

Self-Funding Facts

Self-funding is an important contributor to the financial and physical health of America's wellness future. We must collectively work to promote these offerings to legislators, industry advocates and business owners for a brighter future of the healthcare system. SIEF has collected the key facts about self-funding to help you explain the most important messages of our industry.

- Rising costs and increased instability in the healthcare marketplace has prompted organizations of all types and sizes to consider self-insurance as a solution for quality health benefits to their workers and dependents.
- ▶ With self-insured group health plans now providing coverage for a majority of U.S. employees and dependents (Kaiser Family Foundation survey, 2013), benefits brokers and consultants are becoming increasingly interested and involved in the self-insurance process.
- ▶ Self-insured health plans are sponsored by thousands of companies, as well as many labor unions and public sector entities. These companies include:

- Whole Foods

- Starbucks

- The Home Depot

- Microsoft

- Wells Fargo

- Southwest Airlines

- ▶ Many companies do not know the cost benefits of self-funding. These benefits include:
 - Greater cost containment opportunities
 - Ability to customize benefit offerings
 - Increase in employer cash flow
 - Ownership of claims data
- ▶ Self-funding allows for greater cost containment opportunities. This gives organizations customized plan coverage featuring the best options to meet the needs of their workforce.
- ▶ Due to aggregated claims data availability, companies identify and promote healthier employee cultures. This is traditionally through innovative wellness and disease management experts, who actively engage at the group and member level.
- ► Through stop-loss insurance, traditionally offered by the plan sponsors, self-funded companies have the security of a financial backstop should they incur large healthcare claims.