

Group Health Plans Report

Abstract of 2012 Form 5500 Annual Reports

Reflecting Statistical Year Filings

Data Extracted on 4/29/2014



EMPLOYEE BENEFITS SECURITY ADMINISTRATION
UNITED STATES DEPARTMENT OF LABOR

June 2015
Version 1.1

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HIGHLIGHTS FROM THE 2012 FORM 5500 GROUP HEALTH PLANS REPORT

The universe of group health insurance plans filing a Form 5500 is diverse and complicated. Varying benefit structures, funding arrangements, and relationships to insurance are all major components of the complexity. For purposes of generating this report, EBSA classified private sector employer-sponsored group health employee benefit plans as either self-insured, fully-insured, or mixed-insured. Appendix A1 at the end of this report provides more information on the classification methodology. Additionally, the methodology for selecting data underlying this report is based upon Form 5500 plan year end dates, meaning all employer-sponsored group health employee benefit plans with plan year ending dates in 2012 are included.

Other findings from private sector employer-sponsored group health plans filing Form 5500 series welfare reports for plan year 2012 are summarized below.

- In 2012, 21,000, or 41 percent, of the approximately 50,000 private sector employer-sponsored group health plans that filed a Form 5500 can be categorized as self-insured. Of the remaining 30,000 group health plans, approximately 4,000, or 8 percent, can be categorized as mixed-insured, and 26,000, or 51 percent, can be categorized as fully-insured. (See Table A1.)
- Of the 50,000 group health plans mentioned above, 83 percent offered other welfare benefits in addition to health benefits (such as dental, vision, life, disability, etc.). Of these 42,000 plans, 38 percent can be described as having self-insured health benefits while 9 percent can be

described as having both self-insured and fully-insured characteristics (mixed-insured) for their health benefits. Fifty-three percent of these plans can be described as having fully-insured health benefits. (See Table A1.)

- Fifty-three percent of all private sector single employer group health plans that filed a 2012 Form 5500 provided fully-insured health benefits to their employees. Multiemployer group health plans were much less likely to provide fully-insured health benefits; only 4 percent of those plans did so in 2012. (See Table A2.)
- More than 19,000 of the group health plans categorized as self-insured are single employer plans; the remaining 1,000 are multiemployer plans. Of the 4,000 group health plans categorized as mixed-insured, the majority are single employer with fewer than 1,000 being multiemployer plans. Nearly all of the 26,000 group health plans categorized as fully-insured are single employer with fewer than 100 being multiemployer plans. (See Table A2.)
- More than three-quarters of the group health plans categorized as self-insured covered more than 100 participants and did not operate a trust. Approximately 61 percent of all mixed-insured group health plans and nearly all of the fully-insured group health plans covered more than 100 participants and did not operate a trust. (See Table A2.)¹
- In total, group health plans that filed a Form 5500 held about \$205 billion in assets as of the end of 2012. Self-insured group health plans held approximately \$73 billion; mixed-insured group health plans held less than \$132 billion; and just \$49 million was held by fully-insured group health plans. (See Table A2.)

¹ However, this is a data restriction that results from the filing exemption provided to welfare benefit plans covering fewer than 100 participants (small plans) which are unfunded, fully-insured, or a combination of insured and unfunded. For more information on filing requirements and exemptions, please see Appendix A1.

- Self-insured group health plans covering 100 or more participants held approximately 23 percent of their assets in cash and U.S. Government Securities, 22 percent in direct filing entities, 18 percent in mutual fund companies (registered investment companies), 10 percent in debt instruments, and 9 percent in stock. Mixed-insured group health plans covering 100 or more participants held approximately 17 percent of their assets in cash and U.S. Government Securities, 15 percent in direct filing entities, 11 percent in mutual fund companies, 11 percent in debt instruments, and 29 percent in stock. Fully-insured group health plans covering 100 or more participants held approximately 21 percent of their assets in cash and U.S. Government Securities, 0 percent in direct filing entities, 37 percent in mutual fund companies, 8 percent in debt instruments, and 29 percent in stock. (See Table A6.)
- Form 5500 group health plan filers reported more than \$25 billion in liabilities as of the end of 2012: more than \$11 billion was reported by self-insured group health plans, \$14 billion by mixed-insured group health plans, and \$5 billion by fully-insured group health plans. (See Table A2.)
- Forty six percent, or 32 million, of the approximately 70 million participants in group health plans filing a 2012 Form 5500 were covered under self-insured group health plans. (See Table A2.)
- Of the 50,000 group health plans that filed a 2012 Form 5500, approximately 18,000 indicated a funding arrangement of insurance only, more than 2,000 indicated a funding arrangement of a trust only, and 19,000 indicated a funding arrangement of general assets of the sponsor and insurance. The remaining 11,000 group health plan filers indicated some other combination of funding arrangements or did not report any arrangement. (See Table A7.)
- Overall, group health plans reported on their 2012 Form 5500 receiving approximately \$140 billion in contributions

in 2012, more than \$112 billion contributed by the employers and \$25 billion contributed by the plan participants. All but \$1 billion was contributed to plans with more than 100 participants. (See Table A4.)

- In 2012, group health plans filing a Form 5500 that used trusts posted investment income gains of over \$17 billion, of which approximately \$5 billion was gained by self-insured group health plans, \$13 billion gained by mixed-insured group health plans, and \$5 million gained by fully-insured group health plans. (See Table A4.)
- Self-insured group health plans that filed a 2012 Form 5500 and used trusts made benefit payments of about \$42 billion directly to participants and more than \$6 billion to insurance carriers for the provision of other insured benefits. Mixed-insured group health plans made benefit payments to participants totaling about \$57 billion and made payments to insurance carriers of \$27 billion. (See Table A5.)
- In total, group health plans filing a 2012 Form 5500 reported nearly \$8 billion in administrative expenses.² Self-insured group health plans reported more than \$3 billion; mixed-insured group health plans reported approximately \$4 billion; and fully-insured group health plans reported approximately \$1 million. (See Table A5.)

² Administrative expenses are reported on the Form 5500 Schedule H – Financial Information, Part II – Income and Expense Statement, line number 2(i) – Administrative expenses. Administrative expenses are reported on the Form 5500 Schedule I – Financial Information, Part I – Income, Expenses, and Transfers for this Plan Year, line number 2(h). Administrative expenses are reported on the Form 5500-SF, Part III – Financial Information, line number 8(f).

Table A1. Number of Group Health Plans, Total Participants, Active Participants, Assets, Contributions, and Benefits by type of benefit and type of insurance, 2012

All Plans

Type of Benefit	Number of Plans	Total Participants End of Year (thousands) 1/	Active Participants End of Year (thousands) 2/	Total Assets (millions)	Total Contributions (millions) 3/	Total Benefits (millions) 4/
Total	50,209	69,794	61,321	\$204,502	\$139,847	\$138,858
Health Benefits Only	8,319	7,460	6,349	14,226	7,991	7,412
Health and Other Benefits	41,890	62,333	54,972	190,276	131,856	131,446
Health and Dental	2,419	2,163	1,808	5,371	5,046	4,866
Health and Vision	729	585	493	3,220	905	883
Health and Non-Health 5/	3,258	8,559	7,194	12,037	6,784	6,665
Health, Dental, and Vision	2,829	4,973	4,468	7,470	13,312	13,018
Health, Dental, and Non-Health 5/	9,393	6,993	6,395	14,111	11,131	10,253
Health, Vision, and Non-Health 5/	715	1,361	954	4,421	3,073	2,864
Health, Dental, Vision, and Non-Health 5/	22,547	37,699	33,660	143,646	91,605	92,895

Self-Insured

Type of Benefit	Number of Plans	Total Participants End of Year (thousands) 1/	Active Participants End of Year (thousands) 2/	Total Assets (millions)	Total Contributions (millions) 3/	Total Benefits (millions) 4/
Total	20,551	32,294	28,644	\$72,916	\$55,970	\$53,096
Health Benefits Only	4,766	4,602	4,048	7,753	3,657	3,691
Health and Other Benefits	15,785	27,692	24,596	65,163	52,314	49,404
Health and Dental	1,155	1,168	999	2,842	2,631	2,617
Health and Vision	268	313	250	3,196	464	460
Health and Non-Health 5/	1,679	7,576	6,357	8,351	5,126	4,772
Health, Dental, and Vision	1,569	2,333	2,183	4,106	3,565	3,439
Health, Dental, and Non-Health 5/	3,056	2,804	2,536	5,526	5,817	5,343
Health, Vision, and Non-Health 5/	294	930	607	1,331	2,026	1,925
Health, Dental, Vision, and Non-Health 5/	7,764	12,568	11,664	39,811	32,684	30,847

(continued...)

Table A1. Number of Group Health Plans, Total Participants, Active Participants, Assets, Contributions, and Benefits by type of benefit and type of insurance, 2012

Mixed-Insured

Type of Benefit	Number of Plans	Total Participants End of Year (thousands) 1/	Active Participants End of Year (thousands) 2/	Total Assets (millions)	Total Contributions (millions) 3/	Total Benefits (millions) 4/
Total	3,983	25,989	21,707	\$131,537	\$83,851	\$85,760
Health Benefits Only	243	1,254	925	6,471	4,331	3,720
Health and Other Benefits	3,740	24,735	20,782	125,065	79,520	82,040
Health and Dental	131	652	479	2,528	2,414	2,249
Health and Vision	40	125	101	24	441	423
Health and Non-Health 5/	212	523	403	3,648	1,653	1,893
Health, Dental, and Vision	205	2,125	1,791	3,364	9,747	9,579
Health, Dental, and Non-Health 5/	513	2,295	2,027	8,584	5,311	4,909
Health, Vision, and Non-Health 5/	56	229	149	3,090	1,047	940
Health, Dental, Vision, and Non-Health 5/	2,583	18,785	15,831	103,827	58,906	62,048

Fully-Insured

Type of Benefit	Number of Plans	Total Participants End of Year (thousands) 1/	Active Participants End of Year (thousands) 2/	Total Assets (millions)	Total Contributions (millions) 3/	Total Benefits (millions) 4/
Total	25,675	11,510	10,970	\$49	\$26	\$3
Health Benefits Only	3,310	1,604	1,377	2	4	1
Health and Other Benefits	22,365	9,906	9,594	48	23	2
Health and Dental	1,133	343	330	-	1	-
Health and Vision	421	148	141	-	-	-
Health and Non-Health 5/	1,367	460	435	38	5	-
Health, Dental, and Vision	1,055	516	493	**/	**/	-
Health, Dental, and Non-Health 5/	5,824	1,894	1,832	1	2	1
Health, Vision, and Non-Health 5/	365	201	197	**/	**/	-
Health, Dental, Vision, and Non-Health 5/	12,200	6,345	6,165	8	14	**/

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: Total participants, active participants, and total assets are tabulated as of the end of the plan year.

1/ Includes active, retired, and separated participants either receiving benefits or entitled to future benefits. For Form 5500-SF filers, this number may also include deceased participants whose beneficiaries are receiving or are entitled to receive benefits.

2/ For Form 5500-SF filers, all reported participants are assumed to be active.

3/ Includes both employer and employee contributions.

4/ Amounts shown include both benefits paid directly from trust funds and premium payments made by plans to insurance carriers. Amounts exclude benefits paid directly by insurance carriers. Plans classified as fully-insured do not report benefit payments unless they file the Form 5500-SF, have 100 or more participants as of the beginning of the plan year, do not operate a trust, and report payment of premiums. According to the plan funding classification algorithm outlined in Appendix A1, plans reporting information on health insurance policies or contracts that also report benefit payments on a financial schedule are deemed mixed-insured.

5/ Non-health benefits include life insurance, supplemental unemployment, temporary disability, and long-term disability among others. See 2012 Instructions for Form 5500 Annual Return/Report of Employee Benefit Plan, at <http://www.dol.gov/ebsa/pdf/2012-5500inst.pdf>.

**/ Less than \$500,000.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table A2. Number of Group Health Plans, Participants, Assets, and Liabilities
by type of insurance and type of plan, 2012**

	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Number of Plans	50,209	48,379	1,830	20,551	19,443	1,108	3,983	3,343	640	25,675	25,593	82
Health Benefits Only	8,319	8,241	78	4,766	4,707	59	243	236	7	3,310	3,298	12
Health & Other Benefits	41,890	40,138	1,752	15,785	14,736	1,049	3,740	3,107	633	22,365	22,295	70
Participants End of Year (thousands) 3/	69,794	63,808	5,985	32,294	28,582	3,712	25,989	23,924	2,065	11,510	11,302	208
Health Benefits Only	7,460	7,135	325	4,602	4,440	162	1,254	1,250	4	1,604	1,444	160
Health & Other Benefits	62,333	56,673	5,660	27,692	24,142	3,550	24,735	22,674	2,061	9,906	9,858	49
Assets (millions)	\$204,502	\$148,452	\$56,050	\$72,916	\$34,369	\$38,546	\$131,537	\$114,040	\$17,497	\$49	\$43	\$7
Health Benefits Only	14,226	12,229	1,996	7,753	5,845	1,908	6,471	6,383	89	2	2	-
Health & Other Benefits	190,276	136,222	54,054	65,163	28,524	36,639	125,065	107,657	17,408	48	41	7
Liabilities (millions)	\$25,368	\$14,459	\$10,909	\$11,557	\$4,787	\$6,770	\$13,806	\$9,669	\$4,137	\$5	\$3	\$2
Health Benefits Only	1,437	1,258	179	428	252	176	1,008	1,005	4	1	1	-
Health & Other Benefits	23,931	13,201	10,729	11,129	4,534	6,595	12,797	8,664	4,133	4	3	2

Plans with 100 or More Participants & Trusts

	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Number of Plans	4,071	2,504	1,567	2,744	1,759	985	1,315	736	579	12	9	3
Health Benefits Only	434	394	40	354	319	35	80	75	5	-	-	-
Health & Other Benefits	3,637	2,110	1,527	2,390	1,440	950	1,235	661	574	12	9	3
Participants End of Year (thousands) 3/	23,775	18,091	5,684	12,679	9,035	3,644	11,087	9,050	2,038	8	6	2
Health Benefits Only	1,183	1,031	153	667	517	149	517	513	3	-	-	-
Health & Other Benefits	22,591	17,060	5,531	12,013	8,518	3,495	10,571	8,536	2,034	8	6	2
Assets (millions)	\$200,718	\$144,775	\$55,943	\$69,296	\$30,824	\$38,471	\$131,384	\$113,919	\$17,465	\$38	\$31	\$7
Health Benefits Only	13,865	11,874	1,991	7,427	5,523	1,904	6,437	6,351	87	-	-	-
Health & Other Benefits	186,853	132,901	53,952	61,868	25,301	36,567	124,947	107,569	17,378	38	31	7
Liabilities (millions)	\$23,092	\$12,191	\$10,901	\$9,293	\$2,528	\$6,766	\$13,797	\$9,664	\$4,134	\$2	-	\$2
Health Benefits Only	1,422	1,244	179	416	241	175	1,006	1,003	4	-	-	-
Health & Other Benefits	21,670	10,948	10,722	8,878	2,287	6,591	12,791	8,661	4,130	2	-	2

(continued...)

**Table A2. Number of Group Health Plans, Participants, Assets, and Liabilities
by type of insurance and type of plan, 2012**

Plans with 100 or More Participants & No Trusts

	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Number of Plans	43,458	43,336	122	15,447	15,409	38	2,418	2,412	6	25,593	25,515	78
Health Benefits Only	6,940	6,916	24	3,530	3,519	11	112	111	1	3,298	3,286	12
Health & Other Benefits	36,518	36,420	98	11,917	11,890	27	2,306	2,301	5	22,295	22,229	66
Participants End of Year (thousands) 3/	45,950	45,654	296	19,556	19,491	65	14,893	14,867	25	11,501	11,295	206
Health Benefits Only	6,257	6,085	172	3,917	3,905	12	736	735	*/	1,604	1,444	160
Health & Other Benefits	39,693	39,569	124	15,639	15,586	53	14,157	14,132	25	9,897	9,851	46
Assets (millions)	-	-	-	-	-	-	-	-	-	-	-	-
Health Benefits Only	-	-	-	-	-	-	-	-	-	-	-	-
Health & Other Benefits	-	-	-	-	-	-	-	-	-	-	-	-
Liabilities (millions)	-	-	-	-	-	-	-	-	-	-	-	-
Health Benefits Only	-	-	-	-	-	-	-	-	-	-	-	-
Health & Other Benefits	-	-	-	-	-	-	-	-	-	-	-	-

Plans with Fewer Than 100 Participants & Trusts 4/

	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Number of Plans	2,680	2,539	141	2,360	2,275	85	250	195	55	70	69	1
Health Benefits Only	945	931	14	882	869	13	51	50	1	12	12	-
Health & Other Benefits	1,735	1,608	127	1,478	1,406	72	199	145	54	58	57	1
Participants End of Year (thousands) 3/	69	64	5	58	55	3	9	7	2	1	1	-
Health Benefits Only	20	20	*/	18	18	*/	2	2	*/	*/	*/	-
Health & Other Benefits	49	44	5	41	38	3	8	5	2	1	1	-
Assets (millions)	\$3,784	\$3,677	\$107	\$3,620	\$3,545	\$75	\$152	\$120	\$32	\$12	\$12	-
Health Benefits Only	361	355	6	325	321	4	34	32	2	2	2	-
Health & Other Benefits	3,423	3,321	102	3,295	3,223	72	118	88	30	10	10	-
Liabilities (millions)	\$2,275	\$2,268	\$8	\$2,264	\$2,259	\$5	\$8	\$5	\$3	\$3	\$3	-
Health Benefits Only	14	14	**/	12	12	**/	2	2	-	1	1	-
Health & Other Benefits	2,261	2,254	7	2,252	2,248	4	7	4	3	3	3	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: Participants, assets, and liabilities are tabulated as of the end of the plan year.

1/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

2/ Includes multiemployer plans and multiple employer collectively bargained plans.

3/ Includes active, retired, and separated participants either receiving benefits or entitled to future benefits. For Form 5500-SF filers, this number may also include deceased participants whose beneficiaries are receiving or are entitled to receive benefits.

4/ Includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

**/ Less than \$500,000.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table A3. Number of Participants in Group Health Plans
by type of insurance, type of plan, and type of participant, 2012**
(numbers in thousands)

All Plans

Type of Participant	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Active participants 3/	61,321	56,858	4,462	28,644	25,788	2,856	21,707	20,145	1,562	10,970	10,925	45
Retired or separated participants receiving benefits	8,058	6,592	1,466	3,484	2,670	815	4,069	3,580	488	505	342	163
Other retired or separated participants entitled to future benefits	415	358	57	166	124	42	214	199	15	35	35	*/
Total Participants End of Year	69,794	63,808	5,985	32,294	28,582	3,712	25,989	23,924	2,065	11,510	11,302	208

Plans with 100 or More Participants & Trusts

Type of Participant	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Active participants 3/	18,511	14,183	4,329	10,269	7,480	2,789	8,234	6,697	1,537	8	6	2
Retired or separated participants receiving benefits	5,008	3,709	1,298	2,289	1,476	813	2,718	2,233	485	*/	*/	*/
Other retired or separated participants entitled to future benefits	255	199	57	121	79	42	135	120	15	-	-	-
Total Participants End of Year	23,775	18,091	5,684	12,679	9,035	3,644	11,087	9,050	2,038	8	6	2

(continued...)

**Table A3. Number of Participants in Group Health Plans
by type of insurance, type of plan, and type of participant, 2012**
(numbers in thousands)

Plans with 100 or More Participants & No Trusts

Type of Participant	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Active participants 3/	42,745	42,616	129	18,320	18,256	64	13,464	13,442	22	10,961	10,919	43
Retired or separated participants receiving benefits	3,046	2,878	167	1,192	1,190	1	1,349	1,346	3	505	342	163
Other retired or separated participants entitled to future benefits	159	159	*/	45	45	*/	79	79	-	35	35	*/
Total Participants End of Year	45,950	45,654	296	19,556	19,491	65	14,893	14,867	25	11,501	11,295	206

Plans with Fewer Than 100 Participants & Trusts 4/

Type of Participant	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Active participants 3/	64	59	5	55	52	3	8	6	2	1	1	-
Retired or separated participants receiving benefits	5	4	*/	3	3	*/	1	1	*/	*/	*/	-
Other retired or separated participants entitled to future benefits	*/	*/	*/	*/	*/	-	*/	*/	*/	*/	*/	-
Total Participants End of Year	69	64	5	58	55	3	9	7	2	1	1	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: Participants are tabulated as of the end of the plan year.

1/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

2/ Includes multiemployer plans and multiple employer collectively bargained plans.

3/ For Form 5500-SF filers, all reported participants are assumed to be active.

4/ Includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table A4. Selected Income of Group Health Plans
by type of insurance and type of plan, 2012**
(numbers in millions)

All Plans with Trusts

Selected Income	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
CONTRIBUTIONS	\$139,844	\$94,283	\$45,561	\$55,969	\$27,598	\$28,371	\$83,851	\$66,674	\$17,178	\$23	\$11	\$12
Employer contributions	112,447	70,592	41,855	47,291	21,321	25,970	65,136	49,261	15,874	20	9	10
Participant contributions	25,366	22,188	3,178	8,051	6,107	1,944	17,313	16,079	1,233	2	2	**/
Contributions from others (including rollovers)	2,024	1,496	528	619	162	457	1,403	1,333	70	2	-	2
Noncash contributions	8	8	-	8	8	-	**/	**/	-	-	-	-
INVESTMENT INCOME 3/	\$17,394	\$14,687	\$2,707	\$4,530	\$2,646	\$1,884	\$12,859	\$12,036	\$823	\$5	\$5	**/

Plans with 100 or More Participants & Trusts

Selected Income	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
CONTRIBUTIONS	\$138,776	\$93,397	\$45,380	\$55,370	\$27,097	\$28,273	\$83,394	\$66,297	\$17,097	\$13	\$3	\$10
Employer contributions	111,578	69,890	41,688	46,789	20,913	25,875	64,777	48,974	15,803	13	2	10
Participant contributions	25,181	22,014	3,167	7,963	6,022	1,941	17,218	15,992	1,226	**/	**/	**/
Contributions from others (including rollovers)	2,010	1,485	524	611	154	456	1,399	1,331	68	-	-	-
Noncash contributions	8	8	-	8	8	-	**/	**/	-	-	-	-
INVESTMENT INCOME 3/	\$17,278	\$14,576	\$2,701	\$4,441	\$2,561	\$1,880	\$12,836	\$12,015	\$821	\$1	**/	**/

(continued...)

**Table A4. Selected Income of Group Health Plans
by type of insurance and type of plan, 2012**
(numbers in millions)

Plans with Fewer Than 100 Participants & Trusts 4/

Selected Income	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
CONTRIBUTIONS	\$1,067	\$886	\$181	\$599	\$501	\$98	\$458	\$377	\$81	\$10	\$9	\$2
Employer contributions	869	702	167	503	408	95	359	287	72	7	7	**/
Participant contributions	185	174	10	89	85	3	95	87	7	2	2	-
Contributions from others (including rollovers)	14	10	4	8	8	**/	4	2	2	2	-	2
Noncash contributions	**/	**/	-	-	-	-	**/	**/	-	-	-	-
INVESTMENT INCOME 3/	\$116	\$111	\$6	\$89	\$85	\$4	\$23	\$21	\$1	\$5	\$5	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: The panel for Plans with 100 or More Participants and No Trusts was not reported as these plans are not required to file a Schedule H; thus, these plans have no financial information to report.

1/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

2/ Includes multiemployer plans and multiple employer collectively bargained plans.

3/ For Schedule H filers, Investment Income is equal to the sum of all income items on the Schedule H except for contributions and other income. For Schedule I and Form 5500-SF filers, Investment Income is equal to the Other Income line item of the Schedule I or Form 5500-SF.

4/ Includes only plans with fewer than 100 participants as of the end of the plan year.

**/ Less than \$500,000.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table A5. Selected Expenses of Group Health Plans
by type of insurance and type of plan, 2012**
(numbers in millions)

All Plans with Trusts

Selected Expenses	All Plans			Self-Insured			Mixed-Insured			Fully-Insured 1/		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
BENEFIT PAYMENTS 4/	\$138,855	\$96,028	\$42,827	\$53,096	\$26,832	\$26,264	\$85,760	\$69,196	\$16,563	-	-	-
Directly to participants or beneficiaries (including rollovers)	99,128	69,515	29,613	42,475	21,949	20,526	56,654	47,566	9,087	-	-	-
To insurance carriers for the provision of benefits	33,701	23,913	9,788	6,417	3,552	2,865	27,284	20,361	6,923	-	-	-
Other 5/	6,026	2,600	3,426	4,203	1,330	2,873	1,822	1,269	553	-	-	-
ADMINISTRATIVE EXPENSES 6/	\$7,729	\$4,910	\$2,819	\$3,454	\$1,529	\$1,925	\$4,274	\$3,380	\$894	\$1	**/	**/
Professional fees	822	422	400	429	208	221	393	214	179	**/	**/	**/
Contract administrator fees	4,109	3,206	903	1,414	851	564	2,694	2,355	339	**/	**/	**/
Investment advisory and management fees	343	234	109	123	48	76	220	186	34	**/	**/	**/
Other	2,456	1,049	1,407	1,488	423	1,065	967	625	342	**/	**/	**/

Plans with 100 or More Participants & Trusts

Selected Expenses	All Plans			Self-Insured			Mixed-Insured			Fully-Insured 1/		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
BENEFIT PAYMENTS 4/	\$137,842	\$95,166	\$42,676	\$52,535	\$26,356	\$26,179	\$85,307	\$68,810	\$16,497	-	-	-
Directly to participants or beneficiaries (including rollovers)	98,713	69,171	29,541	42,348	21,884	20,463	56,365	47,287	9,078	-	-	-
To insurance carriers for the provision of benefits	33,580	23,843	9,737	6,390	3,536	2,855	27,190	20,307	6,882	-	-	-
Other 5/	5,549	2,152	3,397	3,796	936	2,861	1,753	1,216	537	-	-	-
ADMINISTRATIVE EXPENSES 6/	\$7,661	\$4,858	\$2,802	\$3,410	\$1,494	\$1,916	\$4,250	\$3,364	\$886	**/	**/	**/
Professional fees	816	420	397	425	206	219	392	214	178	**/	**/	**/
Contract administrator fees	4,086	3,188	898	1,406	845	561	2,680	2,342	337	**/	**/	**/
Investment advisory and management fees	342	233	109	123	47	75	219	185	34	**/	**/	**/
Other	2,416	1,018	1,398	1,456	395	1,061	960	623	337	**/	**/	**/

(continued...)

**Table A5. Selected Expenses of Group Health Plans
by type of insurance and type of plan, 2012**
(numbers in millions)

Plans with Fewer Than 100 Participants & Trusts 7/

Selected Expenses	All Plans			Self-Insured			Mixed-Insured			Fully-Insured 1/		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
BENEFIT PAYMENTS 4/	\$1,013	\$862	\$152	\$561	\$476	\$85	\$452	\$386	\$66	-	-	-
Directly to participants or beneficiaries (including rollovers)	416	344	72	127	65	62	289	280	9	-	-	-
To insurance carriers for the provision of benefits	121	70	51	27	17	10	94	53	41	-	-	-
Other 5/	476	448	28	407	395	12	69	53	16	-	-	-
ADMINISTRATIVE EXPENSES 6/	\$68	\$52	\$17	\$44	\$35	\$9	\$24	\$16	\$8	**/	**/	-
Professional fees	5	2	3	4	2	2	2	**/	1	-	-	-
Contract administrator fees	23	18	4	8	5	3	14	13	1	**/	**/	-
Investment advisory and management fees	1	1	**/	**/	**/	**/	1	1	**/	**/	**/	-
Other	40	31	9	32	28	4	7	2	5	**/	**/	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: The panel for Plans with 100 or More Participants and No Trusts was not reported as these plans are not required to file a Schedule H; thus, these plans have no financial information to report.

1/ Plans classified as fully-insured do not report benefit payments unless they file the Form 5500-SF, have 100 or more participants as of the beginning of the plan year, do not operate a trust, and report payment of premiums. According to the plan funding classification algorithm outlined in Appendix A1, plans reporting information on health insurance policies or contracts that also report benefit payments on a financial schedule are deemed mixed-insured.

2/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

3/ Includes multiemployer plans and multiple employer collectively bargained plans.

4/ Amounts shown include both benefits paid directly from trust funds and premium payments made by plans to insurance carriers. Amounts exclude benefits paid directly by insurance carriers. Plans classified as fully-insured do not report benefit payments unless they file the Form 5500-SF, have 100 or more participants as of the beginning of the plan year, do not operate a trust, and report payment of premiums. According to the plan funding classification algorithm outlined in Appendix A1, plans reporting information on health insurance policies or contracts that also report benefit payments on a financial schedule are deemed mixed-insured.

5/ For Schedule I and Form 5500-SF filers, Other Benefit Payments is equal to Benefits Paid reported on Schedule I.

6/ For Schedule I and Form 5500-SF filers, Administrative Expenses is equal to Administrative Service Providers (salaries, fees, commissions). All of these expenses are classified as Other Administrative Expenses.

7/ Includes only plans with fewer than 100 participants as of the end of the plan year.

**/ Less than \$500,000.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table A6. Balance Sheet of Group Health Plans with 100 or More Participants & Trusts
by type of insurance and type of plan, 2012**
(numbers in millions)

Assets 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
TOTAL ASSETS	\$200,718	\$144,775	\$55,943	\$69,296	\$30,824	\$38,471	\$131,384	\$113,919	\$17,465	\$38	\$31	\$7
Cash	16,576	9,350	7,226	7,474	2,713	4,761	9,095	6,635	2,460	7	3	4
Receivables	10,751	5,759	4,991	4,444	1,160	3,284	6,305	4,599	1,706	1	**/	1
U.S. government securities	21,683	12,384	9,299	8,320	1,681	6,640	13,362	10,703	2,659	1	1	-
Debt instruments	21,700	14,495	7,204	6,693	1,738	4,955	15,003	12,755	2,249	3	3	**/
Stock	44,653	40,671	3,982	6,478	3,392	3,087	38,163	37,268	895	11	11	-
Partnership/joint venture interests	10,048	8,944	1,104	3,302	2,559	743	6,746	6,385	361	-	-	-
Real estate	300	185	115	125	29	96	175	156	19	-	-	-
Loans	383	112	270	367	97	270	15	15	**/	**/	-	**/
Assets in direct filing entities	34,828	26,893	7,936	15,178	9,970	5,207	19,651	16,923	2,728	-	-	-
Assets in registered investment companies	27,137	16,193	10,944	12,372	5,271	7,100	14,751	10,908	3,843	14	14	**/
Assets in insurance co. general accounts	4,378	3,982	396	738	371	367	3,640	3,611	29	-	-	-
Other	8,282	5,806	2,476	3,804	1,843	1,961	4,477	3,962	515	**/	-	**/

Percentage Distribution of Assets 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Cash	8%	6%	13%	11%	9%	12%	7%	6%	14%	18%	8%	65%
Receivables	5%	4%	9%	6%	4%	9%	5%	4%	10%	4%	0%	21%
U.S. government securities	11%	9%	17%	12%	5%	17%	10%	9%	15%	3%	4%	0%
Debt instruments	11%	10%	13%	10%	6%	13%	11%	11%	13%	8%	10%	2%
Stock	22%	28%	7%	9%	11%	8%	29%	33%	5%	28%	34%	0%
Partnership/joint venture interests	5%	6%	2%	5%	8%	2%	5%	6%	2%	0%	0%	0%
Real estate	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Loans	0%	0%	0%	1%	0%	1%	0%	0%	0%	1%	0%	3%
Assets in direct filing entities	17%	19%	14%	22%	32%	14%	15%	15%	16%	0%	0%	0%
Assets in registered investment companies	14%	11%	20%	18%	17%	18%	11%	10%	22%	37%	44%	2%
Assets in insurance co. general accounts	2%	3%	1%	1%	1%	1%	3%	3%	0%	0%	0%	0%
Other	4%	4%	4%	5%	6%	5%	3%	3%	3%	1%	0%	7%

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: Assets are tabulated as of the end of the plan year.

1/ Asset categories in this table represent consolidated categories from the Schedule H. Cash consists of interest- and noninterest-bearing cash. Receivables consists of employer and participant contributions and other receivables. Debt instruments consists of preferred and other debt instruments. Stock consists of common and preferred stock. Loans consists of participant loans and loans (other than to participants). Assets in direct filing entities consists of assets in master trusts, common trusts, pooled separate accounts, and 103-12 investment entities. Other consists of the other line item on Schedule H, employer securities, employer real property and buildings used.

2/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

3/ Includes multiemployer plans and multiple employer collectively bargained plans.

**/ Less than \$500,000.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table A7. Number of Group Health Plans
by type of insurance, type of plan, and method of funding, 2012**

All Plans

Method of Funding	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/

Funding Arrangement

Total	50,209	48,379	1,830	20,551	19,443	1,108	3,983	3,343	640	25,675	25,593	82
Insurance	17,873	17,797	76	860	852	8	102	91	11	16,911	16,854	57
Trust	2,386	1,296	1,090	1,845	1,158	687	538	136	402	3	2	1
Trust and Insurance	2,262	1,684	578	1,564	1,202	362	683	468	215	15	14	1
General Assets of the Sponsor	6,685	6,666	19	5,404	5,391	13	133	129	4	1,148	1,146	2
General Assets of the Sponsor and Insurance	19,381	19,327	54	9,461	9,434	27	2,338	2,332	6	7,582	7,561	21
Trust and General Assets of the Sponsor	141	135	6	123	117	6	18	18	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	409	402	7	236	231	5	171	169	2	2	2	-
Not Reported 3/	1,072	1,072	-	1,058	1,058	-	-	-	-	14	14	-

Benefit Arrangement

Total	50,209	48,379	1,830	20,551	19,443	1,108	3,983	3,343	640	25,675	25,593	82
Insurance	19,016	18,883	133	1,053	1,032	21	261	206	55	17,702	17,645	57
Trust	1,177	933	244	1,157	922	235	19	10	9	1	1	-
Trust and Insurance	3,379	2,010	1,369	2,255	1,453	802	1,108	543	565	16	14	2
General Assets of the Sponsor	5,115	5,103	12	5,000	4,989	11	20	19	1	95	95	-
General Assets of the Sponsor and Insurance	19,945	19,887	58	9,702	9,674	28	2,398	2,391	7	7,845	7,822	23
Trust and General Assets of the Sponsor	82	79	3	82	79	3	-	-	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	423	412	11	244	236	8	177	174	3	2	2	-
Not Reported 3/	1,072	1,072	-	1,058	1,058	-	-	-	-	14	14	-

(continued...)

**Table A7. Number of Group Health Plans
by type of insurance, type of plan, and method of funding, 2012**

Plans with 100 or More Participants & Trusts

Method of Funding	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Funding Arrangement												
Total	4,071	2,504	1,567	2,744	1,759	985	1,315	736	579	12	9	3
Insurance	94	83	11	40	37	3	51	44	7	3	2	1
Trust	1,572	571	1,001	1,088	460	628	482	110	372	2	1	1
Trust and Insurance	1,709	1,174	535	1,140	801	339	564	369	195	5	4	1
General Assets of the Sponsor	38	35	3	30	29	1	8	6	2	-	-	-
General Assets of the Sponsor and Insurance	151	145	6	113	109	4	38	36	2	-	-	-
Trust and General Assets of the Sponsor	107	101	6	92	86	6	15	15	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	381	376	5	222	218	4	157	156	1	2	2	-
Not Reported 3/	19	19	-	19	19	-	-	-	-	-	-	-
Benefit Arrangement												
Total	4,071	2,504	1,567	2,744	1,759	985	1,315	736	579	12	9	3
Insurance	206	152	54	66	56	10	135	92	43	5	4	1
Trust	501	292	209	486	285	201	15	7	8	-	-	-
Trust and Insurance	2,701	1,415	1,286	1,740	980	760	956	432	524	5	3	2
General Assets of the Sponsor	2	2	-	2	2	-	-	-	-	-	-	-
General Assets of the Sponsor and Insurance	174	168	6	132	128	4	42	40	2	-	-	-
Trust and General Assets of the Sponsor	69	66	3	69	66	3	-	-	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	399	390	9	230	223	7	167	165	2	2	2	-
Not Reported 3/	19	19	-	19	19	-	-	-	-	-	-	-

(continued...)

**Table A7. Number of Group Health Plans
by type of insurance, type of plan, and method of funding, 2012**

Plans with 100 or More Participants & No Trusts

Method of Funding	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Funding Arrangement												
Total	43,458	43,336	122	15,447	15,409	38	2,418	2,412	6	25,593	25,515	78
Insurance	17,640	17,581	59	780	776	4	7	7	-	16,853	16,798	55
Trust	-	-	-	-	-	-	-	-	-	-	-	-
Trust and Insurance	-	-	-	-	-	-	-	-	-	-	-	-
General Assets of the Sponsor	6,622	6,607	15	5,357	5,346	11	117	115	2	1,148	1,146	2
General Assets of the Sponsor and Insurance	19,182	19,134	48	9,310	9,287	23	2,294	2,290	4	7,578	7,557	21
Trust and General Assets of the Sponsor	-	-	-	-	-	-	-	-	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	-	-	-	-	-	-	-	-	-	-	-	-
Not Reported 3/	14	14	-	-	-	-	-	-	-	14	14	-
Benefit Arrangement												
Total	43,458	43,336	122	15,447	15,409	38	2,418	2,412	6	25,593	25,515	78
Insurance	18,628	18,568	60	928	923	5	57	57	-	17,643	17,588	55
Trust	-	-	-	-	-	-	-	-	-	-	-	-
Trust and Insurance	-	-	-	-	-	-	-	-	-	-	-	-
General Assets of the Sponsor	5,106	5,094	12	4,992	4,981	11	19	18	1	95	95	-
General Assets of the Sponsor and Insurance	19,710	19,660	50	9,527	9,505	22	2,342	2,337	5	7,841	7,818	23
Trust and General Assets of the Sponsor	-	-	-	-	-	-	-	-	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	-	-	-	-	-	-	-	-	-	-	-	-
Not Reported 3/	14	14	-	-	-	-	-	-	-	14	14	-

(continued...)

**Table A7. Number of Group Health Plans
by type of insurance, type of plan, and method of funding, 2012**

Plans with Fewer Than 100 Participants & Trusts 4/

Method of Funding	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Funding Arrangement												
Total	2,680	2,539	141	2,360	2,275	85	250	195	55	70	69	1
Insurance	139	133	6	40	39	1	44	40	4	55	54	1
Trust	814	725	89	757	698	59	56	26	30	1	1	-
Trust and Insurance	553	510	43	424	401	23	119	99	20	10	10	-
General Assets of the Sponsor	25	24	1	17	16	1	8	8	-	-	-	-
General Assets of the Sponsor and Insurance	48	48	-	38	38	-	6	6	-	4	4	-
Trust and General Assets of the Sponsor	34	34	-	31	31	-	3	3	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	28	26	2	14	13	1	14	13	1	-	-	-
Not Reported 3/	1,039	1,039	-	1,039	1,039	-	-	-	-	-	-	-
Benefit Arrangement												
Total	2,680	2,539	141	2,360	2,275	85	250	195	55	70	69	1
Insurance	182	163	19	59	53	6	69	57	12	54	53	1
Trust	676	641	35	671	637	34	4	3	1	1	1	-
Trust and Insurance	678	595	83	515	473	42	152	111	41	11	11	-
General Assets of the Sponsor	7	7	-	6	6	-	1	1	-	-	-	-
General Assets of the Sponsor and Insurance	61	59	2	43	41	2	14	14	-	4	4	-
Trust and General Assets of the Sponsor	13	13	-	13	13	-	-	-	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	24	22	2	14	13	1	10	9	1	-	-	-
Not Reported 3/	1,039	1,039	-	1,039	1,039	-	-	-	-	-	-	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: Values in this table are representative of the indication of funding arrangement (Form 5500 line item 9(a)) and benefit arrangement (Form 5500 line item 9(b)) as originally reported by the plans. Plans were categorized into the three subpanels of (1) Plans with 100 or More Participants & Trusts, (2) Plans with 100 or More Participants & No Trust, and (3) Plans with Fewer Than 100 Participants & Trusts based on the response to either the funding arrangement indicator, benefit arrangement indicator, or the inclusion of a financial schedule. Thus, this table shows a positive number of plans on the rows for Insurance only in the panels for Plans with Trusts.

1/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

2/ Includes multiemployer plans and multiple employer collectively bargained plans.

3/ The Form 5500-SF does not require plans to report on the funding nor benefit arrangements.

4/ Includes only plans with fewer than 100 participants as of the end of the plan year.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table A8. Number of Group Health Plans and Total Participants
by collective bargaining status, type of insurance, and type of plan, 2012**

All Plans		All Plans		Self-Insured		Mixed-Insured		Fully-Insured	
Collective Bargaining Status / Plan Entity		Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/
Total	Total	50,209	69,794	20,551	32,294	3,983	25,989	25,675	11,510
	Single Employer 1/	48,379	63,808	19,443	28,582	3,343	23,924	25,593	11,302
	Multiemployer 2/	1,830	5,985	1,108	3,712	640	2,065	82	208
Noncollectively bargained plans	Total	46,641	56,180	18,612	25,987	2,961	19,445	25,068	10,748
	Single Employer 1/	46,641	56,180	18,612	25,987	2,961	19,445	25,068	10,748
Collective bargaining plans	Total	3,568	13,613	1,939	6,306	1,022	6,545	607	763
	Single Employer 1/	1,738	7,628	831	2,594	382	4,480	525	554
	Multiemployer 2/	1,830	5,985	1,108	3,712	640	2,065	82	208

Plans with 100 or More Participants & Trusts

All Plans		All Plans		Self-Insured		Mixed-Insured		Fully-Insured	
Collective Bargaining Status / Plan Entity		Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/
Total	Total	4,071	23,775	2,744	12,679	1,315	11,087	12	8
	Single Employer 1/	2,504	18,091	1,759	9,035	736	9,050	9	6
	Multiemployer 2/	1,567	5,684	985	3,644	579	2,038	3	2
Noncollectively bargained plans	Total	2,170	14,951	1,577	8,253	585	6,694	8	3
	Single Employer 1/	2,170	14,951	1,577	8,253	585	6,694	8	3
Collective bargaining plans	Total	1,901	8,824	1,167	4,426	730	4,393	4	5
	Single Employer 1/	334	3,140	182	782	151	2,355	1	3
	Multiemployer 2/	1,567	5,684	985	3,644	579	2,038	3	2

(continued...)

**Table A8. Number of Group Health Plans and Total Participants
by collective bargaining status, type of insurance, and type of plan, 2012**

Plans with 100 or More Participants & No Trusts

Collective Bargaining Status / Plan Entity		All Plans		Self-Insured		Mixed-Insured		Fully-Insured	
		Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/
Total	Total	43,458	45,950	15,447	19,556	2,418	14,893	25,593	11,501
	Single Employer 1/	43,336	45,654	15,409	19,491	2,412	14,867	25,515	11,295
	Multiemployer 2/	122	296	38	65	6	25	78	206
Noncollectively bargained plans	Total	41,990	41,168	14,803	17,680	2,196	12,744	24,991	10,744
	Single Employer 1/	41,990	41,168	14,803	17,680	2,196	12,744	24,991	10,744
Collective bargaining plans	Total	1,468	4,782	644	1,876	222	2,149	602	758
	Single Employer 1/	1,346	4,486	606	1,811	216	2,124	524	552
	Multiemployer 2/	122	296	38	65	6	25	78	206

Plans with Fewer Than 100 Participants & Trusts 4/

Collective Bargaining Status / Plan Entity		All Plans		Self-Insured		Mixed-Insured		Fully-Insured	
		Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/	Number of Plans	Total Participants End of Year (thousands) 3/
Total	Total	2,680	69	2,360	58	250	9	70	1
	Single Employer 1/	2,539	64	2,275	55	195	7	69	1
	Multiemployer 2/	141	5	85	3	55	2	1	-
Noncollectively bargained plans	Total	2,481	62	2,232	54	180	7	69	1
	Single Employer 1/	2,481	62	2,232	54	180	7	69	1
Collective bargaining plans	Total	199	7	128	4	70	3	1	-
	Single Employer 1/	58	2	43	1	15	*/	-	-
	Multiemployer 2/	141	5	85	3	55	2	1	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: Participants are tabulated as of the end of the plan year.

1/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

2/ Includes multiemployer plans and multiple employer collectively bargained plans.

3/ Includes active, retired, and separated participants either receiving benefits or entitled to future benefits. For Form 5500-SF filers, this number may also include deceased participants whose beneficiaries are receiving or are entitled to receive benefits.

4/ Includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table A9. Distribution of Group Health Plans
by type of insurance, type of plan, and number of participants, 2012**

All Plans

Number of Participants End of Year 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi- employer 3/	Total	Single Employer 2/	Multi- employer 3/	Total	Single Employer 2/	Multi- employer 3/	Total	Single Employer 2/	Multi- employer 3/
Total	50,209	48,379	1,830	20,551	19,443	1,108	3,983	3,343	640	25,675	25,593	82
None or not reported	1,307	1,270	37	711	686	25	22	11	11	574	573	1
1-49	1,924	1,872	52	1,673	1,639	34	138	120	18	113	113	-
50-99	1,368	1,311	57	668	639	29	100	74	26	600	598	2
100-249	20,390	20,176	214	5,861	5,749	112	373	300	73	14,156	14,127	29
250-499	10,771	10,458	313	4,173	4,001	172	488	365	123	6,110	6,092	18
500-999	6,182	5,828	354	3,091	2,871	220	567	454	113	2,524	2,503	21
1,000-4,999	6,236	5,650	586	3,451	3,065	386	1,368	1,175	193	1,417	1,410	7
5,000 or more	2,031	1,814	217	923	793	130	927	844	83	181	177	4
Per Plan Statistics												
Mean number of participants	1,390	1,319	3,271	1,571	1,470	3,350	6,525	7,157	3,227	448	442	2,540
Median number of participants	251	244	806	306	293	883	1,391	1,587	765	206	206	344

Plans with Trusts

Number of Participants End of Year 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi- employer 3/	Total	Single Employer 2/	Multi- employer 3/	Total	Single Employer 2/	Multi- employer 3/	Total	Single Employer 2/	Multi- employer 3/
Total	6,751	5,043	1,708	5,104	4,034	1,070	1,565	931	634	82	78	4
None or not reported	289	253	36	260	236	24	22	11	11	7	6	1
1-49	1,840	1,788	52	1,649	1,615	34	136	118	18	55	55	-
50-99	551	498	53	451	424	27	92	66	26	8	8	-
100-249	860	684	176	660	557	103	195	122	73	5	5	-
250-499	741	456	285	515	353	162	224	102	122	2	1	1
500-999	707	381	326	499	285	214	206	95	111	2	1	1
1,000-4,999	1,173	602	571	778	400	378	392	200	192	3	2	1
5,000 or more	590	381	209	292	164	128	298	217	81	-	-	-
Per Plan Statistics												
Mean number of participants	3,532	3,600	3,331	2,496	2,254	3,408	7,091	9,728	3,217	110	87	558
Median number of participants	206	98	854	131	66	912	715	662	760	3	2	407

(continued...)

**Table A9. Distribution of Group Health Plans
by type of insurance, type of plan, and number of participants, 2012**

Plans with No Trusts

Number of Participants End of Year 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi- employer 3/	Total	Single Employer 2/	Multi- employer 3/	Total	Single Employer 2/	Multi- employer 3/	Total	Single Employer 2/	Multi- employer 3/
Total	43,458	43,336	122	15,447	15,409	38	2,418	2,412	6	25,593	25,515	78
None or not reported	1,018	1,017	1	451	450	1	-	-	-	567	567	-
1-49	84	84	-	24	24	-	2	2	-	58	58	-
50-99	817	813	4	217	215	2	8	8	-	592	590	2
100-249	19,530	19,492	38	5,201	5,192	9	178	178	-	14,151	14,122	29
250-499	10,030	10,002	28	3,658	3,648	10	264	263	1	6,108	6,091	17
500-999	5,475	5,447	28	2,592	2,586	6	361	359	2	2,522	2,502	20
1,000-4,999	5,063	5,048	15	2,673	2,665	8	976	975	1	1,414	1,408	6
5,000 or more	1,441	1,433	8	631	629	2	629	627	2	181	177	4
Per Plan Statistics												
Mean number of participants	1,057	1,053	2,430	1,266	1,265	1,714	6,159	6,164	4,203	449	443	2,642
Median number of participants	253	253	398	345	345	401	1,865	1,865	1,922	207	206	344

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: Participants are tabulated as of the end of the plan year.

1/ Includes active, retired, and separated participants either receiving benefits or entitled to future benefits. For Form 5500-SF filers, this number may also include deceased participants whose beneficiaries are receiving or are entitled to receive benefits.

2/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

3/ Includes multiemployer plans and multiple employer collectively bargained plans.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table A10. Distribution of Group Health Plans
by type of insurance, type of plan, and industry, 2012**

All Plans

Industry	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Total	50,209	48,379	1,830	20,551	19,443	1,108	3,983	3,343	640	25,675	25,593	82
Agriculture	475	467	8	304	299	5	19	18	1	152	150	2
Mining	621	618	3	361	359	2	47	47	-	213	212	1
Construction	2,607	1,985	622	1,350	953	397	349	124	225	908	908	-
Manufacturing	11,205	11,069	136	4,962	4,899	63	1,080	1,020	60	5,163	5,150	13
Transportation	1,634	1,496	138	743	662	81	169	114	55	722	720	2
Communications and information	1,580	1,558	22	627	614	13	157	148	9	796	796	-
Utilities	595	586	9	363	357	6	98	96	2	134	133	1
Wholesale trade	2,619	2,590	29	1,024	1,004	20	152	143	9	1,443	1,443	-
Retail trade	2,997	2,918	79	1,201	1,149	52	194	177	17	1,602	1,592	10
Finance, insurance & real estate	5,492	5,008	484	2,162	1,849	313	527	367	160	2,803	2,792	11
Services	19,129	18,936	193	6,992	6,896	96	1,084	1,019	65	11,053	11,021	32
Misc. organizations 3/	1,251	1,144	107	460	400	60	107	70	37	684	674	10
Industry not reported	4	4	-	2	2	-	-	-	-	2	2	-

Plans with 100 or More Participants & Trusts

Industry	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Total	4,071	2,504	1,567	2,744	1,759	985	1,315	736	579	12	9	3
Agriculture	37	34	3	35	33	2	2	1	1	-	-	-
Mining	30	29	1	25	24	1	5	5	-	-	-	-
Construction	698	119	579	462	91	371	235	27	208	1	1	-
Manufacturing	661	564	97	431	384	47	229	179	50	1	1	-
Transportation	199	78	121	128	54	74	70	23	47	1	1	-
Communications and information	98	77	21	60	47	13	38	30	8	-	-	-
Utilities	148	145	3	91	88	3	57	57	-	-	-	-
Wholesale trade	116	91	25	86	69	17	29	21	8	1	1	-
Retail trade	195	128	67	148	100	48	44	28	16	3	-	3
Finance, insurance & real estate	822	390	432	533	247	286	289	143	146	-	-	-
Services	860	731	129	607	538	69	249	189	60	4	4	-
Misc. organizations 3/	207	118	89	138	84	54	68	33	35	1	1	-
Industry not reported	-	-	-	-	-	-	-	-	-	-	-	-

(continued...)

**Table A10. Distribution of Group Health Plans
by type of insurance, type of plan, and industry, 2012**

Plans with 100 or More Participants & No Trusts

Industry	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Total	43,458	43,336	122	15,447	15,409	38	2,418	2,412	6	25,593	25,515	78
Agriculture	351	347	4	183	181	2	16	16	-	152	150	2
Mining	557	555	2	306	305	1	38	38	-	213	212	1
Construction	1,447	1,445	2	501	500	1	42	41	1	904	904	-
Manufacturing	10,235	10,214	21	4,265	4,257	8	817	817	-	5,153	5,140	13
Transportation	1,368	1,366	2	558	558	-	91	91	-	719	717	2
Communications and information	1,370	1,370	-	460	460	-	114	114	-	796	796	-
Utilities	360	355	5	199	196	3	28	27	1	133	132	1
Wholesale trade	2,410	2,406	4	854	851	3	116	115	1	1,440	1,440	-
Retail trade	2,649	2,640	9	916	914	2	142	142	-	1,591	1,584	7
Finance, insurance & real estate	4,305	4,290	15	1,349	1,345	4	193	192	1	2,763	2,753	10
Services	17,423	17,377	46	5,586	5,574	12	792	790	2	11,045	11,013	32
Misc. organizations 3/	980	968	12	269	267	2	29	29	-	682	672	10
Industry not reported	3	3	-	1	1	-	-	-	-	2	2	-

Plans with Fewer Than 100 Participants & Trusts 4/

Industry	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/	Total	Single Employer 1/	Multi-employer 2/
Total	2,680	2,539	141	2,360	2,275	85	250	195	55	70	69	1
Agriculture	87	86	1	86	85	1	1	1	-	-	-	-
Mining	34	34	-	30	30	-	4	4	-	-	-	-
Construction	462	421	41	387	362	25	72	56	16	3	3	-
Manufacturing	309	291	18	266	258	8	34	24	10	9	9	-
Transportation	67	52	15	57	50	7	8	-	8	2	2	-
Communications and information	112	111	1	107	107	-	5	4	1	-	-	-
Utilities	87	86	1	73	73	-	13	12	1	1	1	-
Wholesale trade	93	93	-	84	84	-	7	7	-	2	2	-
Retail trade	153	150	3	137	135	2	8	7	1	8	8	-
Finance, insurance & real estate	365	328	37	280	257	23	45	32	13	40	39	1
Services	846	828	18	799	784	15	43	40	3	4	4	-
Misc. organizations 3/	64	58	6	53	49	4	10	8	2	1	1	-
Industry not reported	1	1	-	1	1	-	-	-	-	-	-	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

1/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

2/ Includes multiemployer plans and multiple employer collectively bargained plans.

3/ Religious, grantmaking, civic, professional, labor, and similar organizations. Does not include church plans which are not required to file.

4/ Includes only plans with fewer than 100 participants as of the end of the plan year.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table A11. Distribution of Group Health Plan Participants
by type of insurance, type of plan, and number of participants, 2012**
(numbers in thousands)

All Plans

Number of Participants End of Year 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Total	69,794	63,808	5,985	32,294	28,582	3,712	25,989	23,924	2,065	11,510	11,302	208
1-49	31	30	1	27	26	1	3	2	*/	2	2	-
50-99	111	107	4	52	49	2	8	6	2	52	52	*/
100-249	3,333	3,296	36	977	957	20	62	51	11	2,293	2,288	5
250-499	3,763	3,649	114	1,482	1,419	63	180	135	45	2,101	2,095	6
500-999	4,311	4,056	256	2,179	2,018	161	409	328	80	1,723	1,709	14
1,000-4,999	13,188	11,914	1,275	7,302	6,445	857	3,269	2,860	408	2,618	2,609	9
5,000 or more	45,055	40,756	4,299	20,275	17,667	2,608	22,060	20,542	1,518	2,721	2,547	173

Plans with Trusts

Number of Participants End of Year 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Total	23,843	18,155	5,689	12,738	9,091	3,647	11,097	9,057	2,040	9	7	2
1-49	29	28	1	26	25	1	3	2	*/	*/	*/	-
50-99	40	36	4	32	30	2	7	5	2	1	1	-
100-249	139	110	30	108	89	18	31	20	11	1	1	-
250-499	269	165	104	187	128	59	82	37	45	1	*/	*/
500-999	510	274	236	362	206	157	146	68	79	2	1	1
1,000-4,999	2,659	1,413	1,247	1,751	911	840	903	497	406	5	4	1
5,000 or more	20,196	16,129	4,067	10,271	7,701	2,570	9,925	8,428	1,497	-	-	-

Plans with No Trusts

Number of Participants End of Year 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Total	45,950	45,654	296	19,556	19,491	65	14,893	14,867	25	11,501	11,295	206
1-49	2	2	-	1	1	-	*/	*/	-	1	1	-
50-99	72	71	*/	19	19	*/	1	1	-	52	52	*/
100-249	3,193	3,187	6	870	868	1	31	31	-	2,292	2,288	5
250-499	3,494	3,484	10	1,295	1,291	4	98	98	*/	2,101	2,094	6
500-999	3,801	3,781	20	1,817	1,813	4	262	261	2	1,722	1,708	14
1,000-4,999	10,529	10,501	28	5,551	5,534	17	2,366	2,363	3	2,613	2,605	8
5,000 or more	24,859	24,627	232	10,004	9,965	38	12,135	12,114	20	2,721	2,547	173

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: Participants are tabulated as of the end of the plan year.

1/ Includes active, retired, and separated participants either receiving benefits or entitled to future benefits. For Form 5500-SF filers, this number may also include deceased participants whose beneficiaries are receiving or are entitled to receive benefits.

2/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

3/ Includes multiemployer plans and multiple employer collectively bargained plans.

*/ Fewer than 500 participants.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table A12. Distribution of Group Health Plan Participants
by type of insurance, type of plan, and industry, 2012**
(numbers in thousands)

All Plans

Industry	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/
Total	69,794	63,808	5,985	32,294	28,582	3,712	25,989	23,924	2,065	11,510	11,302	208
Agriculture	387	371	15	258	250	7	66	60	7	63	61	1
Mining	645	644	1	379	378	1	160	160	-	106	106	*/
Construction	1,891	777	1,114	1,041	373	668	557	111	446	293	293	-
Manufacturing	14,546	13,732	814	5,581	5,335	246	6,627	6,228	400	2,338	2,170	169
Transportation	3,346	2,429	916	1,798	1,069	729	1,229	1,042	187	319	319	*/
Communications and information	3,506	3,342	164	1,366	1,284	83	1,818	1,737	82	322	322	-
Utilities	1,098	1,073	25	606	589	17	422	414	8	71	70	1
Wholesale trade	1,923	1,840	84	792	739	53	690	659	31	442	442	-
Retail trade	8,646	8,104	542	2,992	2,651	341	4,910	4,714	196	745	739	6
Finance, insurance & real estate	7,629	6,343	1,287	3,186	2,379	806	3,151	2,675	477	1,292	1,289	4
Services	20,194	19,465	729	8,726	8,211	514	6,181	5,990	191	5,287	5,264	23
Misc. organizations 4/	5,980	5,687	293	5,571	5,324	247	178	136	42	232	228	4
Industry not reported	*/	*/	-	*/	*/	-	-	-	-	*/	*/	-

Plans with 100 or More Participants & Trusts

Industry	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/
Total	23,775	18,091	5,684	12,679	9,035	3,644	11,087	9,050	2,038	8	6	2
Agriculture	45	32	13	38	31	7	7	*/	7	-	-	-
Mining	29	28	1	26	25	1	3	3	-	-	-	-
Construction	1,217	105	1,111	730	63	667	487	42	445	*/	*/	-
Manufacturing	3,310	2,713	598	1,228	1,030	199	2,082	1,683	399	*/	*/	-
Transportation	1,517	602	916	969	241	729	548	361	187	*/	*/	-
Communications and information	1,244	1,080	164	248	166	83	995	914	82	-	-	-
Utilities	648	634	14	362	349	14	285	285	-	-	-	-
Wholesale trade	324	254	70	132	80	52	193	174	18	*/	*/	-
Retail trade	2,746	2,208	538	641	301	340	2,102	1,907	196	2	-	2
Finance, insurance & real estate	3,648	2,369	1,279	1,548	744	804	2,100	1,625	476	-	-	-
Services	3,578	2,886	692	1,424	920	504	2,149	1,962	187	4	4	-
Misc. organizations 4/	5,469	5,181	288	5,333	5,086	247	135	93	42	1	1	-
Industry not reported	-	-	-	-	-	-	-	-	-	-	-	-

(continued...)

**Table A12. Distribution of Group Health Plan Participants
by type of insurance, type of plan, and industry, 2012**
(numbers in thousands)

Plans with 100 or More Participants & No Trusts

Industry	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/
Total	45,950	45,654	296	19,556	19,491	65	14,893	14,867	25	11,501	11,295	206
Agriculture	339	337	2	217	216	1	60	60	-	63	61	1
Mining	615	615	*/	352	352	*/	156	156	-	106	106	*/
Construction	661	660	1	300	300	*/	69	68	1	293	293	-
Manufacturing	11,226	11,010	216	4,345	4,298	47	4,543	4,543	-	2,338	2,169	169
Transportation	1,827	1,826	*/	827	827	-	681	681	-	319	319	*/
Communications and information	2,260	2,260	-	1,116	1,116	-	823	823	-	322	322	-
Utilities	448	436	12	241	238	3	136	129	8	71	70	1
Wholesale trade	1,597	1,583	14	658	657	1	497	484	13	442	442	-
Retail trade	5,896	5,892	4	2,347	2,346	1	2,807	2,807	-	742	739	3
Finance, insurance & real estate	3,972	3,966	6	1,631	1,629	2	1,049	1,048	*/	1,292	1,289	4
Services	16,600	16,564	36	7,287	7,277	9	4,031	4,027	4	5,283	5,259	23
Misc. organizations 4/	509	505	5	236	236	*/	42	42	-	231	227	4
Industry not reported	*/	*/	-	*/	*/	-	-	-	-	*/	*/	-

Plans with Fewer Than 100 Participants & Trusts 5/

Industry	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/	Total 1/	Single Employer 2/	Multi-employer 3/
Total	69	64	5	58	55	3	9	7	2	1	1	-
Agriculture	3	3	*/	3	3	*/	*/	*/	-	-	-	-
Mining	1	1	-	1	1	-	*/	*/	-	-	-	-
Construction	13	12	2	11	10	1	2	1	1	*/	*/	-
Manufacturing	10	9	1	8	8	*/	2	1	*/	*/	*/	-
Transportation	2	1	*/	1	1	*/	*/	-	*/	*/	*/	-
Communications and information	3	3	*/	2	2	-	*/	*/	*/	-	-	-
Utilities	3	3	*/	2	2	-	1	*/	*/	*/	*/	-
Wholesale trade	2	2	-	2	2	-	*/	*/	-	*/	*/	-
Retail trade	4	4	*/	4	4	*/	*/	*/	*/	*/	*/	-
Finance, insurance & real estate	9	8	1	7	7	1	2	1	1	*/	*/	-
Services	17	16	1	15	14	1	2	1	*/	*/	*/	-
Misc. organizations 4/	2	2	*/	2	1	*/	*/	*/	*/	*/	*/	-
Industry not reported	*/	*/	-	*/	*/	-	-	-	-	-	-	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: Participants are tabulated as of the end of the plan year.

1/ Includes active, retired, and separated participants either receiving benefits or entitled to future benefits. For Form 5500-SF filers, this number may also include deceased participants whose beneficiaries are receiving or are entitled to receive benefits.

2/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

3/ Includes multiemployer plans and multiple employer collectively bargained plans.

4/ Religious, grantmaking, civic, professional, labor, and similar organizations. Does not include church plans which are not required to file.

5/ Includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table B1. Number of Group Health Plans and Total Participants
by type of insurance and type of insurance contracts, 2012**

All Plans								
Type of Insurance Contracts 1/	All Plans		Self-Insured		Mixed-Insured		Fully-Insured	
	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/
Total	50,209	69,794	20,551	32,294	3,983	25,989	25,675	11,510
No Insurance	7,622	9,497	7,622	9,497	-	-	-	-
Health Only	2,573	2,504	-	-	267	1,452	2,306	1,052
Stop-Loss Only	1,084	739	1,084	739	-	-	-	-
Other 3/	7,500	18,201	7,500	18,201	-	-	-	-
Health and Stop-Loss	31	73	-	-	22	59	9	13
Health and Other 3/	26,164	31,079	-	-	3,071	21,076	23,093	10,002
Stop-Loss and Other 3/	4,345	3,857	4,345	3,857	-	-	-	-
Health, Stop-Loss, and Other 3/	890	3,845	-	-	623	3,402	267	443

Plans with 100 or More Participants & Trusts

Type of Insurance Contracts 1/	All Plans		Self-Insured		Mixed-Insured		Fully-Insured	
	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/
Total	4,071	23,775	2,744	12,679	1,315	11,087	12	8
No Insurance	703	2,336	703	2,336	-	-	-	-
Health Only	113	719	-	-	108	716	5	4
Stop-Loss Only	328	357	328	357	-	-	-	-
Other 3/	823	8,875	823	8,875	-	-	-	-
Health and Stop-Loss	11	39	-	-	11	39	-	-
Health and Other 3/	978	8,225	-	-	971	8,221	7	5
Stop-Loss and Other 3/	890	1,111	890	1,111	-	-	-	-
Health, Stop-Loss, and Other 3/	225	2,112	-	-	225	2,112	-	-

(continued...)

**Table B1. Number of Group Health Plans and Total Participants
by type of insurance and type of insurance contracts, 2012**

Plans with 100 or More Participants & No Trusts

Type of Insurance Contracts 1/	All Plans		Self-Insured		Mixed-Insured		Fully-Insured	
	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/
Total	43,458	45,950	15,447	19,556	2,418	14,893	25,593	11,501
No Insurance	5,087	7,122	5,087	7,122	-	-	-	-
Health Only	2,392	1,782	-	-	106	734	2,286	1,048
Stop-Loss Only	623	378	623	378	-	-	-	-
Other 3/	6,450	9,318	6,450	9,318	-	-	-	-
Health and Stop-Loss	18	34	-	-	9	20	9	13
Health and Other 3/	24,940	22,845	-	-	1,909	12,848	23,031	9,997
Stop-Loss and Other 3/	3,287	2,738	3,287	2,738	-	-	-	-
Health, Stop-Loss, and Other 3/	661	1,733	-	-	394	1,290	267	443

Plans with Fewer Than 100 Participants & Trusts 4/

Type of Insurance Contracts 1/	All Plans		Self-Insured		Mixed-Insured		Fully-Insured	
	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/	Number of Plans	Total Participants End of Year (thousands) 2/
Total	2,680	69	2,360	58	250	9	70	1
No Insurance	1,832	39	1,832	39	-	-	-	-
Health Only	68	2	-	-	53	2	15	*/
Stop-Loss Only	133	4	133	4	-	-	-	-
Other 3/	227	7	227	7	-	-	-	-
Health and Stop-Loss	2	*/	-	-	2	*/	-	-
Health and Other 3/	246	8	-	-	191	8	55	1
Stop-Loss and Other 3/	168	8	168	8	-	-	-	-
Health, Stop-Loss, and Other 3/	4	*/	-	-	4	*/	-	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: Participants are tabulated as of the end of the plan year.

1/ Type of Insurance Contracts represents information reported on Schedule A. This information is reported as filed on Schedule A with the following exception. For fully-insured and mixed-insured plans that do not attach a Schedule A for health insurance contracts, Schedule A is assumed to indicate one health insurance contract. The result is that fully-insured and mixed-insured plans that would be listed under the categories of (a) No Insurance, (b) Stop-Loss, (c) Other, or (d) Stop-Loss and Other instead are listed under the categories of (e) Health, (f) Health and Stop-Loss, and (g) Health, Stop-Loss, and Other.

2/ Includes active, retired, and separated participants either receiving benefits or entitled to future benefits. For Form 5500-SF filers, this number may also include deceased participants whose beneficiaries are receiving or are entitled to receive benefits.

3/ Other insurance contracts include dental, vision, life, temporary disability, long-term disability, supplemental unemployment, and prescription drug.

4/ Includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table B2. Distribution of Group Health Plans
by type of insurance, type of plan, and number of health insurance contracts, 2012**

All Plans

Number of Health Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Total	50,209	48,379	1,830	20,551	19,443	1,108	3,983	3,343	640	25,675	25,593	82
None or not reported	20,551	19,443	1,108	20,551	19,443	1,108	-	-	-	-	-	-
1	18,738	18,300	438	-	-	-	2,210	1,831	379	16,528	16,469	59
2	6,509	6,344	165	-	-	-	808	655	153	5,701	5,689	12
3-5	3,632	3,549	83	-	-	-	640	565	75	2,992	2,984	8
6-10	593	567	26	-	-	-	205	181	24	388	386	2
11-25	166	159	7	-	-	-	105	98	7	61	61	-
26 or more	20	17	3	-	-	-	15	13	2	5	4	1

Plans with 100 or More Participants & Trusts

Number of Health Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Total	4,071	2,504	1,567	2,744	1,759	985	1,315	736	579	12	9	3
None or not reported	2,744	1,759	985	2,744	1,759	985	-	-	-	-	-	-
1	706	373	333	-	-	-	698	366	332	8	7	1
2	285	145	140	-	-	-	283	143	140	2	2	-
3-5	199	124	75	-	-	-	198	124	74	1	-	1
6-10	66	41	25	-	-	-	65	41	24	1	-	1
11-25	61	54	7	-	-	-	61	54	7	-	-	-
26 or more	10	8	2	-	-	-	10	8	2	-	-	-

(continued...)

**Table B2. Distribution of Group Health Plans
by type of insurance, type of plan, and number of health insurance contracts, 2012**

Plans with 100 or More Participants & No Trusts

Number of Health Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Total	43,458	43,336	122	15,447	15,409	38	2,418	2,412	6	25,593	25,515	78
None or not reported	15,447	15,409	38	15,447	15,409	38	-	-	-	-	-	-
1	17,755	17,696	59	-	-	-	1,296	1,294	2	16,459	16,402	57
2	6,190	6,174	16	-	-	-	499	495	4	5,691	5,679	12
3-5	3,425	3,418	7	-	-	-	435	435	-	2,990	2,983	7
6-10	527	526	1	-	-	-	140	140	-	387	386	1
11-25	104	104	-	-	-	-	43	43	-	61	61	-
26 or more	10	9	1	-	-	-	5	5	-	5	4	1

Plans with Fewer Than 100 Participants & Trusts 4/

Number of Health Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Total	2,680	2,539	141	2,360	2,275	85	250	195	55	70	69	1
None or not reported	2,360	2,275	85	2,360	2,275	85	-	-	-	-	-	-
1	277	231	46	-	-	-	216	171	45	61	60	1
2	34	25	9	-	-	-	26	17	9	8	8	-
3-5	8	7	1	-	-	-	7	6	1	1	1	-
6-10	-	-	-	-	-	-	-	-	-	-	-	-
11-25	1	1	-	-	-	-	1	1	-	-	-	-
26 or more	-	-	-	-	-	-	-	-	-	-	-	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

1/ Number of Health Insurance Contracts represents information reported on Schedule A. The instructions provide that a plan should file a Schedule A for each insurance contract held by the plan. A plan may have more than one insurance contract. This information is reported as filed on Schedule A with the following exceptions. For fully-insured and mixed-insured plans which do not attach a Schedule A for health insurance contracts, Schedule A is assumed to indicate one health insurance contract. The result is that for fully-insured and mixed-insured plans for which there is no Schedule A record of a health insurance contract, one is added to the contract count of the given plan.

2/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

3/ Includes multiemployer plans and multiple employer collectively bargained plans.

4/ Includes only plans with fewer than 100 participants as of the end of the plan year.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

**Table B3. Distribution of Group Health Plan Participants
by type of insurance, type of plan, and number of health insurance contracts, 2012**
(numbers in thousands)

All Plans

Number of Health Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/
Total	69,794	63,808	5,985	32,294	28,582	3,712	25,989	23,924	2,065	11,510	11,302	208
None or not reported	32,294	28,582	3,712	32,294	28,582	3,712	-	-	-	-	-	-
1	11,924	10,966	958	-	-	-	6,092	5,315	777	5,832	5,651	181
2	5,916	5,544	372	-	-	-	3,647	3,288	358	2,269	2,256	13
3-5	7,022	6,647	375	-	-	-	5,040	4,670	370	1,982	1,977	5
6-10	4,106	3,969	137	-	-	-	3,402	3,265	137	705	704	1
11-25	6,735	6,628	106	-	-	-	6,031	5,924	106	704	704	-
26 or more	1,797	1,472	325	-	-	-	1,779	1,462	316	18	10	8

Plans with 100 or More Participants & Trusts

Number of Health Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/
Total	23,775	18,091	5,684	12,679	9,035	3,644	11,087	9,050	2,038	8	6	2
None or not reported	12,679	9,035	3,644	12,679	9,035	3,644	-	-	-	-	-	-
1	1,809	1,046	763	-	-	-	1,805	1,043	762	4	3	1
2	1,195	849	346	-	-	-	1,192	846	346	3	3	-
3-5	1,682	1,311	371	-	-	-	1,681	1,311	370	1	-	1
6-10	739	602	137	-	-	-	739	602	137	*/	-	*/
11-25	4,287	4,180	106	-	-	-	4,287	4,180	106	-	-	-
26 or more	1,384	1,067	316	-	-	-	1,384	1,067	316	-	-	-

(continued...)

**Table B3. Distribution of Group Health Plan Participants
by type of insurance, type of plan, and number of health insurance contracts, 2012**
(numbers in thousands)

Plans with 100 or More Participants & No Trusts

Number of Health Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/
Total	45,950	45,654	296	19,556	19,491	65	14,893	14,867	25	11,501	11,295	206
None or not reported	19,556	19,491	65	19,556	19,491	65	-	-	-	-	-	-
1	10,107	9,913	194	-	-	-	4,279	4,266	13	5,828	5,648	180
2	4,720	4,694	25	-	-	-	2,453	2,441	12	2,267	2,253	13
3-5	5,339	5,336	4	-	-	-	3,358	3,358	-	1,981	1,977	4
6-10	3,367	3,367	*/	-	-	-	2,663	2,663	-	704	704	*/
11-25	2,448	2,448	-	-	-	-	1,744	1,744	-	704	704	-
26 or more	413	405	8	-	-	-	395	395	-	18	10	8

Plans with Fewer Than 100 Participants & Trusts 5/

Number of Health Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/	Total 2/	Single Employer 3/	Multi-employer 4/
Total	69	64	5	58	55	3	9	7	2	1	1	-
None or not reported	58	55	3	58	55	3	-	-	-	-	-	-
1	9	7	2	-	-	-	8	6	2	1	1	-
2	1	1	*/	-	-	-	1	1	*/	*/	*/	-
3-5	*/	*/	*/	-	-	-	*/	*/	*/	*/	*/	-
6-10	-	-	-	-	-	-	-	-	-	-	-	-
11-25	-	-	-	-	-	-	-	-	-	-	-	-
26 or more	-	-	-	-	-	-	-	-	-	-	-	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA.

Note: Participants are tabulated as of the end of the plan year.

1/ Number of Health Insurance Contracts represents information reported on Schedule A. The instructions provide that a plan should file a Schedule A for each insurance contract held by the plan. A plan may have more than one insurance contract. This information is reported as filed on Schedule A with the following exceptions. For fully-insured and mixed-insured plans which do not attach a Schedule A for health insurance contracts, Schedule A is assumed to indicate one health insurance contract. The result is that for fully-insured and mixed-insured plans for which there is no Schedule A record of a health insurance contract, one is added to the contract count of the given plan.

2/ Includes active, retired, and separated participants either receiving benefits or entitled to future benefits. For Form 5500-SF filers, this number may also include deceased participants whose beneficiaries are receiving or are entitled to receive benefits.

3/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

4/ Includes multiemployer plans and multiple employer collectively bargained plans.

5/ Includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

Table B4. Premiums Paid by Group Health Plans
by type of insurance, type of plan, and type of insurance contracts, 2012
 (numbers in millions)

All Plans

Type of Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Total	\$144,581	\$135,775	\$8,806	\$14,201	\$13,229	\$972	\$44,960	\$37,575	\$7,386	\$85,419	\$84,971	\$448
Health Only	46,314	41,574	4,740	-	-	-	16,217	11,737	4,480	30,096	29,836	260
Stop-Loss Only	3,251	2,996	255	2,480	2,289	191	669	605	64	102	102	-
Other 4/	39,900	37,834	2,066	9,811	9,118	693	13,603	12,255	1,348	16,487	16,461	25
Health and Stop-Loss	56	56	-	-	-	-	-	-	-	56	56	-
Health and Other 4/	52,587	50,942	1,646	-	-	-	14,009	12,526	1,483	38,578	38,415	163
Stop-Loss and Other 4/	2,380	2,281	100	1,910	1,822	88	462	451	12	8	8	-
Health, Stop-Loss, and Other 4/	92	92	-	-	-	-	-	-	-	92	92	-

Plans with 100 or More Participants & Trusts

Type of Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Total	\$31,069	\$22,819	\$8,250	\$2,962	\$2,010	\$952	\$28,049	\$20,762	\$7,287	\$57	\$47	\$11
Health Only	11,414	6,958	4,455	-	-	-	11,373	6,928	4,445	41	30	11
Stop-Loss Only	992	745	247	645	461	183	348	284	64	-	-	-
Other 4/	7,628	5,633	1,995	1,906	1,225	681	5,720	4,406	1,314	2	2	-
Health and Stop-Loss	-	-	-	-	-	-	-	-	-	-	-	-
Health and Other 4/	10,469	9,016	1,453	-	-	-	10,454	9,001	1,453	15	15	-
Stop-Loss and Other 4/	566	467	99	412	324	88	154	143	12	**/	**/	-
Health, Stop-Loss, and Other 4/	-	-	-	-	-	-	-	-	-	-	-	-

(continued...)

Table B4. Premiums Paid by Group Health Plans
by type of insurance, type of plan, and type of insurance contracts, 2012
(numbers in millions)

Plans with 100 or More Participants & No Trusts

Type of Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Total	\$113,244	\$112,758	\$486	\$11,178	\$11,162	\$16	\$16,713	\$16,681	\$33	\$85,353	\$84,915	\$438
Health Only	34,811	34,556	255	-	-	-	4,760	4,754	6	30,051	29,802	249
Stop-Loss Only	2,238	2,233	5	1,815	1,810	5	321	321	**/	102	102	-
Other 4/	32,203	32,147	56	7,882	7,871	11	7,836	7,816	20	16,485	16,459	25
Health and Stop-Loss	56	56	-	-	-	-	-	-	-	56	56	-
Health and Other 4/	42,048	41,878	170	-	-	-	3,488	3,482	7	38,560	38,397	163
Stop-Loss and Other 4/	1,797	1,797	**/	1,481	1,481	**/	308	308	-	8	8	-
Health, Stop-Loss, and Other 4/	92	92	-	-	-	-	-	-	-	92	92	-

Plans with Fewer Than 100 Participants & Trusts 5/

Type of Insurance Contracts 1/	All Plans			Self-Insured			Mixed-Insured			Fully-Insured		
	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/	Total	Single Employer 2/	Multi-employer 3/
Total	\$268	\$197	\$70	\$61	\$57	\$4	\$198	\$132	\$66	\$9	\$9	-
Health Only	89	60	30	-	-	-	85	56	30	4	4	-
Stop-Loss Only	21	18	3	20	18	2	**/	**/	**/	-	-	-
Other 4/	70	55	15	23	21	2	46	33	14	1	1	-
Health and Stop-Loss	-	-	-	-	-	-	-	-	-	-	-	-
Health and Other 4/	70	47	23	-	-	-	66	43	23	4	4	-
Stop-Loss and Other 4/	17	17	-	17	17	-	-	-	-	-	-	-
Health, Stop-Loss, and Other 4/	-	-	-	-	-	-	-	-	-	-	-	-

Note: Excludes so-called 'one participant' plans, which are not required to file an annual report under Title I of ERISA. The premium reported for each plan is equal to the maximum of the following Schedule A values: (1) earned premium on line 9a(4) of Part III, (2) the total premiums or subscription charges paid to carrier on line 10a of Part III, (3) the total amount of commissions paid to agents, brokers, and other persons on line 2a of Part I, (4) the total amount of fees paid to agents, brokers, and other persons on line 2b of Part I, (5) the premiums paid to carrier on line 6b of Part II, (6) the incurred claims on line 9b(3) of Part III, (7) or the claims charged on line 9b(4) of Part III. These values are reported as filed with no adjustment.

1/ Premiums paid by Type of Insurance Contracts is reported as found on Schedule A without adjustment. The result is that for fully-insured and mixed-insured plans for which there are no Schedule A insurance contracts, no premium information is recorded.

2/ Includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

3/ Includes multiemployer plans and multiple employer collectively bargained plans.

4/ Other insurance contracts include dental, vision, life, temporary disability, long-term disability, supplemental unemployment, and prescription drug.

5/ Includes only plans with fewer than 100 participants as of the end of the plan year.

**/ Less than \$500,000.

- Missing or not applicable.

SOURCE: 2012 Form 5500 filings.

APPENDIX A1: Plan Funding Classification

The majority of the U.S. population receives their health insurance coverage through their employer. In 2012, employer-sponsored health insurance covered 55 percent of the U.S. population.¹ There are a variety of ways in which plan sponsors (usually employers) may fund the health insurance coverage they offer their workers.²

What Is a Self-Insured Group Health Plan?

Sponsors may purchase a group insurance policy from a state-licensed insurance carrier or similar organization and pay premiums directly to the insurer. Plans may set aside assets in a dedicated trust to fund the health plan, an arrangement known as a “funded” arrangement for Form 5500 reporting purposes. Alternatively plan sponsors may pay the plan’s benefits directly out of their general assets, an arrangement known as “unfunded” for Form 5500 reporting purposes. In addition, these funding arrangements – insured, funded, and unfunded – may be combined in multiple ways. For example, a group insurance policy may cover a subset of the plan’s health benefits but the plan’s remaining health benefits may be paid out of the plan sponsor’s general assets. Plans may use assets held in a dedicated trust to pay insurance premiums or to pay plan benefits directly. Whether a plan is considered to be self-insured, fully-insured, or a mixture of both is a function of how the benefits are provided under the plan.

¹ U.S. Department of Labor, Employee Benefits Security Administration calculations using the March 2013 Current Population Survey Annual Social and Economic Supplement.

² Upon establishment of a welfare plan, the plan sponsor decides how the plan will be structured – including how the plan benefits will be paid.

Fully-insured – A fully-insured plan provides health benefits by purchasing a group health insurance policy or contract from a state-licensed insurance carrier or similar organization, such as Blue Cross Blue Shield or a health maintenance organization. The insurance carrier then assumes financial responsibility for the covered health benefit claims of the plan’s participants and associated administrative costs.³ An employer with a fully-insured health plan chooses how to transfer insurance premiums⁴ to the insurance carrier: The plan either establishes a trust for the express purpose of receiving contributions for the payment of insurance premiums or pays the premiums directly from the plan sponsor’s general assets.

Self-insured – In the case of a self-insured health plan, the sponsor generally assumes the financial risks associated with covering the health benefit expenses of the plan’s participants. Benefits in a self-insured plan may be paid as needed directly from the general assets of the sponsoring employer or paid from a trust⁵ to which employer and/or employee contributions have been made. While some self-insured plans are self-administered, employers usually enter into a contract with a third party administrator (TPA) or use another outside entity to handle enrollment, pay claims, collect premiums, provide customer service, and perform other administrative duties.

The financial risk for self-insured benefit claims may be borne partially or entirely by the employer offering the self-insured plan. To protect against unexpectedly large claims, self-

³ Definitions of Health Insurance Terms, at <http://www.bls.gov/nchs/ebs/sp/healthterms.pdf>.

⁴ The premium payments could be paid entirely by the employer, entirely by employee contributions, or partly from the employer and partly from employee contributions.

⁵ Some employers may invest plan assets in a separate insurance company account instead of holding plan assets and investing through a trust.

insured plans or employers sponsoring such plans may obtain stop-loss insurance coverage. Stop-loss coverage limits the liability (stops the loss) the plan or employer bears for each covered person's health care costs (in the case of policies with individual or specific attachment points) or for the total expenses of the plan (aggregate attachment points), as the stop-loss carrier will reimburse the plan or employer for losses above the policies' attachment points.⁶

Form 5500 Health Plan Filing Requirements

The Employee Retirement Income Security Act of 1974, as amended ("ERISA"), and the Internal Revenue Code of 1986, as amended ("Code"), establish certain reporting and filing obligations for private-sector employee benefit plans. Plans generally are required to file an annual return/report concerning, among other things, the financial condition and operations of the plan.

In 1975, the Department of Labor (the "Department"), the Internal Revenue Service, and the Pension Benefit Guaranty Corporation (collectively, the "Agencies") jointly developed the Form 5500 Series to allow employers who sponsor an employee benefit plan for their employees to satisfy the annual reporting requirements under Title I and Title IV of ERISA and under the Code. The Agencies have changed the Form 5500 over time. Today, filing the Form 5500 together with any

⁶ An employer may also purchase a "minimum premium" arrangement in which the employer pays a fraction of the fully-insured premium to cover non-claim expenses, such as administration and claims processing, and pays claims up to an agreed-upon limit, after which the insurance carrier is responsible. Under a minimum premium arrangement, the insurance carrier usually is also responsible for processing claims and administrative services. See e.g., U.S. Department of Labor, Bureau of Labor Statistics, *Definitions of Health Insurance Terms*, at <http://www.bls.gov/ncs/ebs/sp/healthterms.pdf>.

required Schedules and Attachments (the "Form 5500") generally satisfies these annual reporting requirements.⁷

The Form 5500 is an important source of information on ERISA-covered, private sector employer-sponsored benefit plans and their operation, funding, assets, and investments. The majority of Form 5500 reports are filed for employee pension benefit plans. Welfare benefit plans (which includes plans providing benefits such as medical, dental, life insurance, severance pay, disability, etc.) are required to file a Form 5500, with certain exceptions tied to plans' size, funding arrangement, and sector. These exceptions are listed below:⁸

- Welfare plans with fewer than 100 participants as of the beginning of the plan year ("small" plans) that are unfunded, fully-insured, or a combination of insured and unfunded⁹;
- Welfare plans maintained outside the U. S. that serve mostly nonresident aliens;
- Governmental plans;
- Unfunded or insured welfare plans maintained for a select group of management or highly compensated employees only;

⁷ See ERISA Section 101 *et seq.*, 29 U.S.C. 1021 *et seq.* and accompanying regulations. The data used for this report were taken from the Form 5500 data for plan years 2012 and earlier. For plan years beginning on or after January 1, 2009, certain eligible small plans are able to file the Form 5500-SF "Short Form Annual Return/Report of Small Employee Benefit Plan." Small plans using the Form 5500-SF include information about total fees and commissions paid with respect to the purchase of insurance.

⁸ 29 C.F.R. 2520.104-1 *et seq.*

⁹ An unfunded welfare benefit plan has its benefits paid as needed directly from the general assets of the employer or employee organization that sponsors the plan. A combination unfunded/insured welfare benefit plan has its benefits partially as an unfunded plan and partially as a fully-insured plan. An example of such a plan is a welfare benefit plan that provides unfunded medical benefits and life insurance benefits.

- Plans maintained only to comply with workers' compensation, unemployment compensation, or disability insurance laws;
- Welfare benefit plans that participate in a group insurance arrangement that files a Form 5500 on behalf of the participating plans;
- Apprenticeship or training plans meeting certain conditions;
- Certain unfunded welfare benefit plans financed by dues;
- Church plans;
- Welfare benefit plans maintained solely for only the owner and/or spouse who wholly own a trade or business or the partners and/or spouses of partners in a partnership.

A small plan that receives employee (or former employee) contributions during the plan year and does not use the contributions to pay insurance premiums or uses a trust or separately maintained fund to hold plan assets or act as a conduit for the transfer of plan assets during the year is required to file; except that a small plan with employee contributions that are used to pay benefits instead of insurance premiums which is associated with a cafeteria plan under Internal Revenue Code section 125 may be treated for annual reporting purposes as an unfunded welfare plan if it meets certain Department requirements.

Data Used for this Report

The data included in this report consists of all Form 5500s filed by welfare plans providing health benefits that had plan year ending dates in 2012. Certain filings are excluded in order to reflect the filing requirements described above:

- Plans filing the Form 5500 with fewer than 100 participants as of the beginning of the plan year that

- filed without a Schedule H or I or with a Schedule H or I that have zero or blank values for each of total assets, liabilities, net assets, income, and expenses;
- Plans that filed the Form 5500-SF with fewer than 100 participants as of the beginning of the plan year that have zero or blank values for each of total assets, liabilities, net assets, income, and expenses;
- Direct Filing Entities; and
- Duplicate filings.

For purposes of this report, Form 5500 health plans are categorized as being self-insured, fully-insured, or a mix of both self-insured and fully-insured (mixed-insured). The Department used information from the 2012 Form 5500 on plans' funding arrangements, together with information from Schedule A "Insurance Information," Schedule H "Financial Information," and Schedule I "Financial Information - Small Plan" to categorize the plans as follows:

- (1) Self-insured. The plan does not include information on a health insurance policy or contract in any Schedule A filed as part of the Form 5500. For classification purposes, Schedule A insurance contracts are not considered health insurance policies or contracts if the per capita premium amount reported is less than \$1,900 or the filing also indicates that the policy could be for stop-loss coverage or for payments to a TPA.¹⁰ The filing must also either:
 - (a) indicate the plan is funded through a trust or general assets of the sponsor,
 - (b) include a Schedule H or Schedule I and report benefit payments,
 - (c) be filed on the Form 5500-SF and report non-zero total assets, liabilities, or net assets or

¹⁰ Although Schedule A health insurance contracts reporting a per capita premium of less than \$1,900 are not considered as such to determine the plan funding classification, they are ultimately counted as health insurance contracts in the event that the plan is deemed fully insured.

- (d) be filed on the Form 5500-SF with fewer than 100 participants as of the beginning of the plan year and report zero total assets, liabilities, and net assets with a non-zero amount for income or expenses.
- (2) Mixed-insured. The plan does not meet the requirements in (1) and
 - (a) the number of individuals covered under insurance contracts as reported on the Schedule A is less than half of the total number of participants as of the end of the plan year, and the filing indicates that the plan is funded through a trust or general assets of the sponsor, or
 - (b) the filing has an attached Schedule H or I that indicates benefit payments.
- (3) Fully-insured. The plan does not meet the criteria in (1) or (2).

For purposes of this report, private sector employer-sponsored health plans were also divided into six distinct categories based on the Form 5500 filing requirements:

- Small plans (covering fewer than 100 participants as of the end of the year) that fully-insure their health plan;
- Small plans that self-insure but do not have a trust;
- Small plans that self-insure their health plan, and use a trust to hold the plan assets;
- Large plans (covering 100 or more participants as of the end of the year) that fully-insure health plans;
- Large plans that self-insure and use a trust to hold the plan assets; and
- Large plans that self-insure but do not operate a trust.

Generally, small group health plans that fully-insure benefits or self-insure benefits but do not have a trust are not required to

file a Form 5500.¹¹ All large welfare plans that fully-insure or self-insure benefits without a trust must file, but are only required to file the main Form 5500 and the Schedule A to report information about insurance contracts.

The tables in this document summarize Form 5500 data for health plans that file. In a limited number of cases, the filed information has been edited to better reflect the universe of Form 5500 filing health plans. For example, certain plans that did not indicate an intention to terminate submitted filings that reported zero participants as of the end of the plan year but a positive number of participants at the beginning of the year. In these cases, the beginning of year participation count has been used for the end of year count and all of these participants have been classified as active participants.

The statistics reported within this document also contain one important imputation. Namely, any plans deemed to be mixed-insured or fully-insured as defined previously are assumed to have at least one health insurance contract even when a Schedule A has not been appropriately filed to provide details on insurance contracts purchased by the plan. Otherwise, all figures reported herein are tabulated without adjustment.

¹¹ Large plans that use a trust to hold the plan assets to self-insure health benefits are required to file a comprehensive Form 5500, including a Schedule H to report financial information about the plan's operations. Generally, those small plans that use a trust to self-insure their health benefits are not required to file a Schedule H. These filings include more abbreviated financial information about the plan's operation as filed on Schedule I or the Form 5500-SF.

APPENDIX A2: Notes on Changes to the Group Health Plans Report

June 2015

- Table A7 was revised to both include values that were previously excluded and to correct certain published values. All rows in the “Benefit Arrangement” section of the “Plans with 100 or More Participants & Trusts” subtable were affected.
- Table B1 was revised to correct certain published values. The “Health and Stop Loss”, “Health and Other”, “Stop-Loss and Other”, and “Health, Stop-Loss, and Other” rows of the “Plans with Fewer than 100 Participants & Trusts” subtable were affected.
- Table B2 was revised to move data from the “6-10” row to the “11-25” row in the “Plans with Fewer Than 100 Participants & Trusts” subtable.