

Self-Insurance Simplified - Self-Funding 101

**April 16, 2024** 





### **AGENDA**

Talking Control – Self-Funding

 Components & Players of Self-Funding

Stop Loss



### Today's Lesson: Control What You Can Control







### Why Self-Fund?

- Clear visibility to plan spend.
- Eliminate carrier profits from premium.

**Transparency** 



#### **Benefits**

 Greater plan customizability, vendor selection, and cost management levers.

Customization



 Overall control over plan expenses and direction.

Control



#### **Risks**

 Month-over-month, greater volatility in expenses for the plan (paying actual claims vs. fixed premium).

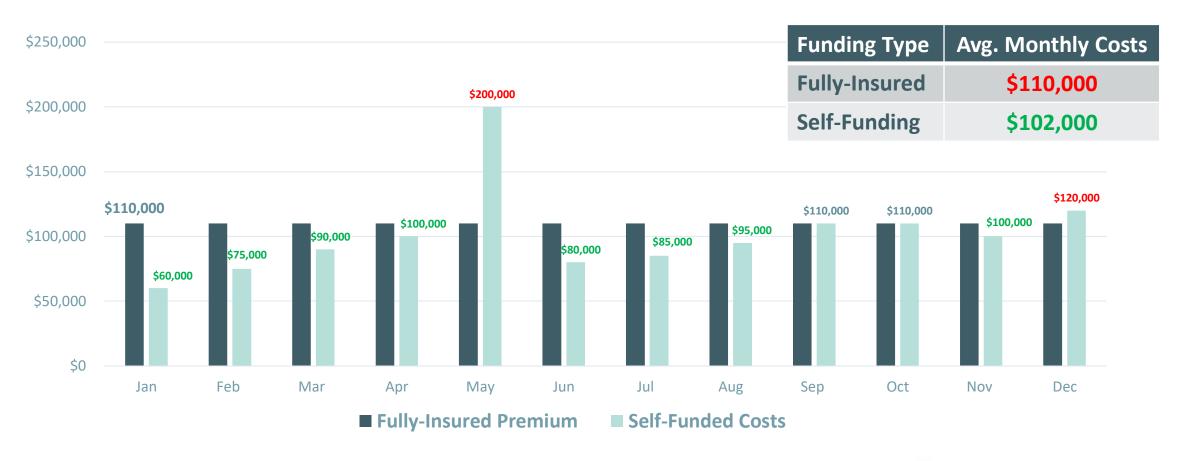
Volatility



In most cases, Self-Funding over time can realize 3-5%+ savings vs. staying fully-insured.\*



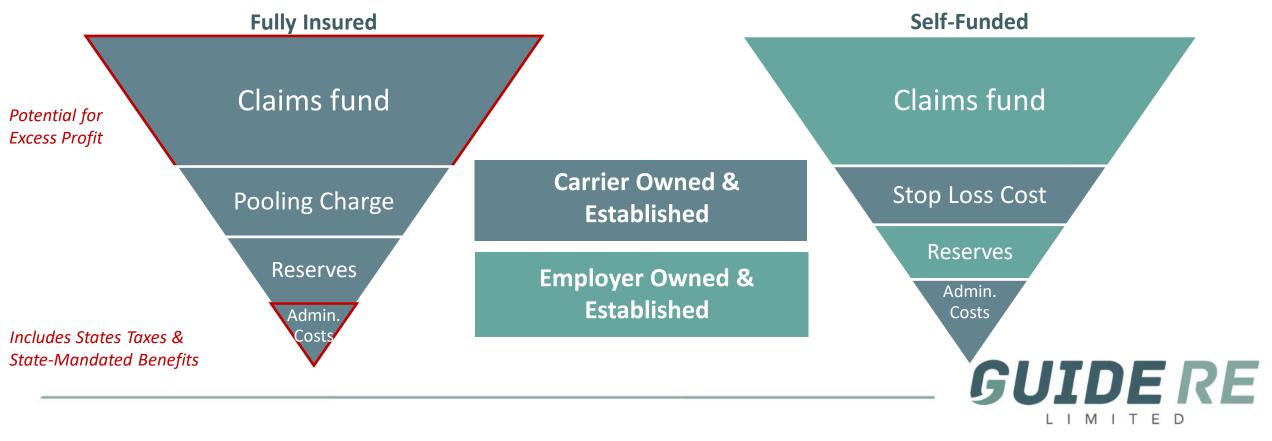
### Self-Funded vs. Fully-Insured Costs - Example





#### SELF-FUNDING 101 – WHAT IT IS, AND HOW TO STRUCTURE

- Self-funded plans have the same basic cost components as fully insured plans.
- However, able to eliminate portions of expenses around carrier profits, taxes & state-mandated benefits.



# **Key Players of Self-Funding**



### The Primary Players



# You – The Employer

Plan Setup & Claims Funding



#### TPA's

Medical Administration



#### PBM's

Pharmacy Administration



# **Stop-Loss Carriers**

 Catastrophic Claims Insurance



### You – The Employer

#### **Key Self-Funding Responsibilities**

- <u>Payments</u>: Two general types of payments when selffunded:
  - *Healthcare Claims*: claims payments are made to cover healthcare services completed by your participants.
  - Fixed Costs: fixed costs cover the cost of TPAs, PBMs, Stop-Loss, and other vendors helping with the administration of your plan.
- <u>Coverage Decisions</u>: When self-funded, you have more flexibility in determining what procedures are included/excluded (e.g., Gene Therapy, Gastric Bypass, etc.) and customization of cost-sharing elements (deductibles, copays, coinsurance).
- Reserve: A portion of funds ("reserve") is set aside for late claims. This is kept as a liability on the balance sheet.
- <u>Compliance</u>: Ultimately responsible for compliance with applicable regulations (i.e., ERISA).



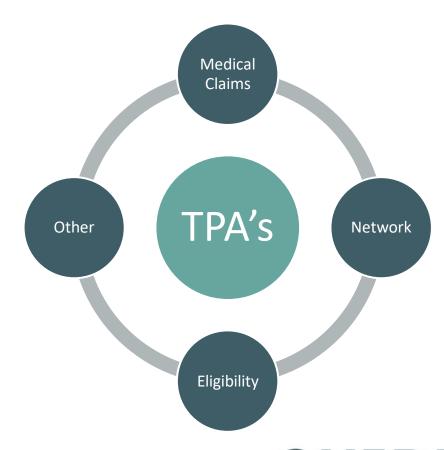
### **TPAs – Third Party Administrators**

#### **Key Responsibilities**

- Medical Claims Processing: Takes in claims submissions and reimburses providers for healthcare services.
- <u>Network Management</u>: Manages or rents a network of providers that patients can visit.
- <u>Eligibility Management</u>: Based on original group decisions, manages who is/isn't eligible for the health plan.

#### **Key Differentiators of Great TPA's**

- <u>Network</u>: Network offerings are competitive for areas where enrolled employees are located.
- <u>Transparent Reporting</u>: Reporting available is detailed and readily accessible.
- <u>Track Record of Great Service</u>: Sets plan up consistently correct; Implementation process is thorough and efficient.





### PBMs - Pharmacy Benefit Managers

#### **Key Responsibilities**

- RX Claims Processing: Takes in claims and reimburses pharmacies for prescriptions.
- <u>Formulary Management</u>: Manages "covered" and "preferred" lists of drugs available to participants.
- <u>Clinical Review</u>: Creates and manages processes for clinically reviewing drugs (i.e., prior authorization, step therapy, etc.)

#### **Key Differentiators of Great PBM's**

- <u>Clinical Effectiveness</u>: The procedures for reviewing expensive medications are thorough and aim to provide participants with quality prescriptions that achieve the lowest net cost.
- <u>Strong Contract</u>: The pricing guarantees and rebate<sup>1</sup> guarantees are market-competitive, and exclusions for those guarantees are kept minimal.
- <u>Track Record of Great Service:</u> Sets plans up consistently correct and Effectively handles patient questions and issues.





# **Stop-Loss**

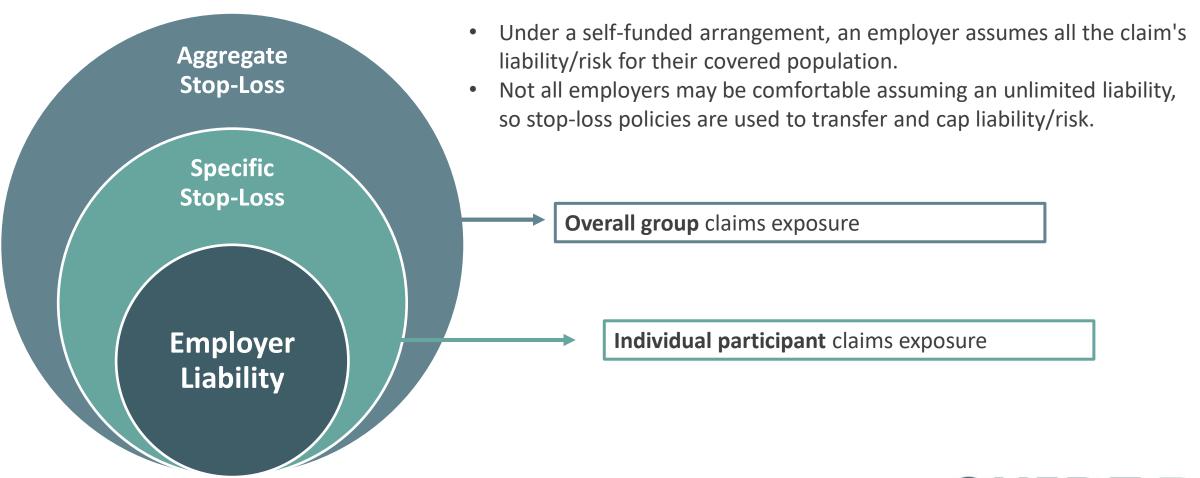


### What is Stop-Loss?

# Insurance to cover the **risk** that employers **don't** want to assume.

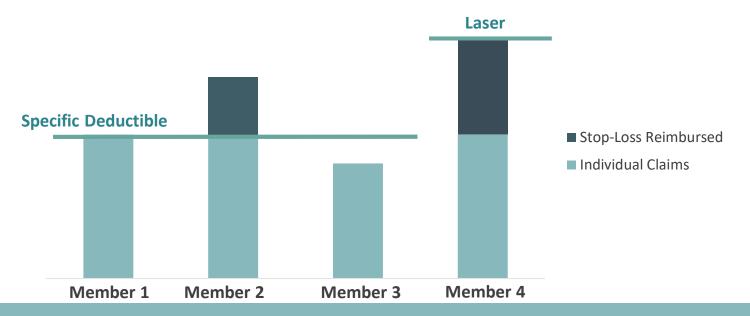


### **Capping Liability**





### **Specific Stop-Loss**



**Specific Stop Loss (SSL)** 

For any **one participant**, the plan sponsor is reimbursed for eligible claims **over** the specific stop-loss deductible.

The specific deductible level should be based on the plan's risk tolerance.

- <u>Higher Deductibles</u> = more risk but less premium.
- <u>Lower Deductibles</u> = more premium but less risk.

The Stop Loss Carrier reimburses individual claimants whose total claims incurred accumulate to an amount above the Specific Deductible during the plan year.

Lasers are higher deductibles placed on individuals by a stop-loss carrier to transfer known risk back onto the employer (i.e., cancer).



### AGGREGATE STOP-LOSS



**Aggregate Stop Loss (ASL)** 

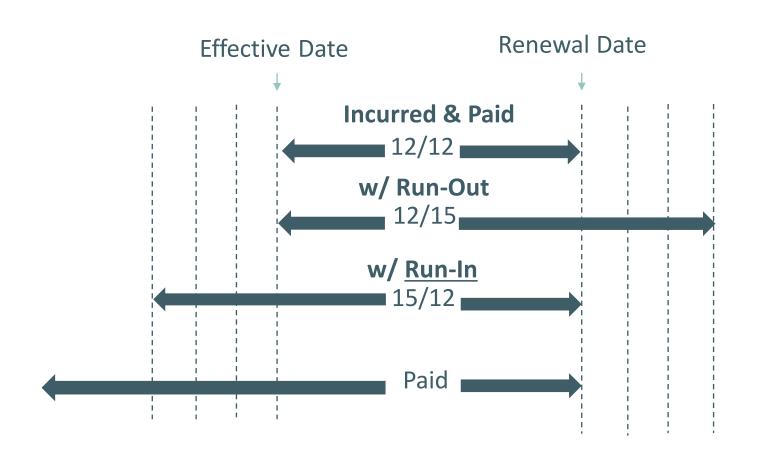
Aggregate stop-loss caps the cost of all claims paid below the specific deductible ("attachment point").

"Attachment point" is normally set at % expected claims + 25 cushion/corridor.

In the event of an <u>unexpected</u> high amount of claims <u>across all</u> <u>members</u>, Aggregate Stop-Loss provides employers security & coverage.



### **Stop-Loss Contract Types**



#### **Contract Type Cheat sheet:**

- <u>Incurred</u> = when a claim happened.
- <u>Paid</u> = when the plan pays a claim.
- 1<sup>st</sup> number = number of <u>incurred</u> months covered under the contract.
- 2<sup>nd</sup> number = number of <u>paid</u> months covered under the contract.



### Why Contract Type Matters

**Claims lag =** When medical services are incurred, compared to when they are paid by a health plan.

- Average claims lag can range from 30 90 days.
- Large or complex claims where multiple payers are involved can have even larger lag.

Not all stop-loss contracts are equal!





### **Stop-Loss Best Practices**

#### **Limit Laser Risk**

Purchase
 contracts that
 include a NLO rate
 cap provision.

### Prevent Contract Coverage Gaps

 Ensure that your stop loss contract covers every month you have liability for.

### Partner with Quality Carriers

 Ensure your stoploss carrier is a good quality partner.

#### Consider a Stop-Loss Captive

- Interested in moving selffunded, but concerned about large claim volatility over time?
- Consider a captive!



### **Next Steps**

#### **Takeaway Questions**

- Do you know your current claims spend?
- Do you know what's currently driving your costs?
- Have you ever completed a selffunding analysis for your plan before?

#### **Next Webinar**

#### **Strategies for Reducing Claims Spend**

- May 14<sup>th</sup>, 1-2 PM
- Dive into the top cost containment strategies to manage high-cost medications, chronic conditions, and more.



# QUESTIONS?



#### **Contact Info**

Reach out with any questions and be on the lookout for additional webinars invites throughout the year to learn more on Guide Re!



Kyle Cluskey
Guide Re Program Manager
kcluskey@cottinghambutler.com
O: 563.587.5680



James Ottavi
Director of Sales, Employee Benefits
jaottavi@cottinghambutler.com
O: 608.467.0445

