MedLink, Inc. Newsletter

November 2009

DO YOU NAHU??

Don't get left out in the cold! NAHU is the only national association working solely on behalf of individual health insurance agents today!

Not already a NAHU member? CLICK HERE to download the NAHU application and be sure to look here for monthly updates from your NAHU leadership!

OR

Visit Kentucky AHU today for more information!

Life & Long Term Care Division

The Resurgence of Whole Life

As markets waiver, more people turn to cash value life insurance to diversify their investment portfolios

Whole Life Insurance can:

- Create a Living Benefit
- Be Built to Borrow
- Provide a Stable Return
- Offer a Financial Safety Net
- Ideal for Diversification

Click on the link below to read an article from The Wall Street Journal, that goes into more detail

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Save The Date

Quick Links

Click Here to run term quotes, search annuity products, dowload forms and check underwriting requirements

Join our Mailing List

Save The Date
Thursday,February 25th
2010 MedLink Broker Forum

regarding these issues.

Article on Whole Life

Let MedLink help design that next case!
Contact us today!
800-960-1371
502-245-1371

November is National Long Term Care Awareness Month

November is National Long Term Care Awareness Month - and the timing couldn't be better. Throughout the holiday season, families join together to share traditional festivities and reminisce of holidays past. This family-focused time presents an ideal opportunity to talk with aging family members about their wishes concerning long term care.

Due to advances in medical technology and health care, people are living longer than ever before. In addition, the traditional family, which once included built-in care for elderly family members, is fast becoming obsolete. Today it is common for adult children to reside in locations far from their aging parents. At the same time, the costs for long-term care services continue to increase.

Long Term Care Insurance typically covers the costs for in-home care, assisted living, and nursing home care. According to industry sources, eight million Americans currently have long term care insurance coverage, with some 400,000 new policies issued in 2007 alone. In addition, roughly 180,000 Americans with long term care insurance policies received benefits amounting to 3.5 billion dollars.*

According to the American Association for Long Term Care Insurance, 50% of those who applied for long term care insurance were between the ages of 55 and 64. Another 26% were between the ages of 45 and 54. As consumers - 76 million baby boomers in particular - become aware of the cost-saving benefits of securing health discounts and obtaining more affordable coverage, the age of buyers continues to decline. In 2011, when baby boomers begin turning 65, the number of older people will dramatically increase between 2010 and 2030. In 2030, the older population is projected to be twice as large as in 2000.**

Therefore, it is important to raise awareness, assess risk, and stress the need for proper planning. The need for adequate coverage, especially for those who currently have no coverage, is fast becoming a national issue.

We hope that you will recognize November as National Long Term Care Awareness Month and take the time to analyze your needs, as well as the needs of close family member, for long term care.

Want to search the cost of care in your area? Click on the following link.
Cost of Care

Contact Ray Nowacki for all of your Long Term Care needs

ray@med-link.net

502-245-1371
800-960-1371

Great Ideas for Unique Insurance Sales Opportunities

More Uses for Business Overhead Insurance

Take the case of...

Dr. C is married to Dr. J. Dr. J owns the practice. Dr. C is a W-2 employee. They share the expenses of the practice equally. Traditional carriers will not offer Dr. C any Overhead Disability Insurance because Dr. C is not an owner, but an employee. This is not an issue for Petersen International Underwriters. They view the case as it is and insure the obligations of Dr. C., who though an employee, has agreed to share the overhead costs.

In like circumstances, traditional disability carriers balk when there are multiple doctors in the same practice and they request Overhead Expense coverage.

Petersen International Underwriters can arrange benefits of $1,000 to $100,000 per month or more, so there is no reason your clients should be underinsured.

Note: Watch for signs that Dr. C will want to buy in to Dr. J's practice. Petersen International offers a market distinctive "Buy-In" DI funding coverage.

Call MedLink Today!
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Annuity Laddering is a Solid Strategy for Retirement

Following the collapse of the markets, those looking for safety are turning to annuities. Laddered annuities can offer your client the best chance for secure retirement..

Laddering immediate annuity purchases or gradually buying more annuities over time, while simultaneously devoting portions of your clients portfolios to equities and bonds, your clients could improve their chances of reaching their goals for retirement income.

Most people facing retirement want guaranteed income and liquidity which is why purchasing annuities over time, even into retirement, make sense.

Contact MedLink for your next annuity case, we can help!

502-245-1371
800-960-1371

Check out our annuity search engine, CLICK HERE

What Every Life Producer Needs to Know About the BIG 3 Impairments

When meeting or speaking with clients, basic facts are helpful in making an initial appraisal of the case. Fact-finding is where it all begins, and that means not being afraid to ask questions about the clients' medical histories. By not doing this, the producer is doing a disservice to themselves and their client.

It is very important for the producer to explain the process they will go through to obtain their insurance coverage. Cover the paramed exam, labs that will be drawn and the HOS sample that will be needed. Advise them to be aware of what they eat and drink for several days prior to taking an exam. Don't drink a big glass of orange juice or to many cups of coffee the morning of the exam, this could cause lab results to abnormal. Encourage the client to be forthright and candid about their medical history. This is in their best interest to be open so that problems will be avoided in attempting to secure the coverage they need.

There are 3 big impairments that all insurance agents need to know about, with the first one, heart disease, being the primary concern for the underwriter.

Coronary Artery Disease - there are a number of key questions to ask clients

- Are they on medication? If so, what & how much?
- Have they had a stress test? What were the results?
- Have they had a heart attack? When did it occur?
- Have they had bypass surgery? What was the date of the procedure?
- Have they had an angioplasty? What was the date of the procedure?
- Do they know their ejection fraction?
    - The ejection fraction, or EF, measures blood flow. Normal EF is 55% or greater. 50% or less is some indication of some degree of dysfunction. The lower the percentage, the worse the prognosis.

Diabetes - can be a chronic disorder that interferes with the body's ability to use starches and sugar. This can also be a major risk factor for coronary artery disease.

- Type 1 Diabetes - usually occurs in younger age groups. The body does not produce enough insulin
- Type 2 Diabetes - usually occurs later in life. The body produces insulin but cannot use it properly
- Gestational Diabetes - usually occurs in pregnancy and will disappear after childbirth.
- A client's diabetes control is monitored by testing glycohemoglobin in the blood, also known as hemoglobin A1C. Range of A1C numbers are
    - Normal level: 6.0 or less
    - Acceptable level:7.0 to 9.0 (usually ratable for insurance)
    - Very poor control: 9.0 or greater

Other helpful information to know about clients with diabetes:

- What medications are they on and what is the dosage?
- Do they exercise regularly?
- What is their diet life: fast food or lots of vegetables?

Cancer - two general terms need to be reviewed when discussing cancer

- Grade - this refers to the aggressiveness of the cancer. The higher the grade, the more rapid the growth of the cancer. Most cancers are graded 1 to 5 with Grade 1 being most favorable and Grade 5 being less favorable
- Stage - this refers to the extent of the tumor/mass, the size and/or the spread. This is also graded 1 to 5, indicating how limited or invasive the cancer has been

Just because a client has cancer history does not always mean a decline or highly rated situation.

The key points to focus on when gathering information from clients are these:

- Tissue of origin, ie., colon, prostate, gland or breast
- Grade
- Stage
- Time since diagnosis
- Type of treatment
- Time since treatment ended
- Relapse or recurrence

Careful, thorough fact-finding can and will benefit the client and the client-advisor relationship by helping to avoid unnecessary issues that will certainly arise later in the process if they are not addressed up front.

MedLink can help!
Contact rob@med-link.net or cheri@med-link.net for impairment specific questionnaires to help pre-qualify your clients for life insurance.

Benefits Division

UnitedHealthcare Packaged Savings for 2-50 is Back!

UHC is very excited to announce that Packaged Savings for your groups with 2-50 eligible is back! UHC is now able to offer additional savings for all of your 2-99 customers when they add one or more employer paid ancillary lines along with Medical. Groups can save up to $7 per employee per month by bundling their benefits with UnitedHealthcare, as well as the added simplicity of a single bill. Please review the attached document for further details.

UHC Brochure

Packaged Savings is already available for 51-99, and 2-50 will be effective on 12/1/09 new business, renewals 3/1/10. UHC will continue to include a Dental, Life, & Vision quote for all groups automatically, and LTD/STD upon request.

Call MedLink today with any questions!

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Are Your January Groups Overwhelming You?

When thinking about all your January 1, 2010 renewals, please remember that you can take advantage of the 15 month rate guarantee from Humana and move some of those groups to a different effective date.
Want to add ancillary and take advantage of the "Bundle Discounts", providing your group with up to an additional 1.5% off their medical premium? You've got it! Also note any ancillary plans you sell, will also be guaranteed up to 15 months along with the medical too.

Don't miss the great opportunity, it will only be offered through January 1st. Available only on Small Group (2-99) business!

Humana Rate Guarantee Brochure

Contact your MedLink Representative for any assistance.

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Humana 51-99 Underwriting Process

This new underwriting process will allow for front end screening and possibly avoid the effort to collect all the applications, only to have the group declined. Over the past year, Humana has heard that obtaining completed medical applications on these larger cases is time consuming and challenging, and you asked for a new process that would include Humana underwriters in a consultative role.

Effective immediately, for all 51-99 new business quotes January 1, 2010 and beyond, please submit the following for **PreQualification:**

1. Group Census (include Multi-location information if necessary)
2. Rick Assessment Form, click here

PreQualification Process

1. After underwriting reviews the above information, your sales executive will contact you to discuss the competitiveness of our quote and help strategize how best to proceed. The Humana underwriting team is also available to assist in this process.
2. On groups with the greatest chance of closing with Humana, medical applications will be requested.
3. The Humana Small Group Underwriter will make every effort to provide you with a competitive, underwritten quote.

Noted below are a few characteristics that are not preferred 51-99 case size groups:

- Groups moving on their first renewal
- Groups moving more than 60 days beyond their renewal date
- Groups with a renewal increase of 40% or greater
- Virgin groups
- Groups with greater than 10% Cobra participation
- Groups with greater than 5% Retiree participation

Humana thanks you for your patience and understanding. They will continue to refine this process in an attempt to balance business needs and ease of quoting and implementing.

Contact you MedLink Representative with any questions

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Anthem Updates

Anthem small group applications have been updated. Please visit the MedLink website, www.med-link.net or call the MedLink office to get the latest version. Be sure to get rid of any old applications immediately. Anthem will no longer accept or quote off the old apps.

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Anthem Blue 4.0 Annual Benefit Changes

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Lumenos Refinements

Lumenos Option Z

- RX Copays - newly introduced Lumenos products include pharmacy copays after deductible for prescriptions filled at participating pharmacies
  - Rx Option Code - Z
  - Retail Copays - $10/$30/$50/25% w/$150 max
  - Mail Service Copays(new) - $10/$75/$150/25% w/$150 max
  - Non-Network Copays - 50% (min $75)
  - Deductible - medical deductible applies before copayments
  - OOP Maximum - accumulates to overall medical plan OOP & 100% coverage afterwards
  - Components - DAW2 applies. This plan is only available on certain Lumenos plans
- The Bottom Line:
  - Before the medical deductible is met, the member pays 100% coinsurance
  - Once the medical deductible has been met, the member pays a Rx Copay
  - The member pays nothing for covered prescriptions once the out of pocket maximum has been met
- How it Works:
  - The medical and Rx claims still apply to the deductible
  - Once the deductible is met: Medical claims are covered at 0% and the Rx claims branch out in a different direction with Rx copays. This is option Z.
  - The Rx copays roll up to out of pocket maximum
  - Once the out of pocket max is met, Rx claims are now covered at o$ (just like medical)

An Example:

You have a single $2000/Family $4000 deductible; your out of pocket max is single $3000/Family $6000. The coinsurance on the plan is 0%. Both Medical and Rx claims apply to help meet the deductible. Once the deductible has been met, Medical claims are now covered at 0% for the member. BUT, Rx claims are now covered based upon the Rx copays implemented (option z) - and, those copays roll up to help- meet the OOP maximum. Once the OOP maximum is met then both Medical and Rx claims are covered at 0%.

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Guardian Dental Rate Caps for Peace of Mind

5% Renewal Caps Available for First and Second Year Renewals!

With Guardian's dental renewal caps for new business, employers can be assured that their rates will not increase beyond the selected cap, or caps - allowing them to better plan for the future.

In addition, renewal caps may be offered at no additional cost with some plan designs.

This is one more example of how you can offer your clients peace of mind that they'd be able to provide their employees with quality benefits, today and in the future.

Click on the following link for the Packaged Savings Brochure.

Contact your MedLink Representative with any questions!

800-960-1371
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December 2009

Below are important dates to remember.
1
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5
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7 Anthem, UHC group cutoff for 12/15 eff date
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9
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11 Anthem individual cutoff for 12/15 eff date
12
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21 Humana group cutoff for 1/1 eff date
22
23 Anthem, & UHC, group cutoff for 1/1 eff date.
24 Closed for the Holiday
25 Closed for the Holiday
26

27
28
29 Anthem individual cutoff for 1/1 eff date
30
31

Forward email

Email Marketing by

SafeUnsubscribe®
This email was sent to matt@med-link.net by matt@med-link.net.
Update Profile/Email Address | Instant removal with SafeUnsubscribe™ | Privacy Policy.

Constant Contact
TRY IT FREE

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