While Washington Fights Over the Nation's Health, a New AI-First Advisory Puts the Fix, and Liability, on the CFO's Desk

Superior Insurance Advisors founder says executives who approve company health plans may already own the liability, and he is using AI to show them a way out.

Superior Insurance Advisors

GARY, IN, UNITED STATES, June 30, 2026 /EINPresswire.com/ -- The country is arguing about how to make Americans healthier. The argument is happening in Washington, in clinics, and across a growing wellness movement. Benefits strategist and bestselling author Paul H. Flowers Jr. says almost everyone is looking in the wrong place.

The place that decides what most working Americans pay, and what care they can reach, is not a government agency. It is the employer health plan. And according to Flowers, the people who sign off on those plans, chief financial officers and business owners, are carrying a personal fiduciary liability that most of them have never been warned about.

"Everyone wants to make America healthier," said Flowers, founder of Superior Insurance Advisors. "Good. So do I. But health does not start in Washington. For most families it starts with whatever plan their employer picked. And right now a lot of those plans are built to protect a broker's commission, not the company or its people. That is a problem you can fix this quarter. You do not have to wait on anyone in D.C."

The timing is pointed. The national conversation has been pushed forward by the federal Make America Healthy Again agenda and by a fast-growing consumer movement around metabolic health and human performance. Both have made everyday people care more about what goes into their bodies and what their care actually delivers. Flowers argues that this new demand has exposed an old gap. Employees now expect better. Most employer health plans were never designed to give it to them.

His thesis is mildly heretical in his own industry. Flowers says the large national brokerages and the biggest carriers have a built-in conflict. They get paid more when costs go up, not down. He points employers instead toward self-funded and level-funded plan designs, paired with a fiduciary-first advisory model and, increasingly, artificial intelligence.

Paul H. Flowers Jr.

That is where Flowers is placing his bet. His teams use AI to read plan documents, claims data, and contracts at a speed and depth that was not possible a few years ago. The goal is simple. Show a CFO, in plain numbers, where the money is going and who is profiting. He calls it radical transparency, and he says AI is what finally makes it affordable for a mid-sized employer instead of only the Fortune 500.

"For decades, transparency in health benefits was a luxury good," said Flowers. "You needed a giant consulting budget to see what was really in your own plan. AI changed that overnight. Now a 200-life employer can get the same X-ray a 20,000-life employer gets. That is the disruption. Not a new app. Just the truth, finally made cheap."

The advisory work sits inside Flowers' broader platform, which spans employee benefits consulting through Superior Insurance Advisors and education through Life Health and Legal Education Partners. The through-line, he says, is the same across everything he builds. People are tired of being sold to by parties who win when they lose.

Flowers is the bestselling author of "[The Hidden Healthcare Gold Mine](#)."

He is candid that his view will not be popular with everyone in his field.

"I am not anti-broker. I was VP of Select Employee Benefits on the broker side. I know how the machine works," Flowers said. "I am anti-conflict. If your advisor makes more when your costs go up, you do not have an advisor. You have a vendor. Employers deserve to know the difference. So do their employees."

His message to executives is direct. Do not wait for a national fix. Read your own plan. Ask who profits. And know that as the person who approves it, the liability may already be yours.

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