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.

EMPLOYER

THE PLAYERS

THIRD PARTY ADMINISTRATOR

INSURANCE AGENT

PROVIDER NETWORK

STOP-LOSS CARRIER

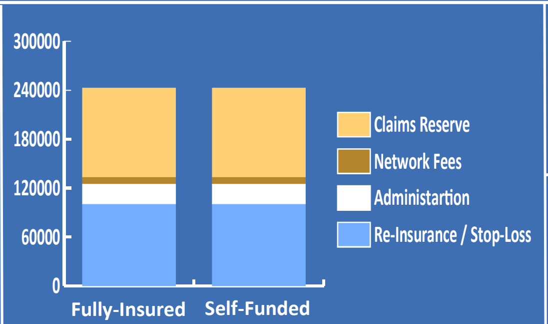
WRAP NETWORK

SELF-FUNDING

Comparison

Self-funded health plans work similar to fully insured plans with a major difference.

The EMPLOYER owns the claims reserve instead of insurance carrier.



7% 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. **93%**

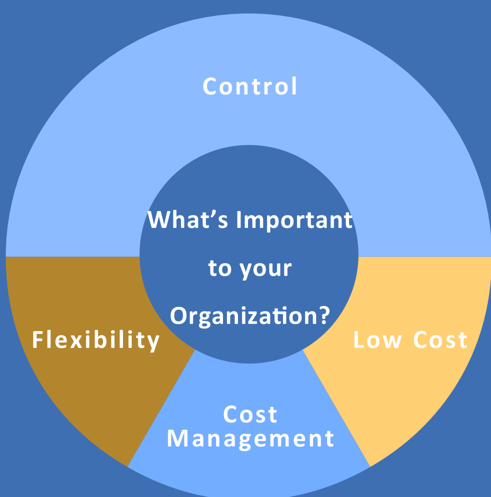
BENEFITS OF SELF-FUNDING

Control

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

Flexibility

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



Low Operating Costs

Most businesses realize immediate monthly savings.

Cost Management

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

Are you an employer with at least five (5) covered employees and looking for a creative, cost effective solution? Learn about the self-funded health plan by calling 1-888-474-1959 or email us at

sales@isi1959.com