

2023 JANUARY MEMBER NEWS

SIIA Diamond, Gold, and Silver member companies are leaders in the self-insurance/captive insurance marketplace. Provided below are news highlights from these upgraded members. News items should be submitted to membernews@siia.org.

All submissions are subject to editing for brevity. Information about upgraded memberships can be accessed online at www.siia.org.

If you would like to learn more about the benefits of SIIA's premium memberships, please contact Jennifer lvy and jivy@siia.org.





We study it, research it, speak on it, share insights on it and pioneer new ways to measure it. With underwriters who have many years of experience as well as deep specialty and technical expertise, we're proud to be acknowledged as experts in understanding risk. We continually search for fresh approaches, respond proactively to market changes, and bring new flexibility to our products. Our clients have been benefiting from our expertise for over 45 years. To be prepared for what tomorrow brings, contact us for all your medical stop loss and organ tranpslant needs.

DIAMOND MEMBERS

BERKLEY ACCIDENT AND HEALTH APPOINTS DAVID DOUGLAS AS REGIONAL SALES MANAGER

Hamilton Square, NJ – Berkley Accident and Health, a Berkley Company, has appointed David Douglas as Regional Sales Manager for its Medical Stop Loss Group Captive segment. In his new role, Dave will advance the organization's mission to transform health benefits through its innovative EmCap solution.

"We are thrilled to have Dave Douglas join our team," said Brad Nieland, President and CEO of Berkley Accident and Health. "In addition to Dave's stop loss and self-funding expertise, his solution-oriented mindset and level of service will be of value to all brokers and clients in the Southeast."



Dave earned a B.A. in Marketing from Western Michigan University and an MBA from the University of Georgia. Dave joins Berkley Accident and Health with extensive experience in sales management and resides with his family in the Atlanta, Georgia area.

BERKLEY ACCIDENT AND HEALTH APPOINTS MIKE CAUSEY AS VICE PRESIDENT, CAPTIVE BUSINESS DEVELOPMENT

Hamilton Square, NJ – Berkley
Accident and Health, a Berkley
Company, has appointed Mike
Causey as Vice President of
Business Development for
its Medical Stop Loss Group
Captive segment. Mike is an
industry leader with a diverse
background that spans over 30
years in employee benefits. In
his new position, he will lead the
organization's rapidly expanding
EmCap sales team in the western
region, which includes Colorado
and all states to the west.

"Mike is an established leader in the industry and will prove to be a tremendous asset for our brokers in the western region," said Brad Nieland, President and CEO of Berkley Accident and Health. "His experience with medical stop loss and reference-based pricing plans is of value and will enable a strong consultative mindset."

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Medical Stop Loss from Berkshire Hathaway Specialty Insurance comes with a professional claims team committed to doing the right thing for our customers — and doing it fast. Our customers know they will be reimbursed rapidly and accurately — with the certainty you would expect from our formidable balance sheet and trusted brand. That's a policy you can rely on.

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Prior to joining Berkley Accident and Health, Mike held leadership positions in sales and account management at benefit consulting firms, as well as health plans. Most recently, he was in sales leadership for a national cost-containment service provider. A U.S. Air Force veteran with a reputation for professionalism and integrity, Mike is based in the Phoenix, Arizona area.

About Berkley Accident and Health

Berkley Accident and Health is a

member of W. R. Berkley Corporation, a Fortune 500 company. Berkley Accident and Health provides an innovative portfolio of accident and health insurance products. It offers four categories of products: Employer Stop Loss, Group Captives, Managed Care (including HMO Reinsurance and Provider Excess), and Specialty Accident. It underwrites Stop Loss coverage through Berkley Life and Health Insurance Company, rated A+ (Superior) by A.M. Best. Visit

QBE RE ANNOUNCES KELLI STURGEON HAS JOINED QBE RE US HEALTHCARE TEAM

www.BerkleyAH.com

QBE Re is delighted to announce Kelli Sturgeon has joined QBE Re US Healthcare team. Kelli joins from PartnerRe where she spent over thirteen years as an underwriter in the Medical Excess and Managed Care reinsurance team based in Maple Grove, Minnesota. Kelli has been in the insurance/reinsurance industry for 20+ years. She has held other Account Management and underwriting roles at other leading organizations previously, including PreferredOne Insurance Co, KMG America and Allianz Life Insurance Co of North America. Kelli will be based in Minnesota and joins on December 5th 2022.

"Kelli has built a strong reputation in the healthcare reinsurance market for service and delivery. Having someone of her knowledge and experience join our team will help take our US healthcare offering to the next level, and fulfill our plans to both improve our client management and develop new business," says Michael Coghlan, Senior Vice President, US Healthcare





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"Welcoming new talent to the team is always a highlight and I'm delighted to be doing so with Kelli. This important hire supports our plans to strategically grow and develop the US Health portfolio. Our broker and cedent contacts in Healthcare will continue to be in excellent hands, and I look forward to announcing further new hires in the future," said Tim Barber, General Manager North America.

About QBE Re

QBE Re was formed to bring together all of QBE's global reinsurance capabilities, allowing us to provide a consistent, streamlined service to our clients. Today, we offer a range of Property, Casualty, Specialty and Life solutions to customers around the world from our offices in London, Bermuda, Brussels, Dubai, Dublin and New York. Visit www.qbere.com

STEFANI VOORHEES JOINS VÄLENZ® HEALTH AS HEAD OF HUMAN RESOURCES

PHOENIX, AZ — $V\bar{a}lenz$ Health is pleased to announce that Stefani Voorhees, SHRM-SCP, has joined the leadership team as Head of Human Resources.

Having served in leadership positions in human resources since 2015, Voorhees brings extensive experience in developing organizational strategy, building and implementing people-focused programs, overseeing performance management, compensation and benefits strategy, compliance, and employee engagement. She also has a strong background in recruitment and talent acquisition.

"Stefani considers human resources to be the nucleus of the business and the catalyst to driving an exceptional employee experience and highly effective talent strategy. That makes her an excellent fit for the Valenz Health culture," said Rob Gelb,

Chief Executive Officer.

"Stefani will play
a lead role in
supporting our
growth strategy
and optimizing our
talent to help us
continue to thrive
through future
acquisitions and
expansion. She is a
terrific addition to
the Valenz team."



Yes, 2023 is here. Wild, right?

It's natural to reflect at the start of a new year. But when you reflect on your claims administration platform, are you where you need to be?

Hi-Tech Health can get you there. We want to grow with your organization and scale to your needs.

We service payers of all sizes: TPAs, Carriers, Insurtech, Provider Sponsored Plans, and Medicare Advantage.

Let us eliminate the stress of implementation, the complication of your specific adjudication needs, and put our software to work for you.

Come 2024, don't find yourself in the same place.

Toast to a new beginning with Hi-Tech Health.





Most recently, Voorhees served as Senior Director of Human Resources for Companion Protect. She also held leadership roles in human resources and talent management for BranchPattern, PeopleAdmin and Modis after working in client management and financial advisory services. She received her bachelor's degree in human resource management.

"I'm thrilled to become part of an innovative company that places a high priority on relationships, alignment, communication and employee engagement," Voorhees said. "People are every company's greatest asset, and you can't separate the people decisions from the business decisions. As I strive to foster a 'love where you work' mentality, I'm looking forward to the opportunity to support, develop and engage with all the great talent at Valenz."

For more information about the Valenz executive team, visit www. valenzhealth.com/about/leadership

VĀLENZ® HEALTH LAUNCHES NEXT GENERATION OF EPSTAFFCHECK™ FOR COMPLIANCE MONITORING

PHOENIX, AZ — Vālenz®
Health announces the launch
of next-generation software for
EPStaffCheck™, a comprehensive
compliance monitoring solution,
complete with an e-commerce
application. This new release
helps providers easily purchase
and quickly use advanced
exclusion monitoring -- yet
another example of how Valenz
supports providers with the very
best compliance management
solutions.

As part of the Valenz Validation, Integrity and Accuracy (VIA) suite of solutions for providers, **EPStaffCheck simplifies** the complexity of exclusion monitoring with updated service tiers and easy-to-administer tools that address the full range of challenges facing compliance teams. Its services protect healthcare organizations from unnecessary fines and lawsuits associated with noncompliance, while also optimizing reimbursement revenue and ensuring high-quality care for members.

"Now offering four tiers of service – Basic, Professional, Enterprise and Enhanced – this fully functional e-commerce experience allows customers to conveniently



Interpreting and comparing PBM responses just got faster, easier, and more dynamic!

Ringmaster Technologies' pharmacy consulting platform presented by its wholly owned subsidiary, "Ringmaster Rx", is a huge win for Brokers, TPAs, and PBMs (pharmacy benefits managers). Its cloudbased data warehouse integrated with a RFP workflow process gives clients the ability to:

- · Solicit, Compare and Award PBM Contracts and Programs
- Perform contract reconciliations & audits on contract performance
- Deliver sophisticated analytics and generate value added reports
- · Customize their own panel of preferred PBM's
- · Efficiently manage cost for their employer groups

So, Step Into the Ring and Start Utilizing the Ringmaster Rx Pharmacy Consulting Platform to Realize the Possibilities.

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find, research and purchase their appropriate EPStaffCheck service tier," said Maurice Steenland, Chief Product Officer of Valenz. "For customers who prefer full-service support and white-glove rapid onboarding, Valenz compliance teams are readily accessible via the Enhanced tier."

The key features of EPStaffCheck services include:

- integration of multiple data sources in one place to simplify searching and monitoring for exclusion, licensing and disciplinary status, with searching driven by provider name, date of birth, NPI, and state license data
- optimization of searching with minimal inputs for accuracy to reduce exposure while increasing efficiency and lowering administrative costs
- following best practices of the Office of Inspector General to ensure audit-readiness, with documentation trails to meet JCAHO requirements across all 50 states and U.S. territories

With EPStaffCheck, compliance teams are just a few clicks away from quickly and easily searching the millions of sanction records, often found in disparate databases, to avoid the costs and dangers of employing troubled providers.

Whether there is a need for permission-based users, a need for single or batch searches, special state-specific licensure search needs, or the need for complete account oversight from Valenz, customers can find the exclusion monitoring solution that is the perfect fit for them.

Learn more about EPStaffCheck and the VIA Provider Solutions: https://www.valenzhealth.com/epstaffcheck-compliance-management/

About Vālenz® Health

Vālenz® Health simplifies the complexities of self-insurance for employers through a steadfast commitment to data transparency and decision enablement powered by its Healthcare Ecosystem Optimization Platform. Offering a strong foundation with deep roots in clinical and member advocacy, alongside decades of expertise in claim reimbursement and payment validity, integrity and accuracy, as well as a suite of risk affinity solutions, Valenz optimizes healthcare for the provider, payer, plan and member. By establishing "true transparency" and offering data-driven solutions that improve cost, quality and outcomes for employers and their members, Valenz engages early

and often for smarter, better, faster healthcare. Valenz is backed by Great Point Partners. Visit www.valenzhealth.com

ELMC RISK SOLUTIONS ANNOUNCES SALE OF ELMCRX CONSULTING TO ALERA GROUP

ELMC Risk Solutions, LLC ("ELMC Risk Solutions") and its subsidiary ELMCRx Solutions, LLC ("ELMCRx Solutions") is pleased to announce the sale of ELMCRx Solutions' consulting and auditing division, ELMCRx Consulting, to Alera Group. The transaction was finalized on November 1.

ELMCRx Solutions CEO, Richard Fleder, explained the rationale. "We purchased a PBM consultant in 2017 and added auditing services in 2022 to expand ELMC Risk's capabilities in prescription drug benefits consulting and risk management. The practice grew to primarily support clients beyond ELMC Risk's Managing General Underwriters. With the growth of our services business, the time was right to focus on that side of the company. By spinning off ELMCRx Consulting, we can focus on delivering the highest caliber clinical and cost containment programs to the market."

Mary Ann Carlisle, ELMCRx Solutions COO and Chief Revenue Officer agrees. "There are a multitude of opportunities to manage prescription drug benefit utilization through well designed cost containment and clinical programs. Our strong clinical team and continuing investment in adaptable technology allows us to build upon and expand intelligent and impactful specialty and non-specialty prescription drug solutions."

ELMCRx Solutions' services include:

- Real-time review

 and management of
 approved specialty prior
 authorizations and high-cost medications prior to
 dispensing
- Full carve-out of specialty prior authorizations
- Management of nonspecialty prescription drug costs through smart technology and member and prescriber engagement
- Effective clinical monitoring of extremely high cost and rare medications

About ELMC Risk Solutions

ELMC Risk Solutions owns and manages premier MGUs across the nation that specialize in underwriting stop loss insurance for selffunded health plans as well as reinsurance for providers and managed care companies. The company also provides cost containment and clinical management solutions to prescription benefit programs through its ELMCRx Solutions and Tesser division. ELMC Risk Solutions provides a best-in-class platform for delivering solutions to brokers, carriers, and clients. Contact Mary Ann Carlisle at mcarlisle@elmcgroup.com and visit www.elmcgroup.com.

RISK STRATEGIES LAUNCHES NATIONAL CONSULTING BUSINESS

BOSTON -- Risk Strategies, a leading national specialty insurance brokerage and risk management firm, announced it has launched its national consulting and actuarial services business.

Now merged into a single unified business segment and reporting to John Greenbaum, Risk Strategies Consulting incorporates expertise and offerings from key acquisitions of industry leading consulting and actuarial firms acquired over the past four years including Corporate Benefit Audits (2018), United Health Actuarial Services (2019), Centric Actuarial Solutions (2021), Cambridge Advisory Group (2021), and recently announced Aquarius Capital Solutions (2022).



These companies joined Risk Strategies to build upon their strengths and expand their reach and ability to serve clients' growing and complex needs.

By merging their collective specialties into one unit, the company can further support clients with an expert, holistic consulting experience to address complex challenges and offer advanced, proprietary tools to forecast and plan for their future success.

The team is made up of experienced consultants, actuaries, data scientists, auditors, pharmacists, accountants, and other experts helping clients understand the risks of their business.

"As operations and risk become more dynamic and complex, leveraging data to drive smarter business decisions is paramount," said Greenbaum, executive vice president, Risk Strategies. "Bringing our industry-

leading consulting teams under one umbrella creates a powerhouse of specialty expertise to help clients better understand their risks and potential costs, ultimately leading to highly effective strategies that reduce clients' costs and manage their overall risk."

Risk Strategies Consulting will operate independently from the company's brokerage business, ensuring full business separation of clients and autonomy of consulting work.



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Depend on Sun Life to help you manage risk and help your members live healthier lives

Behind every claim is a person facing a health challenge. By supporting members in the moments that matter, we can improve health outcomes and help employers manage costs.

For nearly 40 years, self-funded employers have trusted Sun Life to quickly reimburse their stop-loss claims and be their second set of eyes, looking for savings opportunities. But we are ready to do more to help members in the moments that matter. We now offer care navigation and health advocacy services to help your employees and their families get the right care at the right time – and achieve better health outcomes. Let us support you with innovative health and risk solutions that benefit you and your medical plan members. It is time to rethink what you expect from your stop-loss partner.

Ask your Sun Life Stop-Loss Specialist about what is new at Sun Life or click here to learn more!

STOP-LOSS | DISABILITY | ABSENCE | DENTAL/VISION | VOLUNTARY | LIFE

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Services provided include hightouch consulting and state of the art analytics, strategy and consulting (encompassing health and welfare with deep pharmacy expertise as well as mergers and acquisitions), actuarial services for plan sponsors, providers and insurers (encompassing captive and selffunded programs, long-term care, Medicaid, Medicare supplement / Advantage, supplemental health, life insurance, disability income, reinsurance and stop-loss, healthcare and network provider consulting and property and casualty actuarial and consulting

services), and benefit audit services (encompassing employee benefit and claim audits; stop-loss services; and plan document, policy and claims review).

These services are provided to clients from a wide variety of industry segments including government entities, manufacturing and distribution, self-insured organizations including corporations and trusts, healthcare organizations, national and regional insurance companies, and private equity firms, among others.

About Risk Strategies

Risk Strategies is the 9th largest privately held US brokerage firm offering comprehensive risk management advice, insurance and reinsurance placement for property & casualty, employee benefits, private client services, as well as consulting services and financial & wealth solutions. With more than 30 specialty practices, Risk Strategies serves commercial companies, nonprofits, public entities, and individuals, and has access to all major insurance





You want unparalleled customer service. Employers need the right stop loss coverage. At Swiss Re Corporate Solutions, we deliver both. We combine cutting-edge risk knowledge with tech-driven solutions and a commitment to put our customers first. We make it easy to do business with us and relentlessly go above and beyond to make stop loss simpler, smarter, faster and better. We're addressing industry inefficiencies and customer pain points, moving the industry forward - rethinking employer stop loss coverage with you in mind.

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markets. Risk Strategies has over 100 offices including Boston, New York City, Chicago, Toronto, Montreal, Grand Cayman, Miami, Atlanta, Dallas, Nashville, Washington DC, Los Angeles, and San Francisco. Visit www.risk-strategies.com

SUN LIFE RECEIVES BOSTON GLOBE TOP PLACES TO WORK RECOGNITION FOR 5TH CONSECUTIVE YEAR

WELLESLEY, Mass -- Sun Life U.S. has been named a Top Place to Work by the Boston Globe for the fifth year in a row, supported by a series of successful employee support and engagement programs that Sun Life has added in recent years, including flexibility initiatives and one of the most generous paid family and medical leave plans in the country.

This year, offices have been redesigned with amenities supporting the future of work, and employees are able to choose for themselves each day whether they will work out of an office or from home.

Top Places to Work, which will be featured in the Boston Globe, recognizes the most admired workplaces in the state, voted on by the people who know them best – their employees. The survey measures employee opinions about their company's direction, execution,

connection, management, work, pay and benefits, and engagement.

"This recognition reaffirms that doing right by our employees keeps them committed to their work and dedicated to our goal of helping people live healthier lives," said Dan Fishbein, M.D., president of Sun Life U.S. "Offering meaningful benefits, supporting a healthy work/life balance, having a caring and empowered culture, and maintaining strong employee communications

matters to people and makes a real difference."

"As we continue updating our offices around the country with a focus on employee choice, we have this truly special atmosphere that almost makes the office like home," said Tammi Wortham, senior vice president of Human Resources, Sun Life U.S. "Whether you're on Zoom or in an office, Sun Life has become a true network of teams, almost like a large





management businesses in the U.S. employ approximately 8,000 people. Group insurance policies are issued by Sun Life Assurance Company of Canada (Wellesley Hills, Mass.), except in New York, where policies are issued by Sun Life and Health Insurance Company (U.S.) (Lansing, Mich.). Visit www.sunlife.com/us.

family, continuously supporting one another while ensuring we provide top-tier service to our clients."

The company has also enhanced its philanthropic reach, extending support to the National Alliance on Mental Illness and Black Alliance on Mental Health for their programs supporting at risk, minority groups who often don't have access to mental health services.

About Sun Life

Sun Life is a leading international financial services organization providing asset management, wealth, insurance and health solutions to individual and institutional Clients. Sun Life has operations in a number of markets worldwide, including Canada, the United States, the United Kingdom, Ireland, Hong Kong, the Philippines, Japan, Indonesia, India, China, Australia, Singapore, Vietnam, Malaysia and Bermuda. As of September 30, 2022, Sun Life had total assets under management of C\$1.27 trillion. Visit www.sunlife.com.

In the United States, Sun Life is one of the largest group benefits providers, serving more than 55,000 employers in small, medium and large workplaces across the country. Sun Life's broad portfolio of insurance products and services in the U.S. includes disability, absence management, life, dental, vision, voluntary and medical stop-loss. Sun Life and its affiliates in asset

GOLD MEMBERS

AMPS EXPANDS SENIOR LEADERSHIP TEAM, WITH THE HIRE OF JEFFREY ZAVADA AS CHIEF REVENUE OFFICER

ATLANTA – Advanced Medical Pricing Solutions (AMPS), a pioneer in healthcare cost containment, announced the continued expansion of its Senior Leadership Team with the hire of Jeffrey Zavada, Chief Revenue Officer.

"AMPS' go-to-market strategy is starting to yield larger groups, more commercial customers, multi-product sales and new partners, TPAs and clients. Through this exciting growth period, AMPS has grown to the stage wherein we need to expand our team and add a dedicated

Chief Revenue Officer," states Kirk Fallbacher, President, and Chief Executive Officer at AMPS. "I'm excited to work with Jeff as he leads AMPS sales and marketing efforts as our new CRO and SIT member."

Jeff brings in-depth experience, built over a 30-year career in healthcare, focused on sales, marketing and account management. Jeffrey previously held sales leadership positions as the President of Bright Health, ERISA Market Segment Launch and Growth, President of Exceedent, Chief Sales Officer of Walgreens, Regional Vice President of Sales for UnitedHealth Group, and Vice President of Sales for ppoNEXT.

"I am joining the AMPS family at the perfect stage of the organization in that the company is in the perfect position for explosive growth. We will be adding several new sales team members across the country to expand our distribution relationships and added services now being offered. In addition to growth in the sales team, we are also adding a new Vice President of Marketing, and account managers to help AMPS clarify its new complete cost containment suite of programs and manage our current customers which whom we owe so much in getting us to where we are now," adds Jeffrey Zavada.

About AMPS

AMPS provides market leading healthcare cost containment solutions serving self-funded employers, brokers, TPAs, health systems, health plans, and reinsurers. AMPS mission is to help clients attain their goals of reducing medical and pharmacy costs while keeping members satisfied with quality healthcare benefits. AMPS leverages its 16+ years of experience and data in auditing and pricing medical claims to deliver "fair for all" pricing. AMPS offers detailed analytics and transparency to provide clients with insights based on plan performance. Visit www.amps.com

SILVER MEMBERS

KIRON CAPITAL INVESTS IN HI-TECH HEALTH



DALLAS, TX - Hi-Tech Health is pleased to announce the addition of operating partner Kiron Capital to help support the growth of their business and enhancements in their technology, and Michael McAlpin as Vice President of Strategy to guide their positioning in the marketplace. During the past two years, Hi-Tech Health and Kiron Capital have partnered to increase sophistication across

the interface and to better support their clients by expanding their platform and development teams.

They are expanding the professional sales and marketing teams and continue to invest in a culture that values long-term relationships with clients.

"Kiron made an investment in Hi-Tech Health, and we're excited about the continued growth that partnership affords," said Mike Carrara, Founder and Chief Revenue Officer of Hi-Tech Health. "Kiron continues to invest in our management, infrastructure, and ability to support our clients in increasingly dynamic ways."

"I am excited to be a part of the Hi-Tech family. Kiron only partners with the best companies who understand the value of culture, people, and a customer first mentality. During the pandemic they were a testament to what real customer commitment looks like. As we expand our teams, we have an amazing culture and 33-year history to use as our blueprint," said Michael McAlpin.

Kiron Capital investments focus on healthcare facilities, operations, process, and software. Kiron looks to find and grow exceptional companies leading change and efficiencies in the healthcare segmentation. Hi-Tech Health joins a portfolio that includes home health care, hospitals, and business process operations (BPO).

About Kiron Capital

Kiron Capital founded in 2010, invests in industries with strong near-term and long-term performance characteristics. We look for established companies with management teams that have a track record of success growing a business and managing industry and economic cycles.

About Hi-Tech Health

Hi-Tech Health builds claims administration systems that serve TPAs, Carriers, Provider Sponsored Plans, Medicare Advantage, and many more.

Our company was founded in 1990 by a core group of developers who wanted to enhance the healthcare marketplace and increase efficiencies in processing claims. The result is a workhorse platform that is completely customizable to meet any payer's needs and can be implemented swiftly, without outside consultants. We pride ourselves on our longlasting relationships with our clients, from start-up to well-established organizations, and everyone in between. Whatever your adjudication, reporting, or plan needs are, we build our software around you. Visit www.hi-techhealth.com.

MARPAI ANNOUNCES VIRTA AS DIABETES PREMIUM HEALTH PARTNER

NEW YORK -- Marpai, Inc., an Altechnology company transforming self-funded employer health plans, announces the addition of Virta Health as a Premium Health Partner to improve health outcomes for health plan members with diabetes.

Virta offers a breakthrough approach that has proven to reverse type 2 diabetes and other chronic metabolic diseases safely and sustainably and without the risks, costs, or side effects of medications or surgery.

According to the CDC, nearly 133 million Americans live with either diabetes or prediabetes and the number is growing. An estimated 37.3 million have diabetes (11.3%)

of Americans) and 96 million age 18+ have prediabetes (38% of adult U.S. population). The vast majority have type 2 diabetes.

"Diabetes is a highly prevalent, costly condition across our member populations. It represents a disproportionately high amount of health plan costs and is a top priority to address for our clients," says Marpai CEO, Edmundo Gonzalez. He adds, "Virta is a proven, high impact solution that effectively helps people lower their blood sugar and lose weight while also often reducing or even eliminating the need for medications, including insulin."

Under its universal Marpai Cares offering for self-funded health plans, Marpai delivers Proactive Targeted Health Interventions aimed at improving health outcomes and trajectories for atrisk health plan members.

Using advanced AI, Marpai identifies at-risk members with a high potential for engaging clinical treatment, and matches them to a proven, clinical solution. After rigorous analysis by Marpai data scientists and clinicians, Virta has been selected as the clinical solution for treating diabetes.





"Marpai is focused on driving better member health, which also lowers costs for employers. That is 100% aligned with how Virta works," says Kevin Kumler, President at Virta Health.

"Through this partnership, we intend to bring diabetes reversal to Marpai's clients and members nationwide, helping them get off of medications and lose weight, while saving money."

Virta is available within Marpai's Proactive Targeted Health Intervention feature to all current Marpai members upon renewal and all new members to Marpai after 1/1/2023.

About Marpai, Inc.

Marpai, Inc. (Nasdaq: MRAI) is a technology company bringing Alpowered health plan services to employers that directly pay for employee health benefits. Primarily competing in the \$22 billion TPA (Third Party Administrator) sector serving self-funded employer health plans representing over \$1 trillion in annual claims, Marpai creates the healthiest member population with the greatest cost efficiency within the health



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Articles or guideline inquires can be submitted to Editor Gretchen Grote at ggrote@ sipconline.net

The Self-Insurer also has advertising opportunties available. Please contact Shane Byars at sbyars@ sipconline.net for advertising information.

plan budget. Marpai leverages AI and big data to proactively fill gaps in care, proactively implement clinical interventions to improve near-term outcomes, and guide members to high-value in-network providers and pharmacy solutions. Operating nationwide, Marpai offers access to provider networks including Aetna and Cigna and delivers all standard TPA services. Visit www.marpaihealth.com.

About Virta Health

Virta Health helps people reverse type 2 diabetes and other chronic conditions. Current approaches manage disease progression through increased medication use and infrequent doctor visits. Virta reverses type 2 diabetes through innovations in technology, nutrition science, and continuous remote care from physicians and behavioral experts. In clinical studies, 94% of patients reduce or eliminate insulin use, and weight-loss exceeds

FDA benchmarks by nearly 150%. Virta works with the largest health plans, employers, and government organizations and puts 100% of its fees at risk based on clinical and financial outcomes. Visit www. virtahealth.com



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Learn more at www.gpwa.com

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Captive Insurance Advocacy

Task Force
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^{*} Also serves as Director

SIIA NEW MEMBERS JANUARY 2023

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Sam Komo Captive Manager Missouri Department of Commerce & Insurance Jefferson City, MO

Mark Cordes Marketing Manager UMB Healthcare Services Kansas City, MO

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