



BLACK, GOULD & ASSOCIATES, INC.

# Agent Update

JANUARY — FEBRUARY 2025

## 2024 BROKER 1099-NEC

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BGA distributed IRS Form 1099-NEC electronically via your AGB broker portal. Access the form by hovering your mouse over AGB, selecting Broker Info from the menu, and then clicking the Broker 1099 S tab. The 1099 Form is in PDF format for ease of downloading and printing.

### Commission Income under \$600

BGA is not required to submit 1099-NEC forms for less than \$600 to the IRS. A 1099-NEC for less than \$600 will be generated with the “Not Submitted To IRS” watermark.

The responsibility falls to the taxpayer to report these earnings to the IRS.

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		OMB No. 1545-0116 Form <b>1099-NEC</b> (Rev. January 2024) For calendar year	<b>Nonemployee Compensation</b>
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee compensation \$	<b>Copy B For Recipient</b> This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
RECIPIENT'S name		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>	
Street address (including apt. no.)		3	
City or town, state or province, country, and ZIP or foreign postal code		4 Federal income tax withheld \$	
Account number (see instructions)		5 State tax withheld \$	6 State/Payer's state no.
		7 State income \$	

Form **1099-NEC** (Rev. 1-2024) (keep for your records) www.irs.gov/Form1099NEC Department of the Treasury - Internal Revenue Service



## COMPLIANCE NEWS: ACA Forms 1094/1095 Employer Reporting Requirements

All applicable large employers (ALEs)\* must complete one Form 1094-C and a Form 1095-C for each full-time employee for at least one month during 2024. In addition, employers offering self-funded or level-funded medical coverage during 2024 must report for all individuals enrolled in the employer's plan at any time during 2024. Small employers (<50 FTEs) report such coverage using Form 1094-B and Form 1095-B.

Click [HERE](#) for Small Group Level Funded 1094/1095 Reporting Filing Duties by Carrier

### HELPFUL LINKS:

- [Instructions for filing 1094-C and 1095-C](#)
- [Instructions for filing 1094-B and 1095-B](#)
- [Sample form 1094-C](#)
- [Sample form 1095-C](#)
- [Sample form 1094-B](#)
- [Sample form 1095-B](#)

For more information regarding this employer reporting requirement, please get in touch with HR Services, BGA's preferred ACA compliance partner, or your Large Group BGA Account Executive.

\*ALE (applicable large employers) are those with an average of 50 or more full-time or equivalent employees during the preceding calendar year.



## FROM THE GROUP DEPARTMENT

### BANNER|AETNA: \$5 Per Visit Cost through 98point6 for HSA-Eligible Plans Reinstated on 1/1/25

As of 1/1/25 members on Health Savings Account (HSA) eligible plans will be responsible for a \$5 per-visit cost for on-demand virtual care through 98point6. The Consolidated Appropriations Act (CAA) allowed for visit fees with virtual care providers to be waived for members on HSA-eligible plans or High Deductible Health Plans (HDHP) in response to the COVID-19 pandemic.

#### What does this mean for your clients and their members?

Beginning January 1, 2025, the \$5 per-visit cost through 98point6 will be reinstated for members on HSA-eligible plans or High Deductible Health Plans (HDHPs) in order to meet IRS requirements for these plan types. This reinstatement will occur regardless of whether or not CAA legislation is extended.

Banner|Aetna encourages you to remind your clients that HSA payment cards are accepted, along with other major payment methods such as Visa, MasterCard, and American Express. When members open the 98point6 by Transcarent app, they will be prompted to update their account and add payment information.



## FROM THE GROUP DEPARTMENT

### BCBSAZ: New Member ID cards in 2025

Starting 1/1/25, some members may have a new network prefix on their ID card. Here's what that means:

- Members will need to show their new ID card to their providers the first time they get care starting 1/1/25.
- If a claim is denied, they can call the Customer Service **number on the back of their ID card** to ask if the claim shows their new network prefix.

This information is included in their ID card mailer and the December member newsletter. If members need additional help, they should call the number on their ID card or email AZ Blue at [MemberHelp@azblue.com](mailto:MemberHelp@azblue.com).

Early access to digital ID cards: members can now register at [azblue.com/MyBlue](https://azblue.com/MyBlue) with their Social Security Number and date of birth before their ID card arrives.

### BCBSAZ: More Reasons to Sell BlueSignature Prosano!

At Prosano Health Care Centers, members can get personalized primary care for \$0.

For groups that offer a BlueSignature Prosano plan, their employees will have access to eight convenient locations starting January 2025:

<p><b>Chandler/Gilbert</b> 3530 S Val Vista, Ste. B105 Gilbert, AZ 85297 Fax: (833) 449-4001 (Copper Point Campus)</p>	<p><b>Deer Valley</b> 19810 N 7th Ave, Ste. 150 Phoenix, AZ 85027 Fax: (833) 972-5548</p>	<p><b>Mesa</b> 1910 S Stapley Dr, Ste. 101 Mesa, AZ 85204 Fax: (833) 972-5549</p>
<p><b>Peoria</b> 9000 W. Thunderbird, Ste. 110 Peoria, AZ 85381 Fax: (833) 464-2590 (Desert Harbor)</p>	<p><b>Phoenix/Avondale</b> 9321 W Thomas, Ste. 420 Phoenix, AZ 85037 Fax: (833) 983-2942 (Estrella Campus)</p>	<p><b>Scottsdale</b> 7373 N Scottsdale, Ste. A178 Scottsdale, AZ 85253 Fax: (833) 449-4003 (Scottsdale Centre)</p>
<p><b>River &amp; Campbell</b> 1790 E. River Rd. Ste. 200 Tucson, AZ 85718</p>	<p><b>Williams Centre</b> 5210 E. Williams Cir. Ste. 120 Tucson, AZ 85711</p>	

BlueSignature Prosano members can look up Prosano Health locations and make appointments at [prosanohealth.com](https://prosanohealth.com)

## FROM THE GROUP DEPARTMENT

### BEAM BENEFITS: Important Update on the Beam Perks Program

#### A New Chapter for Beam – With Your Support

Over the years, the Beam Perks program, centered around its innovative smart toothbrush, has been a hallmark of the company's commitment to delivering value to members and groups. This program has played a role in fostering healthier smiles and strengthening relationships across communities.

However, following a strategic review, Beam has made the decision to sunset the Perks program. This move, while difficult, underscores the company's focus on sustainability and prioritizing initiatives that provide the greatest value to brokers, clients, and members.

Participation in the Perks program has remained low—just 4% of members enrolled<sup>1</sup>—and has been steadily declining. Recognizing this, Beam has chosen to reallocate resources toward more impactful and meaningful innovations.

Beam has evolved far beyond its roots as a dental company and now offers a comprehensive suite of ancillary benefits, including Dental, Vision, Life, Disability, and Supplemental Health. With tools like the Beam Quoting Tool<sup>^</sup>, BeamElect<sup>\*\*</sup>, and partnerships designed to better support brokers and clients, the company is doubling down on initiatives that drive significant impact.

Here's what brokers and clients need to know about the transition:

- **Key Dates:** Groups with January, February, and March 2025 effective dates will continue to have access to Perks. For groups with April and later effective dates, Perks will only be available if quoted before December 19, 2024. The program will officially conclude by May 2025.
- **Inventory:** Beam has ensured adequate stock to fulfill Perks throughout this transitional period.
- **Support:** A [document with key details](#) about this transition is available in the Broker Resource Center.

Beam's decision reflects a broader strategy to reinvest in initiatives that enhance its comprehensive offerings and improve the broker and client experience. Looking ahead, the company has plans to introduce new tools, partnerships, and solutions aimed at creating greater value in 2025 and beyond.

Updates on these changes and communications for groups and members are expected to be shared soon. In the meantime, brokers are encouraged to provide feedback or direct any questions to their Beam representatives or the dedicated email channel at [brokers@beambenefits.com](mailto:brokers@beambenefits.com).

As Beam closes this chapter, the company remains committed to innovation and its partnerships with brokers, working together to deliver meaningful value and support.

\*Beam Perks™ is provided by Beam Perks LLC. Eligible members age four and up at the time of enrollment are eligible to receive Beam Perks™ and must select their Beam Brush color within 45 days of enrollment to participate. If you do not have a mobile device, you can obtain Beam Perks™ by contacting Customer Operations at 1-800-648-1179. Beam Perks™ can be obtained separately without the purchase of an insurance product by visiting [perks.beambenefits.com](https://perks.beambenefits.com). Beam Perks™ may be changed at any time without notice and is subject to availability. See <https://www.beambenefits.com/legal/beam-perks-terms-and-conditions> for Terms and Conditions.

<sup>1</sup>Based on internal Beam data of member perks enrollments (Jan - Oct 2024)

<sup>^</sup>Use of the Digital Quoting Tool is not currently available in all states and is contingent upon the Broker's proper appointment and licensure.

<sup>\*\*</sup>Not yet available in AZ, NM, and VA and does not yet support disability coverage.



## FROM THE GROUP DEPARTMENT

### HUMANA: Updates

#### **Dental cost estimator tool now LIVE for Humana Dental Members!**

Members can access the cost estimator through the Resources section of the Plan Benefits page in **MyHumana**, where they will find a link titled, “Estimate costs for dental services.” Using their zip code and a dental procedure keyword, code, or category, they can find a cost range to help better estimate their dental expenses.

#### **Humana Life Plan Guides**

Humana Group life insurance is a great way to round out an employer’s benefit package. Please save these quick reference guides for easy access.

- [Basic Life](#)
- [Voluntary Life](#) – Frequently requested, this piece highlights the \$25k annual increase option!
- [AD&D](#)



# Humana

## FROM THE GROUP DEPARTMENT

### SECURECARE: Important Update: SecureCare Administration Transition

SecureCare Group Insurance has announced a significant change effective January 1, 2025. Administration of SecureCare products and services will transition to Employer Driven Insurance Services (EDIS), a move designed to enhance service delivery and maintain the high standards of care and support that clients and brokers expect.

The transition aims to ensure continuity and improvement in service quality while leveraging the expertise of EDIS, a team recognized for its dedication to seamless plan management.

#### What This Means for Clients and Brokers:

- **Premium Billing:** Starting with the January 2025 premium billing cycle, which begins in December 2024, EDIS will issue premium bills directly.
- **EDI Enrollment Vendor Updates:** Clients utilizing EDI enrollment vendors will need to update their connections to EDIS. Clients are advised to coordinate with their EDI vendors for this update. The designated EDIS contact for this process is the EDI Team, available at [edi@employerdreven.com](mailto:edi@employerdreven.com).
- **Enhanced Services:** Brokers, employers, and members will gain access to additional tools and services through a secure new portal.

EDIS will soon distribute a welcome letter providing essential contact details for premium billing and broker commissions.

If brokers or clients have any inquiries about the transition or need assistance with the process, they are encouraged to contact their account managers or the support team directly at 1-888-429-0914.

SecureCare and EDIS are dedicated to making the transition smooth and beneficial for all parties.



## FROM THE GROUP DEPARTMENT

### UNITEDHEALTHCARE: Reminder—Mineral—HR Compliance Platform

#### UnitedHealthcare enhances value through access to Mineral including ACA reporting solution

Effective November 1, 2024, all Level Funded plans will include access to Mineral™ solutions, including select premium products. Mineral takes the guesswork out of HR and compliance, and starting January 1, 2025, an Affordable Care Act (ACA) compliance and reporting solution will be included as part of the premium Mineral solutions for UnitedHealthcare clients.

#### This enhancement gives access to:

- Mineral's new ACA reporting services
- The Mineral platform
- Access to an ERISA, WRAP and POP document creator
- Certified experts, and more

#### Mineral's ACA compliance solution allows clients to complete:

- ACA reporting
- Delivery of Internal Revenue Service (IRS) Forms 1095-Band C to your employees
- Electronic transmission (E-Filing) to the IRS
- Tracking of service hours for part-time employees

#### Get Started

Following the plan's effective date, a welcome communication will be sent with instructions for setting up a Mineral account. A Mineral representative will reach out to schedule a personal live demo of all the services Mineral can provide.

#### Have questions, or need assistance logging in

Email [unitedhealthcare@trustmineral.com](mailto:unitedhealthcare@trustmineral.com) or visit [uhc.com/mineral](https://uhc.com/mineral) to learn more

Click [HERE](#) for the Mineral Flyer

United  
Healthcare

Mineral  
MITRATECH

## FROM THE GROUP, INDIVIDUAL, AND MEDICARE DEPARTMENTS

### BCBSAZ: Important Network Updates: American Vision Partners

AZ Blue and American Vision Partners (AVP) are working on a contract renewal. The current contract ends February 15, 2025, and they expect to have an agreement before then.

BCBSAZ received its first proposal and is evaluating it now. Once they have an update, they will share additional information.

It is likely AVP will also communicate with AZ Blue members.

#### AVP includes the following provider groups and facilities:

- Southwestern Eye Center
- Barnet Dulaney Perkins
- Retinal Consultants of AZ
- Arizona Institute of Eye Surgery (DBA Prescott Vision and Eye Surgery Center)

#### Lines of business and impacts vary:

##### Individual and Family

- National PPO (grandfathered/grandmothered): After 2/15/25, all AVP providers will be out of network.
- Neighborhood and Statewide PPO: Arizona Institute of Eye Surgery and Southwestern Eye Center will be out of network after 2/15/25. Barnet Dulaney Perkins and Retinal Consultants of AZ will remain in the network.
- MaricopaFocus: not impacted (providers not in network)
- PimaFocus: not impacted (providers not in network)
- ACA Health Choice: not impacted (providers are in network)

##### Commercial

- All ACA-Qualified Health Plans: Southwestern Eye Center will be out of network after 2/15/25.
- Statewide Networks (Self-Funded and Fully Insured): After 2/15/25, all AVP providers will be out of the network.
- Alliance Exclusive Networks (Self-Funded and Fully Insured): Arizona Institute of Eye Surgery and Southwestern Eye Center will be out of network after 2/15/25. Barnet Dulaney Perkins will remain in the network. Retinal Consultants of AZ are not part of this network.
- Pima Connect Networks: Arizona Institute of Eye Surgery and Southwestern Eye Center will be out of network after 2/15/25. Barnet Dulaney Perkins will remain in the network. Retinal Consultants of AZ are not part of this network.

##### Medicare – out of the network after 2/15/2025

- Medicare Supplement Senior Preferred<sup>SM</sup>
- Medicare Advantage

##### FEP<sup>®</sup>

- Access to AVP through December 31, 2025

Please reach out to your BGA Account Executive with any questions.

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## CARRIER BONUSES, COMMISSIONS & INCENTIVES

### UNITEDHEALTHCARE: Medical Broker Bonus Program—Groups with up to 50 EE’s

The bonus is paid as a one-time amount per employee determined by the number of enrolled employees in eligible groups according to the following tables. The rows in each of the tables are not cumulative, and the bonus paid will only be the amount in the row of the table where the highest minimum is met. Agents that meet the minimum requirement of at least 300 enrolled medical employees in eligible groups with up to 50 eligible employees (as of Dec. 31, 2024) will be eligible for this bonus program. Only agents permanently located in the geography indicated within the market Producer Performance Guide are eligible for this bonus.

#### New business: Enrolled fully insured and level funded employees

- Agents must sell at least 100 new enrolled employees in fully insured or UnitedHealthcare Level Funded plans in the up-to-50 eligible employee market segment during the bonus period
- Once established, the medical enrolled employee count will not change due to actual enrolled employee count changes due to hiring, layoffs, etc., in the groups during the bonus period

Table 1: New Business

New enrolled medical employees *	Fully insured	Level funded
100-249	\$25.00	\$25.00
250-499	\$50.00	\$50.00
500-999	\$75.00	\$75.00
1,000-1,999	\$125.00	\$125.00
2,000 +	\$150.00	\$150.00

\* Eligible groups are new UnitedHealthcare fully insured or UnitedHealthcare Level Funded medical groups with up to 50 eligible employees with Jan. 1, 2025 through Dec. 31, 2025 effective dates. New enrolled medical employee counts are as of the eligible groups’ effective date with UnitedHealthcare. Eligible groups must remain active, and the selling agent must remain the Agent of Record on Dec. 31, 2025 to be eligible for this bonus. No new business bonus from Table 1 is payable if the minimum requirement of at least 100 new enrolled medical employees in eligible groups with up to 50 eligible employees is not met.

#### Retention: Enrolled fully insured and level funded employees

- Retention percentage is the number of enrolled employees in eligible groups active on Dec. 31, 2025, divided by the total number of enrolled employees in eligible groups on Dec. 31, 2024
- The number of medical enrolled employees used in the enrolled employee retention percentage calculation is the number of active enrolled employees in the agent’s eligible groups as of Dec. 31, 2024
- Once established, the medical enrolled employee count will not change due to actual enrolled employee count changes due to hiring, layoffs, etc., in the groups during the bonus period

Table 2: Retention

Fully insured and level funded enrolled employee retention percentage*	Fully insured	Level funded
<80%	\$0.00	\$0.00
80% - 84.9%	\$10.00	\$10.00
85%-89.9%	\$25.00	\$25.00
90%-94.9%	\$50.00	\$50.00
95%+	\$75.00	\$75.00

\*No retention bonus from Table 2 is payable if the minimum 80% retention requirement is not met.

Click [HERE](#) to download the bonus flyer





## CARRIER BONUSES, COMMISSIONS & INCENTIVES

### UNITEDHEALTHCARE: United Advantage Brokers with 51+ Eligible Employee Groups

All brokers who are part of the UnitedHealthcare United Advantage program, as of March 2024, are eligible for this bonus program. Questions regarding your agency’s United Advantage status? Reach out to your UnitedHealthcare representative, or email [unitedadvantage@uhc.com](mailto:unitedadvantage@uhc.com).

The bonus is paid as a one-time amount per employee determined by the number of enrolled employees in eligible groups according to the following tables. The rows in each of the tables are not cumulative, and the bonus paid will only be the amount in the row of the table where the highest minimum is met.

- The number of employees included in the bonus calculation for any case or affiliated cases is capped at 1,000
- This cap applies to the determination of the payment tiers in both tables and to the calculation of the bonus payable
- In situations where commissions on the case are split between more than one Agent of Record, the case cap will be applied before the credit for the case is allocated for the bonus calculations
- Coverage for prescription drugs must be provided by UnitedHealthcare Pharmacy or a UMR Optum Rx<sup>®</sup> Contract (also referred to as “Optum Rx Carve-in”) to be eligible for the bonus payment amounts in the “Self-funded with prescription drug coverage” column of Table 2

#### New business: Enrolled fully insured and level funded employees

- Agents must sell a minimum of 100 new enrolled employees in fully insured, UnitedHealthcare Level Funded and self-funded plans in the 51+ eligible employee market segment during the bonus period
- Once established, the medical enrolled employee count will not change due to actual enrolled employee count changes due to hiring, layoffs, etc., in the groups during the bonus period

Table 1: New Business

New enrolled medical employees *	Fully insured /level funded	Self-funded medical only	Self-funded with prescription drug coverage
100-249	\$25.00	\$5.00	\$6.00
250-499	\$50.00	\$10.00	\$10.00
500-999	\$75.00	\$15.00	\$20.00
1,000-1,999	\$100.00	\$20.00	\$30.00
2,000 +	\$125.00	\$25.00	\$40.00

\* Eligible groups are new fully insured, UnitedHealthcare Level Funded and self-funded medical groups with at least 51 eligible employees with Jan. 1, 2025 through Dec. 31, 2025 effective dates. New enrolled medical employee counts are as of the eligible groups’ effective date with UnitedHealthcare. Eligible groups must remain active and the selling agent must remain the Agent of Record on Dec. 31, 2025 to be eligible for this bonus. The maximum number of enrolled employees included in the new medical enrollment count for any eligible group or group of affiliated groups is 1,000 enrolled employees. No new business bonus from Table 1 is payable if the minimum 100 new enrolled medical employees is not met.

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## CARRIER BONUSES, COMMISSIONS & INCENTIVES

### UNITEDHEALTHCARE: United Advantage Brokers with 51+ Eligible Employee Groups

#### New Retention: Enrolled fully insured, level funded and self-funded employees

- Retention percentage is the number of enrolled employees in eligible groups active on Dec. 31, 2025, divided by the total number of enrolled employees in eligible groups on Dec. 31, 2024
- The number of medical enrolled employees used in the enrolled employee retention percentage calculation is the number of active enrolled employees in the agent’s eligible groups as of Dec. 31, 2024
- Once established, the medical enrolled employee count will not change due to actual enrolled employee count changes due to hiring, layoffs, etc., in the groups during the bonus period

Table 2: Retention

Fully insured and level funded retention*	Fully insured	Level funded	Self-funded retention *	Self-funded medical only	Self-funded with prescription drug coverage
<b>Bonus per retained employee</b>					
<80%	\$0.00	\$0.00	<80%	\$0.00	\$0.00
80%-84.9%	\$20.00	\$20.00	80%-84.9%	\$5.00	\$7.50
85%-89.9%	\$25.00	\$25.00	85%-89.9%	\$6.00	\$9.00
90%-94.9%	\$30.00	\$30.00	90%-94.9%	\$7.00	\$10.50
95%+	\$35.00	\$35.00	95%+	\$8.00	\$12.00

\* The maximum number of enrolled employees included in the retention medical enrollment count for any eligible group or group of affiliated groups is 1,000 enrolled employees. No retention bonus from Table 2 is payable if the minimum 80% retention percentage requirement is not met.

Click [HERE](#) for Program Details



## CARRIER BONUSES, COMMISSIONS & INCENTIVES

### **UNITEDHEALTHCARE:** Additional Compensation Program

#### **For agents with groups who currently have a carrier that may be exiting the group health insurance market**

Agents have advised UHC that some customers are concerned that their current carrier may be exiting the group health insurance market. UnitedHealthcare is prepared to assist agents who, in direct response to customer requests, move their concerned customers to UnitedHealthcare or UnitedHealthcare subsidiary fully insured, level-funded, and self-funded group medical products. A one-time additional compensation payment per enrolled employee will be made to agents who enroll such customers with UnitedHealthcare or UnitedHealthcare subsidiaries from Jan. 1, 2025, through Dec. 31, 2025, according to the following table:

Bonus for each fully insured and level-funded enrolled employee	Bonus for each self-funded enrolled employee
\$60	\$20

Groups eligible for the additional compensation are medical groups with up to 3,000 eligible employees in eligible states that move directly from a carrier that may be exiting the group medical insurance market to UnitedHealthcare or UnitedHealthcare subsidiary fully insured, level-funded or self-funded group medical products with effective dates from Jan 1, 2025, through Dec. 31, 2025. The additional compensation will be paid based on the Dec. 31, 2025, enrolled employee count of the eligible groups.

Click [HERE](#) for program details.



## CARRIER BONUSES, COMMISSIONS & INCENTIVES

### UNITEDHEALTHCARE: 2025 Specialty Benefits Broker Bonus Program

#### Earn rewards for selling UHC’s specialty benefits

When you sell UHC’s specialty benefits plans, you help them inspire healthy living by giving your clients more ways to live well. That deserves a reward.

Earn bonuses on new and renewing sales of:

✓Dental	✓Supplemental Life	✓Critical illness	✓Supplemental Health Combo
✓Vision	✓Short-term disability	✓Accident	✓UnitedHealthcare Benefit Ally®
✓Basic Life	✓Long-term disability	✓Hospital Indemnity	✓Paid family and medical leave*

\* Paid Family and Medical Leave (PFML) plans are only available to groups with 100 or more eligible employees, with at least 25 employees working in the applicable PFML state (e.g., Massachusetts or Connecticut). For PFML product availability, please contact your UnitedHealthcare representative.

#### How to earn a new business bonus

##### Effective dates

Jan. 1-Dec. 31, 2025

For groups with up to 5,000 eligible employees and 5 or more enrolled employees:

- Includes UnitedHealthcare Small Business and Key Account groups
- Excludes UnitedHealthcare National Account groups

1

Meet these minimum requirements for a bonus on annualized premium and fees of:

New lines	+	Annualized premium and fees	
25	+	\$100K	4%
10	+	\$750K	
30	+	\$200K	5%
10	+	\$1.25M	
40	+	\$300K	6%
15	+	\$1.5M	

#### How to earn a retention bonus

##### Renewal Dates

Jan. 1-Dec. 31, 2025

For groups with up to 5,000 eligible employees and 5 or more enrolled employees:

- Includes UnitedHealthcare Small Business and Key Account groups
- Excludes UnitedHealthcare National Account groups

2

Qualify for a new business bonus and renew at least 20 lines with \$750K in received premium and fees.

Then, meet these minimum requirements for a bonus on received premium and fees:

##### Premium persistency

<85%	0%
85.0%-89.99%	2%
90.0%-97.99%	3%
>98%	4%

Click [HERE](#) for Specialty Bonus Flyer

**BGA WILL BE CLOSED**  
**February 17, 2025**



**BLACK, GOULD**  
**& ASSOCIATES, INC.**

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