

# California Products & Commissions - 2024

Carrier	Products	Group Size	Commission
<b>Small Group Fully Insured</b>			
Aetna	Medical Dental (standalone, with medical) Dental, Vision	1-100 2-50 51-100, 2-100	5% <sup>1</sup> 9%, 10% (first year only) 10%, 7.5%
Anthem Blue Cross	Medical Dental, Vision, Life (contributory) LTD and STD (contributory) Life, LTD, STD (voluntary)	1-100 2-100 2-50, 51-100 10-100	5% <sup>2</sup> 10% 15%, 10% 15%
Balance by CCHP Blue Shield of California	Medical Medical, Dental, Vision Life	1-50, 51-100 1-100 2-100	6.5% <sup>3</sup> , 5% 5%, 10%, 10% 10%
CaliforniaChoice	Medical, Chiropractic Dental, Voluntary Vision, Life	1-100 1-100	5%, 6.5% 12%
Cigna + Oscar	Medical	1-100	5%
Community Care Health Covered California	Medical Medical and Dental	1-100 1-100	5% 5%
Health Net Kaiser Permanente	Medical, Dental, Vision, Life Medical Dental KPIC PPO & Fee-for-Service Dental HMO (DeltaCare)	1-100 1-100 1-100 1-100	5%, 10%, 10%, 10% DG 5% <sup>4</sup> \$2.77 pmpm \$1.38 pmpm
MediExcel Health Plan Sharp Health Plan	Medical, Dental Medical (HMO non-mirrored) Medical (HMO mirrored and pseudo-mirrored) Medical POS	1-100, 1+ 1-100 1-100 1-100	7%, 10% 5% 6.5% sliding scale until 5% 5%
Sutter Health Plus UnitedHealthcare	Medical, Dental, Vision Medical Dental Vision Life LTD	1-50, 51-100 1-100 2-50, 51-100 2-100 2-50, 51-100 2-100	6.5%, 5% 5% 10%, 10% DG 10% 10%, 10% DG 15% DG
Western Health Advantage	Medical	1-100	5%

## Large Group Fully Insured

Aetna	Medical Dental, Vision	101-200 101-200	5% (negotiable) 10% (negotiable) <sup>5</sup>
Anthem Blue Cross	Medical Dental, Vision Life, LTD, STD (contributory, voluntary)	101-500 101-500 101-500	4% (negotiable) 10%, 10% DG 10% (negotiable)
Blue Shield of California	Medical, Dental, Vision, Life	101-299	PSF <sup>6</sup> , 7%, 7%, 10%
Cigna	Medical Dental, Vision Life, Disability (New York Life Group Benefit Solutions)	101-499 51-499 <sup>7</sup> 50-499 <sup>7</sup>	Negotiable 10% Negotiable
Health Net Kaiser Permanente	Medical, Dental, Vision, Life Medical Dental KPIC PPO & Fee-for-Service Dental HMO (DeltaCare)	101-500 101-300 101-300 101-300	5%, 10%, 10%, 10% DG 5% (negotiable) \$2.77 pmpm \$1.38 pmpm
MediExcel Health Plan Nippon Life Benefits	Medical, Dental Medical Dental, Vision, STD Life, LTD	101+ 101-500 <sup>9</sup> 101-500 <sup>9</sup> 101-500 <sup>9</sup>	5%, 10% 5% 10% DG 15% DG
Sharp Health Plan UnitedHealthcare	Medical Medical Dental, Life Vision, LTD	101+ 101-300 101-300 101-300	5% (negotiable) <sup>8</sup> 5% (negotiable) 10% DG 10%, 15% DG

<sup>1</sup> When Aetna small group medical plans annualized premium reaches \$1,000,000 and above, per case, commissions will be paid at 1%.

<sup>2</sup> When Anthem Blue Cross small group medical plans annualized premium reaches \$1,000,001 commissions will be paid at 0.8%.

<sup>3</sup> Balance by CCHP: when annualized premium for a single group reaches \$500,001 or more in a contract year, the commission is reduced to 1.0% for amounts over \$500,001 for that group.

<sup>4</sup> For Kaiser Permanente small groups with aggregate premium higher than \$1,000,001 or more in a contract year, the commission rate is 1.0%.

<sup>5</sup> Aetna's large group ancillary products commission is 10% standard but can be negotiated.

<sup>6</sup> Blue Shield's large group fully-insured medical products commission is a Producer Service Fee (PSF) model. Please contact your Large Group Sales Representative with questions or to obtain a copy of the Blue Shield FAQ.

<sup>7</sup> Cigna's dental, vision, life and disability products are available with 25+ when sold with medical. Vision must be sold with dental or medical – it is not available standalone.

<sup>8</sup> Large group contract is a co-broker relationship.

<sup>9</sup> Nippon Life Benefits is available to groups 2+ when 3 products are sold.

Warner Pacific believes this information to be accurate as of the revision date. However, it is subject to change and therefore accuracy cannot be guaranteed.  
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Carrier	Group Size	Commission
<b>Medical Level Funded</b>		
Aetna Funding Advantage (AFA)	10-100	\$50 PEPM
Allstate Benefits	2+	2-24 enrolled: 7% (negotiable) <sup>1</sup> ; 25-50 enrolled: 6% (negotiable) <sup>1</sup> ; 51+ enrolled: standard PEPM, % also available <sup>1</sup>
Anthem Balanced Funding (ABF)	20-100	Flat PEPM (Commission % is converted and equates to a PEPM). PEPM with higher % is subject to review and approval by Anthem; requires client approval (case by case).
Cigna	25-499	PEPM (negotiable)
UnitedHealthcare	10-100	PEPM equated to standard of % (negotiable)

<sup>1</sup> Commissions paid on total sold premium based on enrolled employee count. All tiers adjustable 0%-29%.

Carrier	Products	Group Size	Commission
<b>Minimum Essential Coverage Plans (MEC)</b>			
Apex-MEC	MEC Basic, MEC and MEC Plus Advantage	4+	\$10 PEPM on all tiers
	MEC with Beazley GLI	7+	\$10 PEPM + 15% of Beazley premium on all tiers
	MEC Plus with Beazley GLI	7+	\$10 PEPM + 15% of Beazley premium on all tiers
	MEC Plus Advantage with Beazley GLI	7+	\$10 PEPM + 15% of Beazley premium on all tiers

Carrier	Products	Group Size	Commission
<b>Standalone Ancillary</b>			
Ameritas (Inshore Benefits)	Dental	1+	8%
Beam	Dental, Vision	2+	10%
California Dental Network	Dental HMO	2-99	10%
Delta Dental (Allied Administrators)	Dental, Vision	2-99	10%
Delta Dental (Inshore Benefits)	Dental	3+	8%
Equitable	Dental, STD	2+	10% DG <sup>2</sup>
	Vision	2+	10%
	Life (contributory or voluntary w/basic life), LTD	2+	15% DG <sup>2</sup>
	Life (voluntary without basic life)	10+	15%
Guardian	Dental PPO, Life, Vision, STD	2-500	10% DG <sup>2</sup>
	LTD	2-200	15% DG <sup>2</sup>
	Voluntary Life, Voluntary LTD, Voluntary STD	3-500, 3-500, 10-500	13%
Guardian (Inshore Benefits)	Dental	1+	10%
Humana	Dental, Vision	2-299	10% DG <sup>2</sup>
	Life (contributory)	2-50, 51-299	10%, 15% DG <sup>2</sup>
	Life (voluntary)	2-299	15%
Humana (Inshore Benefits)	Dental	2+	8%
Landmark Healthplan	Chiropractic, Chiropractic w/Acupuncture	2+	20%
Lincoln Financial Group	Dental (contributory), Dental (voluntary)	2-1,000	10% DG <sup>2</sup> , 10% or 15%
	Vision (contributory/voluntary)	2-1,000	5%
	Life, LTD, STD (contributory)	2-1,000	15% DG <sup>2</sup>
	Life, LTD, STD (voluntary)	2-1,000	10%, 15% or 20%
MetLife	Dental HMO, Vision	5+, 2+	10% <sup>3</sup>
	Dental PPO (contributory, voluntary)	2+, 5+	10% DG <sup>2</sup>
	Life, LTD, STD	10+	15% DG <sup>2</sup>
	Buy-Up Life, Voluntary LTD, Voluntary STD	10+	15% <sup>3</sup>
New York Life Group Benefit Solutions	Life, Disability	50-5,000	Negotiable
	FMLA/ADA Administration	250-5,000	Negotiable
Norton LifeLock (Inshore Benefits)	Identity Theft Protection	1+	20%
Principal Financial Group	Dental, Life, Vision, STD (contributory, voluntary)	3+, 5+	10% DG <sup>2</sup>
	LTD (contributory, voluntary)	3+, 5+	15% DG <sup>2</sup>
Sun Life Financial	Dental, Vision, STD (contributory)	2-499	10% DG <sup>2</sup>
	Life (contributory)	2-499	12% DG <sup>2</sup>
	Life (voluntary), STD (voluntary), LTD (voluntary)	2-499	15%
	LTD (contributory)	2-499	15% DG <sup>2</sup>
The Hartford	Life, STD, LTD	4+, 10+, 4+	10% DG <sup>2</sup> , 10% DG <sup>2</sup> , 15% DG <sup>2</sup>
United Concordia	Dental, Vision	2-149	10%
Unum	Dental, Vision (contributory), Vision (voluntary)	10-500	10%, 10%, 12%
	Life, LTD, STD (contributory)	2-500	10% DG <sup>2</sup> , 15% DG <sup>2</sup> , 10% DG <sup>2</sup>
	Life, LTD, STD (voluntary)	2-500	15%
Vision Service Plan (Inshore Benefits)	Vision (contributory, voluntary)	3+, 1+	8%

<sup>2</sup> Commissions paid at a flat percentage schedule can be requested. The amount available varies by coverage. Please advise your Warner Pacific Rating Analyst of your request about this option at the time of the request for proposal.

<sup>3</sup> MetLife's Standard Broker Commission is displayed. A non-standard commission agreement will be required for each coverage when commission level requested is non-standard.

Legend
Contributory = Employer Sponsored
DG = Downgrade

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