

Build the Knowledge You Need to Make Better Health Plan Decisions
Virtual Education through ZOOM
9 a.m. to 4:15 p.m.

Healthcare costs continue to rise, regulations continue to evolve, and employers are under increasing pressure to make informed decisions about their health benefit programs. Understanding how self-funded health plans operate is no longer optional but essential for organizations seeking to manage costs while continuing to provide competitive employee benefits.

The MASI Health Institute is a comprehensive two-part virtual educational program designed for human resource professionals, benefits administrators, self-insured employers, TPAs, insurance professionals, consultants, and others involved in the management of employer-sponsored health plans.

Part 2 of this series builds on the fundamentals of self-funding with a deeper focus on advanced strategies for managing and optimizing employer-sponsored health plans. Attendees will explore practical approaches to analyzing claims data, managing stop-loss risk, strengthening vendor accountability, controlling healthcare costs, and improving employee engagement. The program will also address emerging legal and regulatory challenges, providing employers with actionable strategies to improve plan performance and achieve long-term financial sustainability.
(Completion of Part 1 is NOT a requirement for Part 2 participation.)

Topics for this session will Include:

- Reading the Data – Turning Reports into Action
- Stop-Loss Strategy & Risk Management
- Vendor Management & Contracting (Where Employers Win or Lose)
- Advanced Cost Containment Strategies
- Employee Engagement & Behavior Change
- Legal Risk, Fiduciary Strategy & What's Coming Next

Focused on real-world applications rather than theory, the MASI Health Plan Institute delivers practical education that participants can immediately put to work in their organizations.

MASI Health Institute
Registration Form – March 2027 Session

Name: _____

Title: _____

Company Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Email: _____

_____ **$250 Member Registration Fee** _____ **$350 Non-Member Registration Fee**

Please copy form for multiple registrations.

Continuing education is eligible for SHRM and the Mississippi Insurance Department Life/Health license.

Payment Information

Enclosed is my check made payable to Mississippi Association of Self Insurers in the amount of $_____.

Mail to:
Mississippi Association of Self Insurers
1888 Main Street; Suite C-106
Madison, Mississippi 39110

For more information or to register online, see the MASI website at www.masiweb.org/events.