

The Profession's Promise to Clients

Companion to the 2027
Insurance Brokers
Code of Practice

Your Voice, Your Code

Elevating professional standards together.

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Welcome

The 2027 Insurance Brokers Code of Practice sets out what a client can expect from a professional insurance broker. This document explains how the NIBA Board arrived at it.

In 2026, as the Code moved from the independent review's recommendations through two rounds of consultation to its final form, NIBA published four op-eds setting out the Board's thinking. They are collected here, as first published, so that brokers, clients, regulators and anyone with an interest in the Code can read the reasoning behind it in one place. The first three were written while the Code was still in draft, so they refer to the draft and to decisions still to come.

The Code binds more than 14,000 brokers across around 380 firms, from sole practitioners to global multinationals. Every obligation it adds is one that someone administers, documents, trains for and pays for. So, the Board applied one test to every proposed change: would a client be better off for it? Where the evidence showed an obligation protects clients, the Code lifts the standard above the law. Where an obligation would have added a duplicate layer that clients ultimately fund, the Code leaves it out.

The four pieces follow the order in which that thinking developed.

The first piece sets out what a Code is for. The law sets the minimum standard, the Code sets the professional standard above it, and each firm decides how it competes. The piece explains how the Board balanced the perspectives of brokers, clients, regulators and the public interest.

The second piece shows how the cost of compliance reaches the client, and why the Board weighed simplification against complexity on every proposed change.

The third piece looks at what the evidence says about how broker clients fare, including where it points to problems. Strata is the clearest example, and the Code extends remuneration disclosure to strata in full as a result.

The final piece sets out the result. The Code went through three stages of consultation, with 51 written submissions and more than 300 pieces of feedback on the draft. Between the draft and the final Code, 21 clauses changed in response to feedback and drafting review.

On the hardest questions, feedback did not always point the same way, and the Board had to make a call. These pieces explain where it landed. Our consultation report, released with the Code, sets out what we heard and the reasoning behind each decision.

The Code takes effect on 1 January 2027 and will be independently reviewed at least every five years. We thank everyone who gave their time to the review and to both rounds of consultation.



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The Profession's Promise to Clients

Published 5 August 2026

There is no such thing as a typical insurance broker.

NIBA speaks for more than 14,000 brokers. Among them are global multinationals with compliance teams larger than most member firms, listed entities answerable to shareholders, national broker networks, mid-tier firms, regional practices two hours from the nearest capital city, and sole practitioners who are the entire business. Their clients are equally varied. A broker in one office is placing cover for a national infrastructure operator. A broker in another is helping a café owner understand why her business interruption cover matters before she has ever made a claim.

A professional Code has to bind all of them. It has to mean the same thing, and be capable of being met, across the breadth and diversity of the profession.

That is the discipline the NIBA Board brought to the draft Insurance Brokers Code of Practice, and it is worth explaining what that discipline produced.

What a Code is for

Here is the part of the conversation we need to make sure we include.

A broker's obligations do not start with our Code. They start with the law. Every Code Subscriber holds, or operates under, an Australian Financial Services Licence, and the licensee's obligations under section 912A of the Corporations Act — to provide financial services efficiently, honestly and fairly — apply to everything this Code describes. That is the foundation.

Our Code sits on top of that foundation. It sets professional standards for the whole profession, and in defined areas it goes beyond what the law requires.

And on top of the Code sit the firms themselves. Many of our members have their own codes. Many have their own governing principles and operational procedures. Across 14,000 brokers you will find firms that have different operating models because the client types are different.

The law sets what is mandatory. The Code sets what is professional. The firm decides how it competes. A Code that reaches down into the third layer and prescribes a single way of doing business does not lift the profession, it flattens it instead. The role of a Code is to set boundaries and allow freedom within them, so the market can operate effectively for the clients it serves.

The Profession's Promise to Clients

Balancing the perspectives

The Board had to balance four different perspectives: the broker view, the client view, the public interest test as well as the view of public stakeholders.

Australia has spent the past few years reckoning with what layered regulation has cost. Complexity, confusion, and expense that lands, eventually, on the customer. The Government's own agenda is regulation that is fit for purpose rather than regulation for its own sake, and the business community has been clear that more rules are not automatically better rules.

Obligations stacked carelessly compound the problem rather than solving it. Every obligation a Code adds is an obligation someone administers, documents, trains for, and pays for. Where that cost buys a better outcome for clients, it is worth paying, and this draft asks the profession to pay it in several places. Where it does not, the client ends up funding a process that protects nobody.

The Board weighed simplification against complexity on every proposed change.

What the evidence said

Then there is the question of what clients actually experience, which is where this conversation should start rather than finish.

NIBA's *Complexity to Clarity* research asked advised clients — not consumers who buy direct, but the people who chose to work with a broker. 84% trust their broker to act in their best interest. 91% say their broker helped them achieve a better outcome. 95% consider their broker essential at claim time, and 98% of claims are ultimately resolved.

AFCA's Datacube shows broker complaints in FY2025–26 continuing a trend of staying below 1% year on year. The review builds on that record.

We read those numbers as an obligation. But they also tell you something about where the problem is and is not. Through two rounds of consultation, across every channel, the argument for expansion was made in principle rather than from demonstrated client harm.

The Profession's Promise to Clients

Where the Board landed

The Code rewrite centres on strengthening consumer outcomes. When considered as a full package, the draft Code delivers on a number of key areas.

Plain English: the Code has been rewritten so clients and brokers alike understand what to expect and what clients are entitled to.

Remuneration disclosure extended: the obligation to disclose what a broker is paid — currently applying to retail clients — extends to strata (see below) and dollar disclosure on request to any client, irrespective of client or product type.

Strata: automatic disclosure extends to all strata insurance, residential and commercial, disclosed to the owners corporation whether or not it is a retail client — the area where the consumer-protection evidence is most acute.

Disclosure on request restored: any client — retail, wholesale, strata, or a business of any size — can ask what their broker is paid on any product arranged for them and be given the figure in dollars within a reasonable time, with no exceptions, thresholds or product carve-outs.

Stronger protections for vulnerable clients, recognising that not every client comes to the table in the same position.

Conflicts of interest obligations consolidated, clarified and aligned to ASIC's Regulatory Guide 181.

A 28-day pre-renewal contact commitment, giving clients a defined window to review cover.

Record-keeping elevated from good practice to a Code obligation.

A minimum five-year independent review cycle locked in, so the Code keeps pace with the profession.

What happens now

The consultation is open until Friday 7 August, to members and to the public. We are targeting commencement on 1 January 2027.

Landing a revised Code is a challenge and it's important that we weigh and balance different perspectives appropriately. On the hardest questions there was no answer available that would satisfy everyone, and a Code drafted to satisfy everyone would have satisfied no one. What I do expect is that the reasoning behind where we landed is visible.

More than 14,000 brokers get up every day and go to work for their clients. This Code is for them, and for the people who rely on them.

Affordability and Accessibility are Regulatory Outcomes Too

Published 9 September 2026

Premiums are one problem. Reach is another. Every time you add regulatory complexity, someone pays, and usually it is the client.

Everyone in insurance is talking about affordability. They are also talking about accessibility, and they are right to be talking about both. Premiums have risen hard, underinsurance is climbing, and for too many households and businesses, cover that was once routine now takes real sacrifice.

Most of that conversation is about weather, reinsurance and claims inflation. Those forces are real, they are global, and they are slow to shift. There is another driver; it sits within our own control as a country, and we talk about it far less. Every time you add regulatory complexity, someone pays. Usually, it is the client.

This is the second piece in a conversation NIBA started earlier this year. The first set out what a professional Code is for, and the test the NIBA Board applied to every obligation in the draft Insurance Brokers Code of Practice. Where a new requirement buys a better outcome for clients, it is worth paying for. Where it does not, the client funds a process that protects nobody. I want to be direct about where that test leads, because it does not stop at our Code.

The test we set ourselves

Getting a Code right means holding three things together at once: what clients need, what regulators need, and what a profession needs in order to keep growing and serving. Lose any one of them and the other two fail with it. A Code that ignores clients is not worth having. A Code that ignores the cost of compliance quietly shrinks the number of people who can afford the service it governs.

That is why the Board weighed simplification against complexity on every proposed change, rather than treating more obligations as automatically better ones. Every obligation a Code adds is an obligation someone administers, documents, trains for and pays for. We were willing to pay it in several places, and we said so. We were not willing to pay it everywhere.

The same discipline is missing from the wider regulatory conversation, and the absence is expensive.

Affordability and Accessibility are Regulatory Outcomes Too

How the cost reaches the client

There is no single response to rising compliance costs. Some absorb it and invest in systems. Some pass it on. Some narrow what they offer, or who they can afford to serve.

Our own research shows where the pressure sits. In *Ready or Reacting? Shaping the Future of the Broking Profession*, 86% of brokers expect regulatory demands to have a significant impact by 2035, while only 62% feel prepared. That is the widest gap of the eight forces we tested.

Picture a broker's obligations as a house. The law is the floor, and every business in the country meets it. Licensing builds the walls, where regulators add to the law and test it through the licence. Our Code is the storey above. A firm's own standards are the roof. Every layer does the same job, which is to protect the client. Every layer also carries a cost, and those costs do not sit side by side. They stack. No client is billed by the layer. The client is billed for the whole house. And while the Insurance Council of Australia in late 2025 calculated that annual compliance costs across the general insurance industry cost consumers \$2.5 to \$3.5 billion a year, no one prices the whole house, because each layer is designed in its own process, on its own merits, by people doing their job well.

NIBA recognises, in that context, that our Code is the one layer this profession builds for itself. That is why we weighed what every obligation in it would buy a client before asking a client to fund it.

What a client loses when the market narrows

Complexity is not the enemy of broking. It is the reason clients come. In *Complexity to Clarity: The Broker Advantage*, 67% of businesses said they went to a broker because they were growing or their risks were becoming more complex, the most common reason given. That is the same complexity arriving from the other direction. It sends clients toward a broker. Regulatory complexity moves brokers away from clients.

What sits at risk is measurable. The same research found clients save around 20 business hours; 94% improved their risk management on their broker's advice; 88% are confident their cover is right for their business; and 98% of claims are ultimately resolved. These are not abstractions. They are what a client keeps when they can reach a broker, and what they go without when they cannot. Clients can see the direction of travel: asked to look out to 2035, 56% expect fewer broking firms.

Recent government inquiries into natural disasters, into insurer conduct, and into business failures have circled back to the same finding. Consumers and businesses do better when they can reach a professional who understands the risk landscape and will advocate for them. That makes the cost of providing that service a public-interest question, not a trade one.

Affordability and Accessibility are Regulatory Outcomes Too

The pattern is not unique to us

Insurance broking is not the first profession on this road. Financial advice is the closest example, and it is not the only one. The shape is familiar: successive waves of reform, each defensible on its own terms, compounding into a cost of doing business. None of those reforms set out to price a service beyond reach. Together, that is what they did, and repair has proved far harder than restraint would have been.

Brokers place \$35.6 billion in premium each year with local general insurers, 46% of Australia's general insurance market, and the profession is deeply embedded in the communities it serves.

Where NIBA goes next

Affordability is not only a market outcome. Neither is accessibility. Weather we cannot legislate. Complexity we can.

That is the discipline behind the Code the Board is now finalising. On every proposed obligation, we asked what it would cost, and whether a client would be better off for it. Where the evidence showed a new standard protects clients, the draft lifts the bar above the law.

Where it would have added a duplicate layer that clients ultimately fund, it does not. Affordability, accessibility and complexity were not side considerations in that process. They were the test.

NIBA will keep making that case to government and to regulators, because the alternative is a market where good advice becomes a luxury. Australian families, businesses and communities deserve better than to carry both the cost and the risk.

A Code Built on Evidence, Not Instinct

Published 29 September 2026

Good decisions rest on evidence. When a choice carries weight — when other people will live with the result — we make it on what can be shown and tested, rather than on instinct, on what we would prefer to be true, or on whoever argues with the most conviction. That discipline matters most when a profession sets the standard it will be judged against, because a standard is only as sound as the evidence beneath it.

We take this for granted almost everywhere else. In a courtroom, a case is won or lost on what can be proven; an advocate's confidence carries no weight until the evidence behind it survives testing. In medicine, a doctor examines and runs the tests before prescribing — the treatment follows the diagnosis, and the diagnosis follows the evidence.

Setting the standard for an entire profession deserves that same discipline. Since NIBA released the draft Insurance Brokers Code of Practice, much of the conversation has been about process. Who was consulted, and when. Whether a clause goes as far as the reviewer recommended. What a definition captures.

Those are fair questions, and the consultation exists to test them. Alongside them sits another one worth asking: what does the evidence say about how clients of insurance brokers actually fare?

It is a question the Board has kept returning to. Evidence of client outcomes, evidence of broker behaviour, and importantly, evidence of client impact — not hypothesis, not hyperbole, and not what might simply feel good to say.

Start with the footprint. NIBA's own research counts the premium brokers place with APRA-authorised insurers at \$35.6 billion in 2024-25, or 46 per cent of the market. General insurance reaches more Australians through a broker than it does without.

NIBA also asked advised clients about what they thought about the quality of service and professionalism that brokers provide across a range of areas, including risk advice and claims management and the evidence was compelling. As noted in *Complexity to Clarity: The Broker Advantage*, 95% view brokers as critical to claims resolution, and 98% report their claims have been successfully resolved. 91% say brokers helped them achieve better business outcomes, highlighting their role as trusted risk advisers.

Against that footprint, the complaints record needs reading properly. Broker clients accounted for 686 complaints to the Australian Financial Complaints Authority in 2025-26, out of roughly 117,000 the scheme received—under 0.6 per cent.

A Code Built on Evidence, Not Instinct

The profession's own monitoring committee gives a more textured picture, and it is worth being straight about it. Across fourteen years, the Insurance Brokers Code Compliance Committee's own-motion inquiries have most often found visibility, process and culture gaps rather than demonstrated client loss. But not always. Its review of strata practices this year found none of the representative agreements it examined met the Code's requirements, made nine breach determinations, and referred three brokers to ASIC and NSW Fair Trading. That is a real finding, and we treat it as one.

The Committee also reported that over calendar 2025, detrimental client financial impact across the whole Code-subscribing profession was \$5.85 million, against the \$44.6 billion of premium placed over that same calendar year — about \$1.31 in every \$10,000 in premiums. Small, but not nothing. Nor does the evidence let us claim too much. Breach and complaint data are self-reported, and the Committee is right to keep asking questions of firms reporting none.

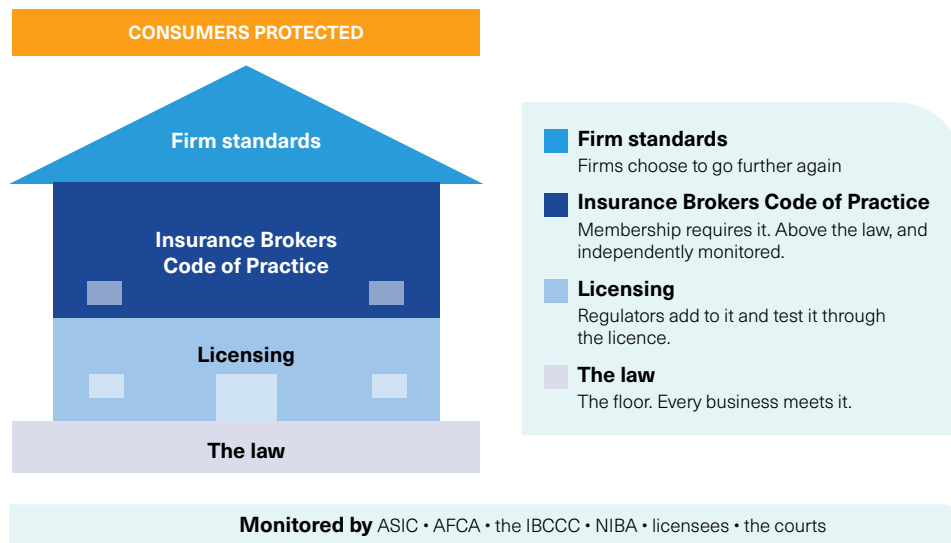
Given these findings, strata remains the clearest pressure point, having been identified by AFCA, the IBCCC and in a number of state-based inquiries. Which is precisely why the draft Code extends remuneration disclosure to strata in full, across both residential and commercial strata corporations, whether or not the owners corporation is a retail client. Being evidence-led means going where the evidence points, including when it points at us.

The NIBA Board also committed to drafting the Code with clarity about what a Code is for. Standards operate in layers: the law sets the floor, licensing builds on it, NIBA membership requires compliance with the Code, and firms may then choose to go further again. A Code that merely restates the law adds no protection — it becomes a cheat sheet for complying with something that already binds you. The point of a Code is to be nimble where legislation cannot be, and to let a profession say: these behaviours matter, we are lifting our minimum above the legal one to protect clients from proven detriment, and we will be held to it. It will not stop everyone from doing the wrong thing, but it does set the standard the profession is prepared to be judged against.

A Code Built on Evidence, Not Instinct

A broker's obligations sit in layers

Every layer does the same job. Each one also adds to the cost of serving a client.



Good decision-making rests on evidence. More than 300 individual pieces of feedback were recorded across written submissions, a member survey, a national webinar and a series of workshops and stakeholder sessions.

The response came from across the profession and beyond it. Sole practitioners and regional firms, mid-tier networks and the largest multinationals all made time to work through the draft. So did regulators and government agencies, the external dispute resolution scheme, consumer and financial counselling organisations, strata advocates, professional bodies and the Insurance Brokers Code Compliance Committee.

The Board finalises the Code in the coming weeks. The Code will be settled with that evidence in mind — fixing where the profession sees the floor, and where the opportunity lies to demonstrate professionalism well above it.

A Code of Practice is Measured by What Clients Experience with their Broker

Published 14 October 2026

Three stages of consultation. Fifty-one written submissions. More than 300 pieces of feedback on the draft Code. One final Code.

That is what happens when a profession asks how it can do better. You get a lot of feedback and a lot of perspectives. And even with the best intentions, you cannot accept all of it. But the 2027 Code is better for every piece of the feedback.

In the coming week, NIBA is launching the 2027 Code at our Convention. It is a new Code that had a lot of questions to answer: how to stay future-ready as broking changes, how to speak to clients in words they understand, and how to make good practice simpler for every broker to follow. Brokers are the voice of the client, so we tested every answer against the people brokers serve.

This is the fourth and final piece in this series. The first three set out the profession's promise to clients, the case for affordability and accessibility, and the evidence the Code was built on. This one sets out the result, and I want to explain how we got there and what it means for clients.

How the Code was made

The 2027 Code was built in three stages: an independent review, followed by two rounds of our own consultation.

The review received 18 written submissions, and held nine individual meetings and four roundtables.

Our first round included 11 workshops with about 80 brokers and 14 written submissions.

Three member surveys drew 243 responses.

In all, more than 10,500 brokers were represented through NIBA's first round consultation, showing the importance of the Code to the membership.

A Code of Practice is Measured by What Clients Experience with their Broker

The second round put the draft Code itself out for comment.

Nineteen organisations and individuals submitted written feedback

35 firms and individuals worked through the draft clause by clause

515 members joined a webinar on it

More than 300 pieces of feedback came in from that round

Every one was mapped to the clause it addressed, and each has a recorded decision.

What we did with what we heard

Those numbers measure more than effort. They measure listening. Between the draft and the final Code, we changed 21 clauses because of what we heard.

Listening is not the same as agreeing. It means weighing every view and then deciding. Feedback did not always point the same way. On the hardest questions, the Board had to make a call. Our consultation report, to be released with the Code, sets out what we heard and why we landed where we did.

Feedback we did not adopt still did its job. It made us test the reasoning behind every call. A Code that has been argued over is a Code that can stand on its own.

The Code by the numbers

2022 Code of Practice	2027 Code of Practice
12 sections	14 sections, 60 new provisions
14 days minimum notice before a policy	28 days minimum notice before a policy
included jargon	written in plain English

And it is written in plain English, addressed to clients, as the profession's public commitment to them.

A Code of Practice is Measured by What Clients Experience with their Broker

What clients will notice

Read from the client's side, those numbers become things a client will actually experience:

A broker that identifies a conflict of interest it cannot manage in the client's best interests must tell the client immediately and stop acting on that matter.

Any client, whether retail, wholesale, strata or a business of any size, can ask what their broker is paid, and get the answer in dollars within a reasonable time.

Where commission must be disclosed, it is shown in the quotation for each insurer compared and as a dollar amount on the invoice.

A client who tells their broker they are going through a difficult time can, with their consent, have it recorded once, so they do not have to repeat their circumstances each time they make contact.

After a declared catastrophe, brokers must contact affected clients as soon as they reasonably can, and offer to help them lodge their claims.

Many good brokers already do these things. Every broker bound by the Code must.

What it asks of brokers

Some of the change sits behind the desk, where clients will rarely see it but will feel it. Conflicts obligations that were spread across four sections of the 2022 Code now sit together in one, and must be applied consistently across a business. Staff must be trained to support clients experiencing vulnerability when they join, and again every year. Client records must be complete, accurate and secure, and kept until any complaint, dispute or claim is resolved. And annual reporting to the Insurance Brokers Code Compliance Committee is now written into the Code itself.

Each of these was weighed against the balance that has run through this series: what clients need, what regulation requires, and what a growing profession can sustain. Obligations that need new systems, processes or training must be met in full within 12 months of the Code taking effect. The Code lists them by subject: strata, remuneration disclosure, vulnerability, records and renewal. Everything else applies from day one. A firm that needs more time can ask NIBA for up to six more months and must tell the Code Compliance Committee it has asked.

A Code of Practice is Measured by What Clients Experience with their Broker

What happens now

The Code takes effect on 1 January 2027, and every existing Code Subscriber must adopt it by then. Between now and January, NIBA will help Code Subscribers make the change with a map from the 2022 Code to the 2027 Code and section-by-section Implementation Guidance. We will also publish a plain-English guide for clients on what they can expect from their broker.

This is the final piece in this series. It is not the final word on the Code. NIBA will arrange for the Code to be independently reviewed at least every five years, and will review and amend any provision without delay if needed to make it work as intended. That is how a Code stays future-ready.

I want to thank everyone who made time to work through the draft: brokers from sole practitioners to the largest multinationals, regulators and government agencies, the external dispute resolution scheme, consumer and financial counselling organisations, professional bodies and the Code Compliance Committee.

A Code is the standard a profession chooses to be judged against. This one asks more of brokers than the Code it replaces. NIBA's job now is to help every broker meet it. For more than 14,000 brokers, it is the new floor. For the Australian families, businesses and communities who rely on them, it sets out, in plain English, what good broking looks like.

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