DEFINITION OF SELF-FUNDING

Self-funding offers employers a practical alternative to traditional insurance, where the employer chooses from a variety of benefit plan designs. In a self-funded plan, the employer accepts the responsibility for the risk of healthcare for their employees. The employer self-funds the plan rather than paying premium to an insurance carrier.

- THE PLAYERS -

EMPLOYER → ISI MEMBER SERVICE AGENT → PROVIDER NETWORK → STOP-LOSS CARRIER → WRAP NETWORK

BENEFITS OF SELF-FUNDING

CONTROL - The employer chooses the benefit design, provider network and stop-loss carriers.

LOW OPERATING COSTS - Most businesses realize immediate monthly savings.

COST MANAGEMENT - 100% of the unused claim fund is returned to the employer.

FLEXIBILITY - Self-funding allows employers to design a health plan to address the needs of their employees and business.

- COMPARISON -

Self-funded health plans work similar to fully-insured plans with a major difference: The EMPLOYER owns the claims reserve instead of the insurance carrier.

On average, 7% of employees have catastrophic medical claims each year.

On average, 93% of employees use less than $2,500 per year in medical expenses.