 2 Christian Schools and pastored in 4 Churches early in his career. He now enjoys lay ministry at his local church.

Proven Insurance Agent

In 1996, after Clay completed his term at his church in South Philadelphia, he, Debbie and his 6 children returned to SC where he began his insurance career. He sold more than 1000 lives a year for more than 10 years.

Industry Leader and Visionary

Since 1996, Peek Performance has appointed more than 13,000 agents and over 996 Agencies across the country. Clay is a “Thought Leader” in the Health Industry and has hundreds of hours of training on multiple website platforms.



Why On Earth Would I Want to Sell ACA?

Because if you don't,
you're literally “walking
on dollars”

Let me explain...



What is ACA?

The ***Patient Protection and Affordable Care Act***, referred to as the Affordable Care Act or “ACA” for short, is the comprehensive health care reform law enacted in March 2010.

The law has 3 primary goals:

- **Make affordable under age 65 health insurance** available to more people. The law provides consumers with subsidies (“premium tax credits”) that lower costs initially for households with incomes between 100% and 400% of the Federal Poverty Level (FPL).
- **Expand the Medicaid** program to cover all adults with income below **138%** of the FPL. About **40** states have expanded their Medicaid programs.
- Support innovative medical care delivery methods designed to lower the costs of health care generally.



A Brief History of ACA

2010

The Affordable Care Act (ACA), **Obamacare** signed into law by President Barack Obama on March 23, 2010. it represents the U.S. healthcare system's most significant regulatory overhaul and expansion of coverage since the enactment of Medicare and Medicaid in 1965.

2014

ACA's Major Provisions came into force in January of 2014. Peek Performance enters the ACA space, recruiting agents across the country to sell ACA. In the beginning ACA was a mess. Healthcare.gov rarely worked and the commissions were not strong. **#chaos**

2016-20

President Trump *ends* the Federal "Individual Mandate" penalty for those who did not purchase a Qualified Health Plan. Various Legal and Legislative challenges to the ACA **fail**. The **21st Century Cures Act** expands the use of **HRA's**

2021-22

The American Rescue Plan Act/**ARPA** extends Tax Credits to millions of new households, and the "**Family Glitch**" is fixed, allowing *dependents* of employees who get healthcare at work to potentially **qualify for a tax credit** on an ACA plan.

2022-24

26 Million People are currently covered by the Affordable Care Act. **ICHRA** and **QSEHRA** allow trained agents to enroll qualified employees into ACA plans **12 months a year!**

2025 & Beyond?

Will **APRA** Continue?
New CMS Guidelines
BBB Impact
Shortened OEP?

ACA is incredibly EASY!

- *18 Second Quote – 15 Minute Enrollment*
- 20-40% are Self Enrolled (YOU can become Agent of Record)
- Market to *Anyone, Anywhere, Anytime*
- Millions Still Unaware
- Creates an “Increasing Income Annuity”
 - **100 humans** = about **\$2000 a month** (varies by state/plan) / **200** = **\$4000 month**



ACA coverage is Great!

- Deepest, Richest Health Coverage EVER
- Guaranteed Issue
- **No** Pre-Ex-Limitations
- **No** Dollar Amount Limit to Benefits
- Huge Subsidies/Premium Tax Credit
- Narrow Networks/ High OOP
- 50% of our sales are **\$0** premium



But I sell **STM** & **HI** Health Plans

- Prospects w *health issues* or who have *modest income* can't or shouldn't buy those.
 - Some plans have *significantly limited benefits*
 - Since ACA is *Guaranteed Issue* and often *more affordable* – it just makes sense
 - Serve the 75%+ who get a subsidy too!
- ... And you should have great **STM** and **Non-ACA** Health Options too.
- PPI has that too (more later)



Yeah, but I sell *Medicare*...

Awesome! Want to sell even more?

Don't Miss Out on Sales

- **Spouse in the House!**
Children, Grandchildren of your Medicare clients need this!
- Make **BOTH** sales!

Increasing Income Annuity

- Stop giving ACA leads away as referrals and increase your monthly income annuity!

Changing Market

- Potential reduction commissions and
- DSNP change in 2025
- Jason Newby/David Poston



Yeah, but I sell *Life Insurance*...

Awesome! Want to sell even more?

Sell More Life!

- *Savings* on monthly health premiums means MORE Life sales! *Right?!*

It's much *easier*...

- to talk about Health Insurance than Life Insurance

Gain the attention...

- of “***High Net Worth***” business owners with health... and you'll sell a lot more life!



But surely this isn't a fit for P&C Agents...

It's the BEST fit for P&C Agents

- *Stop giving away money* (referrals) and become a **one stop shop** for your customers.
- *Stabilize your income* in an unstable P&C market by (at least!) assigning a gifted team member to sell the ACA.
- *Cross Selling* binds your client to you even more!



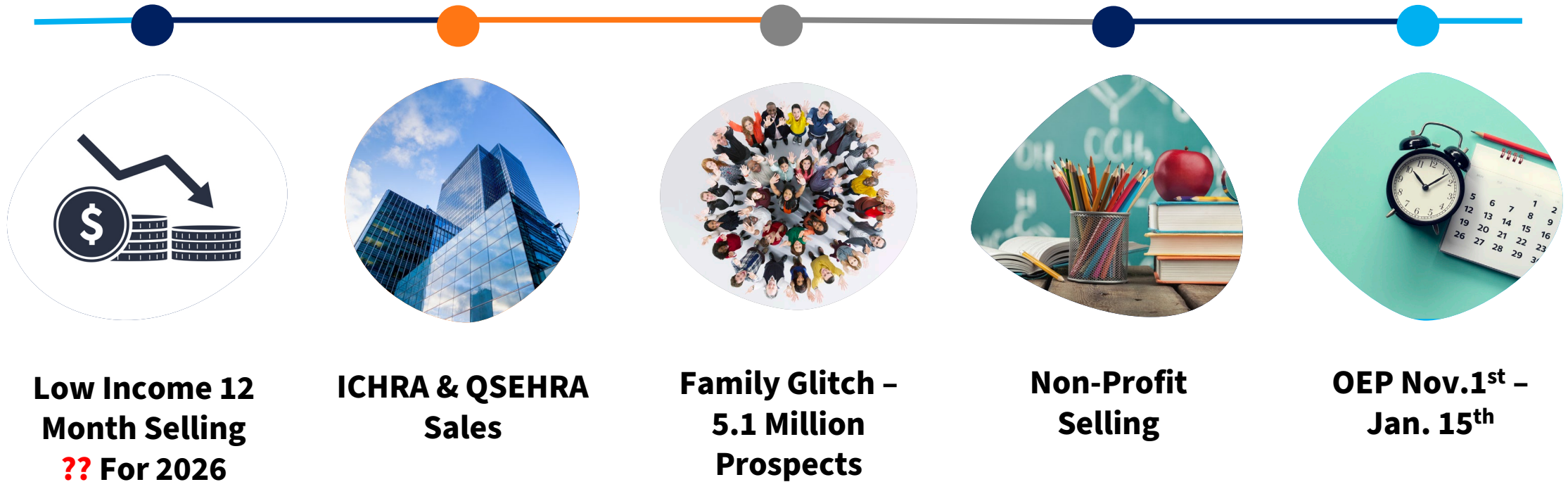


Agency Building

Reasons why 996+ agencies work with Peek Performance:

- Unparalleled Agent Support
- We handle contracting and commissions FOR you.
- The **BEST Training** in the Industry
 - **PeekTraining.com**
- Work with the *#1 ACA Agency Building FMO* in the country

Special Opportunities!



Selling ACA to *Small Businesses*

1 Year Round Selling!

Don't be stuck selling just during OEP. Here's your chance to sell 12 Months! You never have to stop selling health insurance.

2 Target Businesses with 2-49 Employees

The sweet spot is 2-20, but if you come across a group to 49, get them signed up. We also have a solution for groups over 50!

3 ICHRA – Small or Large Businesses!

This is where the magic happens! These tools are the reason we can do this year-round. We will show you how!

4 The Tools You Need

Performance HRA software, training and support you need to make this happen. Doing it on your own can be confusing and *dangerous*! We can help.

5 Get the 2nd and 3rd Sale

We'll also show you how to get the **employer** to pay for the Dental, Life, and Accident Insurance too!



Peek Performance Makes it Easy to Start



PeekTraining.com

This is a training tool that you can use for yourself and your agents! How to get started, basic training for rookies and deep dive training for advanced markets.



Agent Care Team

We have an entire team dedicated to making sure you and your team are taken care of. Once you decide to join Peek Performance, you will be assigned an ACT member to support you.



Support

We want Agency Owners to be out selling and recruiting, NOT worried about technical details like commissions, certification, and contracting etc. That stuff slows you down. Let our team help! We've been doing it for almost 30 years and we're VERY good at it.

ACA / UNDER 65 HEALTH SALES

ACA/Under 65 Health Sales:

Selling Health 12 Months a Year!

The steps & training on this page will show you how to go from an ACA novice to a seasoned pro.

Click on the map or scroll down to see the 6 steps.



PeekTraining.com

- ✓ **ACA/Under 65 Health Sales (Tab)**
- ✓ *ACA Prep Class* (Step 2a): “Step by Step” instructions on how to
 - **Certify** (see map on next slide)
 - **Appoint/Contract/New Carriers**
 - **Set up Enrollment Platform**
 - **Compliance and Enrollment Training**
- ✓ **Intro ACA Training (Step 3)**
- ✓ **Advanced Training (Steps 4, 5 & 6)**

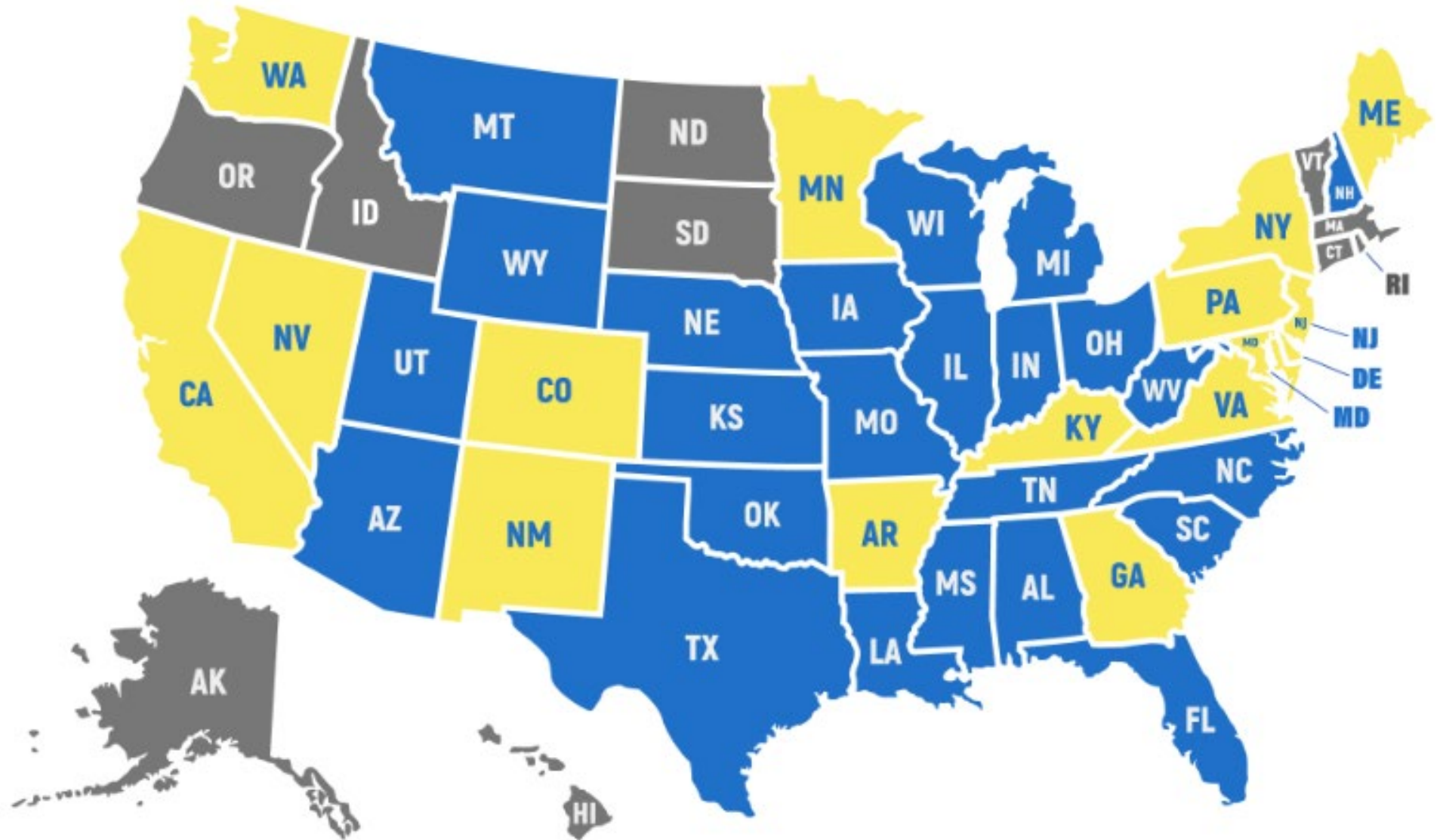
Road Map to Success



Blue = FFM

Yellow =
State-Based
Exchange

Grey = *States
PPI does not
market ACA*



This map will identify all *currently* available plans
(www.peaktraining.com)

Your Market is changing. *Are you?*



What Now?

We'd love for you to be a part of our team. We think we can revolutionize how you do insurance.

If you'd like to join us, scan and complete this Contract Request code. If you'd like to talk to someone before you fill it out, call the agent hotline and we're glad to help!

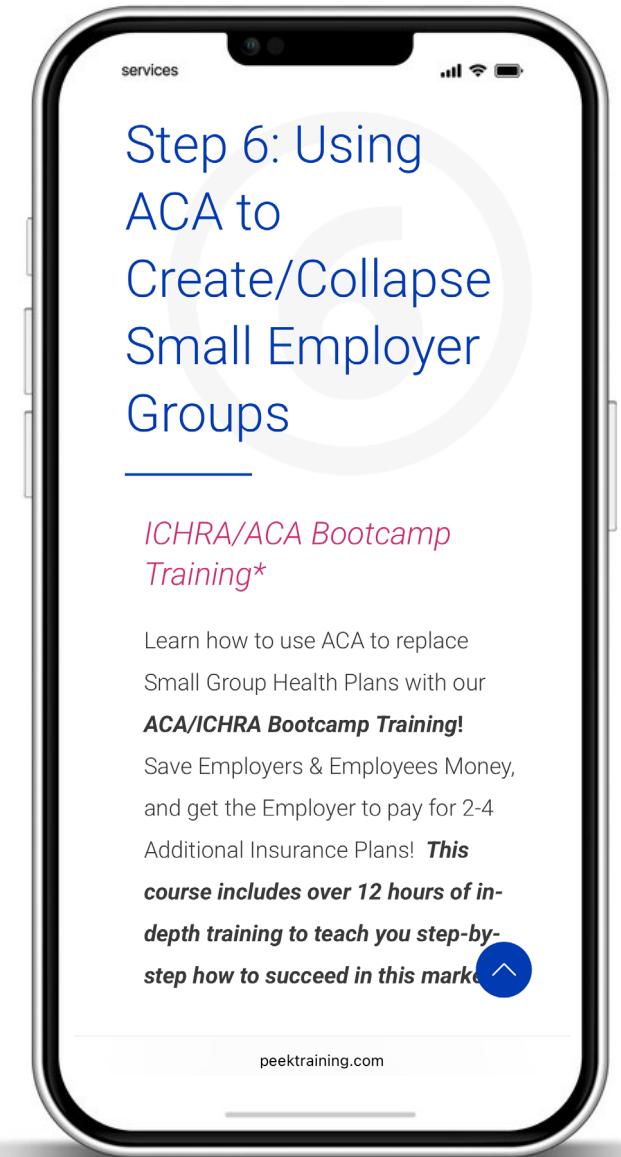
- 877-612-7317 / Agent Hotline
- PeekTraining.com
- ACAclay.com
- Next Steps? *"ACA Prep Class!"*



Selling ACA 12 months a year

PEEK PERFORMANCE

peektraining.com



YOU COULD
SELL ACA PLANS
“**ONE AT A TIME**”

BUT ...
THERE IS A
BETTER WAY!



OPPORTUNITY: Creating/Collapsing Employer GROUPS with ACA

- Almost **50%** of all working Americans work in a business with ***less than 50*** employees.
- Up to **50,000,000** prospects in this space.
- Significant **2nd, 3rd, & 4th sale** opportunities ... the **Employer** will often pay for them.
- We see a **90+ % persistency** in this space.
- You have ***very little competition*** from other skilled ACA or Group agents.

2 Ways to Sell ACA without using ICHRA & Market Overview

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Entrepreneurs need your help with **Benefits**

(Understanding Employers = Selling Individual Health all year long!)

Majority of small businesses (under 10 EE's) **don't** have any health benefits

The rest typically have very **expensive** benefits

They need your help.



Understanding “*Group*” vs. “*Individual*” Health

Think of **Health** markets as if it were an **airplane**.

With a **fuselage** and **two wings**.



“Group Plans”

- State and Federal Employee Plans
- ALE's/Applicable Large Employers 50+
- Small, Medium and Large Corporate Employer Sponsored “Group” employee health plans
- ALL “*True* Group Health Plans” must meet all requirements under the ACA.
 - Whether Fully Insured, or Self/Level Funded ERISA plans

Both Group *and* Individual plans meeting ACA requirements are referred to as “**QHP**” or Qualified Health Plans



Individual Non-ACA Plans, Left Wing

- Limited Medical / Hospital Indemnity Plans/MEC Plans – NOT comprehensive
- Short Term Plans *
- “Medical Cost Sharing” Plans *
- “ERISA or Association” – Health Plans *
(Benefits may meet the guidelines, but are usually Underwritten & do Not qualify for Tax Advantages)

Those “Healthy and Wealthy” enough to buy! (and don’t get a tax credit)



Individual ACA Plans (QHP), *Right Wing*

- **100% Guaranteed Issue**
- **No Pre-Existing Limitations**
- **100% Coverage Day 1**
- **No \$ Limits**
- **All 10 Essential Benefits**
- **Limited Networks/High OOP**
- **Tax credits may be available**



30 - 50 Million people could be moving from the **Red** Section of the plane to the **Blue** Section over the next few years.

You're going to be a part of that!



Selling Seasons

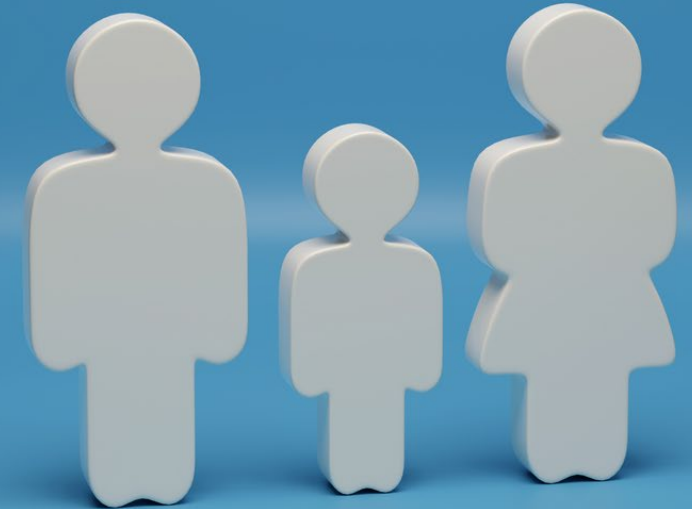
3 Selling Seasons:

- **OEP Sales**
 - ACA individual sales and renewals
 - 11.1.25 – 1.15.26
- **SEP Sales**
 - Life change and “**Family Glitch**” sales
 - **Collapsing** expensive ER Group plans
- **HRA (SEP) Sales - 12 Months a Year**
 - Using **ICHRA** for high *income* or high-cost groups of any size



1. Selling *Dependents*

Understand the ***Family Glitch***



2022 Update “Executive Order”

Executive Order on Strengthening Medicaid and the Affordable Care Act

On 4/5/22 President Biden Admin signed an Executive Order which details the ability to sell ACA plans with subsidies to dependents whose spouse/parent has an affordable employer group health plan, **but the “dependent” coverage is “unaffordable.”**

This opens millions of new prospects into the ACA market.

Now you may **approach employers of ANY size** re helping employees’ dependents previously affected by the
“Family Glitch”

The “Family Glitch”

*Help **Dependents** of those
covered on an expensive
employer group plan*

Get more training at

www.familyglitchfix.com

Use the “[Family Glitch Calculator](#)”

Get entire household income

Compare with total monthly cost of least expensive ER plan

If EE’s premium is affordable, they do NOT get a tax credit, only the dependents

Understand the financial guidelines (9.96% for 2026)

2. “Creating” Groups

- What does “**Creating or Collapsing Small Groups 12 Months a Year**” mean for your selling seasons?
- **Creating** means – bringing health benefits to an ER group where none currently exist
 - Why would they not exist?
- **Collapsing** means – there is an ER group health plan in place but it’s so expensive that it’s *crushing the ER, the EE or both*.
 - We’ll illustrate this shortly ...



Why Create or Collapse Small Groups?



The Small Employer Dilemma

- It's **hard** to *find and retain* good employees!
- **Millions** quit their jobs each month. Usually for better pay and/or benefits
- Competitive employers **offer health benefits** to attract and retain great employees.
- But, if the **cost of insurance is too high**, EEs can't cover their Employees, their dependents or afford other necessary coverage like Dental, Disability, Life, etc.
- Large (and/or) National employers offer generous employee health benefits and many also help with the cost of Dependent coverage.
- Advantage: Larger Employer!



4 kinds of ER Scenarios

- ERs who **currently** have an Employer Group Health Plan
- ERs who **had** a group health plan but **dropped** it
- ERs who **tried** to get a plan but could not meet participation
 - *What is true of all three kinds of employers?*
- ERs who **never tried** to get EGHP
 - Mandated ER's (50+ FTE's) with no group plan who don't know that they're about to hear from the IRS
 - Small ER's who let their EE's do whatever they want



Example: A Small Employer Group Health Plan.

It's NOT
COMPETITIVE



Small Group Health insurance is ***expensive*** for both the EMPLOYER/ER **and** the Employee/EE.

Example:

EE - \$800 mo (if ER pays \$600 – the Net cost to EE is \$200)

Spouse - \$800 mo

Kids - \$400 mo

Summary Cost to EE: Self (\$200), Spouse (\$800), Kids (\$400)

Employee must pay **\$1400/mo** to cover self and family

Annualize
the Costs
Small ER

&

COLLAPSE
the Group!



If EE premium is **\$800** per month

ER pays \$600 mo. = **\$7200 yr** and

EE pays \$200 mo. = **\$2400 yr**

Spouse **\$800**, and dependent **children will be about \$400.**

(\$14,400 a year more for the Dependents.)

Total cost for a **family of 4** (both ER and EE costs) - **\$24,000**

Employee's Cost - **\$16,800**

Average Families **CANNOT** afford this

(Ave EE costs in 2025 are approximately \$775 Month)

1. A Family of 4 Savings

Using tax credits – No ICHRA ...

Parents (age 45) and 2 teenagers – **Family Income \$75,000** a year

In most Zip Codes, this family could get an ACA plan with a **copay** for Doctor, Specialist and Drugs for **\$0 a month.**

- A savings of **\$7200** a year for the ER
- A savings of **\$16,800** for the EE

Unfair Competitive Advantage # 1



2. Better *Benefits* from my *Boss*

The employer could use some of his **\$7200 annual savings** and provide some Dental, Gap and/or Life Insurance ... say **\$150 a month**.

He still **saves \$5400 a year** *per employee*.

But now the **EE gets additional benefits** that they likely *didn't* enjoy previously – paid for by their ER.

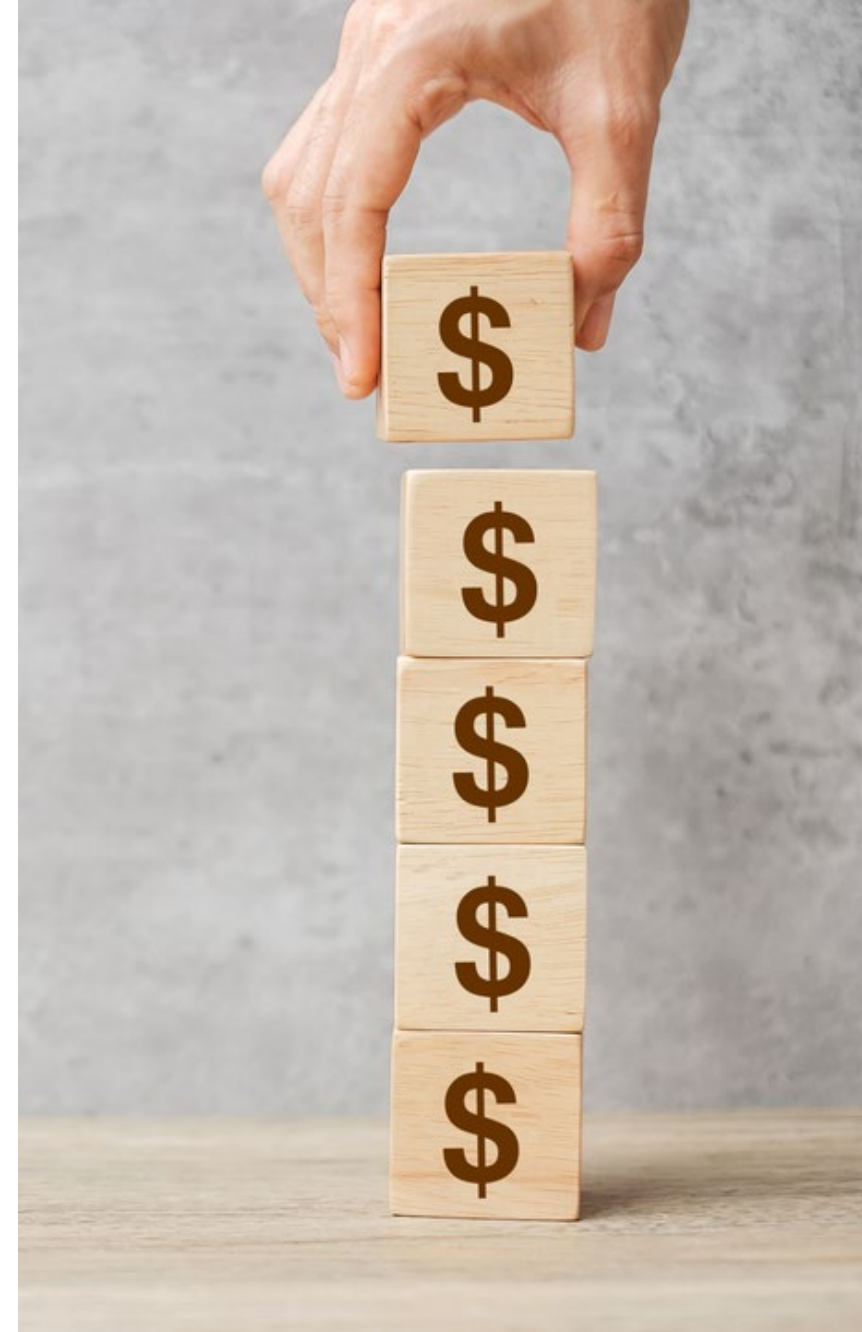
Unfair Competitive Advantage # 2



3. “*Pay Raise*” for the EE

Because the cost of health care is reduced,
the EE keeps more of their own money ...
it’s like a ***pay raise*** that costs the ER **NOTHING!**

Unfair Competitive Advantage # 3



4. *Additional Sales* for the Agent

Agent makes **3-4** sales instead of **1** and the **ER** is often paying for **2-3** of them!

Unfair Competitive Advantage # 4



5. You won't lose it

Getting the benefits (sale) is one thing.

Keeping them is another.

To *replace* it, the other agent is going to have to convince:

the *Employer*

their *bookkeeper/HR*

(or engage *another HRA platform.*)

... And that's unlikely.

It's called Persistency. More than **90%**

Unfair Competitive Advantage # 5



6. *Who else* gets an “*Unfair Competitive Advantage?*”

The Employer!

Now, “*Franks HVAC*” can afford to **attract, hire** and **retain** more and better employees *than their* competitors because of their Health Insurance cost savings.

Unfair Competitive Advantage # 6



Value Proposition for Small Business

- Collapsing/Creating the Small Group Health Plan is **good** for both the **ER** and the **EE**.
- Saves **both** parties money.
- ER can “*Get out of the Insurance Business*” and can offer “Better Benefits” that are now “Employer Paid” like, Dental, Gap, Life.
- EE can now afford to **cover dependents**, and their insurance is *portable* should they ever change jobs.
- EE’s can choose any plan they want and not be forced to choose between the 2 options recommended by ER.



Value Proposition for **You**

- You're *Fishing with a **Net**, Not with a **Pole**.*
- You're getting 1-3 “**Employer Paid**” Ancillary sales in most cases in addition to the Health Sale for **100%** of the Employees!
- You're also getting some “**Voluntary**” sales (additional plans that the EE is paying for themselves).
- Your income **doubles or triples** PER EE.
- You have significant **referral** opportunities.
- These new clients eventually **turn 65!**
- You retire in **CABO** (or Belize is also good).



Are other agents doing this?

...Very few
and far between





Your Target

- Are groups with more than 50 FTE's your target?
- **NO.** 50+ Groups are NOT your *initial* target. ... even if your best friends, cousin's neighbor can "get you in...."
- Stay with **2-20** until you have this in hand.

Easy Access

- There are easily **14 Million** different groups in this space that contain **30 Million additional Prospects** that are ***NOT*** on the “*Do Not Call*” list.
- Yes, you may call them. Legally.
- You may discuss this product freely *with anyone at anytime* in a simple, non-threatening and “non salesy” way.



<u>Employees on Site</u>	<u>Number of Businesses</u>
1 - 4 employees	13,115,030
5 - 9 employees	2,197,924
10 - 19 employees	1,065,752
20 - 49 employees	726,627

EE Count

- Counts by Employees On Site
(Updated February 2021) NAICS Association

3 Fake "Group Health" Plans

1. **MEC** (Minimum Essential Coverage) plans that do not also have a "**MVP/Minimum Value Plan**" (ACA Compliant) group health plan offered affordably to all EE's
2. **Limited Medical/Hospital Indemnity** health plans are NOT ACA compliant/QHP's
3. Some "INDIVIDUAL" Association/ERISA Plans sometime *identify* as "ACA Compliant," but *few if any are!* (There are compliant ERISA Group plans) (*Is it Unlimited Benefit\$? Is it Underwritten?*)

Quick check if the plan is comprehensive?

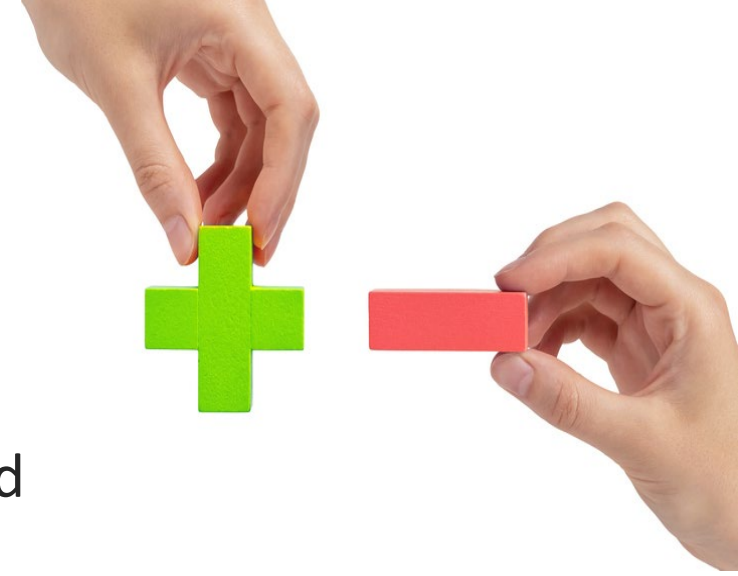
RX & **Chemo**: Are there \$ Dollar limits?

Annual, and/or Lifetime \$ limits?

ACA plans have no \$ limit

Replace them ASAP.

Advantage / Disadvantage



Both ACA Compliant Group or Individual plans have Unlimited coverage for “10 Essential Benefits” & No Pre-Ex.

The difference is primarily
Price and Network

Group plans typically cost much more but offer **PPO**’s and “**out of network coverage**” ... many group plans now offer **HMO** and **EPO**’s

Individual/ACA plans cost less but have **limited networks (HMO/EPO)**.



ICHRA 101

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877 612 7317 or marketers@ppisales.info



ICHRA – *Individual Coverage HHealth
Reimbursement Arrangement*

QSHRA – *Qualified Small Employer
HHealth Reimbursement Arrangement*



What is **ICHRA**?

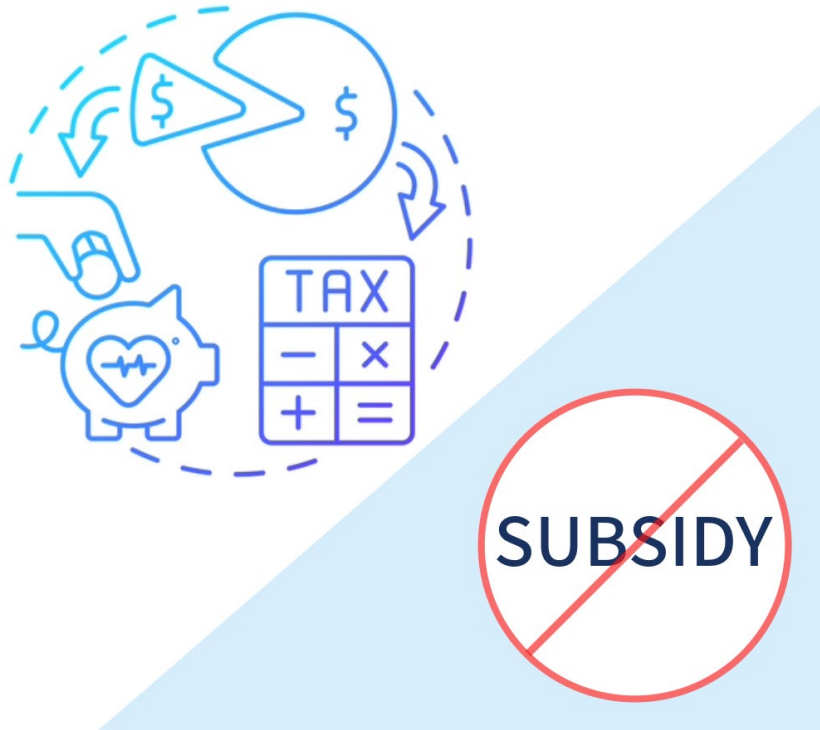


Individual Coverage Health Reimbursement Arrangement

- Employers may contribute to the premium cost of an “Individual” health plan
- Pre-Tax savings on the premium contribution
- No “APTC” available to the employee if ICHRA is affordable
- Can work in any size group
- No “Participation” requirements
- Keeps employers compliant – no penalty

ICHRA – ER Paid Premiums are *Pre-Tax*, But **NO** *subsidy*!

Pre-Tax ER Premiums 



- Can use **ACA** to provide health insurance for **employer** groups of **any** size
- Can enroll groups **12** mo. a year
- Can **add EE's anytime**
- If the “**group**” cost is high ... Use ICHRA and ACA to replace it!
- If you get **ER ICHRA Dollars** and it makes the premiums “Affordable” – you get **NO SUBSIDY**

Why ICHRA?



170 Million Americans are covered by an employer sponsored health plan

- ER's have been doing "group" a long time – and it doesn't always work well
- ER plans usually have 2-3 options w one carrier
- Do you want your ER to pick your *phone*? (It would be a Blackberry!)
- Big networks and big claims are driving group prices
- Cost prohibitive for millions of employers and dependents!
- 94% satisfaction rate w ICHRA's
- A 2-step sale:
 - Convince the ER that it makes sense
 - Enroll the employees

Group vs ACA “Heat Maps”

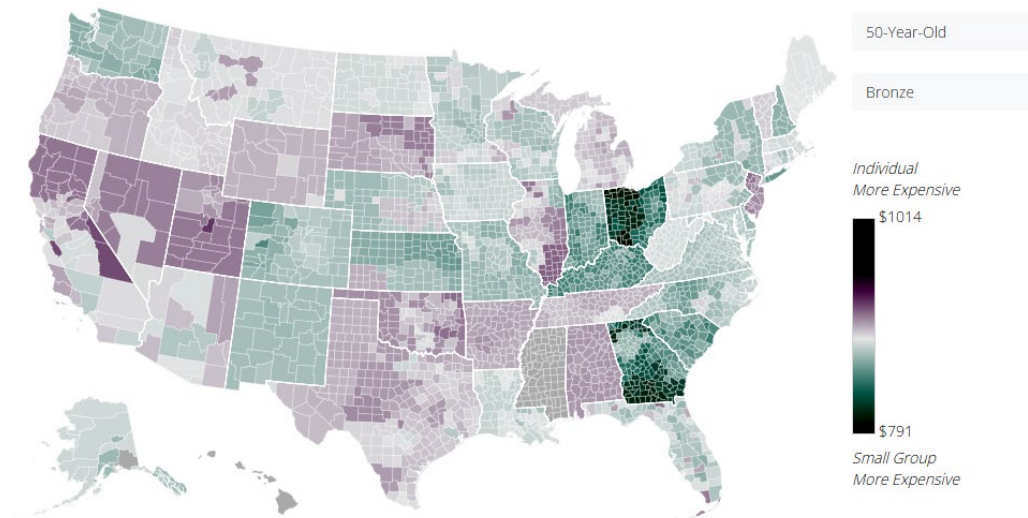
The following heat maps show the difference between the lowest cost Bronze/Silver Plans on the Individual and Small Group ACA Markets by County, 2025

- 50 Year Old – Bronze
- 27 Year Old – Bronze

[LINK TO HEAT MAPS](#)

Difference Between the Lowest Cost Bronze Plans on the Individual and Small Group ACA Markets by County, 2025:

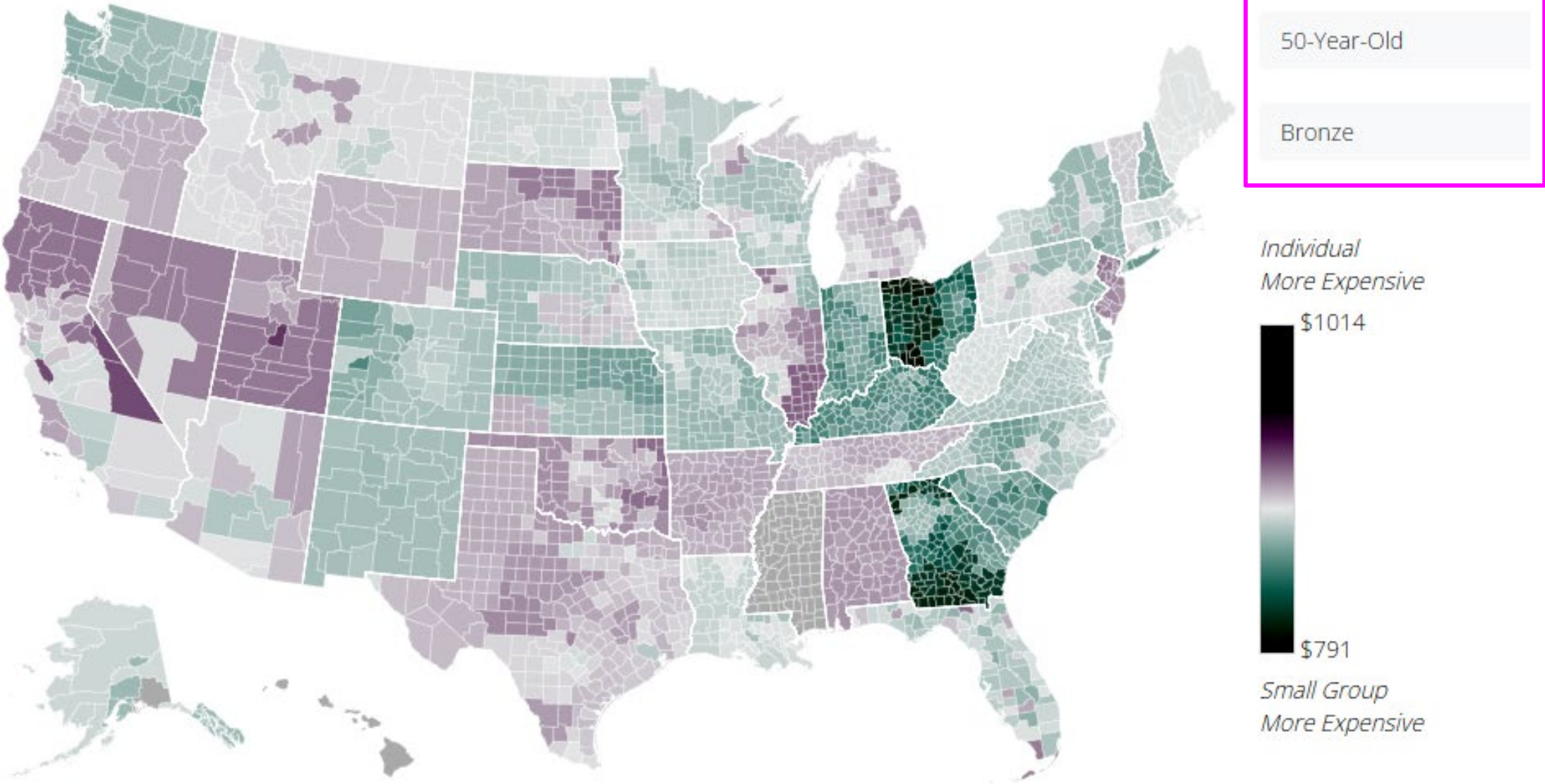
IDEON



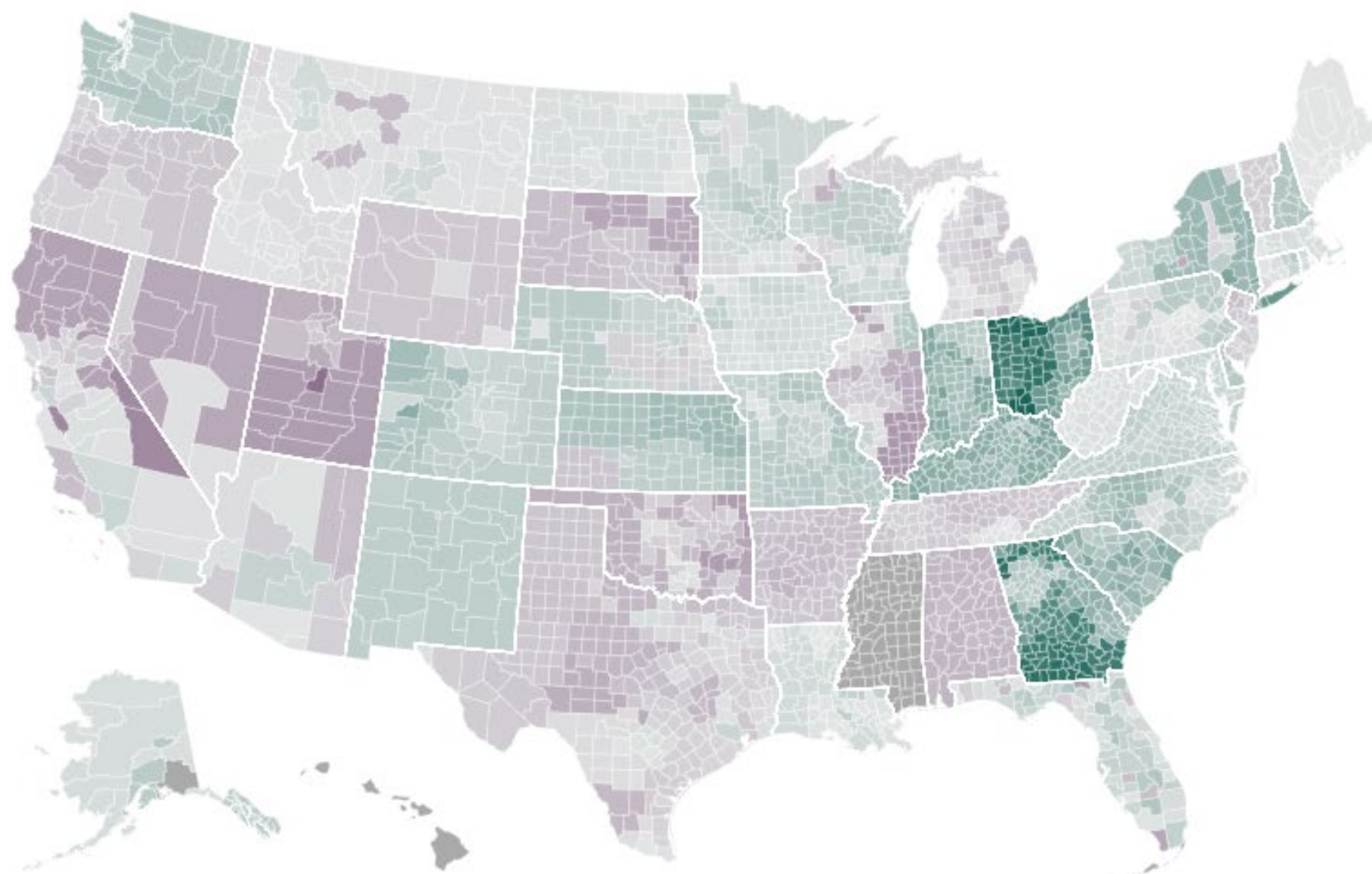
Note: Includes all individual ACA-compliant plans sold on or off the state and federal exchanges. For the purposes of this map, plans and premiums are assumed to be available in a county if they are offered in any part of the county

Map was updated on 11/22/2024 for the 2025 plan year.
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Difference Between the Lowest Cost Bronze Plans on the Individual and Small Group ACA Markets by County, 2025:



Difference Between the Lowest Cost Bronze Plans on the Individual and Small Group ACA Markets by County, 2025:



27-Year-Old

Bronze

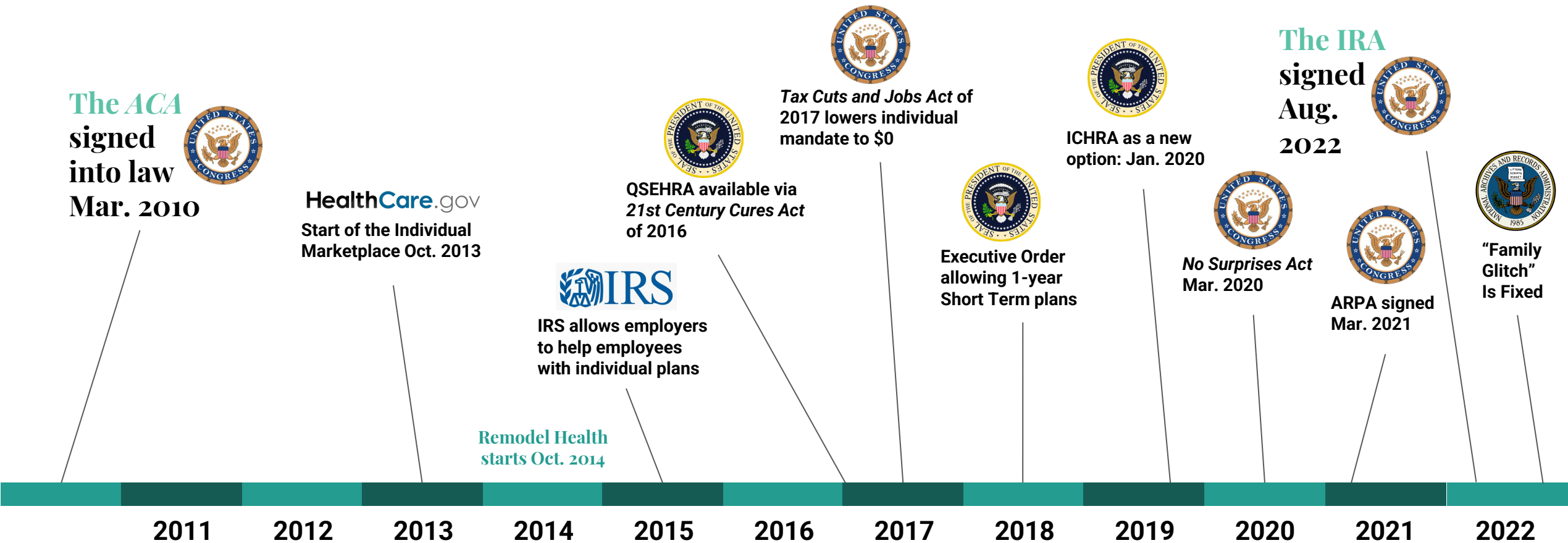
*Individual
More Expensive*

\$1014

\$791

*Small Group
More Expensive*

How we got here: Health Benefits Law Improvements



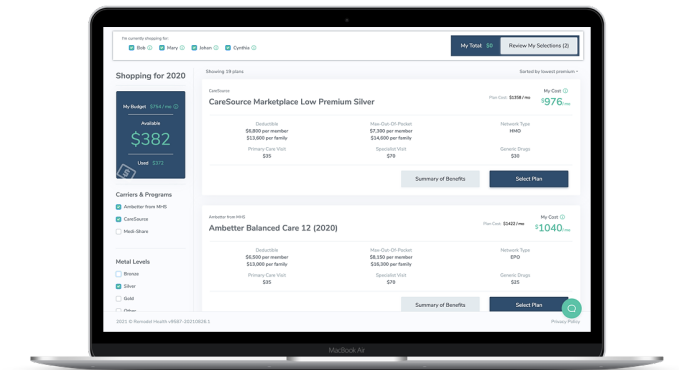
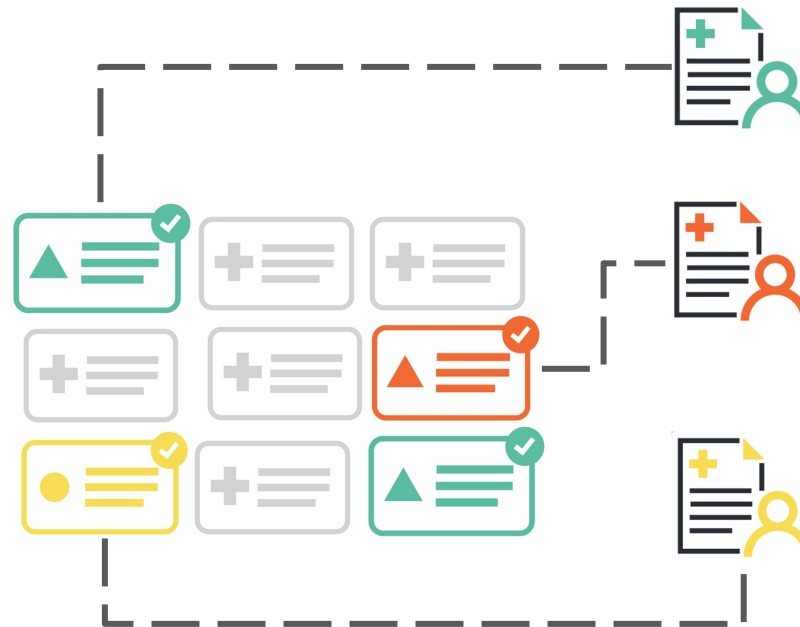
Managed “Individual” Health



1. **Employer** provides a contribution.

2. **Employee** selects the plan they wish to purchase.

3. **Software** for **one bill** to manage it all.



+ Added Benefits:



On-Going Support



Telemedicine



Ancillary Options



Resource documents

EE “CLASSES” ICHRA

Some basics to HRA classes and keeping it legal



Employee Classes

- Waiting Period
- Full-Time and Part-Time
- Seasonal
- Collective Bargaining Agreement
- Non-resident Alien
- Geographical Area
- Salary and Non-salary
- Staffing Firm Employees
- New Hire Subclass
- Combination thereof



Class Size Requirements

- No minimum *if* employer does not offer group health plan
- If group plan *is* offered, these minimums required:
 - 10 for employers with fewer than 100 employees
 - 10% (rounded down) for 100-200 employees
 - 20 for employers with 200+ employees

Rating Options:

- Age (1:3)
- Dependents

Practical Use of ICHRA

What kind of Employers should consider this option?



Small Employers with High Income Employees (Young IT Pro's)

"Mandated" Employers with Over 50 EE's (No QSEHRA for 50+. ICHRA only)

Anytime "Group Health" costs more than ACA (without the Tax Credit)

Let PPI Help you

Comprehensive Quoting and Comparison w all plans

Agent makes additional HRA fees PEPM on all ACA sales, permanently

Agent can make ancillary sales to group

Need **Census, Current Monthly Bill and Summary of Benefits** for Group plan

(Commercial!)

RECRUIT TO YOUR (*OUR*) MARKET ADVANTAGE



Very few agents are aware or engaged in the ER Group w/ACA opportunity



Almost **no** other FMO's teach this
(Do they even *understand* it?)



PPI can take agents to a **deep** level of understanding and expertise



This is part of what makes **Your/PPI's "Value Prop"** so powerful as you recruit agents

WHY OUR MESSAGE IS *DIFFERENT*

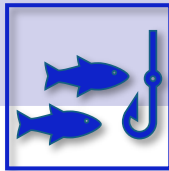
More *Profit*

- In this space, you CAN make the **2nd**, **3rd** and **4th** **sale** ... and the **Employer** will **pay** for them.
- Pick up additional **Medicare** sales too!



More *Participation*

- Now you're "Fishing with a **Net**, Not with a **Pole**."
- Why wouldn't you want to write ACA plans by the **dozen**?
- When the employer pays, **everyone** is offered and is getting the ancillary sale.



More *Persistency*

- It's very hard to steal a group.
- Our 3rd party admin keeps the premium payments compliantly current, so you don't lapse policies.



More *Prospects*

- **10+ Million** small employers **under 50 EE's** means **30 – 50 Million** Prospects!



Group Individual & Family Rate Increases over time



Coverage Type

☐ Single

☒ Family

☒ Premiums

☐ Worker Contributions

1999

to

2020

Optional Filter A

Optional Filter B

☒ Compare

Coverage Type

☒ Single

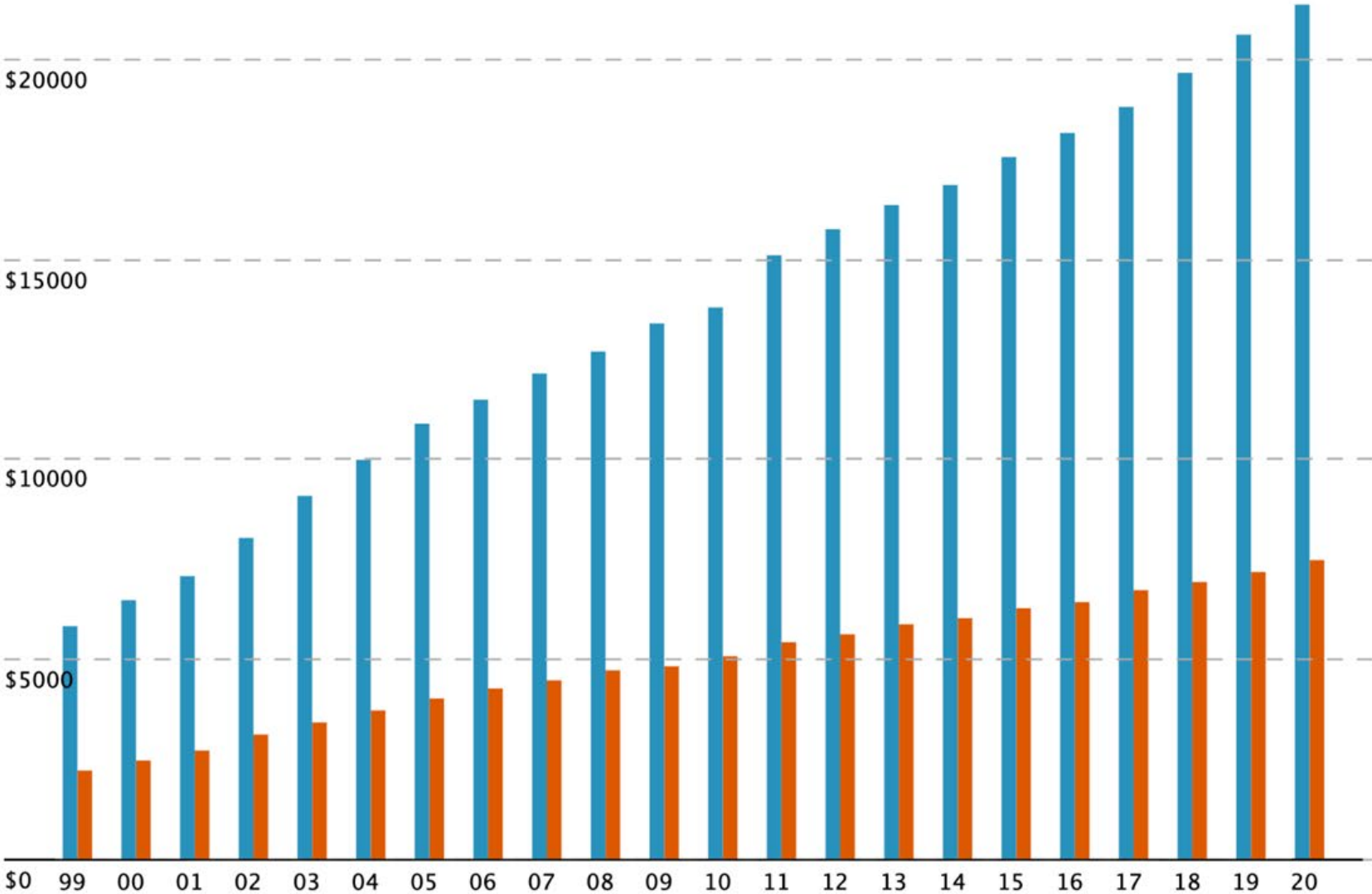
☐ Family

☒ Premiums

☐ Worker Contributions

Optional Filter A

Optional Filter B



Total Addressable Market (i.e. the opportunity!)



- **4,533,903** total employers with **10** employees and **under**
- **Only 24.9%** of these employers offer health benefits in 2024
- **3,404,961** total employers need to start offering health benefits
- **11,127,846** total employees are ready to be served



Source: https://meps.ahrq.gov/data_stats/summ_tables/insr/excel/2022/ ⁸⁴

How Can You Catch This Wave?



A large, billowing mushroom cloud from a nuclear explosion rises from a city skyline. The cloud is thick and dark at the base, transitioning to a lighter, more diffuse top. The city below is densely packed with buildings, and the sky is a pale blue. The overall image has a hazy, almost ethereal quality.

And

87% of employers believe they will be
unable to offer health benefits to
employees within 5 – 10 years.

The Catalyst for Change

January 1, 2020
Health Insurance Tax Laws
Changed

For the **First Time in 75 Years** a
QHP Individual Health Insurance
Plan Can be Purchased Through
Employers on a *Pre-tax* Basis

Enactment of **Individual Coverage**
Health Reimbursement Account
(ICHRA)

In simple terms, employers, rather than choosing an insurance plan for all employees, can give people money, and each employee can choose the plan they wish from the individual health insurance marketplace.

ICHRA IN ITS SIMPLEST TERMS

Modification to Health Reimbursement Accounts


1. Made the **premium** of an **individual health insurance** policy (including **Medicare**) an **eligible expense** under an HRA
2. **Raised** the HRA **limit** to accommodate higher expense

ICHRA Has Opened the Flood Gates

160 Million Americans

Traditional Employer Group Health

- 1 – 3 Plans
- 1 Carrier



Move to
Individual (ACA)
Market

***Individual* Health Exchanges**

- 30 – 150+ Plans per Market
- Many Carriers



Components of ICHRA

✓ Solved

The 3 components to ICHRA Administration



The **technology** to help employees choose plans based on their contributions.



A way to **process** the individual **applications**. (HS!)



A **payment** mechanism for employers and employees.

ICHRA Administration is Primarily Processing Individual Health Insurance

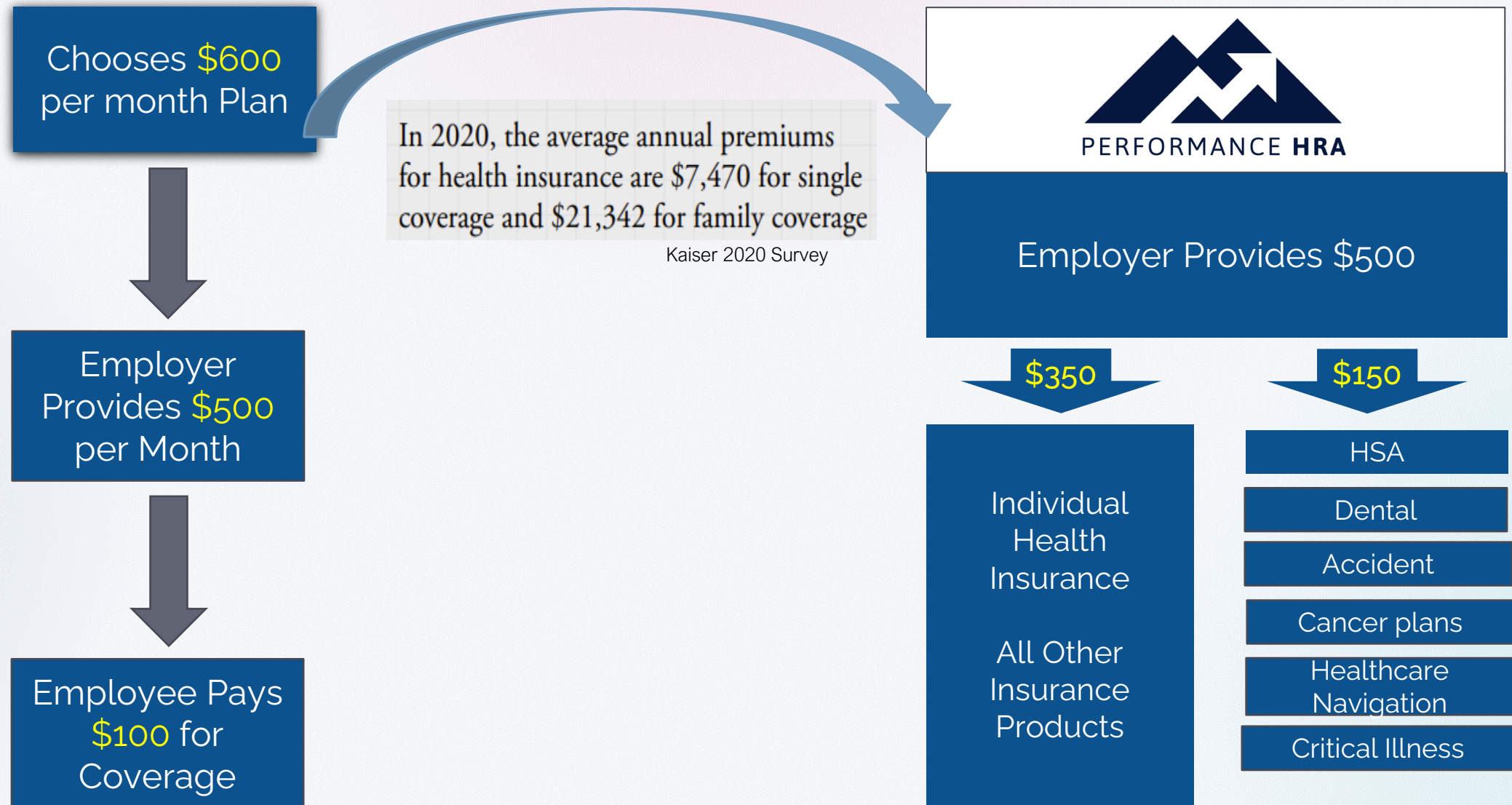


Who does that?

A Licensed, Certified ACA Broker

... YOU!

Employers Will Move to a New Model



The PPI Revenue Model

- **Most** ICHRA Admin are Charging Employers **\$20** PEPM & Brokers are adding \$20 - \$30 PEPM = \$40 - \$50 a month
- **Most** ICHRA platforms will want to **write the ACA themselves** and just pay you *a monthly fee per employee*
- **Our Platform** Cost to You - **\$15.00 PEPM** – You Can Charge an additional **\$10 - \$30 PEPM** = \$25.00 - \$45.00
- Plus – **You write and get paid** for the ACA sales

Marketing

Focus on 3 Topics

- Can I Reduce/Control Health Care Costs?
- Can I Deliver a More Equitable Benefits Program?
- Can I Expand Benefits to a Modern Workforce?

Talk to **Everybody!**

Client Consulting

Three-step Process

1. Employer Education / **Data Collection**
2. ER **Decision**: Go / No Go
3. If “GO” - Set Employer Monthly **Budget** and schedule enrollment

Year-Round Enrollment: ICHRA

- If ICHRA is established in a business, then new EE's may enroll in the ACA **all 12 months** of the year.
- An *affordable* ICHRA offering satisfies the “**Employer Mandate**” for groups 50+ even if only a **few** people enroll
- The IRS treats ICHRA contributions the same as a Qualified Employer Group health plan for tax purposes
- New EE's may get health coverage all year long (according to ER's participation eligibility guidelines, Day 1, 30, 60 etc.)



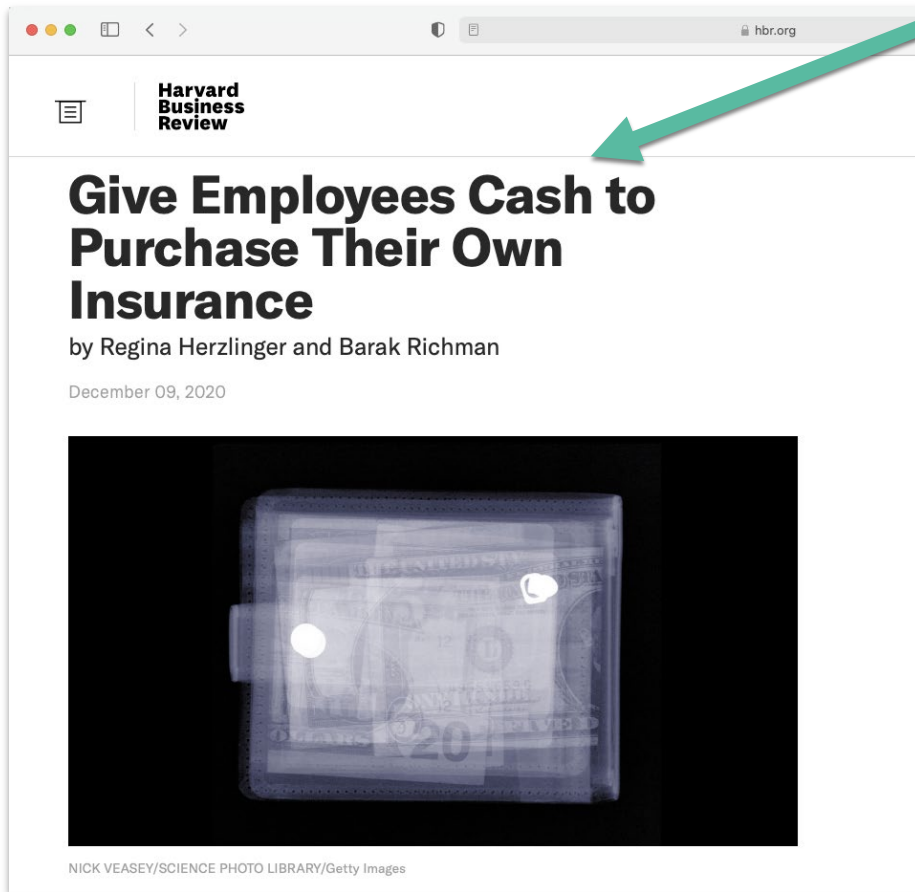
What Employees Want



56% of employees
will stay or leave
based on benefits

Harvard Business Review

Traditional Group Health Benefits are Dying



Coverage Type

☐ Single ☒ Family

☒ Premiums ☐ Worker Contributions

1999 to 2020

Optional Filter A

Optional Filter B

Compare

Coverage Type

☒ Single ☐ Family

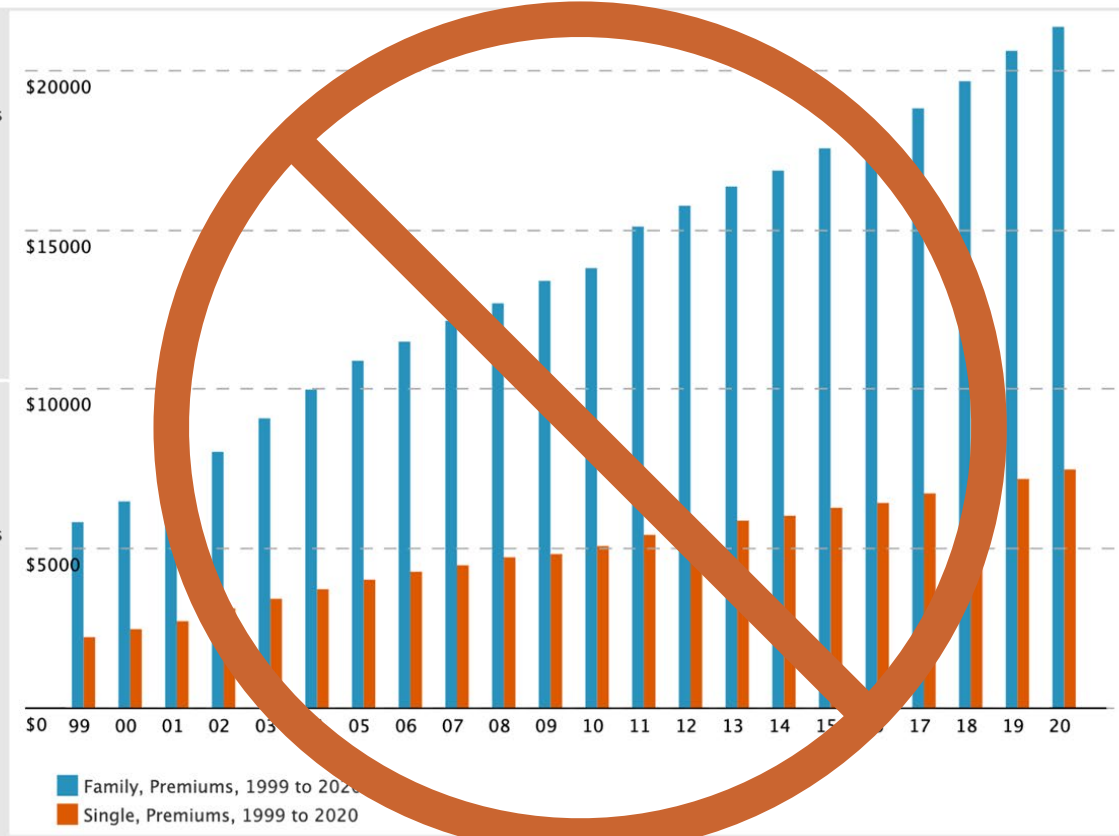
☒ Premiums ☐ Worker Contributions

Optional Filter A

Optional Filter B

Export Table Data

Group Plan Cost Averages



Group **vs.** Managed Individual

Simple breakdown of **how it works**

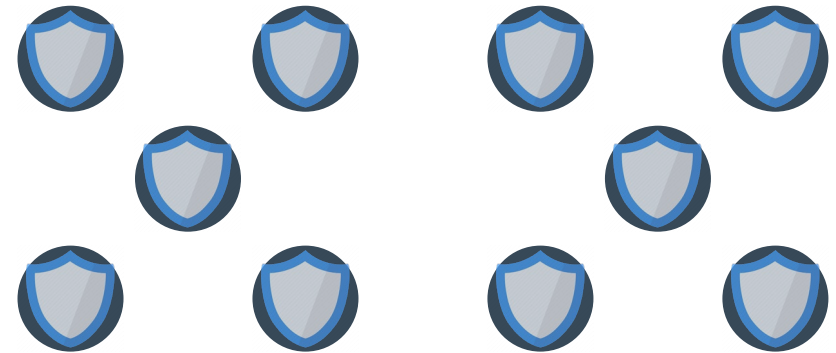
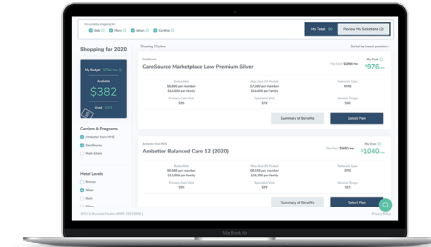
 **BlueCross BlueShield** 1 Group Plan



10 Employees, **1 Bill**

vs.

 **BlueCross BlueShield** 10 Individual Plans



10 Employees, **1 Bill**

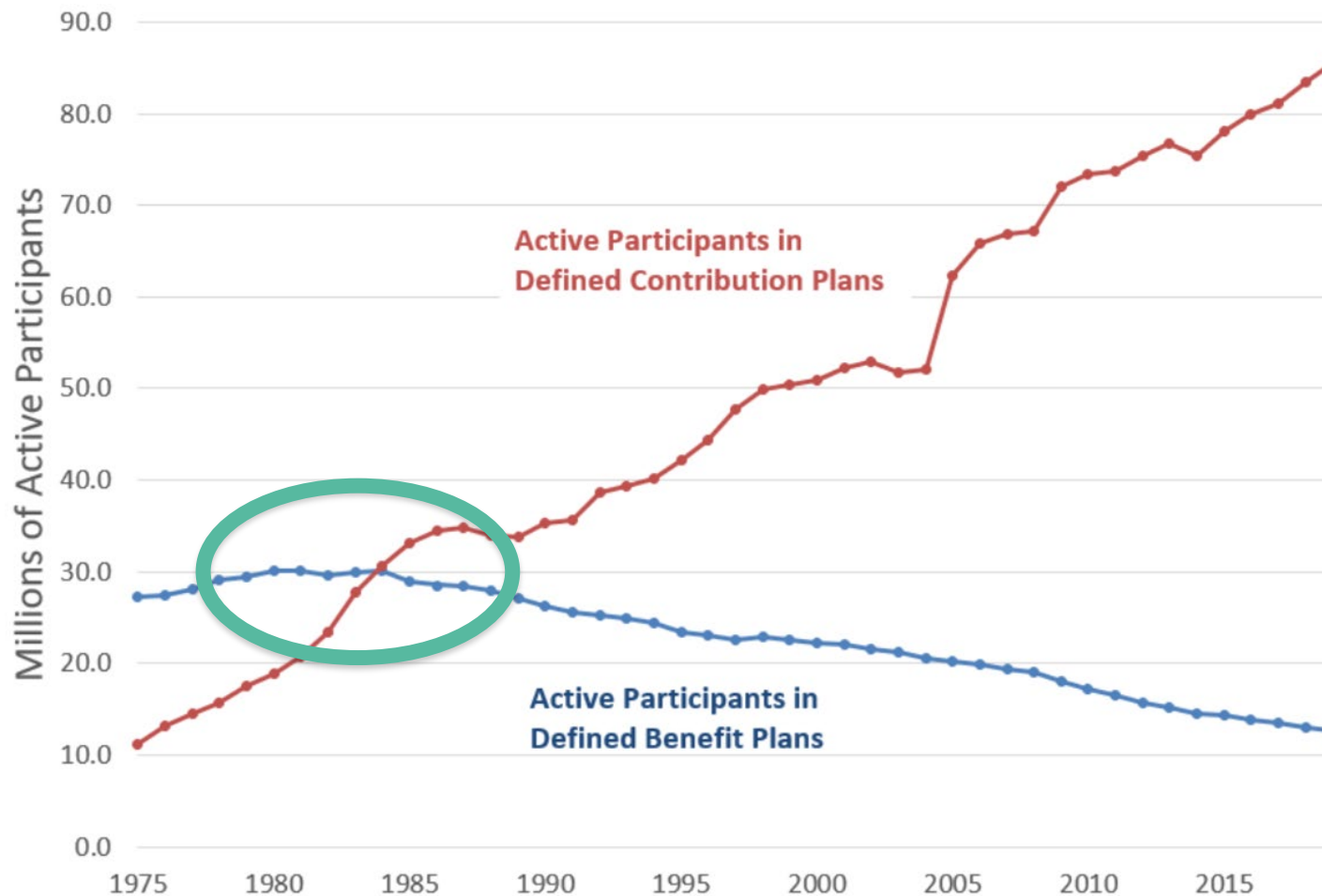


We've
been
here
before.

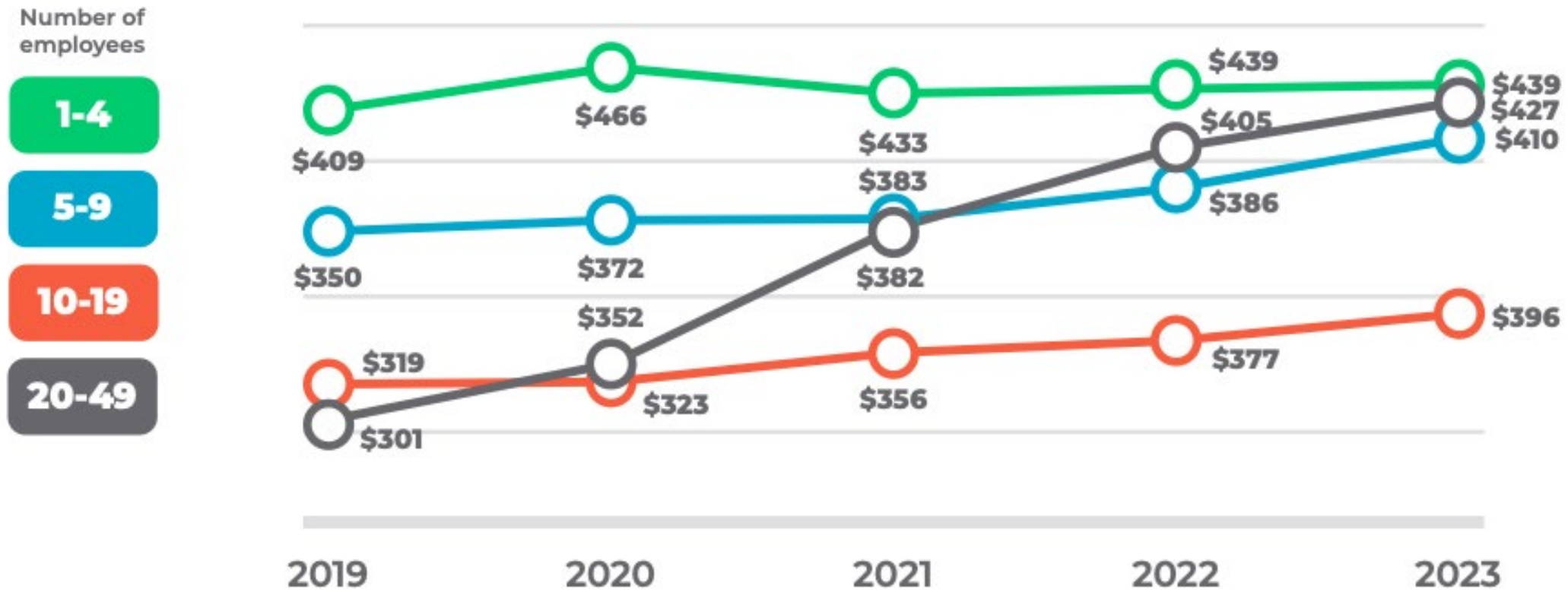
Group retirement plans already died. Group health plans are dying, too.

Figure 1. Active Participants in Private-Sector Pension Plans

1975-2019



Average Monthly Allowance by Org Size



The smallest organizations offer employees 2.8% more than the largest organizations.

Employees are buying *good* plans



MYTH: Employees don't understand health insurance and prefer their employers to select their plans.



TRUTH: Employees know what they need. The nearly even distribution between the metal tiers highlights how employees become wise health consumers evaluating the choices offered by ICHRA and QSEHRA in the context of their personal health needs.

Marketplace Plan Selections by Employees (2023)

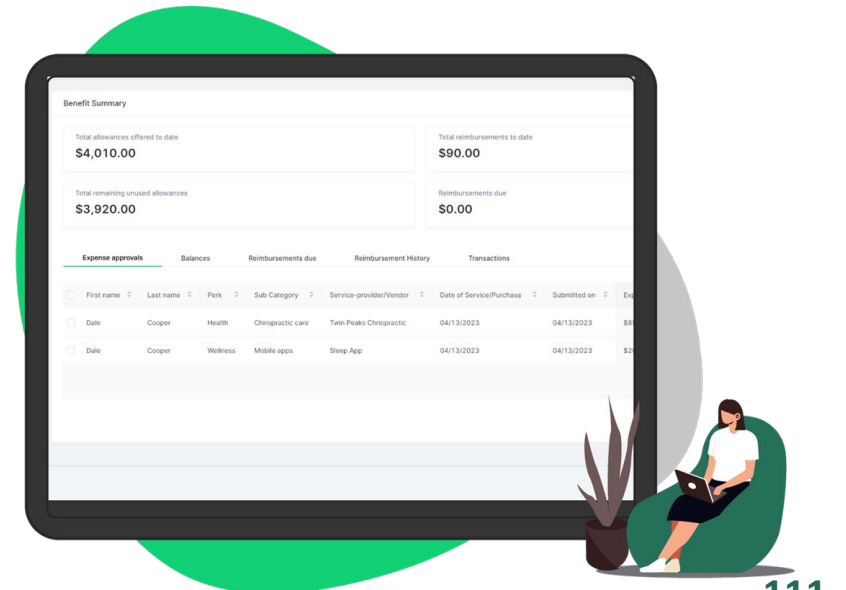


Breakdown of Average **Value** + Costs



What *You* bring ...

- **Enrollment is only available** through a Certified ACA Agent
- RA responsive, local agent
- Professional Guidance on Plan Choice
- Understanding of your unique Doctor/Specialist preferences
- Someone who can match your prescription formulary correctly
- Enrollment assistance
- Assistance with required Government documentation
- Help with 1095/Tax forms
- Updates to your plan when your family, work or location changes
- Help with other insurance needs like Dental, Life, Medicare, etc.





ICHRA Bootcamp & Accelerator Program:

Turning information into Results

- 6 Week Accelerator program for ***Alumni*** of 2025 ICHRA Bootcamp events. (*See Step 6 for recordings*)
- Contents:
 - **Week 1:** Qualification/Approach
 - **Week 2:** Discover/Quote
 - **Week 3:** Design
 - **Week 4:** Propose/Close
 - **Week 5:** Setup
 - **Week 6:** Service/Re-enroll

Scan this code to access all of the helpful tools, links and resources mentioned today.

- Training Materials
- Webinar registration links
- Contract Request Form
- PeekTraining.com Portal
- Agent Care Team contact
- *Links to more info on specific topics discussed today*



SCAN ME!

4 Health Tools

PEEK PERFORMANCE

peektraining.com



Non-ACA Health Plans

For Prospects who don't get a "subsidy" for an ACA Plan

- PSM (Population Science Management)
- Sedera
- UnitedHealthOne



Population Science Management / PSM

PEEK PERFORMANCE
peektraining.com

STEP 3



BE A
RECRUITER
(AGENT) WITH
PSM

HELP
“**WORKING**
OWNERS” GET
A GREAT
HEALTH PLAN!



2 Primary plan structures:

1. **Comprehensive** Health Plans

- **RPB** (Referenced Based Pricing) & PPO options
- “**Gig Care**” with **BCBS** PPO options too

2. A \$1M yr/\$5 Million “**Limited Medical**” plan options – very affordable and permanent.

Who qualifies?

- "Working Owners" get paid a fee to respond to survey questions quarterly. Anonymous. (Yes, they get a small ownership interest in the plan)
- They will be paid fees/dividends as a **K-1** (Not a W-2 or 1099)
- They're offered *Group* health plan benefits under PSM
- Reasonable premiums for those who don't get a tax credit/subsidy



Once you join

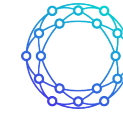
- There is No Pre-Existing Limitation
- Extraordinary Telemedicine and ***Concierge Care Navigation*** services to get you the right provider and even set appointments!
- ***Comprehensive*** plan has No \$ Limits for covered benefits
- Able to enroll in 44 states (See Map)
- Enrollees can use Providers / Facilities in all **50** states



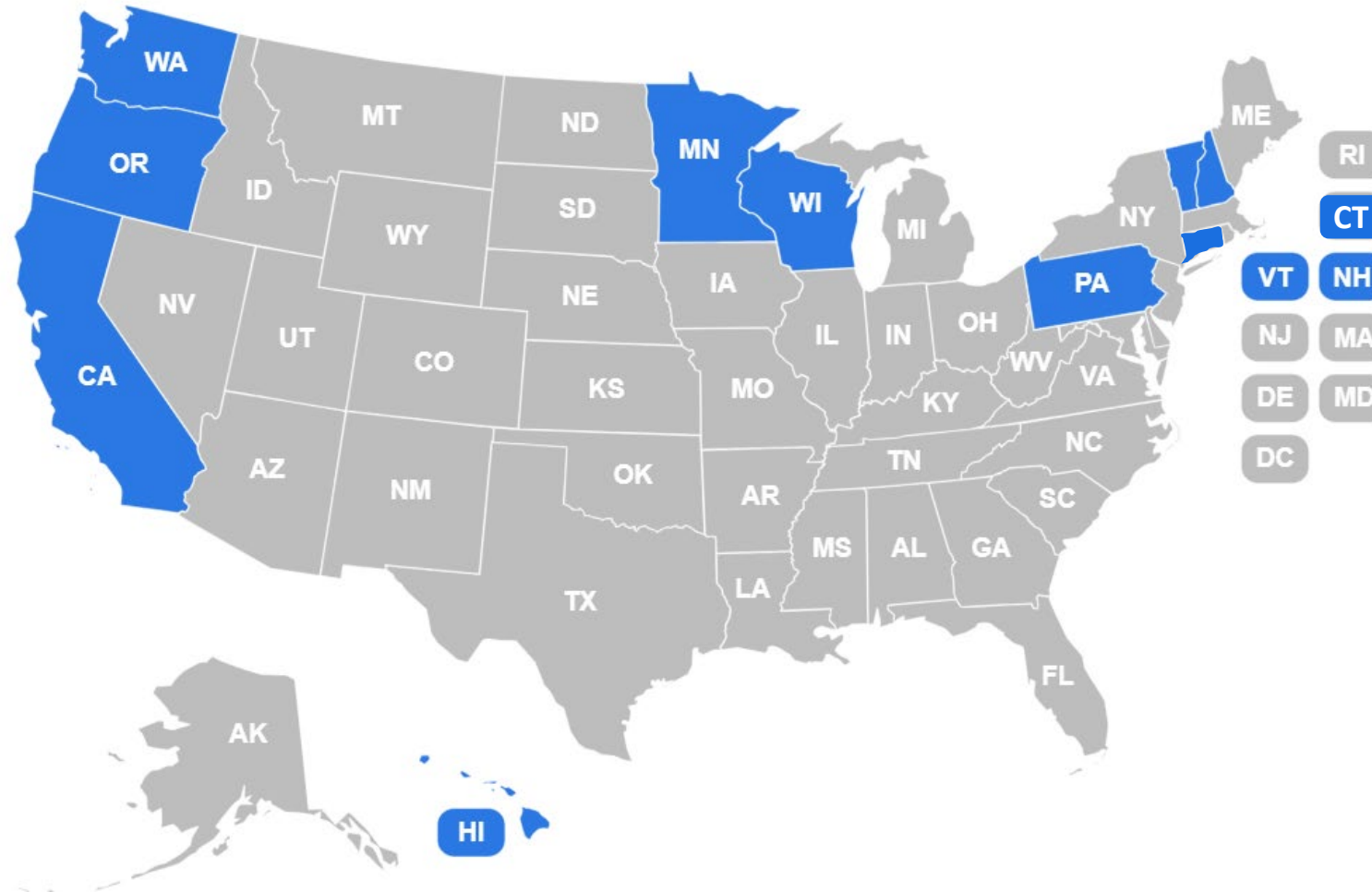
Population Science
Management

PSM - No Sell States

There are currently 9 no sell states for PSM.
They are CA, CT, HI, MN, NH, OR, PA, VT, WA, WI

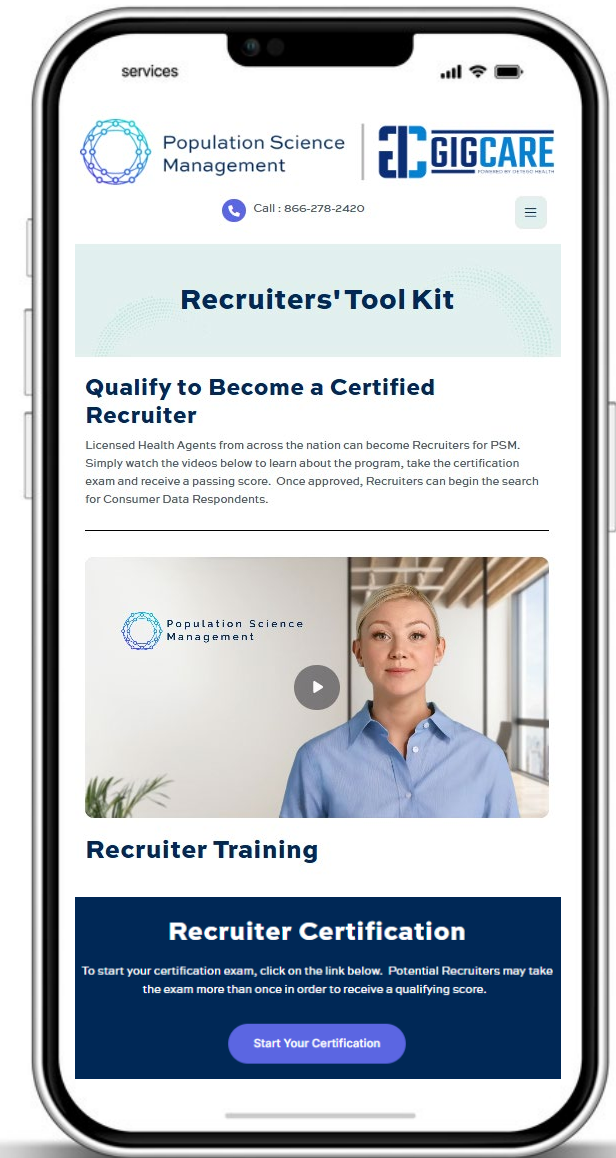


Population Science
Management



How to start

- Complete the 19-minute Certification class and take the certification test
- Access materials on our website
- E123 enrollment platform available in April
- Take ongoing training classes as offered
- Get all marketing materials approved before use
- Ask other agents to join your team. Strong overrides!
- Commissions are **Strong, LEVEL and pay Fast!**





PLAN COMPARISON SUMMARY

- GigCare PPO \$1,500
- GigCare PPO \$2,500
- GigCare EPO \$5,000
- GigCare EPO \$7,350
- GigCare PPO HSA \$5,000 HDHP

Schedule of Benefits Summary: Plan Comparison



Group Name: Population Science Management of Nebraska

Effective Date: January 1, 2025

PLAN	GIGCARE \$1,500 (PPO)		GIGCARE \$2,500 (PPO)		GIGCARE \$5,000 (EPO)		GIGCARE \$7,350 (EPO)		GIGCARE \$5,000 (PPO / HSA)	
NETWORK	IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT
Payment for Services										
Covered Services are reimbursed based on the Allowable Charge. Blue Cross and Blue Shield of Nebraska In-network Providers have agreed to accept the benefit payment as payment in full, not including Deductible, Coinsurance and/or Copayment amounts and any charges for non-covered Services, which are the Covered Person's responsibility. That means In-network providers, under the terms of their contract with Blue Cross and Blue Shield, can't bill for amounts over the Contracted Amount. Cost-sharing and reimbursement amounts for categories showing "Same as any other illness" may vary based on where services are rendered. PPO Plans: In some situations, Out-of-Network Providers can bill for amounts over the Out-of-Network Allowance. EPO Plans: There is no Out-of-Network coverage under these Plans.										
In-network Provider: The provider network is shown on your I.D. card. For help in locating In-network Providers, visit mygigcare.net . For certain Durable Medical Equipment, Independent Laboratory and Specialty Drug Services, the Doctor Finder may display providers that are considered Out-of-network for these types of Services. Please refer to your benefit book for additional information.										
Deductible (the amount the Covered Person pays each Calendar Year for Covered Services before the Coinsurance is payable)										
• Individual	\$1,500	\$3,000	\$2,500	\$5,000	\$5,000	N/A	\$7,350	N/A	\$5,000	\$10,000
• Family (Embedded*)	\$3,000	\$8,000	\$5,000	\$10,000	\$10,000		\$14,700		\$10,000	\$20,000
Coinsurance (the percentage amount the Covered Person must pay for most Covered Services after the Deductible has been met)										
• Covered Person Pays	30%	50%	30%	50%	30%	N/A	30%	N/A	30%	50%
• Plan Pays	70%	50%	70%	50%	70%		70%		70%	50%
Out-of-Pocket Limit (includes Deductible, Coinsurance and Copays)										
• Individual	\$7,350	\$20,000	\$7,350	\$20,000	\$7,350	N/A	\$9,200	N/A	\$6,550	\$20,000
• Family (Embedded*)	\$14,700	\$40,000	\$14,700	\$40,000	\$14,700		\$18,400		\$13,100	\$40,000

In-network and Out-of-network Deductible and Out-of-pocket Limits are separate and do not cross accumulate. All other limits (days, visits, sessions, dollar amounts, etc.) do cross accumulate between In-network and Out-of-network, unless noted differently. Day, session or visit limits for certain services shown on this summary are not applicable to Mental Health and/or Substance Use Disorders. Once the annual Out-of-pocket Limit is reached, most Covered Services are payable by the plan at 100% for the rest of the Calendar Year.

*Embedded – If you have single coverage, you only need to satisfy the individual Deductible and Out-of-pocket Limit amounts. If you have family coverage, no one family member contributes more than the individual amount. Family members may combine their covered expenses to satisfy the required family Deductible and Out-of-pocket amounts.



Plan Comparison: Summary of Benefits and Coverage

- \$1.0 Million / \$5.0 Million Plan with \$250 Deductible
- \$1.0 Million / \$5.0 Million Plan with \$500 Deductible
- \$1.0 Million / \$5.0 Million Plan with \$750 Deductible



Summary of Benefits and Coverage: Plan Comparison



\$1.0 Million / \$5.0 Million Plans: \$250 Deductible - \$500 Deductible - \$750 Deductible

Coverage: 06/01/24 - 05/31/25

PLAN	\$1M/\$5M - 250	\$1M/\$5M - 500	\$1M/\$5M - 750
Subject to plan allowable The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, go to www.detehealth.com or call 1-866-815-6001. For general definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment, deductible, provider, or other underlined terms see the Glossary. You can view the Glossary at www.dol.gov/ebsa/healthreform.com or www.ccoo.cms.gov			
Deductible (the amount the Covered Person pays each Plan Year for Covered Services before the Coinsurance is payable) <ul style="list-style-type: none">• Individual• Family Unit (Accumulated)	\$250 \$500	\$500 \$1,000	\$750 \$1,500
Maximum Annual Benefit Amount <ul style="list-style-type: none">• Yearly• Lifetime	\$1,000,000 \$5,000,000	\$1,000,000 \$5,000,000	\$1,000,000 \$5,000,000
Copays Please note that after your deductible has been met, you will still be responsible for paying copayments for your medical services.			
Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.) <ul style="list-style-type: none">• Annual Lab / X-Ray Tests• Annual Pap Smear / Mammogram• Cancer Screenings• Colonoscopies• Diabetic Supply• Immunizations• Other Preventative Screenings• Precision Rx (Prescriptions)• Telemedicine (including Mental Health Services)• Urgent Care and Office Visits• Well Baby Care• Wellness Visits			
Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.) <ul style="list-style-type: none">• Acupuncture• Children's Dental Check-Up• Children's Glasses• Children's Eye Exam• Dialysis• Biofeedback• Mental Health Services (except for Telemedicine)• Substance Abuse Services• Organ Transplant Services			
Services may require Preauthorization. Failure to obtain Preauthorization will result in denial of benefits.			
Precertification Precertification is required for all in-hospital admissions, imaging (CT/PET/MRI/MRA), home health, skilled nursing, hospice, DME (over \$500), chemotherapy/radiation, sleep studies, prosthetics/orthotics, therapies (chiropractic, cardiac, PT/OT/ST), and outpatient surgery. Please refer to the plan document for a complete list of all services that require precertification under your plan. A 50% (up to \$2,500) penalty will apply for not obtaining precertification.			
This illustration describes the plan in an easily understood manner and is presented as a matter of general information only.			
The contents are not to be accepted or construed as a substitute for the provisions of the plan document or summary plan description, which contains more exact terms and detailed provisions of the plan; and it is not to be considered a policy of insurance.			
All Benefits Payable Under This Plan Are Subject To The Plan Allowable.			

Sedera

Medical Cost Sharing

www.peaktraining.com

Step 3



Sedera

The Sedera Solution

Sedera is a **Medical Cost Sharing Community** made up of Members who share the cost of large medical expenses.

We **empower** Members **with tools and resources** to lower the cost of healthcare.

We provide **affordability, price transparency, freedom of choice and peace of mind.**



Sedera Puts YOU in Control.



Control Your Costs



Choose Value-Driven Care



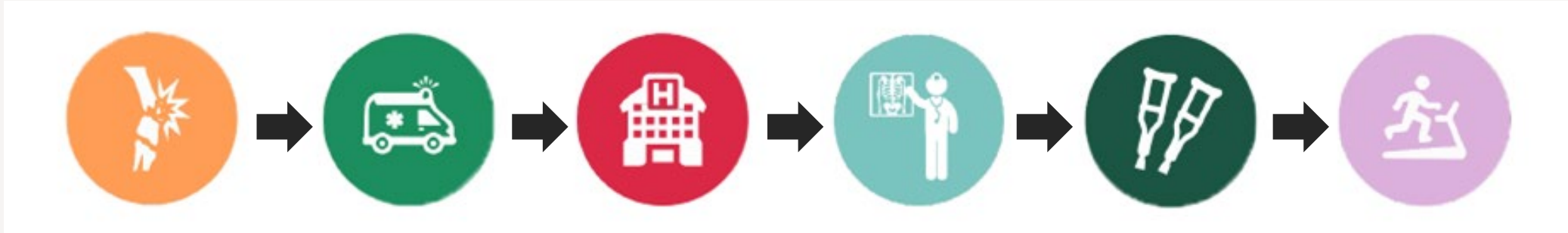
Get Real Support

What Makes Sedera Medical Cost Sharing Unique



Sedera Medical Cost Sharing is not insurance and is NOT issued or offered by an insurance company. In order to participate in the membership, Members are required to agree to the Sedera Ethical Beliefs and Principles and Commitments. Membership in the Sedera Medical Cost Sharing Community, by and of itself, does NOT make any representations that it satisfies any federal or state law requirements for healthcare coverage or insurance.

Sedera for the Large and Unexpected Needs



A “Need” is one or more shareable medical expenses caused by a single injury or illness to a Member that exceeds their IUA.

Initial Unshareable Amount (IUA)

The amount Members pay without help from the Community.

Needs that exceed your IUA

\$500, \$1,000, \$1500, \$2500, \$5000

are eligible for sharing with the Community.*

Limiting your costs

3 IUA’s per Membership Year, 4th eligible Need fully sharable without IUA.*



*Subject to the applicable Sedera Membership Guidelines.

The Sedera Membership

Health benefits for all

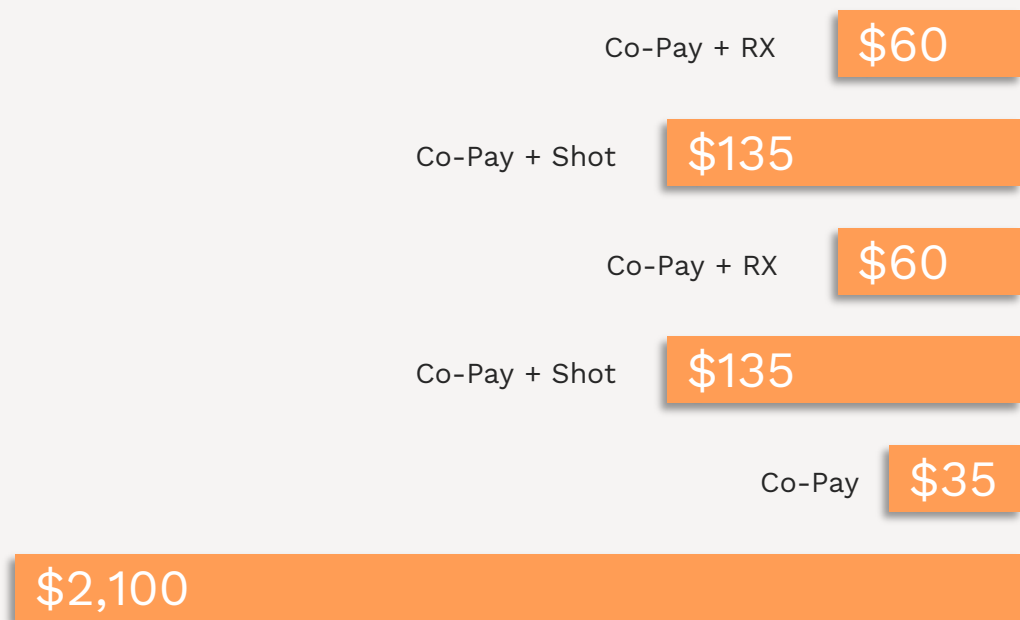
- All can join
- 3 Year (Graduated) Pre-EX
- Unlimited Benefits for medically necessary health needs
- Reasonable monthly contributions
- Strong level compensation



Health Insurance vs Medical Cost Sharing



Health Insurance - \$5000 Deductible



\$2,525
\$19,800*
\$22,325

Dr Visit 1

Dr Visit 2

Dr Visit 3

Dr Visit 4

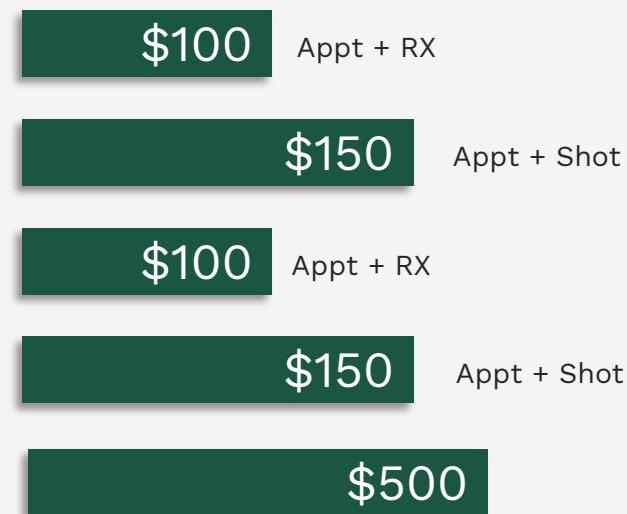
Specialist

Surgery

Patient out-of-pocket
+
Annual Costs

Total

Medical Cost Sharing - \$1000 IUA



SHARED

\$1000
\$8,196*
\$9,196

*Based on Family of 4 over the age of 30 with DPC Membership

Existing Medical Conditions Sharing Rules

Conditions for which symptoms and/or treatment existed **within 36 months** prior to membership.

- **Year 1:** **No** cost sharing for the condition
- **Year 2:** A **\$25,000** sharing limit for the condition
- **Year 3:** A **\$50,000** sharing limit for the condition
- **Year 4:** Condition eligible for **full sharing**



Individuals are not excluded from the Sedera Community due to existing medical conditions.

Preventive Care Sharing Rules



Members are responsible for preventive care costs,* other than larger, high-cost routine diagnostic procedures of:

- Screening colonoscopy age **45+**
- Screening mammogram age **40+**
- Childhood immunizations by schedule **to age 18**
- Annual flu vaccine for **all ages**

*Subject to the applicable Sedera Membership Guidelines for age, membership period, and/or monetary limits for certain preventative care, and only if the Member does not have access to preventative care through another responsible payor.

Sedera TRU Benefit Breakdown

Sedera Healthshare

No caps after reaching IUA (Initial Unshareable Amount)

Pre-Existing Conditions – 3 year look back

Tiered Sharing on pre-existing conditions (1st yr - \$0; 2nd yr - \$25k; 3rd yr - \$50k; 4th yr – full sharing)

Only responsible for 3 IUAs in a 12 month window

TRU-Virtual First

Unlimited \$0 Virtual:

*Primary care, Mental Health, and Specialist care

In-Person:

*Urgent Care Visits

*\$0 for first 6 visits

Unlimited Quest Labs:

*\$0 on most labs

Discounts:

*Chiropractic and Gym

TRU-DPC Plus

Direct Primary Care Network

Unlimited \$0 Virtual:

*Primary care, Urgent Care and Specialist care

Unlimited In-Person:

*DPC - \$10/visit

*Urgent Care - \$25/visit

Unlimited Quest Labs:

*\$0 on most labs

Discounts:

*Chiropractic and Gym

MyTRUrx

800+ \$0 Generic Maintenance Meds:

*90-Day Supply by mail

Acute Meds:

*Immediate Need

Discounts:

*Over-the-Counter Meds

*Save on Diabetes Supplies

*64,000 Pharmacies Nation-Wide

Additional Products

Life Insurance

Dental, Vision & Hearing

Accidental Expense:

*Can help cover IUA

Critical Illness:

*Pays lump sum for major illnesses

Disability Insurance

Medicare Supplements

Virtual First Plus – Sedera Membership Rates

5000 IUA		2500 IUA		1500 IUA		1000 IUA		500 IUA	
Member Only	Monthly Price	Member Only	Monthly Price	Member Only	Monthly Price	Member Only	Monthly Price	Member Only	Monthly Price
Age 18-29	\$198	Age 18-29	\$239	Age 18-29	\$256	Age 18-29	\$326	Age 18-29	\$375
Age 30-39	\$239	Age 30-39	\$272	Age 30-39	\$295	Age 30-39	\$369	Age 30-39	\$425
Age 40-49	\$243	Age 40-49	\$276	Age 40-49	\$308	Age 40-49	\$375	Age 40-49	\$450
Age 50-59	\$321	Age 50-59	\$425	Age 50-59	\$444	Age 50-59	\$508	Age 50-59	\$639
Age 60-64	\$327	Age 60-64	\$436	Age 60-64	\$497	Age 60-64	\$519	Age 60-64	\$653
Member Spouse		Member Spouse		Member Spouse		Member Spouse		Member Spouse	
Age 18-29	\$344	Age 18-29	\$438	Age 18-29	\$475	Age 18-29	\$619	Age 18-29	\$724
Age 30-39	\$438	Age 30-39	\$507	Age 30-39	\$559	Age 30-39	\$662	Age 30-39	\$778
Age 40-49	\$443	Age 40-49	\$514	Age 40-49	\$581	Age 40-49	\$674	Age 40-49	\$820
Age 50-59	\$602	Age 50-59	\$749	Age 50-59	\$848	Age 50-59	\$920	Age 50-59	\$1,174
Age 60-64	\$611	Age 60-64	\$760	Age 60-64	\$876	Age 60-64	\$937	Age 60-64	\$1,193
Member Children		Member Children		Member Children		Member Children		Member Children	
Age 18-29	\$349	Age 18-29	\$444	Age 18-29	\$481	Age 18-29	\$626	Age 18-29	\$737
Age 30-39	\$444	Age 30-39	\$516	Age 30-39	\$565	Age 30-39	\$671	Age 30-39	\$789
Age 40-49	\$452	Age 40-49	\$522	Age 40-49	\$588	Age 40-49	\$681	Age 40-49	\$831
Age 50-59	\$611	Age 50-59	\$757	Age 50-59	\$859	Age 50-59	\$932	Age 50-59	\$1,188
Age 60-64	\$620	Age 60-64	\$771	Age 60-64	\$887	Age 60-64	\$947	Age 60-64	\$1,208
Member Family		Member Family		Member Family		Member Family		Member Family	
Age 18-29	\$548	Age 18-29	\$734	Age 18-29	\$799	Age 18-29	\$921	Age 18-29	\$1,086
Age 30-39	\$645	Age 30-39	\$752	Age 30-39	\$830	Age 30-39	\$937	Age 30-39	\$1,107
Age 40-49	\$656	Age 40-49	\$763	Age 40-49	\$865	Age 40-49	\$953	Age 40-49	\$1,169
Age 50-59	\$885	Age 50-59	\$1,044	Age 50-59	\$1,187	Age 50-59	\$1,337	Age 50-59	\$1,710
Age 60-64	\$898	Age 60-64	\$1,059	Age 60-64	\$1,225	Age 60-64	\$1,357	Age 60-64	\$1,738

Sedera Member Resources

Medication Sharing Rules



Regular, routine medicines (“Maintenance”)

- Sharing eligible for **first 120 days** following a new diagnosis

Hospital administered medications

- Fully shareable as part of an eligible Need

Medicines to recover from illness or injury (“Curative”)

- Fully shareable as part of an eligible Need

Maternity Sharing Rules

Maternity specific Initial Unshareable Amount applies: **2x the Member's selected IUA** up to a **maximum of \$5,000.***

Newborn members must be added to a household no later than **30 days after birth** to be eligible for shared funds.



*For pregnancies that begin after the membership Effective Date the Maternity Need will be generally Shareable. For a pregnancy that began prior to membership Effective Date, sharing is limited.

Medical Shopping Concierge



Medical Shopping Concierge helps members shop for local, **value-driven prices** on office visits and smaller diagnostics such as X-rays, ultrasounds, and medications.

- Members request a list of providers, procedures, and/or prescriptions.
- Sedera provides a list of fairly priced, local recommendations within 3-5 days.
- Members compare these options to find the right fit.

We shop the best value, quality, and price for most things in life - shouldn't healthcare be the same?

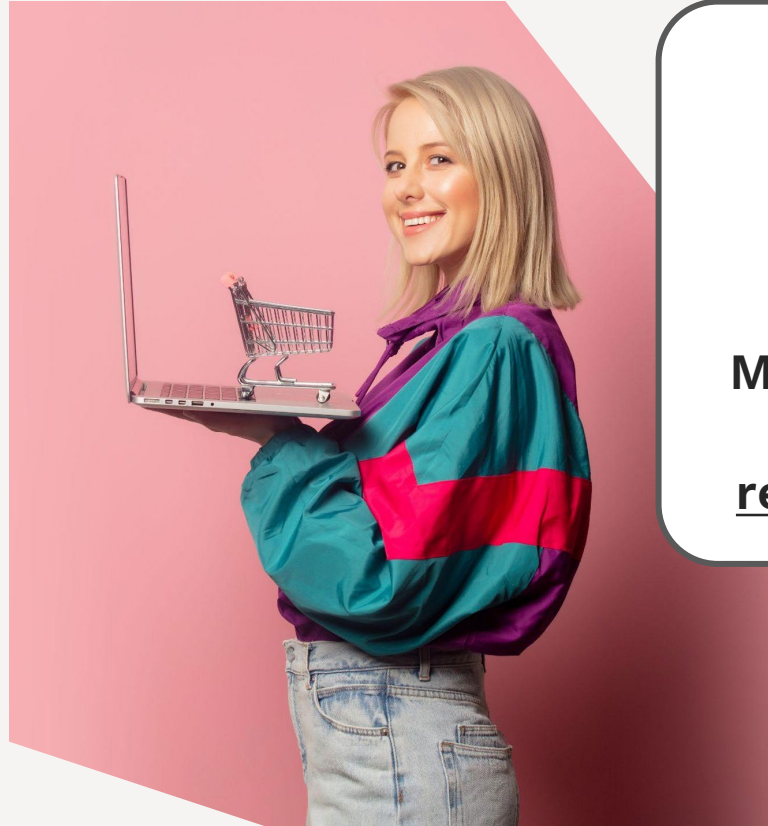
Savvos Cash Pay Marketplace



Savvos is the nation's largest marketplace of affordable cash prices for shoppable medical care, imaging, outpatient surgery, labs, and more.

By using Savvos, Sedera Members are able to:

- Find reduced costs on medical procedures, saving up to 90% compared to local hospital prices
- Pay just once for all provider services for a procedure
- Communicate with Sedera Member Services, medical professionals, and Savvos all in one message center.



**Members using Savvos
are eligible for a
reduction of their IUA!**

Get Real Support

Speak with a real, live expert who can answer your questions and walk you through the process.

Sedera Members Services helps Members:

- Shop for the best prices for medical services
- Understand the Medical Cost Sharing Guidelines
- Navigate the Needs Case process





**There's a better way to pay for
healthcare — Sedera.**

Sedera Training Webinar

Tues Sept 2nd @ 3:00 PM (EST)



Register
Here



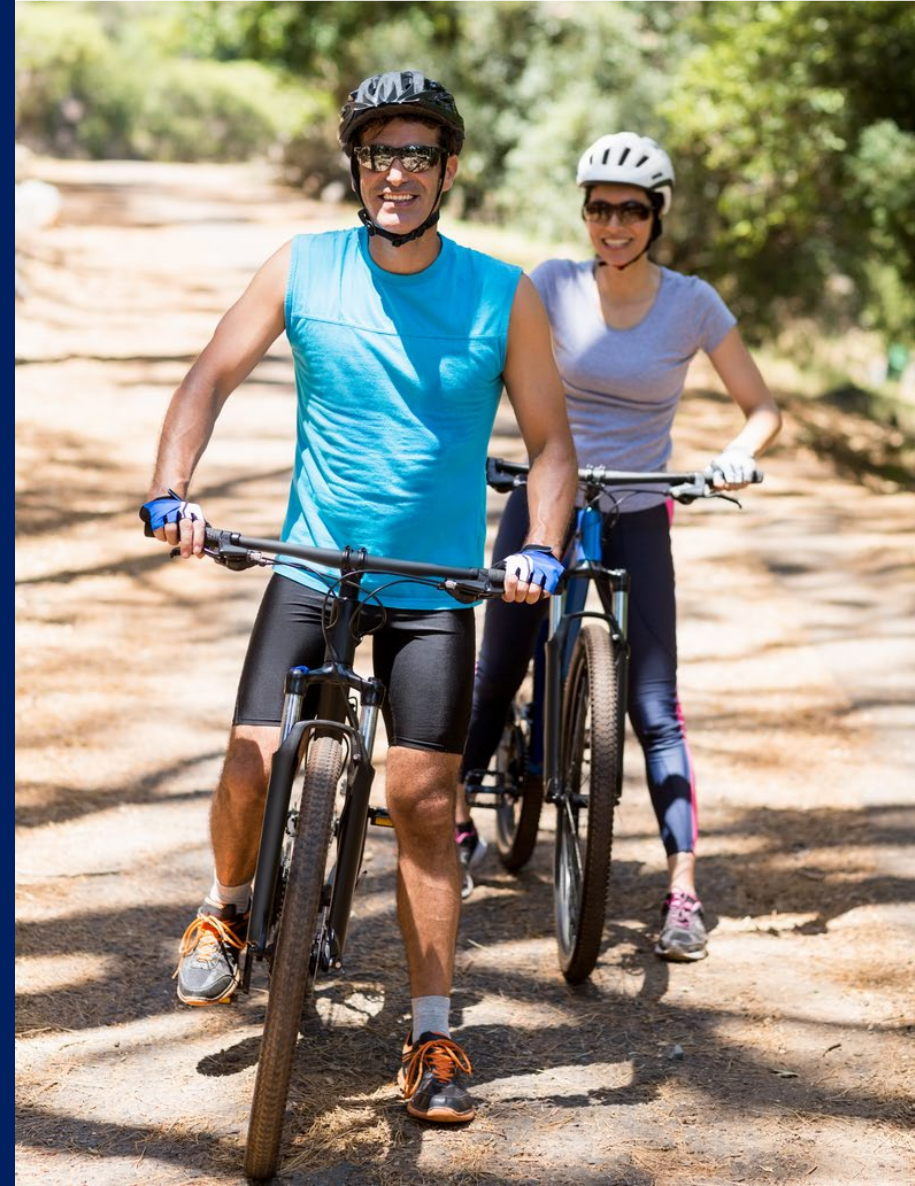
UnitedHealthOne

www.peaktraining.com

Step 3 - UnitedHealthOne



United
Healthcare



Short Term Medical Plans

Peek Performance will be appointing agents with **United Health One** and **Allstate** for STM plans

Why STM Plans?

- These are **affordable** and **reasonably comprehensive** options for healthy people who *don't* get a subsidy
- Commissions are strong
- There **IS** a Pre-Ex-Limitation on all plans
- Currently available for up to **120 days**. Hopefully available for up to **36 months** in most states **November of 2025**. No announcement yet ...
- Much deeper coverage than “Hospital Indemnity” plans



UnitedHealthOne – Under 65

UHO: Under 65 Product Deep-Dive

UnitedHealthOne > UHO: Under 65 Product Deep-Dive **IN PROGRESS**

Agenda

- **Guarantee Issue Under 65 Ancillary**
 - HospitalWise (GI 18-65)
 - Hospital SafeGuard (GI 18-65)
 - CriticalGuard (GI 18-74 / SI 18-90)
 - AccidentWise (GI 18-75)
 - Accident ProSeries (GI 18-65)
- **Quote & Enroll Review**
- **Bonus Opportunities**

5:10

[< Previous Lesson](#) [Mark Complete ✓](#) [Next Lesson >](#)

[Back to Course](#)

Guarantee Issue Under 65 Ancillary:

- HospitalWise (GI 18-65)
- Hospital SafeGuard (GI 18-65)
- CriticalGuard (GI 18-74 / SI 18-90)
- AccidentWise (GI 18-75)
- Accident ProSeries (GI 18-65)
- DentalWise (GI 18-99)
- VisionWise (GI 18-99)

UnitedHealthOne – Over 65

UHO: Over 65 Product Review

UnitedHealthOne > UHO: Over 65 Product Review **IN PROGRESS**

Agenda

- **Medical Financial Protection Products**
 - AdvantageGuard (GI 60-74 / SI 60-90)
 - CriticalGuard (GI 18-74 / SI 18-90)
 - AccidentWise (GI 18-75)
- **Ancillary**
 - DentalWise (GI 18-99)
 - VisionWise (GI 18-99)
- **Bonuses**

[Previous Lesson](#) [Mark Complete](#) [Back to Course](#)

Medical Financial Protection Products:

- AdvantageGuard (GI 60-74 / SI 60-90)
- CriticalGuard (GI 18-74 / SI 18-90)
- AccidentWise (GI 18-75)

Ancillary:

- DentalWise (GI 18-99)
- VisionWise (GI 18-99)



UnitedHealthOne

Learn about UnitedHealthOne products & enrollment platform. Click the Training Videos link below to watch carrier specific training and learn about the product portfolio, the UHO quoting and enrollment platform, and a deep dive into the Under 65 and Over 65 products.

UHO Training Videos

To request a contract, [click here to complete an Agent Contract Request](#) form, and select "UnitedHealthOne" under Ancillary Plans.

UnitedHealthOne Training:



UnitedHealthOne



- ☐ UHO Agent Resources
- ☒ **UHO: Intro and Overview**
- ☐ UHO: Quote & Enroll Platform Demo
- ☐ UHO: Under 65 Product Deep-Dive
- ☐ UHO: Over 65 Product Review

UnitedHealthOne

- Contract Now!
- Competitive commissions, 3 mo advance, sales bonus
- Learn more at www.peaktraining.com 3H



UnitedHealthOne

Learn about UnitedHealthOne products & enrollment platform. Click the Training Videos link below to watch carrier specific training and learn about the product portfolio, the UHO quoting and enrollment platform, and a deep dive into the Under 65 and Over 65 products.

[UHO Training Videos](#)

To request a contract, [click here to complete an Agent Contract Request](#) form, and select "UnitedHealthOne" under Ancillary Plans.

UHO Portfolio



Short Term

Short term health insurance designed to provide a fast, flexible, and budget-friendly option to help bridge a gap in coverage



Health ProtectorGuard

Health ProtectorGuard is a fixed indemnity plan designed to pay preset cash benefits for eligible medical services covered by the plan



AdvantageGuard

Hospital indemnity with "Plan Recommendation" tool to help find the right benefits for your client



DentalWise

Insurance plans to help with many dental expenses, like annual exams, cleanings, cavities, crowns and more



Dental Savings Complete™

Dental Savings Complete™



VisionWise

Vision plans for individuals and families with coverage for eye exams, eyeglass lenses and frames and contacts

UHO Portfolio



AccidentWise

Accident Insurance that pays cash benefits regardless of other coverage, to help offset out-of-pocket medical costs



Accident Pro Series

Multiple plans options with guaranteed issue option along with multiple benefit options



CriticalGuard

Pays lump sum benefits for cancer, heart-related issues, stroke and more



Term Life

Life Insurance with 10 or 20 year terms



Hospital SafeGuard GI

Hospital SafeGuard GI offers fixed benefits paid for qualifying expenses, like those coming from a hospital stay, surgery or trip to the emergency room



HospitalWise

3 Bundled indemnity plan options



Telehealth

Healthiest You and New Benefits



Mental Health Complete Plus

Telehealth access to mental health professionals

Physicians Mutual: *“Innovative G”*



Physicians Mutual®



Physicians
Mutual



Agent Incentive Guide

January 1, 2025

YOUR LOCAL SUPPORT



Rick Izze
Sales Director
704-310-0109

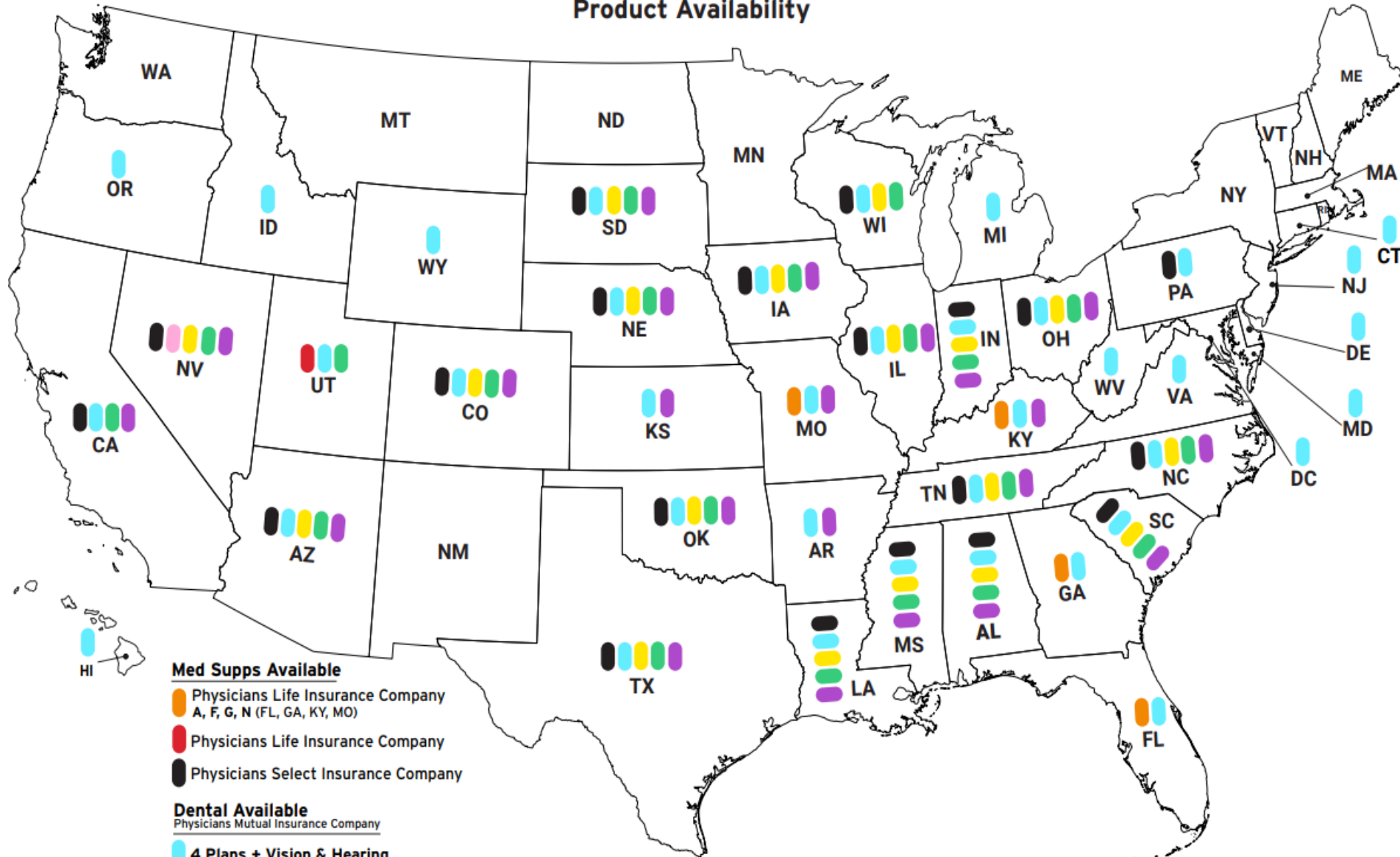


Bruce Hamdorf
Broker Relationship Manager
972-533-7872

Physicians Mutual

- Headquartered in Omaha NE
- Established in 1902- 123 years old in 2025
- Selling Medicare Supplements over 55 years
- Selling Exclusive Innovative plan for 16 years
- A+ rating by Weiss
- Local Support
- Available on CSG
- Available on Connecture
- 95% customer satisfaction rating

Physicians Mutual Family Product Availability



Please refer to PMA5983-1024 and S3 for all product availability and rules.

L726 must use paper application and be done in person.



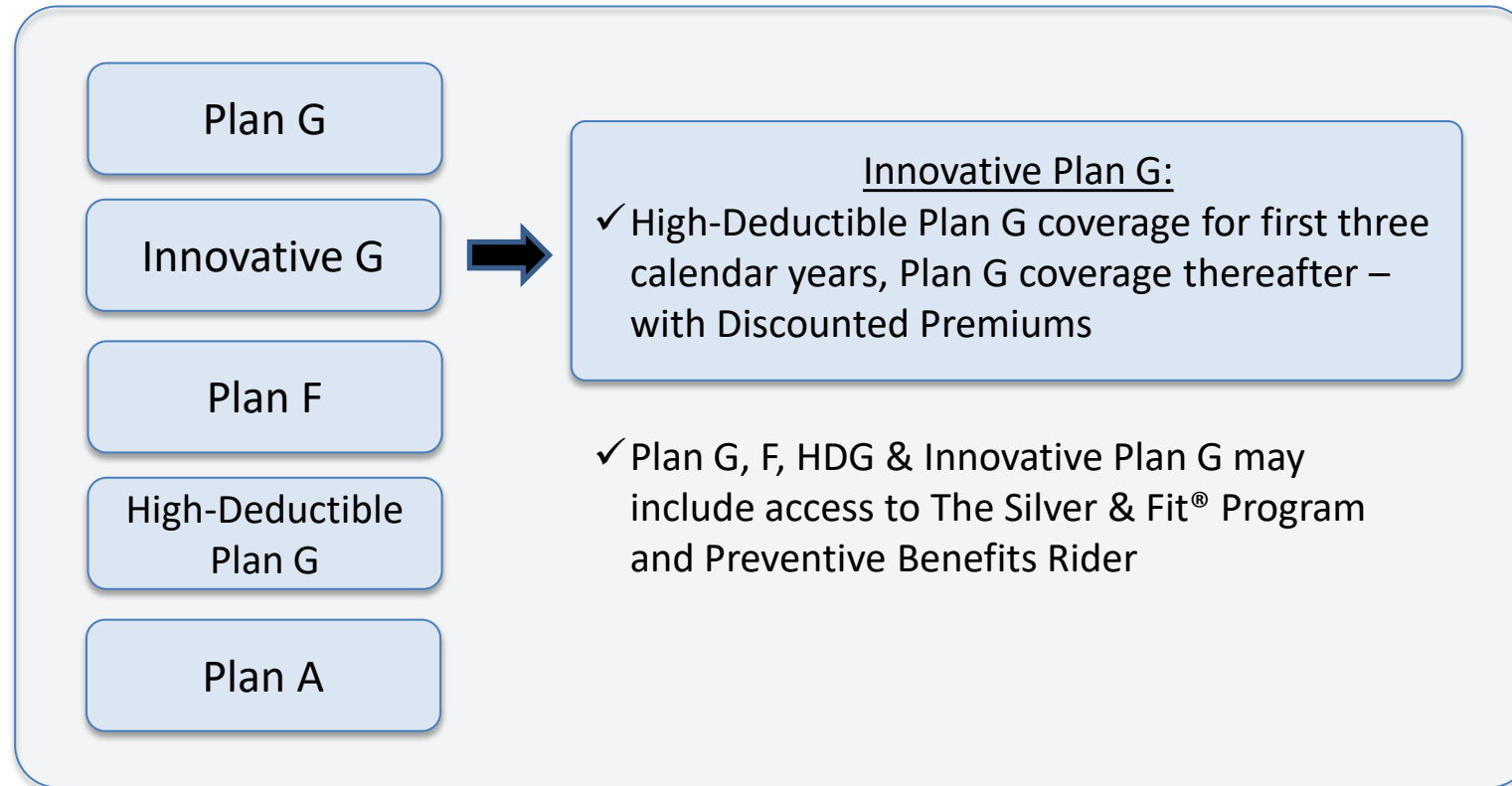
Medicare Supplement Sales

- Medicare has created the Need and the GAP
- People aging in T65 (part B) are Open Enrollment Apps
- People leaving an Employers plan are GI Apps
- People leaving a Medicare Advantage plan
 - Can be Voluntary – Underwritten
 - Can be In-Voluntary – GI
- People over age 65 are usually Underwritten
 - Ages 65-68 are Simplified Underwritten
 - Ages 69 and over are Fully Underwritten

Physicians Mutual Med Supps

- **Exclusive** Medicare Supplement plan - Innovative
- **Exclusive** Unlimited preventive care benefits Rider
- Silver & Fit Gym Membership included with *Preventive Rider*
- **Exclusive** Two-year selection guarantee
- Write T 65 Med Supps 7 months in advance
- 10% Non-tobacco discount
- 10% Household discount

Plans Offered



Continuing Great Features

Innovative

- Temporary High-Deductible coverage, with **discounted Plan G rates for life**
- Preventive benefits **not** subject to the deductible
- Rates may be one of the lowest for plans that include optional rider benefits
- Long-term ownership rewarded with **full benefits at a lower price**

Two-Year Selection Guarantee

- Minimizes customer reluctance to purchase
- Flexibility allows customer freedom if finances, understanding of Medicare, or anything else changes
- Available to customers that are new to the Physicians Mutual family

And Introducing One More

\$9.50
In SC

\$9.53

Preventive Benefits Plus Rider

Preventive Care

- Fills the gaps in Medicare's Preventive Benefits
- No dollar limit on the benefits you can receive
- Defined as an Innovative Benefit under Medicare Supplement regulations
- Most carriers do not go beyond standard benefits
- **No other carrier offers this benefit**



The Silver & Fit® Program

- Free access to over 14,800 fitness centers, including the **YMCA**
- Discounted access to 5,000 premium fitness centers
- Online library of hundreds of videos
- Daily classes on social media channels
- Free home fitness kit each year



Physicians Mutual®
Insurance for all of us.®

Preventive Benefit Examples

Procedures	Average Cost	Value Per Month
Physicals	\$360 - \$960	\$30 - \$80
Life Line Screenings	\$149 - \$500	\$12 - \$45
Thermography	\$180 - \$420	\$15 - \$35
CBC - Broad Spectrum Blood Panel	\$600 - \$720	\$50 - \$60
Cologuard	\$600 - \$780	\$50 - \$65
DexaScan	\$1700	\$140

Ability to Code tests Preventive BEFORE symptoms are present...

PRICELESS!



Physicians Mutual®
Insurance for all of us.®

Physicians Mutual®
Insurance for all of us.®

The Power of the Innovative

North Carolina's Plan G Comparison			
AGE	Innov G	Plan G	Annual Difference
65	\$84.16	\$112.66	\$342.00
66	\$90.05	\$120.55	\$365.94
67	\$96.35	\$128.98	\$391.56
68	\$103.10	\$138.01	\$418.96
69	\$110.32	\$147.67	\$448.29
70	\$118.04	\$158.01	\$479.67
71	\$126.30	\$169.07	\$513.25
72	\$135.14	\$180.91	\$549.18
73	\$144.60	\$193.57	\$587.62
74	\$154.72	\$207.12	\$628.75
75	\$165.56	\$221.62	\$672.77
76	\$177.14	\$237.13	\$719.86
77	\$189.54	\$253.73	\$770.25
78	\$202.81	\$271.49	\$824.17
79	\$217.01	\$290.50	\$881.86
80	\$232.20	\$310.83	\$943.59
81	\$248.45	\$332.59	\$1,009.64
82	\$265.85	\$355.87	\$1,080.31
83	\$284.46	\$380.78	\$1,155.94
84	\$304.37	\$407.44	\$1,236.85
85	\$325.67	\$435.96	\$1,323.43
Total Savings			\$15,343.89
Female Rate/Non Tobacco/House Hold Discount Used 7% Annual Rate of Increase			



Physicians Mutual®
Insurance for all of us.®

CMS Changes & ACA Updates

PEEK PERFORMANCE

peektraining.com



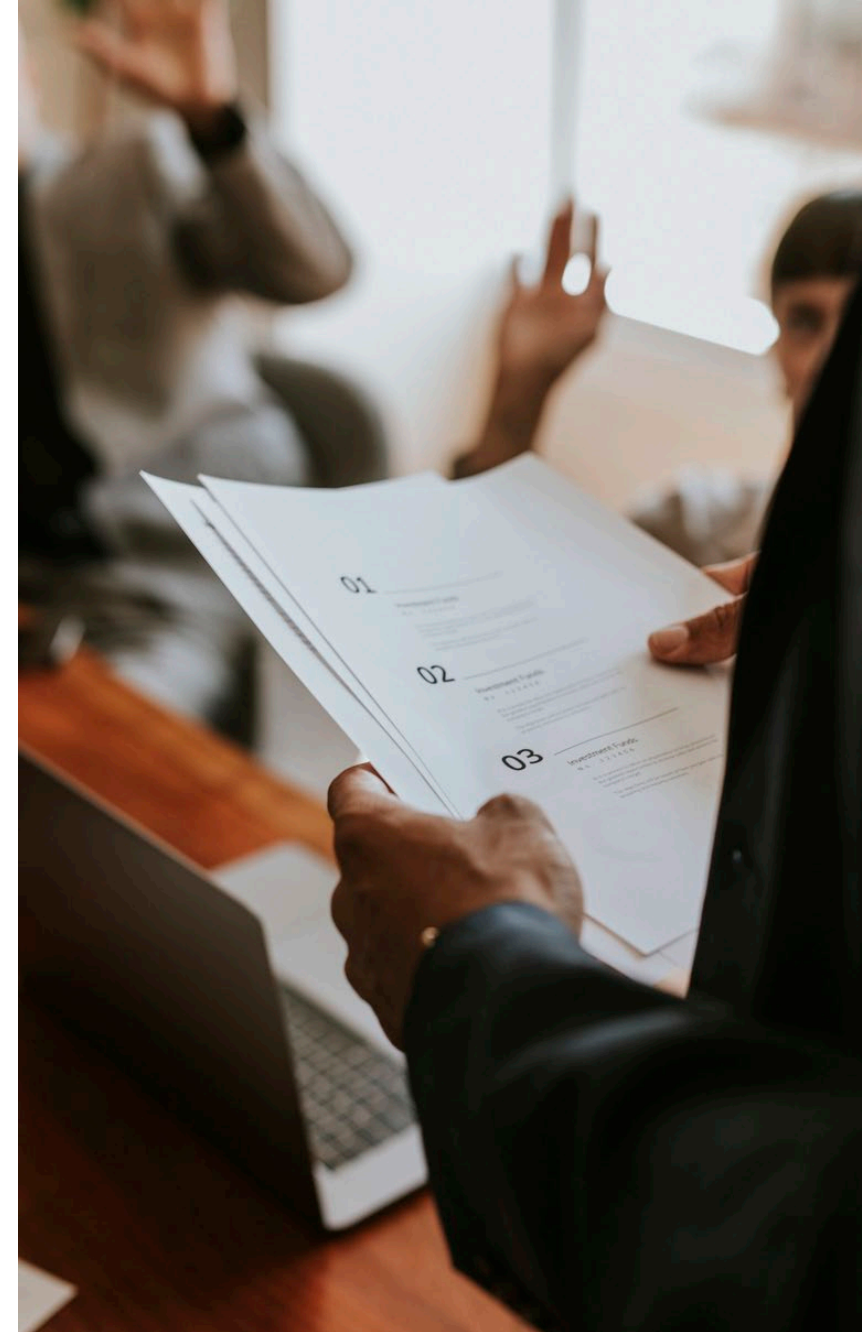
Proposed CMS Regs: Challenge/Opportunity?!

- 1 **New NON-ACA Plans! Extension of STM plans?**
Our **Population Science Management/PSM** plans by Detego Health are awesome and pay extremely well! **STM's** may go back to 3 yrs. **Sedera** MCS options
- 2 **10 Week OEP this year – 6 week next year** Don't be fearful, that's why you partner with PPI! When others *shrink* from the market, we'll show you how to advance!
- 3 **Reduction of CSR?** Likely to happen in 2026? If so, learn the Manhattan Life plans that can help cover Out of Pocket costs!
- 4 **No More “Low Income Selling” in 10 states?** No worries. We'll teach you how to sell all 12 Months!
- 5 **Explosion of HRA Sales PPI Bootcamp** - You CAN sell ACA to employer groups 12 months a year and get the 2nd and 3rd Ancillary sale! Our HRA platform will **pay you** another \$5 or \$20 per policy per month!



CMS Changes for 2026 OEP

- Last year for 10-week OEP: Nov 1 – Jan 15
- 100 – 150 SEP Closed
- CMS will flag income discrepancies for DMI/Docs/90 Days – no extension!
- Verify Income. Complete taxes. 1 year look back
- 75% of all SEP apps will verify income on FFM
- Additional \$5 per mo. if *auto/passive renewal* (until eligibility is confirmed) for \$0 prem plans (FFM)



Program Integrity

- The intent is to lower fraud, lessen Medicaid overspend, get able-bodied people working.
- If denied Medicaid b/c failure to meet work requirement, will also be denied APTC. Get a job.
- Some healthy people will not be patient with the longer process. Could require prospect to go to hc.gov, set up account and verify AOR
 - HS/Carriers are pushing for the GA SBE process
 - Reinforces the value of YOU!
- Some lower income will not pay \$5 and will lapse
- End of a \$ limit on repayment if you got too much APTC. Tell the truth. Update income.



Good News

- **10 million** American's qualify for an APTC who do not have coverage
- **ICHRA, Family Glitch** and **Collapsing** overpriced group plans opens the door to 12 mo enrollment.
- PPI absolutely leads the way
- A "Significant" EDE has positioned PPI as their "go to" for agents who want to engage in ICHRA education and contracting.

PPI TOOLS THAT BUILD YOUR PROFIT

*Platform, Contracting,
Commissions*



The *Platform*



[Peektraining.com](https://peektraining.com)



[HOME](#)

[ACA/UNDER 65 HEALTH SALES](#)

[MEDICARE/OVER 65](#)

[TRAINING](#) ▾

[CARRIERS](#) ▾

[AGENT RESOURCES](#) ▾

[AGENT LOGIN](#)

ACA / UNDER 65 HEALTH SALES

ACA/Under 65 Health Sales:

Selling Health 12
Months a Year!

The steps & training on this page will





Let **our** team help build **your** team

- If **you** will learn and do **your** part ... **then** we'll be able to help you best.
- We have great tools and guidance ... if you can absorb this next, brief session – it will help you a TON!
- *You can't teach what you don't know; you can't lead where you won't go.*
- We're going to *Teach* and *Lead* you there right now!

The (“*Health-y*”) cookies

- **Recruit** and **Motivate** Agents to do ACA/Health (and other markets)
- **Certify, Contract & Platform** them
- **Train** for mastery of this market
- Provide **Marketing Strategies** & Selling Technology
- **RESULTS:** If you make the **good cookies**, you’ll enjoy **fat profits**



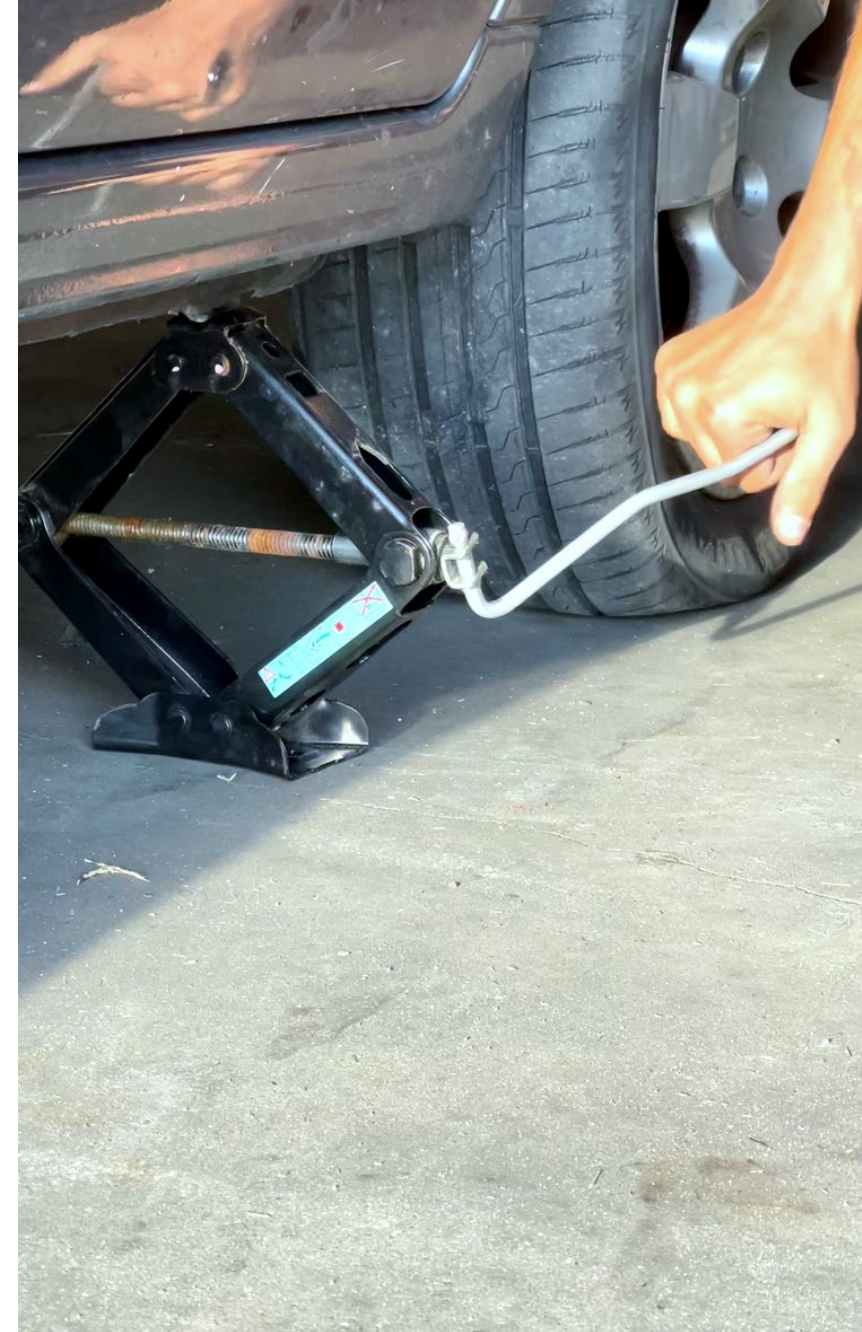
The (“*Health*”) Shelf

- www.peaktraining.com ... EVERY STEP on one page
- Training to take your agents from “*How do you spell ACA?*” to **Selling 1000 Cases a Year**
- Technology to appoint agents, write business, to get more leads, open markets
- Marketing tools for sales success

Leverage Our Strength

How do we partner with you to build your ACA agency?

- **Contracting** – just tell us what you want, nudge and help move as necessary
- **Commissions** – reliable, third party verified, with multiple levels
- **Basic/Advanced Training** – you don't want to repeat this information 4, 12 or 1000 times, do you?
- **Tools/Strategies** – the best, for selling and for marketing
- **Agent engagement** - THIS is where **Profit/Persistency/Participation/Prospects** come from





Why so much **agency support**?

- If you had to *hand process* 4-10 carrier contracts per agent
- If you had to do the **accounting/bookkeeping** to pay commissions at multiple commission levels and hierarchies
- If you had to create engaging and practical **training** and provide it in a simple to use format
- And if you had to provide an **Agency Care Team** to assist agents who need help

... well, I'm going to get a job at Walmart!

- **Don't do that.** Let PPI help you provide a strong "Back Office."



Specific Ways PPI helps you

- How do we partner with you to build your ACA agency?
 - **Contracting** (**ACR**, Transfer Doc, Hierarchy Protection, Manager Reports)
 - **Commissions** (**APL**, Commission “GRIDS,” Creating “Spread,” Timelines, & Fixes)
 - **Training** (www.peaktraining.com, 50-100 Webinars & LIVE Events a year)
 - **Technology** (HealthSherpa, **AMOS**, Constant Contact, **ICHRA**, ... **CRM 2026**)
 - **Group to ACA** tools (ICHRA and “Selling Group w/out Selling Group”)
 - **ACT / Agent & Agency Care Team**
 - **Spring & Fall Live Agent Events** - **45+** cities across the country – to help YOU grow your team! www.acaclay.com

HEALTH REVOLUTION TOUR

August 2025
Live in **17** cities &
2 virtual events



We know why some Agents/Agencies are so *Profitable* and some NOT!

Invest one morning to learn the **SECRETS** that Top Producers and Top Agency Builders know and *revolutionize your health insurance career.*

WATCH
A SHORT
MESSAGE FROM
CLAY PEEK



What if you or your agents added **a hundred** (or even more) new Health or Medicare clients in 2025? We'll show you how!

Since 1996, Clay Peek / Peek Performance Insurance (PPI) have helped thousands of agents grow their sales and have helped to build 875+ agencies. *Is this the year to finally hit your goals?*

REVOLUTIONARY SECRETS:

- > Virtually **untapped markets** that need your help
- > Sell ACA/Health/Medicare **12 months** a year
- > **2nd/3rd cash sales** that top producers always make
- > Sell **multiple people** at one time
- > Build your **Agency** faster and more profitably
- > Better health **plans** for people who don't get a tax credit
- > **Recruit** high producing agents with proven tools
- > Make **easy Medicare sales** into your business
- > ...and much more

HEALTH REVOLUTION TOUR

CITIES/DATES
ACACLAY.COM



8/5/2025 - Mobile, AL
8/6/2025 - Birmingham, AL
8/7/2025 - Atlanta, GA
8/8/2025 - Greenville, SC
8/11/2025 - Raleigh, NC
8/12/2025 - Philadelphia, PA
8/13/2025 - Columbus, OH
8/14/2025 - Chicago, IL
8/15/2025 - Virtual Event
8/18/2025 - Scottsdale, AZ
8/19/2025 - Dallas, TX
8/20/2025 - San Antonio, TX
8/21/2025 - McAllen, TX
8/22/2025 - Houston, TX
8/25/2025 - Ft. Lauderdale, FL
8/26/2025 - Orlando, FL
8/27/2025 - Tampa/Spring Hill, FL
8/28/2025 - Jacksonville, FL
8/29/2025 - Virtual Event

Health Revolutions Tour

Executive

~~\$37~~

\$27

Early Bird Rate

Executive Seating

Training Materials

Live Q&A

Networking Opportunities

BUY TICKETS

Health Revolutions Tour

VIP

\$57

VIP

VIP Breakfast w/ Clay Peek

VIP Seating

Training Materials

Live Q&A

Networking Opportunities

BUY TICKETS

BOOTCAMP FOR **SEAL TEAM 6** LEVEL AGENTS



September 8/9 – Orlando, FL

This is NOT for beginners. Need 100 sales to apply.

This year's Bootcamp will offer training on how to penetrate the small group marketplace for ACA and other Health, Medicare and Ancillary selling.

However, extensive and extended time will be spent on **specific steps of ICHRA set up and management.**



"2-DAY ICHRA/ACA BOOTCAMP" – SEPT 8/9



September 8th – 9th
Orlando, FL



2 days of detailed
ICHRA & marketing
training. NOT for
beginners!



All attendees must be
fully appointed with
PPI for ACA sales??



Appointed with PPI for
Manhattan Life /UHO
Physicians Mutual /
PSM & Sedera



Registration
www.acaclay.com or
www.peaktraining.com



Motivates some of the
best agents to *realign*
with you. They must
take *decisive action* to
qualify.



FOCUS FOR 2025 - 2026

- Build out of our **65+ Web Site** for Medicare / Senior Market Sales
- Medicare 101 / ***Medicare University*** series
- Focus on **Physician's Mutual** Med Sup platform
- Focus on **PSM, UHO & Sedera Health** Plans
- Focus on **ICHRA** platform
- Focus on **Life Selling**
- **Agency Accelerator** series

ACAclay.com
Peektraining.com

Agency Care Team Hotline:
(877) 612-7317

Office/Admin Team:
(864) 228-2635



*Why **996+** Agencies Partner w PPI*



877 612 7317

marketers@ppisales.info

www.peaktraining.com



We Make Agency Building Easy

- ✓ We help you share the ACA opportunity
 - ‘Why ACA’ for your team and prospective agents
- ✓ We show you where to “point”
 - Simply direct agents to our platform
- ✓ You Focus on Selling and Recruiting, **not** “Administrivia”



Next Steps: Contracting & Training

We'd love for you to be a part of our team. We think we can revolutionize how you do insurance.

If you'd like to join us now, just scan this Contract Request code and complete. If you'd like to talk to someone before you fill out this form, call the agent hotline and we will be glad to help!

- 877-612-7317 / Agent Hotline
- PeekTraining.com
- Next Steps? *"ACA Prep Class!"*



Scan this code to access all of the helpful tools, links and resources mentioned today.

- Training Materials
- Webinar registration links
- Contract Request Form
- PeekTraining.com Portal
- Agent Care Team contact
- *Links to more info on specific topics discussed today*



SCAN ME!

Q&A



ACAclay.com
Peektraining.com

Agency Care Team Hotline:
(877) 612-7317

Office/Admin Team:
(864) 228-2635



Why Manhattan Life?



Manhattan Life

(Gap, DVH, Acc, CI, Cancer, etc.)

- Total electronic app (You sign for your client)
- Best in class products
- 6 mo. advance = Cash Flow during transition
- Easy to win Incentive Trips (Awesome!)
- Spanish materials – TIN
- PPI #1 Agency in the country 4 times.

National General

Trio Med, Accidental Injury, Dental
Plan Enhancer



Who is Manhattan life?

- One of America's oldest insurance companies (est. 1850)
- Privately held for 174 years
- Tremendous financial strength & growing
- Licenses to sell in every state and US territory
- Our mission – help you achieve health, wealth & security for life
- Broad, diverse portfolio of insurance & investment products

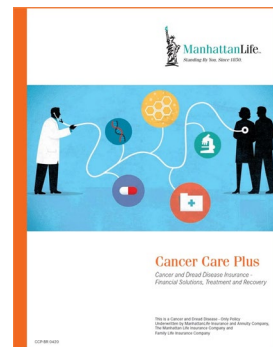


ROBUST Product Portfolio

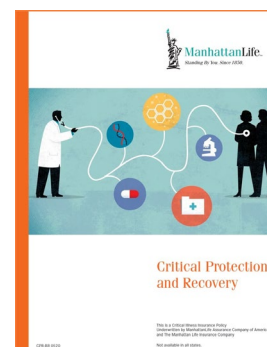
- Individual & Worksite Products



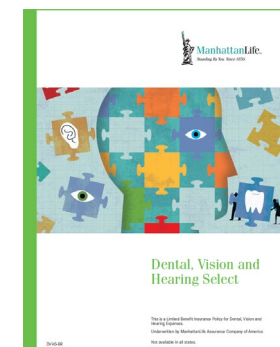
**Affordable
Choice**



**Cancer
Care Plus**



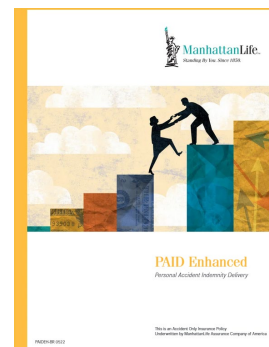
**Critical
Protection
&
Recovery**



**DVH
Select**



**Out of
Pocket
Protection**



**Paid
Enhanced**



**Term Life
Series**

Manhattan Life Product Portfolio

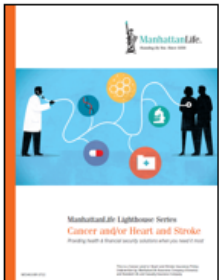
Lighthouse Series



Medicare
Supplement



Accident Guard



Cancer
Heart Attack
Stroke



DVH
SELECT



Final Expense



Home Health
Care SELECT



OmniFlex™
STC

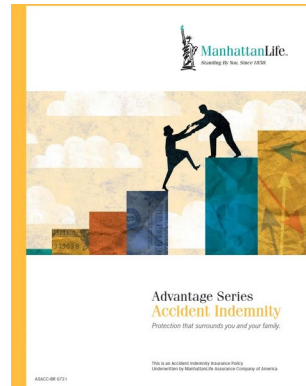
Future Initiatives



Hospital
Indemnity
SELECT

Manhattan Life Product Portfolio

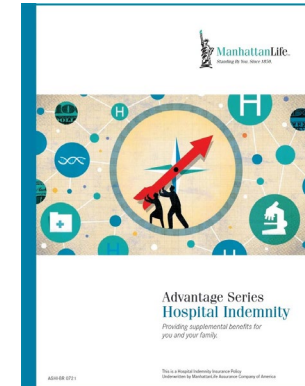
- Advantage Series – Group Products



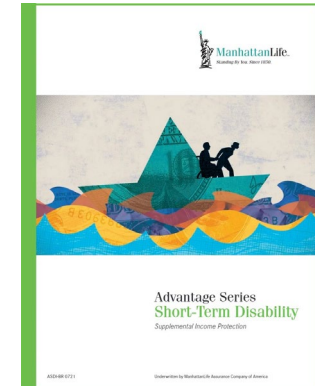
Accident
Disability



Critical
Illness



Hospital
Indemnity



Short
Term
Disability

Enrollment

- Individual & Lighthouse Products
- Manhattan Direct 2.0 Enrollment System
- Located on your agent portal at www.manhattanlife.com. Signature is Mother's Maiden Name.
- External Manhattan Direct enrollment links can be created to email to clients, put on your website, post on social media, etc.
- Products also available on Employee Navigator, EASE, & Selerix.
- Advantage Series – Group Products
- Quotes are available by emailing advantage@manhattanlife.com.
- Please include Name, Address, Employee Number, Products, & effective date.
- Any questions of group products can be directed to Bailey Schuelke at baileyschuelke@manhattanlife.com

Concierge Producer Services

ACES Team (Agent Counselors & Enrollment Specialists)

Available: Mon through Fri 8AM-5PM & Friday's 8AM-2PM CST

ACES@manhattanlife.com

800-369-3600

ARMS Team (Agent Counselors & Enrollment Specialists)

Available: Mon through Fri 8AM-5PM & Friday's 8AM-2PM CST

Our goal is to answer the phone when you call. The last thing we want is producers spinning their wheels trying to figure out who to contact at ManhattanLife. Our staff is highly trained and has internal relationships built with new business, claims and contracting. Give us a call!



Marketing Materials & Supplies

- ManhattanLife offers brochures, applications, flyers and other marketing materials at no cost. Simply download and of a multitude of marketing pieces from our Agent Resource Center, AKA ARC.
- Need 100 brochures for an upcoming event? No problem. Simply request an order through ARC for free printing and fulfillment.



Product & Training Libraries

For agents on the go, we offer on demand product and product training videos on demand.

Making staying up to date convenient.



Compensation & Cash Flow!

- Competitive Commissions
- Immediately Vested – Commissions paid directly to you
- 6-Month Advances available
- Advance commissions paid daily through automatic bank deposit (As earned commissions paid twice per month)
- ITIN accepted for individuals with no SSN
- Easiest application in the known world (Manhattan Direct 2.0)

Incentive Trips

Chairman's Club 2024

Grand Hotel | Stockholm, Sweden | July 27 - August 1, 2024
Reserved for the Elite!

The ManhattanLife Chairman's Club incentive qualification is underway. It is challenging to match the destinations that seemingly continue to exceed expectations.

2014 - Switzerland
Hotel Park Gstaad/
Fairmont Le Montreux Palace
2015 - Prague/Berlin
Prague Four Seasons/Kempinski Berlin
2016 - Hawaii (the Big Island)
Four Season, Hualalai
2017 - French Polynesia
Paul Gauguin Cruise
2018 - Portugal
Penha Longa Resort
2019 - Austria
The Ritz-Carlton, Vienna
2020 - Stockholm (postponed due to pandemic)
2021 - see 2020
2022 - Hawaii (Maui)
Four Seasons, Maui
2023 - Rome
Rome Cavalieri, Waldorf Astoria
2024 - Stockholm, Sweden
Grand Hotel, Stockholm

Trip Qualification Dates:
May 1, 2023 - March 31, 2024

Trip Qualifications

- 45 Top Overall Agents
\$250,000 Minimum production credit required
- 8 Overall Top Agencies
\$1,250,000 Minimum production credit
- 5 Overall Top Marketing Directors
\$2,000,000 Minimum Production credit
- Top Overall Call Center
\$5,000,000 Minimum production credit

Trip Qualification: May 1, 2023 - March 31, 2024



President's Club 2024

St. Regis Resort | Aspen, Colorado | September 8 - 12, 2024
Reserved for the Best!

The ManhattanLife President's Club incentive qualification is underway. It is challenging to match the destinations that seemingly continue to exceed expectations.

2015 - Cancun, Mexico
Secrets Moroma
2016 - Aspen, Colorado
St. Regis Aspen Resort
2017 - Grand Cayman
Kimpton Seafire Resort
2018 - Laguna Beach, California
Montage, Hotel and Resort
2019 - Park City, Utah
Montage, Deer Valley
2020 - Cabo San Lucas, Mexico
(postponed due to pandemic)
2021 - see 2020
2022 - Cabo San Lucas, Mexico
Montage, Cabo
2023 - Punta Mita, Mexico
Four Seasons, Punta Mita
2024 - Aspen Colorado
St. Regis Aspen Resort

Trip Qualification Dates:
May 1, 2023 - March 31, 2024

Trip Qualifications

- 55 Top Overall Agents*
\$150,000 Minimum production credit required
- 12 Overall Top Agencies
\$750,000 Minimum production credit
- 6 Overall Top Marketing Directors
\$1,000,000 Minimum Production credit
- Top Overall Call Center
\$5,000,000 Minimum production credit

* New Agent contract after September 1, 2023 is \$125,000 net annual premium.

Trip Qualification: May 1, 2023 - March 31, 2024



Notes: Manhattan Life

- Got a small budget? \$100 a month?
- Sell a DVH & Accident Plan – They're both Guaranteed Issue
- Spouse and Dependent can be payroll deducted and added