

The State Health Plan: a Self-funded Plan



The State Health Plan is a self-insured plan that PEBA administers on behalf of its members. As a self-funded plan, the State Health Plan does not pay premiums to an insurance company. Instead, employee premiums and employer contributions are held in a trust fund. PEBA pays your claims and the Plan's administrative expenses from this trust fund. Any interest earned from this account helps fund the Plan, too. Self-funding offers real advantages for the Plan's members and employers since PEBA maintains control of the financial assets.

As the plan sponsor for the State Health Plan, PEBA is responsible for providing a comprehensive plan of benefits at a cost that is affordable to both the individuals covered by the plans and their employers. PEBA contracts with third-party administrators to provide benefits and process claims. PEBA works closely with these administrators to customize a comprehensive benefits package within available resources for all individuals covered by the plans. BlueCross BlueShield of South Carolina processes the State Health Plan's medical claims. Express Scripts is the pharmacy benefits manager.

Where to go for benefits information

Check out the resources below to learn more about what the State Health Plan covers and how your benefits work.

- peba.sc.gov
- [Insurance Summary](#)
- [Insurance Benefits Guide](#)
- [BlueCross BlueShield of South Carolina](#)
- [Express Scripts](#)