

EXPLORING PARTIAL SELF-INSURANCE: GETTING STARTED

So, you've decided to take a deeper look at partial self-insurance (PSI) – congratulations! You are taking the first steps towards establishing a more balanced healthcare program that considers both your organization's bottom line and your employees' health needs. Getting started is easy once you know what to look for and who to talk to.

- **KNOW YOUR OPTIONS:** Fully-funded, self-funded, partially self-funded, MEWAs...there's many choices when it comes to employee benefits purchasing. Knowing the pros and cons of each will go a long way towards understanding what your organization needs most from a plan. For a detailed breakdown of available benefits programs, download our guide [How Well Do You Know Your Options](#).
- **TALK TO A SUPPORTIVE BROKER:** Have an honest conversation with your broker about their experiences and openness to self-funding and partial self-funding. For a list of potential questions that can lead to a deeper discussion, you can download [Three Steps Nonprofits Should Take Before Renewing Healthcare Plans](#). But you should leave this conversation feeling like your broker is putting the financial and employee needs of your organization above their commission rate. At the very least, ask your broker how they get paid. Specifically, does their commission go up if your premiums go up? If you find the answers to any of these queries unsatisfactory, it might be time to shop around for a new broker.
- **GET CURIOUS:** Ask colleagues at other nonprofits that partially self-fund about their experiences, attend workshops or conferences on health benefits, listen in on podcasts and webinars dedicated to partial self-insurance, and conduct a web search with the terms "partial self-insurance" and "partially self-funding." If something strikes your eye, delve deeper and – if satisfied – bring it to the attention of your leadership team.
- **UNDERSTAND YOUR PLAN:** Knowing your current plan backwards and forwards, and how (or if) it is best serving your employees will give you something to compare a PSI program to throughout this process. This is especially true when it comes to both premium and out-of-pocket costs. Understanding what your organization and your staff pays towards these two important costs, and what those fees actually cover, will help guide your thinking about the need for a plan change.

Once you have done all of the above, you should have a really solid grasp of PSI and if it's worth digging deeper into specific plans that may work for your organization. One such program is Nonstop Wellness, which takes PSI a step further by providing a "one stop shop" for consolidated billing, transaction facilitation, and benefits administration. Nonstop Wellness offers nonprofits greater financial control over healthcare spending, including premium cost savings, eliminated out-of-pocket expenses for employees, a focus on proactive wellness, and customized benefit options. In addition, Nonstop removes the financial and administrative barriers that are associated with partial self-funding.

For a free and confidential savings analysis, contact us at 877-626-6057 or info@nonstopwellness.com.



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