

# Taking the First Step Toward Self-funding



## With Promise Health Plan's Level-funded Group Health Plan

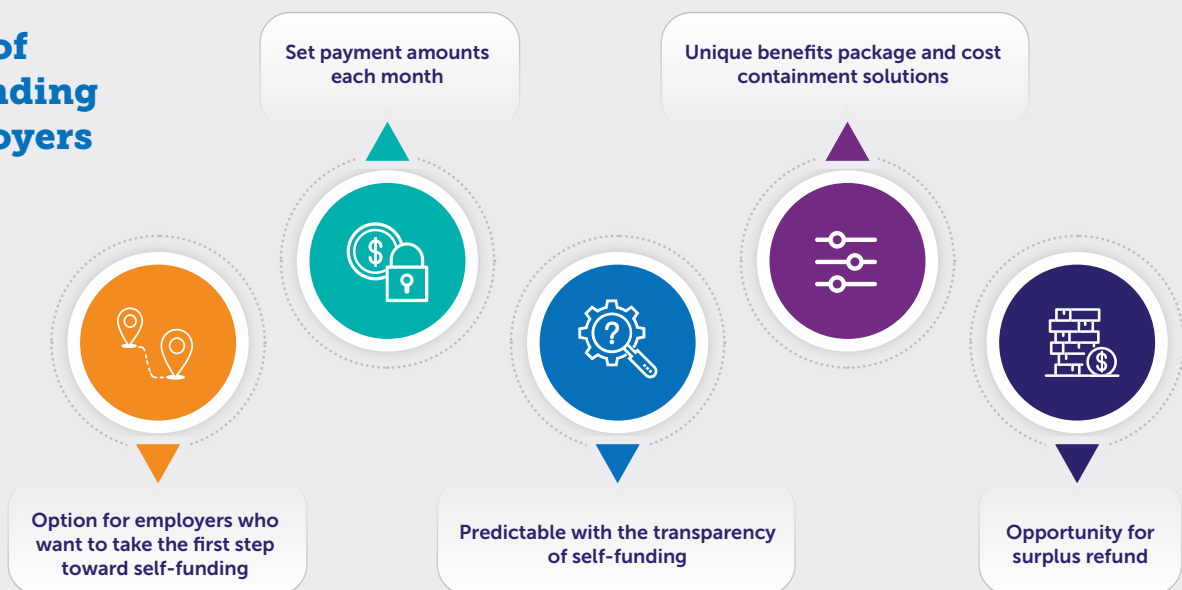
### Understanding a Level-funded Group Health Plan

A level-funded group health plan is a type of self-funded health plan in which an employer pays a fixed monthly payment to cover the cost of claims, administrative costs and stop-loss insurance premiums.

With a level-funded group health plan, the stop-loss underwriter calculates the employer's maximum claim liability based on the group's risk. This dollar amount is called the aggregate attachment point and is typically 115–125% of expected claims. The aggregate attachment point is divided by 12 to produce the amount that the employer will be required to pay each month in claims costs.

If actual claims are lower than the employer's maximum claims liability, the employer receives a refund for unused claims dollars at the end of the plan year (the surplus refund). If actual claim costs are higher than the employer's maximum claims liability, the stop-loss carrier covers the balance.

### Benefits of Level-funding for Employers



### The Promise Health Plan Difference

Many options are available, but Promise Health Plan's level-funded group health plan provides employers with additional benefits and services.

- Access to our Clinically Integrated Network
- Discounted network access fees
- Enhanced cost containment solutions for care management, disease management and utilization management
- More competitive stop-loss pricing through our A-rated carriers
- Robust member coverage through our national network solution
- 100% of any claims surplus is refunded back to the employer
- Best-in-class customer service and account management

Reach out to us to learn more about  
our level-funded group health plan:

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