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NABIP Condemns United Healthcare's Decision to Slash Agent Commissions

Washington, D.C. – The National Association of Benefits and Insurance Professionals (NABIP) strongly objects to United Healthcare's recent decision to eliminate agent commissions across more than 100 Medicare Advantage plans in over 20 states. This move limits access to trusted, licensed guidance for Medicare beneficiaries and threatens the role of independent agents who serve as vital advocates for older Americans.

"This decision by United Healthcare is as shortsighted as it is harmful," said NABIP CEO Jessica Brooks-Woods. "At a time when seniors are grappling with rising costs, changing formularies, and overwhelming plan options, United Healthcare is cutting off the very people best equipped to help—licensed agents who know their communities, understand their clients, and act in their best interest. Let's be clear: this is not about reducing administrative burdens or modernizing enrollment. This is about prioritizing shareholders over seniors."

Independent agents provide year-round service, helping Medicare beneficiaries enroll, manage claims, and adjust coverage as their needs change. Reducing renewal commissions sends a clear signal that long-term service and client relationships are no longer a priority. This decision risks leaving many seniors confused, unsupported, and vulnerable to making poor coverage choices.

"Slashing commissions on renewals punishes agents for doing the right thing—staying with their clients after the sale," added Brooks-Woods. "These professionals aren't just selling policies; they're guiding people through claims, care decisions, and life changes. Cutting them out undermines the entire Medicare support system."

NABIP has met directly with the congressional committees that oversee the Medicare program and with the Centers for Medicare & Medicaid Services (CMS) to elevate urgent concerns about the impact of commission cuts on Medicare beneficiaries. These meetings reflect the seriousness of the threat to Medicare access and the urgency for action. Alongside these efforts, NABIP—joined by NAIFA, HAFA, CIAB, and IIABA—submitted a [joint comment letter](#) to U.S. House and Senate leadership urging immediate intervention to address the growing instability in the Medicare Advantage market. NABIP has collected more than **14,000 testimonials** from Medicare beneficiaries affected by these changes, with several of their stories included in the letter to illustrate the real-world consequences these policy decisions are having on seniors' ability to access care and make informed choices.

To prevent further disruption during the critical Annual Enrollment Period (AEP), NABIP strongly urges CMS to prohibit plan sponsors from altering commission structures after October 1. This deadline, already referenced in CMS proposals for pharmacy network finalizations, is essential to provide agents and consumers with stability and predictability. Allowing last-minute or retroactive compensation changes jeopardizes the trust built between agents and the Medicare beneficiaries they serve and risks shifting millions to already overwhelmed government assistance lines.

NABIP calls on regulators and lawmakers to examine the consequences of United Healthcare's decision and take immediate steps to protect beneficiary access, preserve market competition, and ensure the long-term integrity of the Medicare program.

Decisions like this reinforce the importance of [NABIP's Healthcare Bill of Rights](#), a clear set of principles that affirms every American should have access to affordable, understandable, and personalized healthcare. These principles also emphasize the essential role that licensed health insurance professionals play in helping consumers make informed decisions that safeguard both their health and financial security.

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