

IS PARTIAL SELF-INSURANCE THE RIGHT MOVE FOR YOUR COMMUNITY HEALTH CENTER?

Changing your approach to employer-sponsored healthcare can be an exciting process when you understand all of the possibilities. But it can also be difficult to know if one funding approach is a better option for your organization over another.

This checklist provides the top five things we encourage you to consider and discuss with your leadership team before deciding to move to a partially self-funded insurance plan.

❑ NUMBER OF EMPLOYEES ON BENEFITS:

Most partially self-funded plans work best when there are more members on benefits. This ensures a greater rate of return in low-to-average claims years and reduced premium costs.

The Nonstop Wellness program is designed specifically for organizations with 50+ members on benefits and provides an estimated savings of 12.5 percent annually.

❑ LEVEL OF RISK TOLERANCE:

Consider how much financial wiggle room you have to take on a high claims year, or flexibility with staff time to support third party administrators, claims, and billing reconciliation.

Nonstop Wellness mitigates all of the financial risks associated with partial self-funding and manages all benefits administration, billing, and claims processing for you.

❑ ORGANIZATIONAL VALUES AND HEALTHCARE GOALS:

Establishing and understanding your nonprofit's values when it comes to employee care is a crucial step in the process of determining the right healthcare approach. If your values and goals center on employee health and wellbeing, as well as long-term retention, partial self-funding may be the right approach for your organization.

Nonstop Wellness goes beyond the norm when it comes to employee healthcare, providing improved, customized benefits and the elimination of out-of-pocket costs.

❑ ORGANIZATIONAL FINANCIAL GOALS:

Most nonprofits have one significant financial goal – staying in the black. Going beyond that though, consider how and where you would like to save costs, and if supporting employee reductions in healthcare spending is on the list.

Nonstop Wellness allows for across the board savings for both the employer and its employees. Most CHCs see a baseline savings of 12.5% for premium costs, along with the potential for a quarterly return of reserves and eliminated out-of-pocket costs for employees.

❑ OPENNESS TO TRYING SOMETHING NEW:

With any new approach to a big budget item like healthcare, there is uncertainty and a differing level of openness among various members of leadership teams. Ensuring that everyone understands all of the options on the table is a first step before making a decision. You will also need to consider your current broker and how a change in approach could affect that relationship.

Nonstop's Community Outreach team is always on hand to provide more information about partial self-insurance and the Nonstop Wellness program. We are happy to provide any details you need to better understand this approach, and how our combined consulting and brokering services can best serve your nonprofit.

Nonstop is deeply committed to helping CHCs find health insurance solutions that fit their organization and staff needs in the most accessible, affordable way possible. We recognize there are many different approaches to health insurance and we want to help you find the right program for your organization and your valued employees.

CONTACT US TO EXPLORE PARTIAL SELF-INSURANCE FOR YOUR ORGANIZATION

Contact Nonstop at: nonstopwellness.com/nachc | 877.656.6057



Nonstop is proud to partner with NACHC's business development affiliate Community Health Ventures (CHV) to offer the Nonstop Wellness program through its Value in Benefits (ViB) pilot. Nonstop Wellness is a unique partially self-insured health benefits program that provides immediate reductions in premium costs and improved benefits to support recruitment and retention. **LEARN MORE AT [WWW.NONSTOPWELLNESS.COM/NACHC](https://www.nonstopwellness.com/nachc)**

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