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# THE SELF-INSURANCE DIRECTORY

2024/2025

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Health Cost IQ (HCIQ) exists to help self-insured entities save money within their health plans. HCIQ enables customers to mine their health plan data and uncover costly inefficiencies, waste, and abuse. Armed with these insights, customers can make strategic changes in their health plan spending and realize significant savings.

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Northwell Direct provides direct-to-employer healthcare solutions, with the mission to make high-quality, whole-person healthcare more affordable and accessible for employers, employees, and their families. We offer a direct-to-employer network backed by Northwell Health – New York State's largest healthcare provider with access to over 31,000 providers while saving businesses up to 20%. Northwell Direct also offers a broad range of customizable workplace solutions – including but not limited to concierge primary care, behavioral health services, and on-site vaccination clinics. \* Northwell Direct's provider network is held by Northwell Direct Administrative Services Organization, Inc.

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We provide marketing services representing a number of quality established MGUs and Reinsurance Carriers assisting Third-Party Administrators and Brokers in placing Medical Stop-Loss Insurance. We partner with various cost containment vendors to ensure they are saving their clients Claims Dollars, thereby reducing the overall costs to their Plans. We also are General Agents for a number of carriers assisting Brokers with their Life, AD&D, Dental, STD, LTD and Vision Plans.

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Ringmaster is a cloud-based healthcare software provider for self-funded experts providing automated workflow optimization solutions and analytical tools for Stop-Loss management and Pharmacy Benefit consulting, which drastically reduce the processing time and complexity needed for quoting, contracting, and policy administration. Realize the Possibilities – Step into the Ring.

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Stealth Partner Group is a leading provider of premier medical stop-loss and ancillary wholesale services, offering unparalleled expertise in self-funding, plan administration, and account management for brokers, consultants, and third-party administrators. Our robust selection of offerings also includes best-in-class cost-containment solutions and specialized programs. With offices in 18 locations across the country, the Stealth management team offers its clients more than 150 years of collective experience in the stop-loss and ancillary insurance marketplace. This allows for productive connections with prominent carriers, proven negotiating techniques and streamlined management processes.

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Strategic Underwriting Solutions (SUS), with its 25+ years of experience, brings unsurpassed expertise to the level-funded and traditional stop-loss marketplace. With a wide range of products, services and top-rated partners, SUS is uniquely qualified to assist all-size employer groups with their self-funded and consulting needs.

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**Erica Manhardt**

Director of Product, Population  
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### ✓ PREVENTIVE CARE MANAGEMENT

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Välenz® Health is the destination for employers, payers, providers and members to reduce costs, improve quality, and elevate the healthcare experience. With fully integrated solutions on a platform to simplify healthcare, Valenz executes across the entire patient journey - from care navigation and management to payment integrity, plan performance and provider verification.

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Blackwell Captive Solutions empowers our clients to optimize their risk financing strategies by designing and implementing customized captive insurance programs that align with their unique risk profiles and business objectives. Headquartered in Chicago, Illinois, Blackwell serves a diverse portfolio of clients across various industries, offering comprehensive services in captive formation, management, and consulting. Learn more at BlackwellCaptive.com.

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Since 1986, Captive Resources has provided expert consulting services to group captive insurance companies and their member-owners. We currently advise 47 Casualty and Medical Stop Loss group captives comprised of 7,000 member companies from across the U.S. and \$5 billion in premium.

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Elevate Risk Solutions specializes in assisting clients with a complete solution to their insurance and risk financing program, not just one element.

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Pinnacle is an independent, full-service actuarial firm focused on the property/casualty insurance industry. With a home office in Bloomington, IL, the firm also has offices in Atlanta, Chicago and San Francisco. Pinnacle is owned by its professional staff and ranks among the largest independent property/casualty actuarial firms in the United States.

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Risk Management Advisors is a national firm specializing in captive insurance company management. We offer holistic, multi-faceted risk management strategies developed with industry expertise. As the 5th largest captive manager in the U.S., managing over 1000 entities with \$1B+ in premiums, our goal is maximizing clients' success through tailored insurance solutions.

## **Risk Strategies Company**

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The Risk Strategies Reinsurance team has one focus: helping our clients achieve their business goals. Our team brings a web of industry relationships, proven results for over twenty years, and analytic depth to support our client's growth, profitability, risk management, expansion, and innovation objectives. From carrier, reinsurer, distribution, actuarial, product development and claim management, we have arrayed resources with our team's broad experience to carefully structure each program to meet and exceed the client's individual needs.

## **Sapient Health**

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Sapient Health™ is an employer-owned, fully transparent, self-funded healthcare solution. It offers a cost-effective alternative to traditional health programs, integrating state-of-the-art solutions with the innovative funding mechanism of group captive insurance to meet employers' unique needs. Our approach reduces costs through collective risk management while maintaining transparency.

## **Skyward Accident & Health**

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Skyward A&H is a direct writer of Medical Stop Loss, bringing creative underwriting solutions to our TPA, Broker & Consulting partners. Our consultative approach can assist our partners to identify best-in-class vendors to manage employer costs. Connect with us to learn more about our Captive, AI and Rx underwriting capabilities.

## **Strategic Risk Solutions, Inc.**

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Strategic Risk Solutions is the world's largest independent insurance company manager. SRS has vast experience assisting clients in developing, implementing and managing both single-parent and group captives writing medical stop-loss and various employee benefit lines of coverage.

## **Underwriting Management Experts**

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As a full-service Managing General Underwriter (MGU), UME offers underwriting, policy binding, contract issuance, premium collection, and claims payment. UME provides excellent customer service by focusing on responsiveness and flexibility to meet the needs of our partners.

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Improving member lives by delivering exceptional healthcare solutions with compassion, innovation, and unwavering commitment to excellence. Vault's service ecosystem optimizes the administration of healthcare benefits, manages financial and clinical risks, and promotes cost containment and sustainability. This collaboration contributes to the delivery of high-quality, affordable healthcare services to its partners.

# Cell & Gene Therapy Cost Management Services

## **Amwins Accident & Health Underwriters, an Amwins Group Benefits Company**

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Amwins Accident & Health Underwriters is a specialty underwriter and program manager for A&H products, including stop-loss, hospital indemnity, and gap. Through our underwriting expertise, superior administration, innovative cost-containment programs, and customer service, we deliver solutions that help our clients, brokers, TPAs, health plans, and reinsurers win.

## **AscellaHealth, LLC**

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AscellaHealth, a global healthcare and life sciences solutions company, provides superior cost-containment strategies for managing specialty drug spend to captives, self-insured companies, at-risk providers, PBMs and regional health plans. Our core offerings include specialty and medical cost management, formulary and network design, custom clinical programs and data analytics to assess and maximize health outcomes.

## **Emerging Therapy Solutions**

**Ashley Hume, President**

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Emerging Therapy Solutions® (ETS) helps reinsurance and stop-loss payers, health plans, and self-funded employers manage the risks associated with high-cost therapies for rare and complex conditions. ETS offers end-to-end solutions for cell and gene therapies, solid organ and bone marrow transplants, and other highly specialized therapies.



## HEMOPHILIA ALLIANCE NETWORK SERVICES

# ACCESS A NATIONAL NETWORK OF HEMOPHILIA TREATMENT CENTERS (HTCs) WITH INTEGRATED PHARMACY SERVICES



Our total cost-of-care model prioritizes high-quality care and efficient pharmacy services to minimize costs: a win-win scenario for payers and their customers. At HANS, our unique model provides numerous benefits for brokers, employers, captives, stop loss carriers, and TPA's including:



### Cost Savings

- Working directly with HTC pharmacies, HANS can **reduce bleeding disorder medication costs up to 30%**
- The integration of clinical and pharmacy services enhances outcomes and reduces unnecessary dispensations
- HTC care **decreases the risk of hospitalization by 40%<sup>1</sup>** compared to other sources of care
- There are **NO** network access fees



### Collaborative Partnerships

- HANS builds a communication bridge between HTCs, brokers, and their clients to ensure that patients with bleeding disorders receive the most cost-effective client's care
- We connect your members with best-in-class, specialized clinical care and pharmacy services to reduce ER visits, hospitalizations, and unnecessary procedures
- We collaborate and troubleshoot on your client's behalf with HTC team members



### Streamlined Process

- We bring new contract proposals directly to the HTCs, minimizing the number of multiple contracts and single-case agreements
- We facilitate effective, efficient, and standardized processes for all stakeholders
- HANS creates a client-provider relationship team to develop unified goals, share updates, and troubleshoot issues

## ANNUAL COST COMPARISON

HTC Member Pharmacy    Commercial Pharmacy

Adult Severe Hemophilia A



Adult Severe Hemophilia B



\*Results vary by case

1. Soucie JM, Symons J, Evatt B, Brettler D, Huszti H, Linden J, and the Hemophilia Surveillance System Project Investigators. Home-based factor infusion therapy and hospitalization for bleeding complications among males with hemophilia. *Haemophilia* 2001; 7:198-206.

LEARN MORE ABOUT WHAT HANS CAN DO FOR YOU AT  
[HEMOALLIANCE.ORG/HANS-BROKER](https://hemalliance.org/hans-broker)

## **HealthClaim Review® (Considine & Associates Inc.)**

James Considine, MD, MBA, President and  
Chief Executive Officer

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HealthClaim Review® (a Considine & Associates Inc. company) performs physician specialist audit and hospital/facility bill review services to ERISA groups, TPAs, health plans, MGUs and stop-loss carriers. Hospital bill audit and negotiation is provided on a flat fee basis - customized by case. We also provide DRG Record Validation and Medicare repricing.

## **Hemophilia Alliance**

Jennifer Borrillo, Senior Vice President Member  
and Community Relations

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The Hemophilia Alliance works on behalf of federally designated Hemophilia Treatment Centers (HTCs) with employers, self-insured plans, brokers, stop-loss carriers, and payers on cost containment while prioritizing high-quality, comprehensive care and integrated pharmacy services. The Hemophilia Alliance is a member organization made up of federally recognized HTCs with 340b Pharmacies.

## **Stealth Partner Group, an Amwins Group Benefits Company**

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Stealth Partner Group is a leading provider of premier medical stop-loss and ancillary wholesale services, offering unparalleled expertise in self-funding, plan administration, and account management for brokers, consultants, and third-party administrators. Our robust selection of offerings also includes best-in-class cost-containment solutions and specialized programs. With offices in 18 locations across the country, the Stealth management team offers its clients more than 150 years of collective experience in the stop-loss and ancillary insurance marketplace. This allows for productive connections with prominent carriers, proven negotiating techniques and streamlined management processes.

# Cost Containment/Medical Management

## 6 Degrees Health

### Heath Potter, Chief Growth Officer

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6 Degrees Health is a healthcare cost containment company dedicated to achieving superior results while prioritizing a best-in-class customer and member experience. We leverage both clinical expertise and innovative technology to deliver fair reimbursements and enhance payment accuracy.

## 90 Degree Benefits

### Gene Rodgers, Chief Operating Officer

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90 Degree Benefits is your benefits advocate dedicated to delivering solutions that exceed our clients and their members' unique benefit and budget needs. We take the challenges of costly and complicated health plans and turn them into new opportunities for you and your employees.

## Advanced Benefit Consulting & Insurance Services, Inc.

### Dorothy Cociu, President

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We are a full-service health insurance agency and consulting firm specializing in self-funded group health plans, including reference-based pricing. Our senior management comes from decades of experience in the self-insured space. We are benefits as well as compliance consultants focusing on ERISA, ACA, HIPAA, CAA, RXDC and other compliance issues.

## Advanced Risk Managers, LLC

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Advanced Risk Managers is a leading provider of medical underwriting expertise, advising clients on creating solutions to high-cost claims and improving medical management processes. We leverage 20+ years of reinsurance experience to reduce large loss risk exposure. Our services also include cost containment strategies, claim audit/negotiation, and nurse training and development.



## **aequum LLC**

### **Christine Cooper, Chief Executive Officer**

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aequum LLC protects self-insured plan participants against unreasonable out-of-network and reference-based pricing billings by medical providers, achieving savings of 97.2% off disputed charges. aequum partners with Koehler Fitzgerald LLC, a law firm with a national practice, to provide comprehensive advocacy services to plan participants from negotiation to trials and appeals.

## **Amalgamated Life Insurance Company**

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American Health Holding, Inc. is a URAC-accredited, national medical management company providing comprehensive, integrated solutions that support millions of members across the healthcare continuum. American Health delivers cost savings through flexible solutions, clinical expertise, leading proprietary technology and advanced reporting while improving quality of care for members.

## **Aphora Health**

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Aphora Health brings destination healthcare directly to consumers who pay self-insured employers, along with their plan members, through its network of accredited healthcare providers, with a clinically focused, high-touch customer service model at a fraction of the typical cost. The company's offerings target expensive specialty medications, high-cost elective surgeries, cosmetic/non-covered procedures, and everyday prescription drugs through AphoraRx, all designed to bring accessible, high-quality healthcare at significantly lower cost.



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## **AscellaHealth, LLC**

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AscellaHealth, a global healthcare and life sciences solutions company, provides superior cost containment strategies for managing specialty drug spend to captives, self-insured companies, at-risk providers, PBMs and regional health plans. Our core offerings include specialty and medical cost management, formulary and network design, custom clinical programs and data analytics to assess and maximize health outcomes.

## **Avande, Inc.**

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Avandé does not replace your vendors. We catch what they miss. Most cost containment efforts attack the low-hanging fruit - they do not attack the root problem. Avandé's team of specialist physicians looks where others do not. Try us with one claim, and we'll show you what we can save.

## **Beacon HCI**

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Beacon HCI is the pioneer in the Cost Containment and Healthcare Bill Review industry. We have been experts in the industry for over 25 years. Our combination of world-class in-house development and second-to-none nurse review positions us as the leading authority, ensuring true and accurate healthcare bills. We are trusted by companies nationwide. Experience the Beacon HCI advantage.

## **CANARX Services Inc.**

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Founded in 2002, CANARX was the first International Prescription Service Provider to introduce and facilitate a personal importation option for a public sector program in America. CANARX has remained the leader in the industry, saving self-funded health plans and their members millions of dollars on prescription costs. Plan holders save on average over 70% on brand-name medication costs and program participants receive prescriptions at \$0 copay—a true win/win. CANARX is simple, safe, smart—and the only fully insured international prescription option.

## **Cavo Health**

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Cavo Health retrieves medical records for self-insured employers and codes them for ICDs with high accuracy using Precise Word Matching AI and expert QC. Using this granular clinical data of employees, Cavo Health supports self-insured employers, their TPAs and brokers, as well as MGUs with payment integrity and other services.

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CERIS is a payment integrity partner with 30 years of experience, serving payers to help them contain costs on their hospital bills with pre and post pay reviews.

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ClaimDOC, a national medical claim auditing and member advocacy company, is driven to help employers deliver successful and sustainable health plans for their employees. DirectAccess+™ — ClaimDOC's unique RBP model — leverages superior member advocacy to build partnerships with members and providers while maintaining a 360° View of Risk™ as co-fiduciary.

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ClaimsBridge delivers high-performance solutions that reduce costs, increase accuracy, and raise the bar for the entire healthcare claims lifecycle. Our Connect and Navigator products enable claim capture, pre-adjudication and routing for payment through our industry-leading Celerity engine. Our service team covers balance bill, legal and appeals support.

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ClearCost Health is a customizable provider search and price transparency solution. Our expertise lies in working with large self-funded employers, health plans, TPAs, and other partners to build a search tool unique to each individual plan and benefit offering.

## Connect Healthcare Collaboration

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CHC's four business lines address the entire industry spectrum. Our Benefits Marketing services expand the reach of point solutions. CHC Advocacy boosts employee engagement through clinical navigation. Our Enrollment and Onboarding guide members in plan choices. The Granite List does for the benefits arena what OpenTable does for restaurants.

## ELMCRx Solutions

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ELMCRx Solutions is a growing hub of PBM solutions, navigating employer groups through rising pharmacy benefit costs. Partnering with brokers and TPAs, ELMCRx offers cutting-edge clinical management and cost containment solutions supported by an expert team of physicians and pharmacists. Drive better health outcomes and reduce financial risk with ELMCRx today.

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### Kelly Webb, Vice President, Sales and Marketing

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## Expion Health

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Expion Health, a pioneer in healthcare cost containment, uses its proprietary, award-winning ExpionIQ platform to optimize pharmacy drug spend and non-network medical savings. ExpionIQ employs AI & analytics to power solutions for pharmacy rebates, specialty drugs, next-gen RBP, OON pricing, and NSA & state regulation compliance. Expion also offers top-tier medical bill review & post-payment support.

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H.H.C. Group is a national cost containment company dedicated to ensuring its clients pay only the appropriate amounts for healthcare services. HHC combines customized cost-reducing solutions, bulldog tenacity and personalized customer service to deliver the savings our clients demand and the service they deserve. A URAC accredited Independent Review Organization.





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## Health at Scale

### Laura Carlson, Director of Growth

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Health at Scale supports detection and prevention of FWA (fraud, waste, and abuse), early outreach to rising risk members, and navigation to individually-optimal providers. The company achieves leading results through machine intelligence that creates a hyper-personalized, proactive understanding of each member's individual needs at a given moment.

## HealthCheck360

### Michael Kelly, Vice President

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At HealthCheck360, we're here to revolutionize population health management. Our tailored medical management, advocacy, steerage, and well-being solutions tackle the root causes of healthcare costs, all in one place. Join us for a healthier, happier future by supporting your members' healthcare needs, from the routine to the complex!

## HealthClaim Review® (Considine & Associates Inc.)

### James Considine, MD, MBA, President and Chief Executive Officer

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Irvine, CA-92618-United States  
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HealthClaim Review® (a Considine & Associates Inc. company) performs physician specialist audit and hospital/facility bill review services to ERISA groups, TPAs, health plans, MGUs and stop-loss carriers. Hospital bill audit and negotiation is provided on a flat fee basis - customized by case. We also provide DRG Record Validation and Medicare repricing.

## Hemophilia Alliance

### Jennifer Borrillo, Senior Vice President Member and Community Relations

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The Hemophilia Alliance works on behalf of federally designated Hemophilia Treatment Centers (HTCs) with employers, self-insured plans, brokers, stop-loss carriers, and payers on cost containment while prioritizing high-quality, comprehensive care and integrated pharmacy services. The Hemophilia Alliance is a member organization made up of federally recognized HTCs with 340b Pharmacies.

## **Hines & Associates**

### **Robert Marcoux, Executive Vice President**

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Hines provides custom Care, Cost and Risk Management solutions to the Payer with unparalleled care to members and exceptional savings to the Plan. Hines seamlessly integrates programs across the continuum of healthcare needs. Our staffed clinicians and professional negotiators manage the patient journey, secure an optimum referral and attain signed agreements prior to care. With Hines, you receive high-value clinical and financial returns.

## **HOMELINK**

### **Tim Gesicki, Vice President, Commercial Sales**

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HOMELINK is an innovative, national provider of integrated ancillary services to the healthcare and workers' compensation industries. As a privately held, employee-owned company, our associates are naturally motivated to help the payors, patients and providers we service achieve great outcomes. Our commitment to deliver superior customer service is backed by our proprietary technology to ensure that information is received timely for a coordinated and efficient offering across the continuum of care. HOMELINK is a part of the VGM Group, a sophisticated solutions company that has connected over 25,000 companies to resources that simplify the complexity of doing business. All of our services are available 24 hours a day, 7 days a week. For more information, visit us at vgmhomelink.com.

## **Imagine360**

### **Tom Wittick, Senior Vice President of Growth**

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Imagine360 offers an integrated health plan that addresses a critical challenge facing employers: healthcare costs are harming the bottom line, unaffordable for employees, and the experience is poor. Imagine360's model includes preferential provider contracts, care coordination, and additional price protection through reference-based pricing that saves 15-30% over the national carriers.

## **INTERVENT International, LLC**

### **Neil Gordon, Chief Executive Officer**

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INTERVENT is a physician-led, global, technology-driven behavior change and population health management company. INTERVENT provides credible, trusted and proven digital/telehealth coaching/remote patient monitoring services to empower individuals to better prevent, manage and live successfully with chronic conditions. INTERVENT's solutions help reduce healthcare costs while enhancing health, well-being and productivity.

## Helping TPAs Strengthen Client Partnerships with Unmatched Risk Mitigation & Savings!

### WHAT WE DO:



Create higher-performing plans, allowing access to better vendor-partners and better stop-loss rates.



Substantially increase the value of current services and offer additional clinical services.



Identify hidden CKD risks with our proprietary algorithms for more effective and proactive plan management.



Provide solutions that generate significant savings compared to PPO/network agreements for outpatient dialysis claims.



Integrate with any TPA system through established, live operational interfaces with 70+ TPAs and cost-containment solutions nationwide.

### FACTS:

- 1 in 7 U.S. adults have chronic kidney disease (CKD) but 90% are undiagnosed.
- The average commercial dialysis costs are 700% more than Medicare – \$300,000 annually per health plan member on dialysis.
- CKD costs commercial plans \$100 billion annually.

We empower TPAs to identify and get ahead of hidden CKD risks and costs. Our proven methodology provides a clear advantage and is essential for every TPAs retention strategy.

### OUR RESULTS:

**230%**

Better at identifying undiagnosed CKD.

**84.5%**

Savings off contracted dialysis rates.

**98.3%**

of participating members have avoided dialysis.

[Request a Meeting!](#)



Learn more:  
[renalogic.com](https://renalogic.com)



## Leap Health

### Robert LaHayne, Chief Executive Officer

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Provider of at-home infusion services with direct specialty pharmacy contracts to reduce employer specialty pharma spend by eliminating provider mark-ups.

## MacroHealth

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The people of MacroHealth are on a mission to measurably improve healthcare cost, access, and quality by modernizing the healthcare marketplace. MacroHealth's first-of-its-kind Intelligent Health Market-as-a-Service (IHMaas) platform leverages data science and industry-standard interoperability to enable Payers and Health Market Partners to optimize and connect their unique healthcare ecosystems.

## Mano Health

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An exceptional claims experience is crucial for TPAs that want to expand their customer base, drive revenue, and increase retention. Mano's Generative AI platform automates and guides medical claims, enabling your adjusters to focus on delivering outstanding service. With a single integration, you can ensure 100% protocol adherence, enhanced customer outreach, and loss mitigation; all backed by provable ROI.

## Medefy Health

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Medefy ensures that your employees get the most from their health benefits while your HR team focuses on other priorities. We'll elevate your employees' benefits experience and guide them to make smart healthcare choices that save you time and your organization money. Unlock a calmer, more productive workday.

## Medical Review Institute of America

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Medical Review Institute of America (MRloA) is a technology-enabled provider of clinical insights to TPAs and self-insured employers through analytics, regulatory monitoring and evidence-based clinical opinions derived from independent specialty reviews and virtual 2nd opinion solutions that empower better decision-making. MRloA is your utilization and clinical review solution partner.

## MedWatch, LLC

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MedWatch leads the industry in Concierge Member Advocacy & Medical Cost Containment, offering over 30 proven strategies that positively impact cost and quality. URAC Accredited in Utilization, Case and Disease Management, with specialized programs for Oncology, Kidney Care, Dialysis, Telemedicine, Virtual Primary Care, and more. Administrators, brokers, and health plans trust MedWatch as their preferred partner for maximizing outcomes and member satisfaction.

## Merit Medicine

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Merit Medicine leverages billions of patient data points and proprietary AI/ML software to support Carriers, Employers, and other Risk-Bearing Entities with risk stratification and identification of high-risk members before they become high-cost claimants, supporting care navigation to promote preventative care, early intervention, and proactive disease management.

## MINES and Associates, Inc.

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Since 1981, MINES & Associates has been a leading international business psychology firm. Specializing in employee assistance programs, behavioral health services, managed care programs, and risk management strategies, MINES offers specialized networks that enhance healthcare access and cost-effectiveness for organizations of any size or industry.



## MultiPlan

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MultiPlan is committed to bending the cost curve in healthcare. Our focus is on identifying medical savings, helping to lower out-of-pocket costs, and reducing or eliminating balance billing. MultiPlan delivers value to more than 700 healthcare payors, over 100,000 employers, 60 million consumers, and 1.4 million contracted providers.

## Nokomis

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Nokomis is a pre-payment payment integrity company created to make a difference. Using our proprietary ClaimWise™ technology alongside our team's expertise, we identify savings nobody else can. Putting our clients first, we customize our service to your needs, reviewing all claim types irrespective of value alongside negligible levels of provider abrasion.

## Nova Healthcare Administrators, Inc.

### Todd Martin, Chief Sales Officer

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Nova is an innovative health plan solutions company that rejects the notion of one-size-fits-all employee benefits. We use flexibility and creativity to improve holistic health plan performance and build a better experience, including DPC and RBP, in-house medical management, HSA, FSA and HRA products and a variety of private-labeled solutions.

## Point C

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Point C is a National TPA organization with local market benefit administrators that delivers customized self-funded benefit programs. We curate, integrate, and administer plans with national and local provider solutions and progressive cost containment programs. With over 150,00 lives covered, we're growing, and we want to help you grow, too.

1 in 7 US Adults have  
kidney disease...

# IS YOUR HEALTH PLAN PROTECTED?



- Dialysis Risk Management
- Comprehensive Data Analytics
- Chronic Kidney Disease Management / Clinical Coaching

Specialty Care Management is the industry leader in risk mitigation and cost containment solutions for high-cost renal dialysis and CKD claims. Leveraging a combination of clinical programs and financial strategies, SCM enhances predictability, affordability, and the enduring sustainability of employer health benefits.

Schedule a complimentary discovery call with our team by scanning the **QR code** below, or by calling/ texting us at **+1 (267) 544-0365**.

Your next coffee is on us...

Join our team for a 15-minute discovery call to learn more about our solutions, and as a token of our appreciation, we'll send you a \$15 Starbucks gift card.

Scan the QR code and select "Meet with us..."



## Private Health Management (PHM)

Tommy Axford, FSA, MAAA, Senior Vice President, Business Development and Strategic Partnerships

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PHM, a clinically sophisticated complex care management company, specializes in assisting individuals in obtaining the best care and outcomes when facing serious and complex medical conditions like cancer. We help employers improve outcomes and optimize costs by supporting members from diagnosis through treatment.

## Quality Care Partners

Jeremie Bates, Director of Finance

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Since 1995, Quality Care Partners has dedicated itself to building partnerships for better health. Our provider-based organization integrates cost containment strategies for payers, physicians, employers, and their employees to reduce the overall healthcare spend. We believe that excellence in care starts with an intense focus on the physical and economic wellness of our members, partners, patients, and community. As they adapt to meet the needs of an ever-changing world, so does QCP.

## RAS - Risk Administration Services, Inc.

Eddie Riveiro, Executive Vice President, Chief Revenue Officer

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RAS is a leading monoline workers' compensation insurance provider in the Upper Midwest. As one of the largest writers of work comp insurance in the region, we offer a wide variety of services, including insured and self-insured work comp insurance, claims handling, managed care, and loss control.

## Reliant Health Partners, LLC

Bailey Smith, Chief Operating Officer/Founding Partner

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Reliant Health Partners is an innovative medical claims repricing service provider, helping clients achieve maximum savings with minimum noise. Reliant's services include everything from individual specialty claims repricing to full plan replacement as a high-performance, open-access network alternative. Founded in 2010, Reliant pioneered a smarter claims repricing methodology that lets us make more informed repricing decisions. Referencing a comprehensive set of real-world data points, it's fully customized for each of our clients. The result is a better-informed repricing strategy, for consistently fair and defensible pricing.

## Renalogic

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Renalogic helps self-funded plans and their health plan members manage the human and financial costs of chronic kidney disease (CKD) and dialysis. We help organizations manage dialysis claims with cost containment and transparency solutions while working to prevent members from progressing to dialysis with our care management programs. Renalogic has helped clients save hundreds of millions of dollars and helped stop CKD from progressing for thousands of members.

## Rocky Mountain Review

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Receiving Healthcare should not bankrupt an individual or plan. Even more so if the cost of that healthcare is consistently inaccurate and left unchecked. Cost Containment should help, but it needs to become more comprehensive and impactful. We work tirelessly, from all corners of our industry, to increase your CLEAN CLAIM CONFIDENCE.

## RTZ Global

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RTZ Global reduces health plan spending using intelligent automation to drive claims down the appropriate and best path to savings. By maximizing efficiencies and using intelligent automation, we minimize our costs and overhead, absorb more customer expense and provide the most competitive rates.

## Rx Manage

### Casey Macpherson, Chief Executive Officer

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By removing the borders and barriers to medication, RxManage provides employers the opportunity to save up to 70% on prescription claims costs, while offering their employees a prescription program with zero-dollar co-pays. Self-funded employers and their employees both save money on a critical health benefit, contributing towards a healthier and happier workforce, which is a win/win for everyone.

## Specialty CM

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SCM is the industry leader in cost containment and clinical management solutions for high-cost dialysis claims. Our programs include Dialysis Repricing, CKD clinical coaching, and Data Analytics. Further, our services feature flat case rates, no set-up fees, and a full administrative exclusion, delivering solutions that surpass typical network discounts.

## Synergistic Genomics

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Synergistic Genomics helps you to understand genetics and genomics in healthcare. Our services include claims and CPT code analysis for fraud/waste/abuse, policy review for gaps and opportunities, and advice regarding treatments for genetic conditions. See how our genetics expertise can address your concerns regarding claims for genetic testing and treatments.

## TALON

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As the industry pioneer in transparent healthcare pricing, we are experts in leveraging price transparency and consumer-centric principles. TALON's platform establishes a market-driven healthcare system, empowering consumers to make smart healthcare decisions and helping them gain control of their financial and physical well-being. Educate, Empower, and Incentivize with TALON.

## The Quality Alliance

### Wesley Bryan, Business Development

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The Quality Alliance is a joint venture between Baylor Scott & White Quality Alliance and Catalyst Health Network. Together, the Quality Alliance empowers high-quality, cost-effective providers to deliver value-based care through incentivized payment models and innovative plan designs while always focusing on patient-centered care and promoting better health outcomes.

## **Välenz® Health**

### **Rob Gelb, Chief Executive Officer**

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Välenz® Health is the destination for employers, payers, providers and members to reduce costs, improve quality, and elevate the healthcare experience. With fully integrated solutions on a platform to simplify healthcare, Valenz executes across the entire patient journey - from care navigation and management to payment integrity, plan performance and provider verification.

## **Vitable Health**

### **Steven Baek, Head of Marketing**

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Vitable is an enhanced Direct Primary Care (eDPC) built for the self-insured framework. Vitable provides in-home and virtual visits, 1,000+ free prescriptions and labs, mental health visits, and care navigation at a low PEPM. With 120% utilization and 94 NPS, Vitable is effective in reducing claims by up to 14.4%.

## **WellSpark Health**

### **Annie Tse, VicePresident, Advisory Practice Lead Wellbeing Strategy**

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WellSpark, a national wellbeing provider, couples health coaching with the virtual modalities that engage today's workforce. Since 2013, WellSpark has partnered with public and private sector employers to provide coaching and disease prevention programs that support the whole employee while creating a supportive workplace culture that achieves results.

## **Zelis**

### **Lisa Reale-Pazienza, Director, Segment Marketing**

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Zelis is modernizing the healthcare financial experience by providing a connected platform that bridges the gaps and aligns interests across payers, providers, and healthcare consumers. Zelis sees across the system to identify, optimize, and solve problems holistically with technology built by healthcare experts – driving real, measurable results for clients.



# Direct Primary Care

## Premise Health

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Premise Health serves large organizations and their people with exceptional healthcare. It partners with commercial and municipal employers, health plans, Taft-Hartley funds, unions, and tribes, serving millions of members at more than 800 wellness centers in 45 states and Guam. Premise's mission is to help people get, stay, and be well. With more than 30 types of care, it provides convenient access to healthcare built around the needs of its members. Premise is the leading direct healthcare company and one of the largest digital providers in the country. For more information, visit [www.premisehealth.com](http://www.premisehealth.com).

## PsychHealth Care Management, LLC

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PsychHealth Care Management is a managed behavioral healthcare organization. Comprised of clinicians operating primarily in Illinois and California, we practice on an in-office and telepsych basis. We specialize in direct provider contracting, network development, credentialing, population health management, UM, and CCM, ensuring access and quality care.

## Revive

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Revive is unlocking human potential through our comprehensive virtual care platform. We offer on-demand primary care, mental health support, weight management, and pharmacy solutions. By transforming individual health experiences, we equip organizations with a powerful talent attraction tool. Revive isn't just a benefits package; it's a catalyst for an unstoppable, thriving workforce.



# Say hello to an enhanced *Direct Primary Care* made for the self-insured

A new type of Direct Primary Care with in-home and virtual visits, free prescriptions, mental health, and care navigation. Designed to effectively redirecting over 14% of claims away from the plan.



## 4 reasons to add Vitable DPC

# 14%

### discount on stop-loss claims attachment

Attested by Windsor Strategy Partners to reduces up to 14.4% on stop-loss claims attachment for self-funded plans

# 3x

### avg. return on investment

Always get their moneys worth: as Vitable redirect primary and urgent care, mental health, and Rx claims

# 120%

### average plan utilization

Easy accessibility and reliable continuum of care drives one of the highest employee plan utilizations

# 94

### net promoter score

With 4.8 in average care ratings, it's no surprise that employers can't stop recommending Vitable

## More about Vitable DPC

Copay: \$0

Deductible: \$0

Adding Dependents: \$0

Easy access to delightful in-home and virtual primary care visits from a dedicated team of providers, combined with over 1,000 free prescriptions, labs, mental health, and care navigation at \$0 copays or deductibles, maximizes utilization and actively redirects claims to a low-cost fixed membership.



### In-Home Visits

Enjoy delightful care from the comfort of your home or on-site at your office with **House Calls**



### Telemedicine

Access same-day primary care directly from the app whenever you need with our **Virtual Visits**



### 1,000+ Free Rx

Vitable membership includes access to **over a thousand** prescriptions at no cost to anyone



### On-site Clinics

Vitable works with employers to set up and run on-site clinics and health fairs



### Labs & Annuals

Get free lab work from any LabCorp location as well as flu vaccines and annual checks



### Behavioral Health

Diagnose, treat, and manage behavioral conditions with our 5-visit mental health program



### Care Navigation

Vitable's care navigation team works closely with our members to refer them to the right next-steps



← Scan here to learn more

[www.vitablehealth.com](http://www.vitablehealth.com)

## **The Quality Alliance**

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The Quality Alliance is a joint venture between Baylor Scott & White Quality Alliance and Catalyst Health Network. Together, the Quality Alliance empowers high-quality, cost-effective providers to deliver value-based care through incentivized payment models and innovative plan designs while always focusing on patient-centered care and promoting better health outcomes.

## **Vitable Health**

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Vitable is an enhanced Direct Primary Care (eDPC) built for the self-insured framework. Vitable provides in-home and virtual visits, 1,000+ free prescriptions and labs, mental health visits, and care navigation at a low PEPM. With 120% utilization and 94 NPS, Vitable is effective in reducing claims by up to 14.4%.

# Financial Services

## **Ansley Capital**

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Ansley Capital Group offers investment banking services to healthcare entrepreneurs focused on the self-insured industry.

## **Dana Investment Advisors**

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Dana Investment Advisors is an Asset Management firm that manages a broad range of public U.S. equity and fixed-income strategies. Dana's client base is very diverse and includes insurance and self-insurance companies. Dana strives to generate superior, consistent, risk-adjusted returns for clients while providing exceptional, personal, and timely service.

## **Houlihan Lokey**

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Houlihan Lokey's Healthcare Group is a recognized leader in M&A advisory and capital-raising services in the middle market. We provide clients with outstanding results when executing investment banking, financial advisory and restructuring assignments. Since 2013, Refinitiv (Thomson Reuters) has ranked us the No. 1 M&A advisor for all U.S. healthcare M&A transactions. We provide in-depth knowledge, proven transaction experience and an exceptional level of service to our clients.

## Jefferson Health Plan

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The Jefferson Health Plan (JHP) was established in 1985 to serve public entities and afford them an opportunity to share in the benefits of better healthcare. The JHP was founded as a partially self-insured health benefits program and today provides healthcare and related employee benefit programs to over 200 public employer member organizations throughout the country.

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MW Premium Finance Captive Specialists offers innovative premium finance and capital solutions for the captive industry. Our services include financing 100% of annual premiums for pure captives, structured loan backs, collateral financing, and assistance in forming private premium finance companies for group captives. We provide captive owners with easy-to-use and valuable solutions.

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Zelis is modernizing the healthcare financial experience by providing a connected platform that bridges the gaps and aligns interests across payers, providers, and healthcare consumers. Zelis sees across the system to identify, optimize, and solve problems holistically with technology built by healthcare experts – driving real, measurable results for clients.

# Medical Provider Networks

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First Health® offers one of the largest national PPO networks, the First Health Network, and Cofinity®, a Michigan-based network. First Health also offers supplemental rental networks, non-par claim repricing, payment integrity services and the Aetna Dental® Administrators network. First Health serves third-party administrators, carriers, employers, Taft-Hartley trusts and government entities.

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Healthcare Highways builds, manages, grows, and distributes high-performance provider networks that are optimized to meet the needs of employers and members. Our network solutions offer self-funded employers a real choice for high-quality, high-value care. In Texas, Louisiana, and Oklahoma, we have saved our clients millions of dollars through curated provider networks and optimal contracting — with savings yields that are as good as or better than reference-based pricing.

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HealthSmart Network Solutions offers flexible and customizable solutions. HealthSmart Preferred is a national PPO of hospitals, facilities, physicians, and ancillary care providers. HealthSmart Physician & Ancillary network is a perfect complement for RBP plans. Our suite of solutions can fit any client and bring innovation like no other network.



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HOMELINK is an innovative, national provider of integrated ancillary services to the healthcare and workers' compensation industries. As a privately held, employee-owned company, our associates are naturally motivated to help the payors, patients and providers we service achieve great outcomes. Our commitment to deliver superior customer service is backed by our proprietary technology to ensure that information is received timely for a coordinated and efficient offering across the continuum of care. HOMELINK is a part of the VGM Group, a sophisticated solutions company that has connected over 25,000 companies to resources that simplify the complexity of doing business. All of our services are available 24 hours a day, 7 days a week. For more information, visit us at [vgmhomelink.com](http://vgmhomelink.com).

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MediOrbis is a global specialty telehealth company that provides innovative specialty services, such as chronic disease management, medical weight loss and integrated specialty care worldwide.

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MultiPlan is committed to bending the cost curve in healthcare. Our focus is on identifying medical savings, helping to lower out-of-pocket costs, and reducing or eliminating balance billing. MultiPlan delivers value to more than 700 healthcare payors, over 100,000 employers, 60 million consumers, and 1.4 million contracted providers.

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A company on the move, Prime Health Services, Inc. is a nationally recognized PPO with a preferred provider network used by insurance carriers, third-party administrators (TPAs), self-insured employers, and governmental entities. When it comes to lowering healthcare costs, more often than not, we are second to none — and we can prove it. Prime Health is perfectly sized to create customized preferred provider networks to maximize value for our clients and our network of medical providers. We are nimble, client-centric, and offer a good dose of Southern hospitality.

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Since 1995, Quality Care Partners has dedicated itself to building partnerships for better health. Our provider-based organization integrates cost-containment strategies for payers, physicians, employers, and their employees to reduce the overall healthcare spend. We believe that excellence in care starts with an intense focus on the physical and economic wellness of our members, partners, patients, and community. As they adapt to meet the needs of an ever-changing world, so does QCP.

## RAS - Risk Administration Services, Inc.

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RAS is a leading monoline workers' compensation insurance provider in the Upper Midwest. As one of the largest writers of work comp insurance in the region, we offer a wide variety of services, including insured and self-insured work comp insurance, claims handling, managed care, and loss control.

## Regenexx, LLC

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Regenexx works with self-funded employers to reduce their orthopedic surgery spending by up to 70% and replace the need for up to 70% of elective orthopedic surgery. Our approach uses a nonsurgical, needle-based technique using the patient's cells. We offer a national network and no PEP. We offer a national network and no PEP.

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The Alliance serves as the voice for self-funded employers who want more control over their healthcare costs. Using Smarter Networks and sophisticated data mining and analysis, they provide transparent, creative approaches to network and benefit plan design to unlock savings where others can't – or won't.



# Bending the healthcare cost curve for all.

**Brokers / Employers**

Health Plans / Members / Payors

**Self-Insured Plans**

Supplemental Carriers

**Third-Party Administrators**

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The Quality Alliance is a joint venture between Baylor Scott & White Quality Alliance and Catalyst Health Network. Together, the Quality Alliance empowers high-quality, cost-effective providers to deliver value-based care through incentivized payment models and innovative plan designs while always focusing on patient-centered care and promoting better health outcomes.

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Välenz® Health is the destination for employers, payers, providers and members to reduce costs, improve quality, and elevate the healthcare experience. With fully integrated solutions on a platform to simplify healthcare, Valenz executes across the entire patient journey - from care navigation and management to payment integrity, plan performance and provider verification.

## **VAULT Strategies**

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Improving member lives by delivering exceptional healthcare solutions with compassion, innovation, and unwavering commitment to excellence. Vault's service ecosystem optimizes the administration of healthcare benefits, manages financial and clinical risks, and promotes cost containment and sustainability. This collaboration contributes to the delivery of high-quality, affordable healthcare services to its partners.



# Medical Travel

## Air Doctor

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Air Doctor connects travelers to 20,000+ local, multi-lingual doctors via an easy-to-use app. Active in 78 countries, it offers clinic, at-home, and video consultations, along with local, valid prescriptions, ensuring travelers worldwide can seamlessly find and receive trusted medical care anywhere they travel.

## Exclusive Surgeries Solutions

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Exclusive Surgeries Solutions manages your supply chain in Surgery. That is one-fifth of any company's healthcare spend. We lead self-funded employers in cost containment by utilizing pre-negotiated bundled claims with full transparency. Our nationwide board-certified surgeons excel in providing surgery and better outcomes. Our brokers know we help them retain clients year after year. ESS is the healthcare you deserve.

## HealthClaim Review® (Considine & Associates Inc.)

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HealthClaim Review® (a Considine & Associates Inc. company) performs physician specialist audit and hospital/facility bill review services to ERISA groups, TPAs, health plans, MGUs and stop-loss carriers. Hospital bill audit and negotiation is provided on a flat fee basis - customized by case. We also provide DRG Record Validation and Medicare repricing.

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Hostcare Medical Navigation and Travel provides a patient-centered service, reducing healthcare costs for members and self-funded plans. Hostcare secures transparent, bundled pricing for advanced imaging, specialty Rx and over 400 domestic surgical procedures, including orthopedics, spine, cardiac, general surgery, ENT and gynecology. Travel Specialists coordinate appointments and all travel arrangements.

# MGU/Medical Stop-Loss Carriers Life and Health/Employee Benefits

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90 Degree Benefits is your benefits advocate dedicated to delivering solutions that exceed our clients and their members' unique benefit and budget needs. We take the challenges of costly and complicated health plans and turn them into new opportunities for you and your employees.

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AcrisureRe's A&H reinsurance division provides superior service, expertise, and market insights to enhance your competitive edge. We use market intelligence and data to create innovative risk transfer solutions. We customize programs for Carriers, MGUs, TPAs, MEWAs, and Captives to effectively safeguard your portfolio, providing a business advantage beyond competitive pricing in reinsurance.

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ATA is a small group TPA and MGU. We provide transparent plan administration that allows small employers access to the savings and services that historically have only been for larger groups. Celebrating half a century of service.



## **Amwins Accident & Health Underwriters,** an Amwins Group Benefits Company

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Amwins Accident & Health Underwriters is a specialty underwriter and program manager for A&H products, including stop-loss, hospital indemnity, and gap. Through our underwriting expertise, superior administration, innovative cost-containment programs, and customer service, we deliver solutions that help our clients, brokers, TPAs, health plans, and reinsurers win.

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Amwins Group Benefits created a portfolio of capabilities that span the benefits landscape and deliver them with hands-on service and expertise. Whether you need a partner for the day-to-day or a problem solver for the complex, our goal is that whenever you think of group benefits, you think of us.

## **Arlo**

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As a technology-first MGU, Arlo helps TPAs and health plans build level-funded programs for the small and mid-sized market. Our proprietary underwriting technology offers real-time quotes without IHQs for groups with 5+ employees.

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AST Risk is the industry's leading Managing General Underwriter (MGU) for TPA-based small group level-funding programs. Led by industry experts with deep experience in all aspects of this specialized product line, we enable our TPA partners to obtain a unique competitive advantage in their markets.

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Bardon Insurance Group is a Managing General Underwriter of medical excess loss coverage for single employer groups with 25 to 5,000+ employee lives. Our business was founded on the principles of honesty, integrity, and excellence and it is our goal to form partnerships with people who share these same values.

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BCS Financial Corporation has 75 years of experience delivering a wide range of insurance and financial solutions for Blue Cross and Blue Shield organizations and commercial markets nationwide. Through its subsidiaries, BCS Insurance Company and 4 Ever Life Insurance Company, BCS is licensed in all 50 states and is rated A (Excellent) by A.M. Best. BCS Financial is headquartered in Oakbrook Terrace, Ill. Learn more at [bcsf.com](https://www.bcsf.com).

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BenefitMall Self-Funded Division supports brokers/advisors with self-insured clients through comprehensive stop-loss and integrated claim risk management solutions, including identification of known/emerging risks using all available data, implementation/coordination of point solutions to mitigate or manage those risks, and protection against losses by placing clients in the best stop-loss contracts available.

## **Berkley Accident and Health**

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Berkley Accident and Health is a risk management leader that offers a creative, analytical approach to risk with the strong backing of our parent, W. R. Berkley Corporation, a Fortune 500 company. We are a direct writer of Stop-Loss insurance in all 50 states. Policies are issued by Berkley Life and Health Insurance Company, rated A+ (Superior) by A.M. Best. We also offer Stop-Loss Group Captives, which provide small- and midsize companies with a gateway to self-funding.

## **Berkshire Hathaway Specialty Insurance**

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Berkshire Hathaway Specialty Insurance, Accident & Health is part of Berkshire Hathaway's National Indemnity group of insurance companies, with financial strength ratings of A++ from AM Best and AA+ from Standard & Poor's. Our underwriters average 20 years of experience. "Claims is our product," We resolve claims accurately and quickly.

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For over 30 years, Commencement Bay Risk Management (CBRM) has been providing peace-of-mind to self-funded groups through its premier stop-loss solutions; safeguarding clients against unpredictable and financially catastrophic health care claims. Through a long-term partnership approach and focus on offering sustainable pricing, quick reimbursements, trusted expertise, and innovative solutions, CBRM has been able to deliver exceptional service, partnership, and value.

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**Dave Valenzano**  
President  
Audit Actuarial & Consulting

To discuss how Davies can help your business, contact **Dave Valenzano**, **President-Audit Actuarial & Consulting**, at [Dave.Valenzano@us.davies-group.com](mailto:Dave.Valenzano@us.davies-group.com).

## Our market experts work in partnership with self-insureds to:

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- Deliver exceptional claims reviews through significant industry experience, advanced technical solutions, and highly skilled staff.
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Companion Life Insurance Company has specialized in employee benefits for more than 50 years. Companion Life Insurance Company, Companion Life Insurance Company of California, and Niagara Life and Health Insurance Company currently market insurance products in 49 states and the District of Columbia. The mission of Companion Life Insurance Company is to be a well-managed, customer-focused organization acting in the best interests of its policyholders and marketing partners, operating on a financially sound, growing, and diversified basis. Companion Life has earned an AM Best rating of A+ (Superior)\* for 22 consecutive years.

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Coterie Advisory Group, Inc. is an insurance program manager and consultative advisor who delivers Affordability-Based Medical Plan Strategies to help benefit brokers, employers, and associations in the benefits industry. Our unique and proprietary Affordability-Based Medical Plans (Fundamental Care) include fully insured limited-benefit indemnity plans, level-funded limited-day plans, MEC, MEC+, and MVP.

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Risk Protection for Self-Funded Employer Health Plans: Employer Stop-Loss (ESL) coverage is customized to the risk tolerance and coverage requirements of an employer's health plan. As a direct writer of ESL insurance, Coverys brings a seasoned team that is well-versed in the healthcare marketplace, self-funded employer groups, and specifically in ESL insurance programs.

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Crum & Forster's (C&F) Employer Stop-Loss team collaborates with clients to develop customized stop-loss solutions that effectively manage high-frequency and high-cost claims. We offer a comprehensive product portfolio, including traditional, level-funded, and captive employer stop-loss plans, managed care, and ancillary products. C&F is rated "A" (Excellent) by AM Best.

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A&H Reinsurance Intermediary that works with carriers, reinsurers, distributors, MGUs and TPAs. We identify and secure reinsurance partners for insurers and MGUs. Product expertise in multiple lines with particular strengths in the ESL business and other healthcare finance. Annually conduct carrier and MGU survey, includes \$5+ Billion annual premium.

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Davies Excess Claims Management Services provide claims evaluation and review of self-funded employer stop-loss claims, establish claim reserves, and manage claims processes on behalf of carriers, MGUs and risk-bearing entities. We also excel at claims management for HMO Reinsurance, Provider Excess of Loss and Medical Excess of Loss programs.

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East Coast Underwriters is a Managing General Underwriter providing Medical Stop-Loss to employer groups with 25+ enrolled lives. ECU offers traditional and level-funded Stop-Loss products for benefit consultants and TPAs and underwrites on behalf of Pan American Life and Gerber Life (A+ rated).

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Elevanta Health is a proprietary group health insurance program that is an affordable, ACA-compliant, and self-funded solution that you can trust. Elevanta Health offers benefits programs that include medical, dental, vision, life and disability options. Our unique program utilizes a national PPO network. Our program is a one-stop shop providing all sales, marketing, enrollment and consulting services to employers across the US. Our program has been in existence for over a decade, providing cost stability and high-level professional services to participants.



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## **Ethos Underwriting Services**

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Ethos is a full-service MGU providing specific and aggregate medical stop-loss for those companies that self-insure their employee health benefits. We work with brokers, consultants and TPAs to help them address the reinsurance needs of their self-funded clients.



## **Evolution Risk Partners, LLC**

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Evolution Risk Partners (ERP) is a full-service MGU that specializes in providing comprehensive, compelling and leading-edge solutions for the Medical Stop-Loss and Medical Captive communities. An organization built with the intent of redefining partnership through a shared vision of success, we endeavor to have a highly collaborative and engaged relationship with our broker and consultant partners. Our ultimate goal is to understand your needs and to utilize our experience and knowledge to provide a flexible, efficient and seamless customer experience.

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Excess Re is a national, full-service managing general underwriter specializing in employer stop-loss insurance, referenced-based pricing, MEC and MVP coverage, consortium and coalition programs, and captive reinsurance solutions. Excess Re's history, reputation, and innovative underwriting enable it to deliver products and services to meet the needs of an evolving industry.

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Excess Risk Solutions Inc., a Stop-Loss GA, specializes in providing comprehensive services to Managing General Underwriters (MGU) and carriers in the stop-loss insurance sector. With over 40 years of experience in self-funding, we offer pre-underwriting, marketing, and sales assistance through our preferred Third Party Administrator (TPA) and Broker/Consultant relationships across the United States. Our expertise allows us to build and sustain trusted legacy relationships, making us an industry leader committed to delivering reliable solutions in the stop-loss market.

## FAIRCO

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FAIRCO is a member of the Berkshire Hathaway family of companies, with financial strength ratings of A++ from AM Best and AA+ from Standard & Poor's. Our medical stop-loss division provides a wide array of innovative solutions to meet today's needs of employers self-insuring their employee benefits. Our strength and stability, combined with the experience and expertise of our professionals, have been the keys to our success.

## Granular Insurance

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Granular is a risk platform to help employers, healthcare providers, and other stakeholders manage risks and costs and achieve better outcomes. Granular provides intelligent employer benefit risk sharing through data-driven insights and predictive analytics. Granular uses an intelligent framework to better protect self-funded employers from the increasing volatility of a workforce with diverse health-related needs.

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SELF FUNDED DIVISION

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Group Marketing Services, Inc. has been offering group benefits to small and medium businesses since 1972. With offices in Kalamazoo and Grand Rapids, MI, we are able to serve your group insurance needs throughout Michigan, Indiana, Ohio and the entire Midwest. We offer and administer self-funded and fully insured Major Medical, Dental, Vision, Life and Disability insurance. We also offer COBRA and Flexible Spending Account administration. We pride ourselves in customer service and our ability to customize solutions to meet each employer's group benefit needs.

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Havarti Risk offers Provider Stop-Loss, Employer Stop-Loss, First Dollar Underwriting, and Captive Actuarial services to providers, employers, health plans, and others in the business of managing Health Cost of Care risk. Leveraging decades of healthcare actuarial and underwriting experience at the highest levels, Havarti brings visibility and helps manage risk by performing insightful risk analysis, setting client-specific optimized policy parameters, and securing quality risk coverage through highly-rated insurers.

## HealthClaim Review® (Considine & Associates Inc.)

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HealthClaim Review® (a Considine & Associates Inc. company) performs physician specialist audit and hospital/facility bill review services to ERISA groups, TPAs, health plans, MGUs and stop-loss carriers. Hospital bill audit and negotiation is provided on a flat fee basis - customized by case. We also provide DRG Record Validation and Medicare repricing.

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iiSi, founded in 1983, is a full-service Managing General Underwriter of specific, aggregate and integrated stop-loss insurance, with particularly strong product offerings in the RBP, narrow network and level-funded spaces, accommodating groups down to 15 employees. Spectrum, also a division of Companion, merged its operations into iiSi in early 2024.

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Kismet Risk Management Associates, LLC (KRMA) is a Managing General Underwriter (MGU) of Medical Stop-Loss on behalf of our AM Best rated A (Excellent) carriers. We provide stop-loss insurance solutions tailored to each of our customer's needs and preferences by focusing on patient and plan advocacy methodologies.

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Liberty Mutual Medical Stop-Loss coverage can help protect employers who self-fund their health insurance plans against large or catastrophic claims. Our mission is to be a leader in the excess loss industry through outstanding services, relationship building, and innovative products. Partner with Liberty Mutual, and you will benefit from the financial strength, security, and capacity of a Fortune 100 carrier. Go beyond business as usual.

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Founded on the principles of stability and integrity, Litchfield Underwriters' proprietary underwriting methodologies deliver superior self-funded reinsurance solutions to both commercial clients and Welfare Funds alike. Our targeted strategy enables Litchfield to focus on the unique needs of each segment to offer more competitive pricing and policy flexibility.

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ManhattanLife is a direct writer of stop-loss for the self-funded employee benefits market.



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Medical Risk Managers, Inc. is a stop-loss consultant, underwriter and actuary. As of January 1, 2024, our total block of stop-loss business was over \$360 million in annual premiums, and we have underwritten over \$5 billion throughout our history. We are the largest underwriter in the country. Our services include underwriting, extensive network evaluation, consulting, stop-loss claim adjudication, and actuarial and accounting support.

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Merit Medicine leverages billions of patient data points and proprietary AI/ML software to support Carriers, Employers, and other Risk-Bearing Entities with risk stratification and identification of high-risk members before they become high-cost claimants, supporting care navigation to promote preventative care, early intervention, and proactive disease management.

The advertisement features a blue background with a pair of white earbuds and a smartphone. The smartphone screen displays the podcast 'FIRM & FINAL: THE LEGENDS OF STOP LOSS & REINSURANCE' by BCS Financial. The BCS logo is a white four-pointed starburst.

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Get the insider scoop on the self-funded industry

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MSL Captive Solutions is the leading managing general underwriter dedicated to captive programs for medical stop-loss. Our exclusive focus is working with select program managers, brokers, consultants, and captive managers to build proprietary group and single-parent captive programs.

## **Nevaeh Insurance Solutions, LLC**

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Nevaeh Insurance Solutions is an external facility performing functions on behalf of insurance carriers, such as underwriting, product development, business acquisition, sales, and program management. We focus on all group A&H lines of business. We work with MGUs not only to underwrite their portfolio but remarket their services to our distribution channels.

## **NSM Healthcare Solutions**

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NSM Healthcare Solutions is dedicated to protecting self-funded companies from the unexpected. Comprised of three leading managed care and medical stop-loss programs — IOA Re, Rockport Benefits and Sequoia — our customized accident and health insurance packages are backed by a team of medical benefits and claims experts and top-rated carriers.

## **One80 Intermediaries**

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One80 Intermediaries is a full-service Managing General Underwriter of Medical Stop-Loss. We have full in-house binding authority to manage stop-loss insurance across the United States on behalf of our leading carriers and reinsurers. Backed by a team of experienced professionals, we provide best-in-class products and services to our partners and clients.

## **Optimyl Benefits**

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Optimyl Benefits is an MGU and a program manager that is changing the way small businesses experience their health insurance by using bold ideas, data-driven technology, and a laser focus on customer service.

## **Pan-American Life Insurance Company**

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Through our Pan-American Accident & Health division, we offer traditional specific and aggregate stop-loss coverage and level-funded stop-loss via our MGU partners with cost-effective quotes, flexible coverage terms, and consistent renewal offerings. Pan-American Life Insurance Company is an "A" rated company from both AM Best and Fitch Ratings.

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Our goal at Phoenix Excess Risk Underwriters is to provide our clients with the best self-funded health insurance plan choice for their employees. We clearly pinpoint the needs of our clients and deliver creative solutions for your most challenging risks.

## **Prodigy Health Insurance**

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At Prodigy, we deliver innovative solutions based on time-tested principles and in-depth knowledge of medical risk management and loss mitigation. In addition to traditional stop-loss, we offer experience and expertise in level-funded, trust and captive insurance solutions, all designed to help make quality healthcare more affordable and accessible.

## **QBE**

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QBE North America is part of QBE Insurance Group Limited, one of the largest insurers and reinsurers worldwide. Our Accident & Health division provides exemplary coverage and services to support the specialized needs of self-insured employers as a top 10 independent provider of medical stop-loss insurance.

## **Redirect Health**

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Redirect Health is a healthcare solution that brings together a program manager, TPA, risk pool, stop-loss, and PBM to manage a plan that meaningfully improves access and affordability for small/medium businesses and individuals. Holding this mission at our forefront, we provide personalized 24/7 access to members across the country.

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Reunion Health Services is an MGU that writes on behalf of SiriusPoint and Pennsylvania Manufacturer's Associate Insurance Company (Old Republic Company) with full authority to underwrite medical stop-loss.

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Ringmaster is a cloud-based healthcare software provider for self-funded experts providing automated workflow optimization solutions and analytical tools for Stop-Loss management and Pharmacy Benefit consulting, which drastically reduce the processing time and complexity needed for quoting, contracting, and policy administration. Realize the Possibilities – Step into the Ring.



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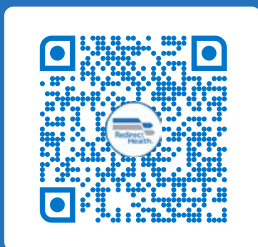
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Skyward A&H is a direct writer of Medical Stop-Loss, bringing creative underwriting solutions to our TPA, Broker, & Consulting partners. Our consultative approach can assist our partners to identify best-in-class vendors to manage employer costs. Connect with us to learn more about our Captive, AI and Rx underwriting capabilities.

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As one of many stop-loss solutions available today, what sets us apart is our commitment to service, sustainability, and consistency. We're part of the Beyond Risk family of solutions. We partner with some of the largest insurance companies in the country, who are committed to this product.

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SCM is the industry leader in cost containment and clinical management solutions for high-cost dialysis claims. Our programs include Dialysis Repricing, CKD clinical coaching, and Data Analytics. Further, our services feature flat case rates, no set-up fees, and a full administrative exclusion, delivering solutions that surpass typical network discounts.

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StarLine is an Underwriting Management Company accessible to Brokers, Consultants, TPAs and Regional Health Plans. We tailor customized solutions within Employer Stop-Loss, Managed Care and Personal Accident Products. Our collaborative process and collective expertise translate to a true partnership—aligned to your specific goals.

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Starr Insurance is a leading insurance and investment organization with a presence on six continents; through its operating insurance companies, Starr provides property, casualty, and accident and health insurance products, including employer stop-loss, as well as a range of specialty coverages including aviation, marine, energy and excess casualty insurance. For more information, visit [starrcompanies.com](http://starrcompanies.com).

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Stealth Partner Group is a leading provider of premier medical stop-loss and ancillary wholesale services, offering unparalleled expertise in self-funding, plan administration, and account management for brokers, consultants, and third-party administrators. Our robust selection of offerings also includes best-in-class cost-containment solutions and specialized programs. With offices in 18 locations across the country, the Stealth management team offers its clients more than 150 years of collective experience in the stop-loss and ancillary insurance marketplace. This allows for productive connections with prominent carriers, proven negotiating techniques and streamlined management processes.

## **Strategic Underwriting Solutions, an Amwins Group Benefits Company**

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Strategic Underwriting Solutions (SUS), with its 25+ years of experience, brings unsurpassed expertise to the level-funded and traditional stop-loss marketplace. With a wide range of products, services and top-rated partners, SUS is uniquely qualified to assist all-size employer groups with their self-funded and consulting needs.

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Summit Re is a managing general underwriter and reinsurance advisor working with self-funded employers, TPAs, health insurers, provider groups, and managed care organizations throughout the US. We help our customers analyze, manage, and transfer risk to protect their financial stability.





# Swiss Re Corporate Solutions

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.

[corporatesolutions.swissre.com/esl](https://corporatesolutions.swissre.com/esl)

A large, curved concrete structure, possibly a dam or bridge, with the words "STOP LOSS" written in large, white, sans-serif capital letters across its surface. The structure is set against a background of deep blue water. The text is partially obscured by the structure's curves and shadows.

**Employer Stop Loss:  
Limit Health Care Exposure.  
Advancing Self-funding Together.**

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Sun Life is one of the largest group benefits providers in the U.S., serving 60,000+ employers. In addition to being a leader in stop-loss and a provider of several group benefits solutions, Sun Life now offers employers care navigation and health advocacy services to help their employees live healthier lives.

## Swiss Re Corporate Solutions

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Swiss Re Corporate Solutions' long history and continuity in the employer stop-loss industry means we adapt to trends and provide market-leading capacity. Our portfolio includes medical, captives, and organ transplant. Coverage is underwritten by Swiss Re Corporate Solutions America Insurance Corporation, a direct writer for self-insured employer groups in all 50 states, as well as the District of Columbia, with a financial strength rating of (A+ Superior) by A.M. Best Company.

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At Symetra, we are committed to helping groups across the country manage healthcare costs while providing valuable benefits to employees and their families. We earn the trust of our distribution partners and clients by following through on our promises and supporting every plan with professional, informative and responsive service.

## The Prudential Insurance Company of America

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Prudential offers Stop-Loss Insurance to help provide protection against financial risk associated with catastrophic medical and prescription drug claims. As the frequency of claims over \$1M continues to rise, employers can feel confident in self-funding their plans while having reliable coverage from Prudential, a leading Financial Services company that's been fulfilling promises for nearly 150 years. At the same time, producers get to work with a carrier they trust that delivers responsive service and efficient turnaround times from quote to claim.

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For 95 years, Ullico has been a champion for the American worker, and as the only labor-owned insurance and investment company, Ullico has gained the trust of union members and employees to protect their families, employees, businesses and investments.

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HCC Life Insurance Company, operating as Tokio Marine HCC – Stop-Loss Group, has been leading the way in medical stop-loss insurance for 50 years. We also offer Taft-Hartley, Supplemental Health, captive and organ transplant solutions. Rated A++ (Superior) by A.M. Best Company, Tokio Marine HCC – Stop-Loss Group is backed by the financial stability of its parent company, Tokio Marine HCC.

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For over 30 years, TPAC has been changing the way healthcare is financed, disclosed, and delivered, offering transparent, innovative solutions. Our Medical Stop-Loss expertise includes Specific, Aggregate, Spaggregate®, SmartShare®, and SLEQ™. With premium increase caps and laser-free options, we ensure stability and savings. Experience stop-loss differently with TPAC.

## True Captive Insurance

### David Voorhees, Chief Executive Officer

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As a pioneering and transparent captive insurance partner, we are dedicated to delivering exceptional customer experiences through collaboration, financial alignment, and an employee-centric approach. We help customers with innovative solutions to manage expenses while prioritizing care. Our commitment ensures lower costs and healthier outcomes for all, representing a truly superior approach to captive insurance.

**Trustmark Life Insurance Company**  
**John Wiklund, Vice President and Actuary**

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Trustmark clients enjoy seamless integration of level-funded health benefit plan administration and stop-loss insurance. Employers nationwide can create a level-funded plan design to meet their unique needs. Our unparalleled personal service takes care of broker's clients every step of the way. Trustmark Life Insurance Company provides stop-loss coverage for level-funded plans administered by Star Marketing and Administration Inc.

**Underwriting Management Experts**  
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As a full-service Managing General Underwriter (MGU), UME offers underwriting, policy binding, contract issuance, premium collection, and claims payment. UME provides excellent customer service by focusing on responsiveness and flexibility to meet the needs of our partners.

**Underwriting Management Experts**  
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## **Underwriting Management Experts**

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As a full-service Managing General Underwriter (MGU), UME offers underwriting, policy binding, contract issuance, premium collection, and claims payment. UME provides excellent customer service by focusing on responsiveness and flexibility to meet the needs of our partners.

## **USBenefits Insurance Services, LLC**

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USBenefits is a full-service MGU and leading medical stop-loss insurance provider, partnering with employer groups, TPAs, brokers, consultants, and employee benefit producers. Since 2007, we have served as an advocate and resource to the stop-loss community and have complete responsibility for all administrative, claims, and underwriting decisions on our program.

## **VAULT Strategies**

### **Shawn Rutledge, Chief Strategy Officer**

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Improving member lives by delivering exceptional healthcare solutions with compassion, innovation, and unwavering commitment to excellence. Vault's service ecosystem optimizes the administration of healthcare benefits, manages financial and clinical risks, and promotes cost containment and sustainability. This collaboration contributes to the delivery of high-quality, affordable healthcare services to its partners.

## **Voya Employee Benefits**

### **Anthony Russo, Vice President, Stop-Loss Distribution**

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Voya Employee Benefits has been offering consultative expertise as a direct writer of stop-loss insurance for nearly half a century. Our focus on superior customer service continues into the flexible approach we take when building solutions with you. We'll be by your side every step of the way.

## **Xchange Benefits, LLC**

### **Kenneth Zieden-Weber, Executive Vice President & Chief Operating Officer**

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Employer Groups from coast to coast are taking a more self-deterministic view of their benefit plans as costs continue to rise and legislation remains in flux. XB can help. In the appropriate circumstances and with quality administration, self-funding is a clear and viable option with reduced costs and more control over coverages and plan design. Through trusted administrators, consultants and brokers, Xchange Benefits™ delivers medical stop-loss coverage to self-funded clients across the nation on behalf of A.M. Best 'A' rated insurance carrier partners. Our expert team of underwriters can assist with even the toughest placements, exceeding service expectations, and deliver creative underwriting solutions tailor-made for the underlying plan.



# Onsite Clinics/Virtual Care/Telehealth

## 90 Degree Benefits

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WEB: www.90DegreeBenefits.com



90 Degree Benefits is your benefits advocate dedicated to delivering solutions that exceed our clients and their members' unique benefit and budget needs. We take the challenges of costly and complicated health plans and turn them into new opportunities for you and your employees.

## SimpleTherapy

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SimpleTherapy provides physical, musculoskeletal and behavioral health services combining digital and technology-guided treatment with a national network of in-person and telehealth providers. We are committed to delivering inclusive, holistic care that is simple, accessible, and personalized. Our clients include employers of all sizes, major health plans and Fortune 50 organizations.

# Pharmacy Benefit Management

## **AEBRx**

**Erin Linney, Director of Marketing**

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By leveraging our extensive benefits administration experience, AEBRx helps your plan and its members realize significant cost-savings through its unique programs for managing high-cost specialty drugs by applying clinical protocols and providing alternative payer sources. These programs save Plan Sponsors significant costs while ensuring the most appropriate medications are prescribed.

## **AMPS**

**Michael Condon, Vice President, GM RBP**

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For nearly 20 years, AMPS has led in healthcare cost containment, providing innovative solutions for fair pricing in medical and pharmacy sectors. Our holistic approach ensures exceptional outcomes and personalized service, delivering superior value to clients, partners, and members across the healthcare spectrum.

## **AscellaHealth, LLC**

**Dea Belazi, Chief Executive Officer**

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AscellaHealth, a global healthcare and life sciences solutions company, provides superior cost-containment strategies for managing specialty drug spend to captives, self-insured companies, at-risk providers, PBMs and regional health plans. Our core offerings include specialty and medical cost management, formulary and network design, custom clinical programs and data analytics to assess and maximize health outcomes.

# Partner with BeneCard PBF



BeneCard PBF is your trusted Prescription Benefit Facilitator. With over 40 years of industry experience, we prioritize our members' well-being while meeting our clients' goals. Experience BeneCard PBF's award-winning service firsthand.

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24/7/365 personalized support with access to state-of-the-art mail service pharmacies.

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Partner with BeneCard PBF and experience a prescription benefit facilitator who prioritizes patient care driven by clinical expertise, always putting members first.

Contact our dedicated team to learn more at  
[Sales@benecardpbf.com](mailto:Sales@benecardpbf.com) or call 1-877-723-6003.



[benecardpbf.com](http://benecardpbf.com)



People in Focus. Pharmacists in Practice. Bringing Integrity to Prescription Benefits.

## **BeneCard PBF**

### **Maida Alajbegovic, Assistant Director of Marketing**

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Discover BeneCard PBF: Your trusted Prescription Benefit Facilitator with 40+ years of proven expertise. Prioritizing member well-being through tailored services and leveraging cutting-edge predictive analytics for true cost savings. Our value-based approach guarantees predictability with real results. Experience our Always First philosophy, benefiting both members and clients.

## **Candesa Pharmacy Solutions**

### **Brandie Cain, Brand Manager**

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Candesa Pharmacy Solutions connects the dots across the pharmacy ecosystem for members, providers and employer groups. Through a brilliant approach that combines hands-on expertise of clinical pharmacists, the knowledge of a large health plan and the power of advanced data, Candesa is shining a light on opportunities to enhance care and drive down pharmacy spend.

## **ChoiceScripts Rx**

### **Joe Yaklic, President & Chief Clinical Officer**

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ChoiceScripts is an innovative pharmacy benefits architect, combining the best of benefits consulting and management. Standing on a foundation of expertise, flexibility, and transparency, ChoiceScripts is committed to transforming pharmacy benefits for clients, resulting in the best possible outcomes. Let's build your pharmacy benefits - together.

## **ClearScript**

### **Kyle Johnson, Vice President, Sales**

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Evolving from Fairview's innovative health system and its industry-leading Fairview Specialty Pharmacy, ClearScript has the expertise to cost-effectively manage drug spend with tailored solutions that address every client's unique challenges. Our results-driven programs and white-glove customer service deliver optimal member wellness.

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Options for partnership and involvement in managing your pharmacy benefits.

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Coordinating with PBMs is extra work. Bring your PBM in-house to make it work for you and your members. CBG's pharmacy benefits management and clinical pharmacy services model gives you enhanced control over your PBM.

You get integrated data, transparency, and customization while CBG provides the technology, clinical knowledge, and operational expertise. Maximize your revenue and ease your administrative burden, all while giving your members the superior service that comes with coordinated care.

Learn more at [coopbenefitsgroup.com](http://coopbenefitsgroup.com)



## Cooperative Benefits Group

### Brad Butler, Vice President, Sales

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CBG's pharmacy benefits management and clinical pharmacy services model creates joint ventures that allow our clients to own their PBM. Our clients have the benefits of ownership and CBG provides the technology, clinical knowledge and operational capabilities. CBG's approach aligns incentives to optimize value and net cost.

## EHIM, Powered by ProCare Rx

### Rachel Strauss, Vice President, Strategic Development

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EHIM, powered by ProCare Rx, is a direct-source, full-solution healthcare company offering pharmacy benefit management, third-party administration, and injury claims benefit management services. With a service-first philosophy and emphasis on creating the best experience for their partners, they deliver on their promise of superior cost containment and high-touch service. Pharmacy Benefits. Managed.

## ELMCRx Solutions

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ELMCRx Solutions is a growing hub of PBM solutions, navigating employer groups through rising pharmacy benefit costs. Partnering with brokers and TPAs, ELMCRx offers cutting-edge clinical management and cost-containment solutions supported by an expert team of physicians and pharmacists. Drive better health outcomes and reduce financial risk with ELMCRx today.

## HealthSmartRx Solutions

### Peter Beerman, Senior Vice President

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HealthSmartRx Solutions is a pharmacy benefit services organization that includes the following product offerings: full-service pharmacy benefit management for commercial employers and workers' compensation administrators, variable copay administration (medical & pharmacy), standalone prior authorization and clinical management services, rebate aggregation, and pharmacy discount card administration. White-label capabilities are available.





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ChoiceScripts is here to provide an independent alternative to large, vertically integrated PBMs. As your Pharmacy Benefits Architect, we combine the best of pharmacy consulting and management and provide unparalleled concierge service, value, and true transparency. It's time to experience partnership and advocacy for your plan and members like never before.



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## Liviniti

### Eric Wan, Chief Growth Officer

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A pioneer in pharmacy benefit innovation, Liviniti offers a fully transparent, pass-through pricing model dedicated to meaningful savings and optimal health outcomes. Founded by pharmacists in 2011, our name reinforces the infinite power of medication to change lives as we serve employers across the U.S. Visit [liviniti.com](http://liviniti.com).

## LynxRx

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LynxRx enhances member health with client-centric, flexible pharmacy solutions. By prioritizing innovation and collaboration, we are redefining pharmacy benefits through cutting-edge technology and personalized service. Our mission is to lead the evolution of healthcare, ensuring access to affordable medications and fostering healthier communities. We value integrity, transparency, and continuous improvement.



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### **Savings from Pass-through Pricing**

We return all network discounts and rebates to clients.

### **Clinical Savings**

Lowest net cost clinical approach ensures you pay the lowest amount.

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## MedImpact

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San Diego-based MedImpact Healthcare Systems, Inc. is the nation's largest independent health solutions, technology, and pharmacy benefit management provider. For 35 years, MedImpact has helped commercial and government healthcare payers improve member health, manage benefits, and reduce drug costs.

## PharmPix Corp.

### Jordan Lund, Regional Sales Director

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Gain a clear view of your pharmacy data. Build a dynamic solution with our proactive technology and clinical reviews at point-of-sale, Specialty Hub serving 30-40% savings, 65,000+ pharmacies and white-label options. In business for over 15 years, PharmPix delivers a superior quality and cost control approach with hands-on administration.

## RAS - Risk Administration Services, Inc.

### Eddie Riveiro, Executive Vice President, Chief Revenue Officer

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RAS is a leading monoline workers' compensation insurance provider in the Upper Midwest. As one of the largest writers of work comp insurance in the region, we offer a wide variety of services, including insured and self-insured work comp insurance, claims handling, managed care, and loss control.

## RealRx

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RealRx has envisioned a better way to provide pharmacy benefit management services. We partner with health plans and employers to simplify access to pharmacy benefits and provide clarity and transparency. Our innovative, customized approach provides unrivaled service at the lowest net cost.

**Ringmaster Technologies, Inc.**  
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Ringmaster is a cloud-based healthcare software provider for self-funded experts providing automated workflow optimization solutions and analytical tools for Stop-Loss management and Pharmacy Benefit consulting, which drastically reduce the processing time and complexity needed for quoting, contracting, and policy administration. Realize the Possibilities – Step into the Ring.

**RxPreferred Benefits**  
**Zac Hanson, Senior Director, Revenue Operations**

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RxPreferred is a fully transparent, pass-through Pharmacy Benefits, 340b, and Pharmaceutical Rebates Administrator that provides customized pharmacy solutions to maximize savings for plan sponsors and align with their goals. We specialize in cost-containment strategies, plan collaboration, and emphasize community and own-resource capitalization in a data-driven environment.

**Script Care, Ltd.**  
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Script Care, Ltd. is the longest-operating privately held Pharmacy Benefit Manager in the industry and is fully URAC PBM accredited. Through various business lines - PBM, Managed Care, Correctional Services, Outsourced Business Solutions, as well as our sister company SCL 340B CARE - we offer innovative solutions for a wide range of clients.

**Serve You Rx**  
**Nancy Fleming,**

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WEB: [www.serveyourx.com](http://www.serveyourx.com)



Serve You Rx, an independent and privately held PBM for over 37 years, delivers exceptional service and tailored, cost-effective benefit solutions. With unquestionable flexibility, an unwavering commitment to its clients, and a fervent focus on those it serves, Serve You Rx sets the benchmark for client-centricity and adaptability.



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## **True Rx Health Strategists**

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True Rx Health Strategists transforms the pharmacy benefits experience with exceptional care for employees, customized cost controls, and personalized client service. Our model is built on transparent pricing and innovative clinical solutions. We prioritize the health and quality of life of members, minimize disruption, and provide strategies for continuous improvement.

## **TrueScripts**

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TrueScripts is a pharmacist-founded PBM based on truth and transparency. Our mission is to build lasting relationships by providing prescription benefit expertise at a personal and customized level to ensure optimum value at the lowest possible cost. We are committed to lowering prescription drug spend, achieving clinically enriched outcomes, and always delivering Amazing Care.

## **Ventegra, Inc**

**Brian Vossler, Vice President, Strategic Business Development**

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ClaimDOC, a national medical claim auditing and member advocacy company, is driven to help employers deliver successful and sustainable health plans for their employees. DirectAccess+™ — ClaimDOC's unique RBP model — leverages superior member advocacy to build partnerships with members and providers while maintaining a 360° View of Risk™ as co-fiduciary.

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Kelly Webb, Vice President, Sales and Marketing

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Exclusive Surgeries Solutions manages your supply chain in Surgery. That is one-fifth of any company's healthcare spend. We lead self-funded employers in cost containment by utilizing pre-negotiated bundled claims with full transparency. Our nationwide board-certified surgeons excel in providing surgery and better outcomes. Our brokers know we help them retain clients year after year. ESS is the healthcare you deserve.

## Green Imaging

Cristin Dickerson

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Green Imaging offers direct diagnostic care to employers and members through our quality, easy, and affordable network across the United States. We are a great option for self-funded employers looking to buy healthcare directly from providers, often as a bolt-on benefit that easily co-exists with traditional and non-traditional employee benefits insurance. We offer a fast, no-cost assessment of claims and geographic analysis to determine if we would be a good fit for employers.

## **InfuCare Rx**

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## **Mayo Clinic**

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The Mayo Clinic Complex Care Program is a customizable Centers of Excellence program focused on getting the right diagnosis and treatment plan for high-cost, high-risk employees and dependents with complex or serious conditions. We break down barriers to high-quality care through medical record reviews, expedited scheduling, and condensed appointment schedules without charging any administrative fees.

## **Nomi Health**

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Nomi Health is changing the economics of healthcare for buyers of care and their partners. We simplify the business of healthcare with actionable analytics, direct access to medical and pharmacy services, and payment rails and programs built specifically for self-funded employers, governments and their partners, such as TPAs, brokers, and consultants.

## **Provider Network of America**

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PsychHealth Care Management is a managed behavioral healthcare organization. Comprised of clinicians operating primarily in Illinois and California, we practice on an in-office and telepsych basis. We specialize in direct provider contracting, network development, credentialing, population health management, UM, and CCM, ensuring access and quality care.

### Regenexx, LLC

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Regenexx works with self-funded employers to reduce their orthopedic surgery spending by up to 70% and replace the need for up to 70% of elective orthopedic surgery. Our approach uses a nonsurgical, needle-based technique using the patient's cells. We offer a national network and no PEPM.

## **The Quality Alliance**

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The Quality Alliance is a joint venture between Baylor Scott & White Quality Alliance and Catalyst Health Network. Together, the Quality Alliance empowers high-quality, cost-effective providers to deliver value-based care through incentivized payment models and innovative plan designs while always focusing on patient-centered care and promoting better health outcomes.

## **Välenz® Health**

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Välenz® Health is the destination for employers, payers, providers and members to reduce costs, improve quality, and elevate the healthcare experience. With fully integrated solutions on a platform to simplify healthcare, Valenz executes across the entire patient journey - from care navigation and management to payment integrity, plan performance and provider verification.



# Reference-Based Pricing

## 90 Degree Benefits

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90 Degree Benefits is your benefits advocate dedicated to delivering solutions that exceed our clients and their members' unique benefit and budget needs. We take the challenges of costly and complicated health plans and turn them into new opportunities for you and your employees.

## Advanced Benefit Consulting & Insurance Services, Inc.

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We are a full-service health insurance agency and consulting firm specializing in self-funded group health plans, including reference-based pricing. Our senior management comes from decades of experience in the self-insured space. We are benefits as well as compliance consultants focusing on ERISA, ACA, HIPAA, CAA, RXDC and other compliance issues.

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ClaimDOC, a national medical claim auditing and member advocacy company, is driven to help employers deliver successful and sustainable health plans for their employees. DirectAccess+™ — ClaimDOC's unique RBP model — leverages superior member advocacy to build partnerships with members and providers while maintaining a 360° View of Risk™ as co-fiduciary.

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ClearHealth Strategies provides leading technology and services for reference-based pricing, out-of-network, supplemental network, and surprise billing programs. The market-leading technology allows clients to define and design the program with a turnkey approach whereby ClearHealth manages profile building, claim pricing, balance billing, hold harmless, and arbitration (IDR) processes. Contact ClearHealth for a technology demo today!

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The Context4 Reference-based Pricing (C4RBP) Solution is our in-depth, accurate claim repricing cloud-based solution. Combining 100% accurate Medicare pricing using the full CMS Prospective Payment Systems (PPS) software with Context's industry-proven Usual, Customary, and Reasonable (UCR) fee schedules, the C4RBP solution provides proven, defensible healthcare pricing with unmatched accuracy.

## Exclusive Surgeries Solutions

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We partner with direct carriers, intermediaries, managing general underwriters (MGUs), specialty insurance marketers, accountable care organizations (ACOs), health plans, and captives.

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HealthClaim Review® (a Considine & Associates Inc. company) performs physician specialist audit and hospital/facility bill review services to ERISA groups, TPAs, health plans, MGUs and stop-loss carriers. Hospital bill audit and negotiation is provided on a flat fee basis - customized by case. We also provide DRG Record Validation and Medicare repricing.

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Homestead is the smart choice for a sustainable, long-term strategy to beat rising healthcare costs while offering employees more value and convenience. Our Smart Plans deliver transparent, reasonable reimbursement using proprietary RBP technology; full protection against balance bills; and options for full integration, including TPA and stop-loss protection.

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Guy Carpenter is a leading global risk and reinsurance specialist with 3,400 professionals in over 60 offices around the world, delivering broking expertise, strategic advisory and industry-leading analytics. Guy Carpenter is a business of Marsh McLennan (NYSE: MMC), the world's leading professional services firm regarding risk, strategy and people.



An aerial photograph of a large concrete dam on the left, a paved road with a white car in the center, and a body of water on the right. The text 'PartnerRe' is in the top right. A red square is on the right side. A red banner with white text is at the bottom. The background is a mix of concrete, asphalt, and water.

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HealthClaim Review® (a Considine & Associates Inc. company) performs physician specialist audit and hospital/facility bill review services to ERISA groups, TPAs, health plans, MGUs and stop-loss carriers. Hospital bill audit and negotiation is provided on a flat fee basis - customized by case. We also provide DRG Record Validation and Medicare repricing.

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PartnerRe is a leading global reinsurer that helps insurance companies reduce their earnings volatility, strengthen their capital and grow their businesses through reinsurance solutions. Risks are underwritten on a worldwide basis through the company's three segments: P&C, Specialty, and Life and Health. PartnerRe is a leader in Health Reinsurance and Stop-Loss Markets with a focus on exceptional partner relationships.

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Reinsurance Group of America, Incorporated (NYSE: RGA), a Fortune 250 company, is a global leader in group and individual life and health reinsurance. RGA's U.S. Group Healthcare team offers comprehensive solutions for the managed care and employer stop-loss market and is known for deep actuarial, underwriting, claims, and clinical expertise.

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Ringmaster is a cloud-based healthcare software provider for self-funded experts providing automated workflow optimization solutions and analytical tools for Stop-Loss management and Pharmacy Benefit consulting, which drastically reduce the processing time and complexity needed for quoting, contracting, and policy administration. Realize the Possibilities – Step into the Ring.

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The Risk Strategies Reinsurance team has one focus: helping our clients achieve their business goals. Our team brings a web of industry relationships, proven results for over twenty years, and analytic depth to support our client's growth, profitability, risk management, expansion, and innovation objectives. From carrier, reinsurer, distribution, actuarial, product development and claim management, we have arrayed resources with our team's broad experience to carefully structure each program to meet and exceed the client's individual needs.

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RiverStone is a group of insurance, reinsurance, and service companies specialized in the acquisition and management of commercial and alternative risk liabilities. Run-off transactions are becoming commonplace as business needs and markets change. RiverStone offers the expertise and proven strategies to provide sustainable solutions companies can count on.

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Summit Re is a managing general underwriter and reinsurance advisor working with self-funded employers, TPAs, health insurers, provider groups, and managed care organizations throughout the US. We help our customers analyze, manage, and transfer risk to protect their financial stability.

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Trean Re's areas of expertise include developing independent carrier relationships; reinsurance placement, negotiation, and servicing; consultation to HMOs, MGUs, TPAs and insurers on stop-loss insurance; and captive stop-loss development and implementation. Trean Re is set apart as an intermediary in connecting Trean Insurance Group's A-rated carriers to program partners.



# Subrogation

## Davies

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Intellivo provides technology-enabled pre-bill and post-pay TPL identification and full recovery solutions for complex claims that improve payment accuracy, maximize savings, increase recovery speed, and provide a positive experience for providers and patients and for health plans and plan members. For more information, please visit [intellivo.com](http://intellivo.com).

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MultiPlan is committed to bending the cost curve in healthcare. Our focus is on identifying medical savings, helping to lower out-of-pocket costs, and reducing or eliminating balance billing. MultiPlan delivers value to more than 700 healthcare payors, over 100,000 employers, 60 million consumers, and 1.4 million contracted providers.

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The Phia Group, LLC is an experienced provider of healthcare cost containment techniques offering comprehensive consulting services, legal expertise, plan document drafting, subrogation and overpayment recovery, claim negotiation, and plan defense designed to control costs and protect plan assets.

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# Technology Products/Services

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## Arcuity ai, Inc.

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Benefitfocus — a Voya Financial Company — is a benefits administration services and technology company committed to helping organizations and their people get the most out of their healthcare and benefit programs. This includes data analytics and services that aid plan sponsors with insight and actions to improve the health of their population and control cost.

## Claros Analytics

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Claros Analytics provides next-generation analytics to model, price and predict health benefits cost. Clients, including stop-loss carriers, underwriters, health plans, reinsurers, benefits advisors, TPAs, and service providers, are achieving competitive advantage by pricing risk, modeling health plan changes, defining self-funded opportunities, and developing self-funded budgets and reserves using our sophisticated predictive algorithms.

## ClearCost Health

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ClearCost Health is a customizable provider search and price transparency solution. Our expertise lies in working with large self-funded employers, health plans, TPAs, and other partners to build a search tool unique to each individual plan and benefit offering.

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Deerhold transforms the availability and ease of use of contracted rates between providers and payers, assisting self-funded employers, brokers, networks, and analytics companies with insights through its powerful price transparency products - Contract Rate Explorer (CRE) and TARA. By providing seamless access to Payer MRF data, Deerhold's CRE offers rates for any given provider, market rate analysis, and benchmark data to assist all parties in comparing and evaluating networks. Additionally, through TARA, employees can confidently shop for healthcare services, understanding their cost share prior to incurring services. Deerhold's mission is to enhance transparency and accessibility in healthcare pricing, ensuring all stakeholders can make informed decisions with ease and confidence.

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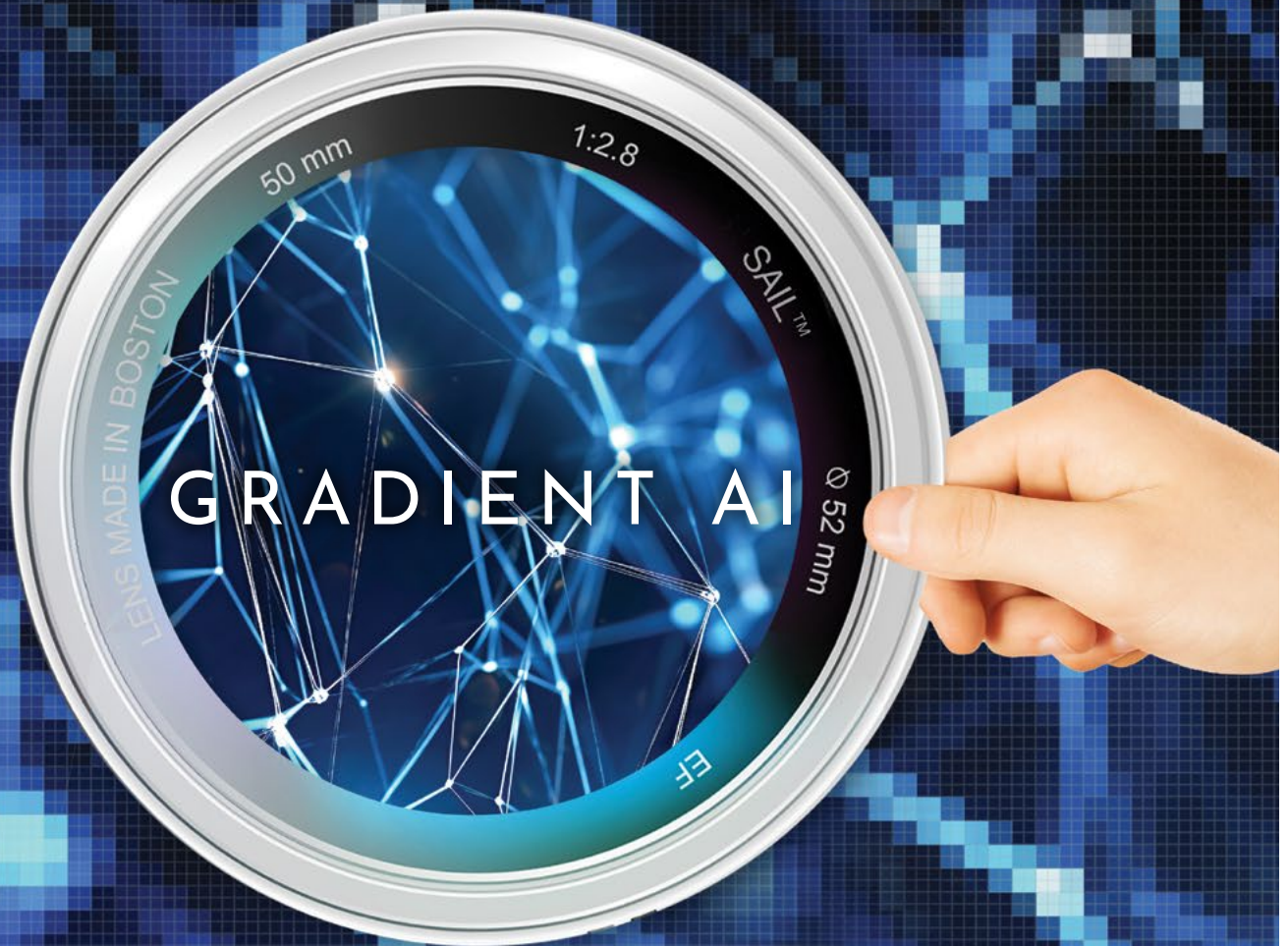


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HealthCorum is a health data analytics company that identifies providers delivering high-value care when compared to their peers. HealthCorum's Quality Scores are served alongside price transparency data in provider search tools, which are leveraged by care navigators and employees nationwide to improve the provider selection process and optimize outcomes.



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Peek is a game-changing prescription shopping solution offering its users the ability to compare prescription cost options in one easy-to-use platform. Peek helps both employers and employees manage costs more effectively.

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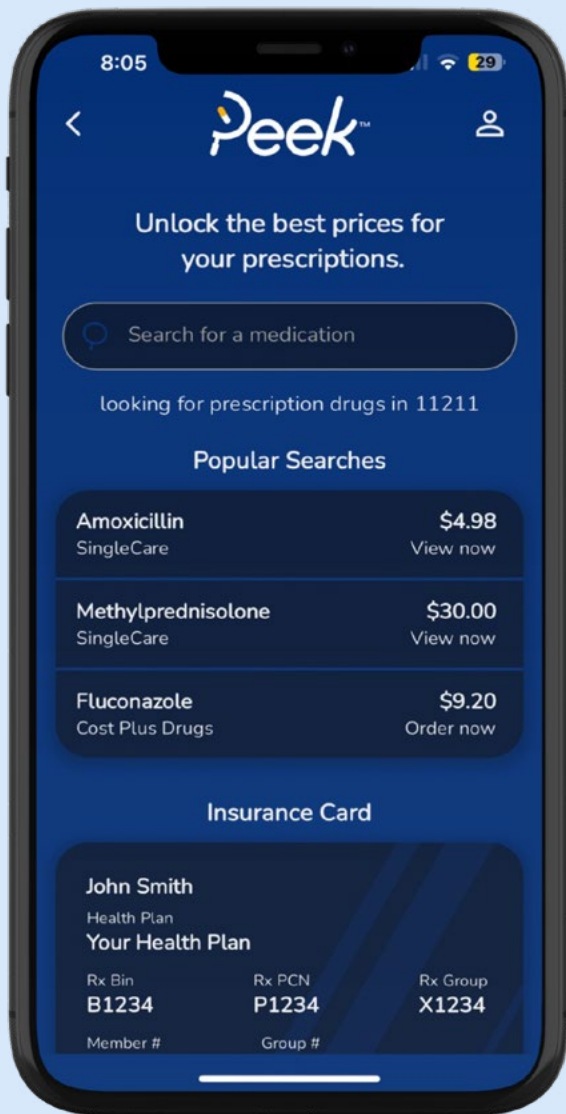
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VBA is a healthcare technology company on a mission to enable payers to deliver a better experience for all. Our integrated suite of solutions helps payers face the challenges of increased costs and changing regulations. Together, we can reduce the administrative costs of healthcare and positively impact member outcomes.

## Verikai

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Verikai provides the trusted predictive data and risk platform for health insurance companies, enhancing underwriting precision and efficiency. Our AI-powered platform delivers actionable insights into millions of individuals' lifestyles and medical backgrounds, enabling insurers to make precise risk assessments and drive profitable growth.

## Wellnecity

### John Quinn, Founder and Chief Executive Officer

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Wellnecity's Smart Hub simplifies self-funded health plan management by integrating the entire ecosystem of health plan vendors and their data (not just claims) for proactive and objective performance monitoring. This results in cost savings, higher utilization, improved member outcomes, and reduced fiduciary risk - with a guaranteed positive ROI.

## WellRight

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WellRight's powerful digital wellbeing platform is a high-touch solution focusing on holistic health through a tailored member experience. Backed by our highly consultative, hands-on approach, WellRight's flexible technology empowers you to build an effective program that delivers real results, increases client satisfaction, and sets you apart.

## WLT Software

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Benefits administration software, insurance adjudication.

## Zealic Health

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Patient Centricity is our focus, and our digital companion is our tool to realize that focus. One Companion, Many Experiences, Better Results. Build a support ecosystem that adapts to each patient - their interactions, their situation, their preferences - to provide them with the best experience that fits their needs.

## Zelis

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Zelis is modernizing the healthcare financial experience by providing a connected platform that bridges the gaps and aligns interests across payers, providers, and healthcare consumers. Zelis sees across the system to identify, optimize, and solve problems holistically with technology built by healthcare experts – driving real, measurable results for clients.

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# Third-Party Administrators (TPAs) Life and Health/Employee Benefits

## 90 Degree Benefits

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90 Degree Benefits is your benefits advocate dedicated to delivering solutions that exceed our clients and their members' unique benefit and budget needs. We take the challenges of costly and complicated health plans and turn them into new opportunities for you and your employees.

## ACS Benefit Services, LLC

### Diane McMahon, Market Analyst

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ACS offers innovative products and services available in the employee benefits marketplace. Over the past four decades, we are proud to have grown into a leading TPA by focusing on the future of the industry and creating long-term health plan solutions for our employer groups.

## Aither Health

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Aither Health is a healthcare solutions company offering a full suite of innovative products and services for third-party administrators and risk-bearing entities such as self-funded employers, health plans and providers.

## Allegiance Benefit Plan Management, Inc.

### Stephen Tahta, President & General Manager

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At Allegiance, we measure our success by the value we deliver to our customers. We take the consultative, team-based approach with each of our clients to be their overall resource for employee benefits. Our experience, flexibility and technology ensure fast, accurate claims processing together with high-touch customer service.



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*Since 1993, BRMS has partnered with employers all over the country. We work endlessly to provide unique solutions that enhance benefit plans to fit the needs of the client and elevate their member experience.*



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## **Allied Benefit Systems, LLC.**

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Allied is a national healthcare solutions company that supports healthy workplace cultures. Founded in 1980, Allied has grown to be one of the largest third-party administrators in the United States. We customize self-insurance solutions to align with individual choice and organizational needs while providing industry-leading medical and cost management strategies.

## **Alpha Isle Services**

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Alpha Isle Services LLC (AIS) is a specialist medical stop-loss claims administrator. It provides outsourced claims administration services to managing general underwriters, insurance companies, brokers, captives and self-funded employer groups. AIS also provides operational assessments, claims audits and reserve analysis.

## **AmeriHealth Administrators**

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AmeriHealth Administrators, Inc. has a history of innovation in managing self-funded health plans and providing business process outsourcing services for insurers and payers. We listen, anticipate, and respond by leveraging technology and carefully crafting strategies, tools, and services to help customers manage solutions for next-generation health care. Visit <https://www.amerihealth.com/tpa>.

## **Amwins Accident & Health Underwriters, an Amwins Group Benefits Company**

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Amwins Accident & Health Underwriters is a specialty underwriter and program manager for A&H products, including stop-loss, hospital indemnity, and gap. Through our underwriting expertise, superior administration, innovative cost-containment programs, and customer service, we deliver solutions that help our clients, brokers, TPAs, health plans, and reinsurers win.





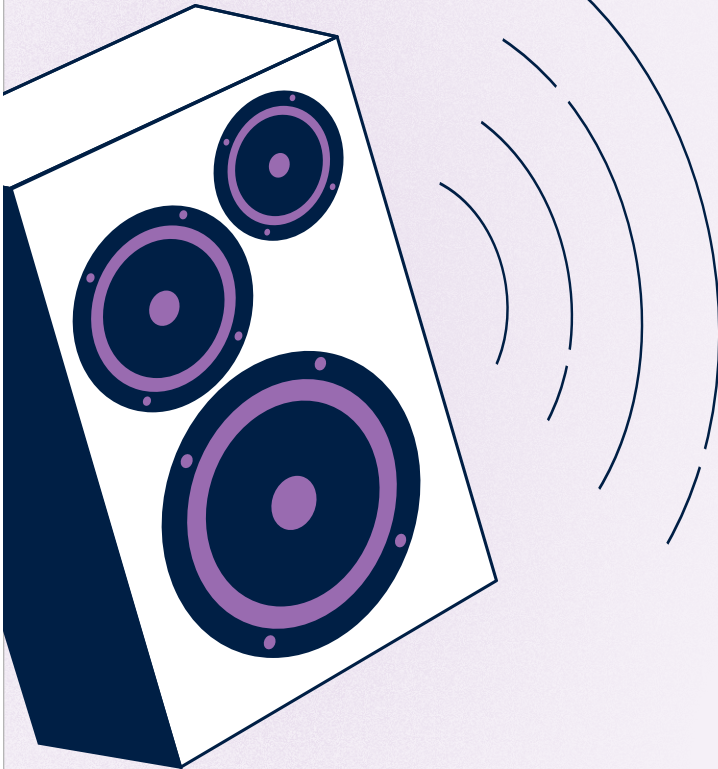
# WELCOME TO YOUR BENEFITS STUDIO

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Amwins Group Benefits created a portfolio of capabilities that span the benefits landscape and deliver them with hands-on service and expertise. Whether you need a partner for the day-to-day or a problem solver for the complex, our goal is that whenever you think of group benefits, you think of us.

## ASR Health Benefits

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ASR provides a complete range of benefit products and services to growing companies in a wide range of industries. Whether your group is large or small, local or national, ASR has the expertise to meet your employee health benefit needs now and in the future.

## **Avant Health**

### **Sidhartha Sinha, Founder & Chief Executive Officer**

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Avant Health is an AI-native TPA focused on better outcomes and lower costs for employers and employees through flexibility and hyper-personalization. We leverage disparate data sources and ecosystem partners to provide targeted interventions. Our AI-driven tech stack enables us to provide care management at scale and 24/7 customer service.

## **AvMed**

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AvMed offers a wide range of health plans and works with employers to deliver best-in-class service, affordable solutions and self-funded programs that maximize coverage, minimize hassles, improve health and control costs. We tailor our programs to meet the needs of employers, encouraging employees to live healthier lives.

## **Benefit & Risk Management Services**

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BRMS is a leading independent TPA that delivers integrated, end-to-end benefits solutions, including claims and benefit administration, ancillary solutions, and multi-employer administration. We empower businesses to optimize their employee benefit programs with integrated technology and customized service solutions. Experience better service, technology, and relationships with BRMS.

## **Cardea Benefits Limited**

### **Edison Raphael, Managing Director**

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We are a market leader in designing cost-effective, self-funded benefit plans by offering the highest quality claims management and administrative services through cutting-edge technology, access to real-time information and expertise and superior customer service. We are the only company in the Caribbean dedicated exclusively to Self-Insurance and Alternative Risk Transfer.



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



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*And more*

Our systems run on the latest technologies and hardware to ensure supportability and speed and to keep our software up-to-date with System Critical Support from all of our vendors.

As a strategic partner, we're dedicated to scaling our platforms to continue to meet our clients' evolving needs now - and in the future.



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**Have questions?**

Contact us. 908.274.0442 • sales@hi-techhealth.com



## CareFactor

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CareFactor is dedicated to partnering with our employer clients and their employees and dependents to provide all their benefit needs while exceeding expectations. Our service-focused environment is committed to respecting our customers and treating them as people, not numbers.

## CGS Health

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CGS Health offers customized, self-funded insurance plans to help businesses secure cost-effective employee health benefits. Partnering with A-rated carriers, we provide coverage tailored to your team's unique needs, avoiding unnecessary benefits or blanket premiums. Discover how CGS Health can save you time and money.

## ClaimChoice Administrators

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ClaimChoice is a visionary Third-Party Administrator and Benefits Studio specializing in flexible solutions that help employers navigate self-funding healthcare options. From personalized service to innovative offerings, we stay at the forefront of a constantly evolving marketplace. ClaimChoice is here to make a difference – one bold move at a time.

## Cobalt Benefits Group

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Cobalt Benefits Group is a family of trusted third-party administrator brands, including Blue Benefit Administrators of Massachusetts, CBA Blue, and EBPA. With over 60 years of experience, we help employers and brokers reduce costs, enhance quality, and improve the member experience through flexible, self-funded plans backed by the Blue network.

## Concierge Third-Party Administrator

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Our team of industry professionals focuses on providing excellent customer service in the self-funded space. We are a workhorse third-party administrator (TPA), not a show pony, and we let our core values guide us in creating a better way to handle health benefits for our clients.

## Consociate Health

### Darren Reynolds, JD, CBWA, President & Chief Executive Officer

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Consociate Health's continued growth is linked to our objective of turning the health plan from an expense to a performing asset. We partner with key consultants across the U.S. to deliver innovative results to our employer clients. We collaborate with National Provider Network options, Reference-Based Pricing solutions, as well as Direct-To-Employer custom network development. As a results-driven organization, we are disrupting the status quo, but not the member experience.

## Crescent Health Solutions

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Since 1999, Crescent has helped employers to administer and optimize their self-funded health plans by blending administrative services, clinical care management and cost management to drive better outcomes at a lower cost. As a not-for-profit, taxable corporation, we focus on delivering quality health plan management.

## Custom Design Benefits

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Custom Design Benefits (CDB) is a dynamic, service-oriented organization specializing in the administration of self-funded health benefits, compliance services such as FMLA, COBRA and consumer-driven services. Founded in 1991, Custom Design Benefits is the area's largest independent Third Party Administrator servicing brokers and employers in Ohio, Kentucky and Indiana and is a WBENC-Certified Women's Business Enterprise. We are recognized as a national leader in the development and implementation of reference-based pricing plans and other innovative cost containment services.



There are many companies with a mission.

# WE'RE A MISSION WITH A COMPANY.

We curate, integrate, and administer benefit plans with a specific expertise in savings for self-funded health plans. With over **150,000 lives** covered and **325 employers**, Point C is growing and **we want to help you grow, too.**

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## **D.W. Van Dyke & Co.**

### **Walter Roland, President**

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A&H Reinsurance Intermediary that works with carriers, reinsurers, distributors, MGUs, TPAs. We identify and secure reinsurance partners for insurers and MGUs. Product expertise in multiple lines with particular strengths in the ESL business and other healthcare finance. Annually conduct carrier and MGU survey, includes \$5+ Billion annual premium.

## **Decent**

### **Nick Soman, Chief Executive Officer**

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Finally, small business health insurance that doesn't suck.

## **Delta Health Systems**

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Delta Health Systems is a one-of-a-kind, privately owned, Third Party Administrator (TPA) unsurpassed with 50+ years of experience. Delta's product suite is unique with a robust wellness program, a data and analytics platform powered by Deerwalk, and Delta Navigator, an industry-first program that combines elements of concierge, coaching and provider steerage.

## **Difference Card**

### **Christopher Calderone, Chief Revenue Officer**

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Difference Card helps brokers to provide better health benefits to their employer clients at a better price. The MERP solution brings a partially self-funded strategy to small employers, with a track record of 18% net annual savings. Clients are financially protected by the Difference Guarantee.

## Direct Care Administrators

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We are a best-in-class TPA focused on medical, dental, vision and MEC plans. DCA is an integral component of administering self-funded benefits. Best of all, we're problem solvers and wholly aligned to drive your employee benefit costs down while elevating the entire experience. We're committed to helping our clients maximize their employee benefit package. Challenge us with the issues your groups are experiencing; together, we have the solutions!

## Diversified Group

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Diversified Group was built on the premise that self-funded plans are the most cost effective and transparent health insurance option for most companies across the country. We have been administering self-insured health plans for over 50 years. Our experience allows us to provide comprehensive and cost-effective approaches to healthcare.

## Eliance Health Solutions

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Eliance Health Solutions offers self-funded health plans powered by Penn Medicine to businesses with 15 or more employees. Our health plans help employers stabilize costs and help employees improve their health and well-being.

## Employee Plans, LLC

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Employee Plans places the health of the employee and your business first. We are the benefits administrator that employees, employers and brokers trust for creative benefit solutions and superior personal service.



# Trusted guidance

With decades of self-funded experience, we have developed best practices to eliminate the guesswork – providing the support you need.

**Tap into our industry knowledge.**  
[go.umar.com/experience](https://go.umar.com/experience)



A UnitedHealthcare Company

## Enthea

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Enthea is a licensed, third-party administrator of health plan benefits providing access to safe and affordable ketamine-assisted therapy via a national provider network. Ketamine therapy gets to the root cause of trauma, improving mental health by 89%. Enthea helps employers and employees save up to 75% of health plan and out-of-pocket costs.

## Five Wishes

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Five Wishes has helped thousands of employers ensure employees and their families get the care they want. It is a simple way to help employees do something that means a lot to them personally by helping them take good care of their loved ones. Employers who offer advance care planning have seen a reduction in unwanted healthcare costs while increasing trust and productivity throughout their organizations.

## Fringe Benefit Group

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Since 1983, Fringe Benefit Group and its affiliate companies have helped thousands of employers design and administer benefit programs for the prevailing wage market. During its history, the company has significantly expanded both its capabilities and offerings becoming a leading provider of benefits solutions for government contractors and variable-hour employers, including many Fortune 500 and ENR 400 firms.

## Group Benefit Services, Inc. (GBS)

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Serving as a Third-Party Administrator (TPA), Group Benefit Services (GBS) uses industry-leading technology to create and administer sustainable self-funded health plans. Established in 1992, today GBS develops custom benefit plans to meet the needs of a diverse set of clientele while building positive, personalized connections with members.



## Group Marketing Services, Inc.

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Group Marketing Services, Inc. has been offering group benefits to small and medium businesses since 1972. With offices in Kalamazoo and Grand Rapids, MI, we are able to serve your group insurance needs throughout Michigan, Indiana, Ohio and the entire Midwest. We offer and administer self-funded and fully insured Major Medical, Dental, Vision, Life and Disability insurance. We also offer COBRA and Flexible Spending Account administration. We pride ourselves in customer service and our ability to customize solutions to meet each employer's group benefit needs.

## Group Resources

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At Group Resources, we strive to act as a true partner for our clients in managing their medical spend. We are a source of knowledge for our clients, the broker/agent/consultant community and the healthcare industry at large.

## Health Plans, Inc. (HPI)

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HPI is a forward-thinking, national third-party administrator of self-funded health plan solutions with over 40 years of experience. Our entrepreneurial spirit, flexible and innovative approach, and commitment to quality, technology, and personalized service set us apart and enable us to deliver better value to our clients and their employees.

## Healthcare Management Administrators

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HMA has been a leading administrator of health plans for more than 35 years, expertly serving employers who choose to self-fund their health care. HMA partners with employers to build and deliver customized health plans designed to protect their two most important assets: their people and their plan dollars. Proving What's Possible in Healthcare®.

## HealthClaim Review® (Considine & Associates Inc.)

James Considine, MD, MBA, President and  
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HealthClaim Review® (a Considine & Associates Inc. company) performs physician specialist audit and hospital/facility bill review services to ERISA groups, TPAs, health plans, MGUs and stop-loss carriers. Hospital bill audit and negotiation is provided on a flat fee basis - customized by case. We also provide DRG Record Validation and Medicare repricing.

## HealthEZ

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HealthEZ is an independent health benefits innovator empowering clients to opt out of the one-size-fits-all traditional insurance models burdened by rising costs and lackluster service. HealthEZ specializes in self-funded and level-funded solutions that have proven to deliver superior cost containment, more predictable costs, and an industry-leading experience.

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In 2021, HNAS became a wholly-owned subsidiary of Highmark Health. We are a National third-party administrator since 1977. Our operational teams provide responsive, personalized service, making us your one and only stop for employee benefit solutions.

## HealthVue360

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Healthvue's claims administrative platform is built on Salesforce.com infrastructure. We focus on automating your business processes to decrease costs while delivering one-of-a-kind customer experiences. Best-in-class UI / UX; world-class security; intelligent reporting; 6,500+ APIs; and advanced AI & BI provide our customers with increased revenues while removing costs.

## Hi-Tech Health

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Hi-Tech Health builds claims administration systems that serve TPAs, Health Insurance Carriers, Provider-Sponsored Plans, Self-Insured Plans, Medicare Advantage, and more. Our company was founded in 1990 by a core group of developers who wanted to enhance the healthcare marketplace. The result is a SaaS, cloud-based platform that is completely customizable to meet any payer's needs.

## HRMP, LLC

### John Mange, President

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HRMP is a distinctive third-party administrator positioned to offer creative solutions to underwriters, insurance carriers, and reinsurers. Our unique solutions include back office or run-out administration, auditing services, life conversions, and more. We'll be there for you because Our Success Can Only Follow Yours®.

## Insurance Management Services

### Patrick Sanders, President

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WEB: [www.imstpa.com](http://www.imstpa.com)



A full-service TPA working with self-funded clients on their group health plan needs. We administer group health plans from start to finish. We also offer FSA, HRA, HSA, COBRA, STD administration, and anything else our clients need.

## Insurance Program Managers Group

### Gregg Peterson, Chief Executive Officer

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At Insurance Program Managers Group, we are committed to helping our partners and clients thrive by delivering superlative insurance products and services that can bring transformative change. That's why our mission, for over 25 years, has been to create comprehensive insurance solutions for those who trust in IPMG.

## Key Benefit Administrators

### Craig Frazier, Vice President, Human Resources

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Key Benefit Administrators was founded in 1979 as a full-service group benefits administration firm specializing in self-funded medical and chronic disease management plans. Since that time, the Key Family has grown to become one of the country's largest independently owned third-party administrators, supporting a wide variety of group benefit plans.

## Lucent Health

### Katie Volpentesta, Marketing Coordinator

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Lucent Health combines best-in-the-industry claims management with a compassionate, human-focused, data-driven care management solution. This delivers self-insured employers the type of care management that helps health plan participants make smarter, cost-saving healthcare decisions. The use of continuous data analytics provides ongoing insights that lead to better care management, ensuring that participants receive the right care, at the right cost, at the right time.

## Luminare Health Benefits

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Luminare Health's expertise and dedication to clients have propelled them to become one of the nation's leading administrators of self-funded employee health plans. With an innovative and evolving suite of solutions, Luminare Health designs personalized and comprehensive benefit plans — all aimed at reducing clients' healthcare spend without sacrificing access and quality of care.

## Marpai Health

### Laurie Gardner, Vice President, Sales Enablement

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Marpai is a TPA maximizing the value of self-funded health plans by creating the healthiest member population with the greatest cost efficiency. Marpai Connect, a member-centric offering, allows us to identify member needs and proactively connect them to proven solutions predicted to deliver positive outcomes.

## **Med-Pay, Inc.**

### **Marshall Kinne, President**

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Med-Pay is a full-service third-party administrator with over 35 years of experience. We support a diverse mix of employers through customized administration of programs, including self-funded health plans, Section 125 plans, HRAs and COBRA.

## **MedBen**

### **Brian Fargus, Vice President of Sales and Marketing**

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MedBen is a Midwest leader in Third-Party Administration for self-funded plans. We provide unique, proven cost-saving solutions, including medical, Rx, wellness/disease management, FSA/HRA plans, COBRA administration, plan analytics and stop-loss brokerage services. Self-funding Saves and MedBen Delivers.

## **Meritain Health, an Aetna Company**

### **Amy Bahadosingh, Administrative Assistant**

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At Meritain Health®, our goal is simple—take a creative approach to health care and build industry-leading connections. Whether you're building an employee benefits program, researching your member benefits or offering support to your patients, we're ready to help you do more with your health plan.

## **North American Risk Services (NARS)**

### **Amanda Jensen, Head of Marketing and Branding**

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North American Risk Services, Inc. (NARS) is a privately held, national third-party claims administrator that offers comprehensive claims and insurance-related services. Recognized in the industry for its flexibility, strong customer service and depth of insurance and claims knowledge, NARS tailors program administration to fit client needs.



## **Nova Healthcare Administrators, Inc.**

### **Todd Martin, Chief Sales Officer**

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Nova is an innovative health plan solutions company that rejects the notion of one-size-fits-all employee benefits. We use flexibility and creativity to improve holistic health plan performance and build a better experience, including DPC and RBP, in-house medical management, HSA, FSA and HRA products and a variety of private-labeled solutions.

## **Personify Health**

### **Kacey Rasmussen, Senior Vice President, Strategic Development**

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Personify Health is the industry's first personalized health platform that provides health plan administration, holistic well-being, and comprehensive health navigation — all in one place. With our human-centric, simplified approach, people engage with our app and live experts 19 times per month, saving significant time and money.

## **Planned Administrators, Inc.**

### **George Stiles, President**

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PAI is a nationally licensed TPA, delivering flexible solutions across group health plans, ancillary products, and P&C programs and offering innovative approaches to support client partners. We currently provide administrative services for both traditional self-funded accounts as well as providing business process outsourcing solutions for regional and national businesses.

## **Planstin Administration**

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Planstin administers your client benefit package to bring you additional options, streamlined processes, valuable benefits, and bottom-line savings. We administer customizable self-funded health plans so businesses can offer their employees high-quality care at an affordable price. By choosing self-funded benefits, you'll ensure you're only paying for what you're using, keeping the money in your business.

## Point C

### Robert Wolfkiel, Chief Growth Officer

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Point C is a National TPA organization with local market benefit administrators that delivers customized self-funded benefit programs. We curate, integrate, and administer plans with national and local provider solutions and progressive cost containment programs. With over 150,00 lives covered, we're growing, and we want to help you grow, too.

## Populytics, Inc.

### Stacey Asbell, Vice President, Operations & Health Plan Management

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Populytics is a population health management and analytics company that transforms health insurance claims and clinical data into actionable information. We are built on a foundation of legacy TPA experience and three decades of employer health plan management. We have also pioneered Populytics Health Management Solutions, a new direct-to-employer healthcare model that delivers high-quality and high value without the extra layers associated with major insurers. Additional services include benefits administration/consulting, care coordination, and well-being services.

## Ringmaster Technologies, Inc.

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Ringmaster is a cloud-based healthcare software provider for self-funded experts providing automated workflow optimization solutions and analytical tools for Stop-Loss management and Pharmacy Benefit consulting, which drastically reduce the processing time and complexity needed for quoting, contracting, and policy administration. Realize the Possibilities – Step into the Ring.

## Rocky Mountain Administrators

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RMA has provided exceptional personalized service to our self-insured clients since 2010. We are committed to not only providing plan participants with the most responsive and complete service while increasing savings. Our Mission: To provide exceptional service to our clients and their employees while responding quickly and efficiently to the ever-changing healthcare environment.

## **SISCO**

### **Dick Sigwarth, Senior Vice President**

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SISCO's results are too good to ignore. As an independent and privately held TPA, we work for our clients, not stockholders. We peel back the layers and do what's right, finding new, innovative ways to control rising healthcare costs and help our clients maximize the value of their plan. Our unique services include self-funded administration, fully integrated admin for insured ancillary benefits, and a licensed call center for professional member support. Our integrated approach means you have one point of contact for all your needs.

## **Southern Premier Administrators**

### **Lynn Smith, President**

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Southern Premier Administrators is a non-risk assuming, full-service TPA, delivering the highest quality of service. Through our team of dedicated Customer Care Specialists and Benefit Advisors/Analysts, we are committed to providing you with the worry-free, cost-effective service that you deserve.

## **Stealth Partner Group, an Amwins Group Benefits Company**

### **Kristy McLean, Marketing Director**

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Stealth Partner Group is a leading provider of premier medical stop-loss and ancillary wholesale services, offering unparalleled expertise in self-funding, plan administration, and account management for brokers, consultants, and third-party administrators. Our robust selection of offerings also includes best-in-class cost-containment solutions and specialized programs. With offices in 18 locations across the country, the Stealth management team offers its clients more than 150 years of collective experience in the stop-loss and ancillary insurance marketplace. This allows for productive connections with prominent carriers, proven negotiating techniques and streamlined management processes.

## **Strategic Underwriting Solutions, an Amwins Group Benefits Company**

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Strategic Underwriting Solutions (SUS), with its 25+ years of experience, brings unsurpassed expertise to the level-funded and traditional stop-loss marketplace. With a wide range of products, services and top-rated partners, SUS is uniquely qualified to assist all-size employer groups with their self-funded and consulting needs.

## **Summit Administration Services, Inc.**

**Alfred Gregory, President**

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Summit is a privately held TPA focused on high-touch service, price transparency, and providing truly unbundled benefit administration. Since 1996, we've administered Corporate, Government, School District, Multi-Employer Trust, and Tribal Self-Funded Health Benefit Plans. Summit is a leading administrator for Self-Funded Tribal W/C & Liability programs nationwide.

## **TrueClaim**

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TrueClaim is a modular and transparent healthcare TPA with proprietary technology that saves at least 7% of overall healthcare costs for self-insured companies. TrueClaim uses healthcare data and AI to save across billing errors, pharmacy and care navigation, all while improving care.

## **UMR**

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UMR, UnitedHealthcare's TPA solution, is the country's largest third-party administrator (TPA) of health benefits, providing customized solutions, cost-effective networks and compassionate service for self-funded medical, dental, vision and disability plans.

## **Unified Group Services, Inc.**

**Forrest Williamson, Vice President of Sales**

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Unified Group Services is a full-service third-party administrator (TPA) for self-funded group health plans dedicated to providing employers with the innovative programs, services and tools needed to effectively control employee health plan costs while also ensuring access to superior care.

## Välenz® Health

### Rob Gelb, Chief Executive Officer

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Välenz® Health is the destination for employers, payers, providers and members to reduce costs, improve quality, and elevate the healthcare experience. With fully integrated solutions on a platform to simplify healthcare, Valenz executes across the entire patient journey - from care navigation and management to payment integrity, plan performance and provider verification.

## VAULT Strategies

### Shawn Rutledge, Chief Strategy Officer

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Improving member lives by delivering exceptional healthcare solutions with compassion, innovation, and unwavering commitment to excellence. Vault's service ecosystem optimizes the administration of healthcare benefits, manages financial and clinical risks, and promotes cost containment and sustainability. This collaboration contributes to the delivery of high-quality, affordable healthcare services to its partners.

## Vitori Health

### Art Hoath, Chief Revenue Officer

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A modern TPA with a remarkable member experience built on next-generation fintech with 30% savings and 80+ Net Promoter scores. Our seamless platform includes medical and pharmacy benefits administration, network and provider-choice plans, preferred surgery contracting, and concierge member support. Our 3-Yr Level-Funded Plan is an industry first.

## WellNet Healthcare

### Keith Lemer, Chief Executive Officer

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Americans don't love our healthcare system – they tolerate it. Tired of paying more and getting less, companies join forces with WellNet to rebuild insanely efficient health plans. Now, at their own pace, businesses have a roadmap to tackle their #1 negotiable operating expense.



# Trade Associations

## **Captive Insurance Council of The District of Columbia, Inc. (CIC-DC)**

PHONE: (888) 302-4232

EMAIL: [info@dccaptives.org](mailto:info@dccaptives.org)

WEB: [www.dccaptives.org](http://www.dccaptives.org)

The Captive Insurance Council of the District of Columbia represents captive owners, service providers and professionals in the District of Columbia. CIC-DC advances the District of Columbia's presence in the captive marketplace, advocates on behalf of its members before state and federal policymakers, provides educational opportunities, and serves as a networking forum for members.

## **Delaware Captive Insurance Association, Inc. (DCIA)**

4023 Kennett Pike, Box 801

Wilmington, DE-19807-United States

PHONE: (888) 413-7388

EMAIL: [info@delawarecaptive.org](mailto:info@delawarecaptive.org)

WEB: [www.delawarecaptive.org](http://www.delawarecaptive.org)

DCIA's mission statement truly reflects the strategic positioning of this organization and the benefits to its members: "To serve as the unified voice of the captive insurance industry in Delaware and to support the development and growth of the industry through marketing, networking, education, and legislative initiatives".

## **HCAA**

### **Carol Berry, CSFS, Chief Executive Officer**

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For over 43 years, the Health Care Administrators Association (HCAA), a national membership-based trade organization, has fulfilled its core purpose by providing a collegial and inclusive environment through education and networking that focuses on the success of health benefit administrators. Our mission is to improve the quality, sustainability and value of self-funding and healthcare benefit administration.

## **Montana Captive Insurance Association, Inc. (MCIA)**

1302 24th Street West, #303

Billings, MT-59102-3861-United States

PHONE: (866) 388-6242

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The Montana Captive Insurance Association is dedicated to promoting the development and expansion of captive insurance programs within the state of Montana. As part of this mission, it provides its membership with unbiased industry information, networking, and educational opportunities. The association also acts as an effective voice for Montana's captive insurance industry in the legislative/regulatory process.

## **Self-Insurance Institute of America (SIIA)**

883 Northeast Main Street, 2nd Floor  
Simpsonville, SC-29681-United States  
PHONE: (800) 851-7789  
EMAIL: [info@siia.org](mailto:info@siia.org)  
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The Self-Insurance Institute of America is a national association whose members provide products and services that support the self-insurance marketplace. SIIA is committed to advocating for employers' right to self-insure by engaging with policymakers at the federal and state levels and works to build the self-insured community through education, networking, and mentoring programs.

## **South Carolina Captive Insurance Association**

**Annie Wilson, Executive Director**

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WEB: [www.sccia.org](http://www.sccia.org)



The SCCIA promotes the formation and growth of captives in SC. The SCCIA is an important resource for organizations that have or are considering a captive or providing professional services to those that do. The SCCIA holds numerous events annually, including our conference, webinars, and the Friendly Society Restored breakfasts.

# Other

## 90 Degree Benefits

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90 Degree Benefits is your benefits advocate dedicated to delivering solutions that exceed our clients and their members' unique benefit and budget needs. We take the challenges of costly and complicated health plans and turn them into new opportunities for you and your employees.

## Advantria, LLC

### Larry Taylor, President & Chief Marketing Officer

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Cost containment company focused on Dialysis Claim Solutions and Catastrophic Claim Solutions.

## AscellaHealth, LLC

### Dea Belazi, Chief Executive Officer

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AscellaHealth, a global healthcare and life sciences solutions company, provides superior cost-containment strategies for managing specialty drug spend to captives, self-insured companies, at-risk providers, PBMs and regional health plans. Our core offerings include specialty and medical cost management, formulary and network design, custom clinical programs and data analytics to assess and maximize health outcomes.

## Chubb

### Waldemar Balzac, Assistant Vice President, Business Development, Accident & Health

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Chubb offers several solutions for groups and individuals. Our supplemental health products are guarantee issue. Our products include Supplemental GAP, Hospital Indemnity, Critical Illness, AD&D, Accident Medical Expense. We also have unique products like Essential Living Benefits. Our products can be distributed via multiple channels.

[166] [www.sipconline.net](http://www.sipconline.net)

## **CPR Strategic Marketing Communications**

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CPR Strategic Marketing Communications (CPR) serves publicly traded and privately held emerging healthcare companies as well as not-for-profit organizations to effectively position them for growth and expansion, industry leadership and success in the self-insured marketplace. Recognized for delivering innovative, multifaceted approaches and leveraging national and global networking opportunities, CPR develops and implements integrated strategies and content that deliver cost-effective branding and communications. Visit [www.cpronline.com](http://www.cpronline.com).

## **Davies**

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Davies Accident & Health Audit Services conduct audits across all industry levels, from TPAs through reinsurers for most administrators and risk-takers in the industry. We perform Aggregate Claim Audits, Specific Claim Audits, TPA Audits, MGU Audits, Carrier & Reinsurance Audits, Premium Audits, and Life & Disability Audits.

## **Denniston Data Inc (DDI)**

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DDI – the Healthcare Transparency Company – is an innovator in healthcare analytics, revealing transparency in quality and pricing. We help self-insureds and member portals identify the best doctors at the best prices by procedure, location, plan, or to compare by NPI or payer. Benefits include compliance, ease of use, better health outcomes, and lower cost.

## **HealthClaim Review® (Considine & Associates Inc.)**

**James Considine, MD, MBA, President and**

**Chief Executive Officer**

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HealthClaim Review® (a Considine & Associates Inc. company) performs physician specialist audit and hospital/facility bill review services to ERISA groups, TPAs, health plans, MGUs and stop-loss carriers. Hospital bill audit and negotiation is provided on a flat fee basis - customized by case. We also provide DRG Record Validation and Medicare repricing.

# Shocked by high medication costs?

Since 2017, the **ImpaxRX Medication Under Management™** program has provided high-cost drug-saving solutions for self-funded companies. Built on pillars of technology, personalized service, compliance, and effective management, our proven approach aims to achieve substantial savings for your clients.

Let's bring that same success to your clients.



Charlie Kane, VP Operations  
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## Hemophilia Alliance

Jennifer Borrillo, Senior Vice President Member and Community Relations

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The Hemophilia Alliance works on behalf of federally designated Hemophilia Treatment Centers (HTCs) with employers, self-insured plans, brokers, stop-loss carriers, and payers on cost containment while prioritizing high-quality, comprehensive care and integrated pharmacy services. The Hemophilia Alliance is a member organization made up of federally recognized HTCs with 340b Pharmacies.

## ImpaxRX

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For self-funded healthcare employers who need to provide high-cost specialty medications to their employees, ImpaxRX™ is a supplemental pharmaceutical solution that administers a proven proprietary process that will lower specialty medication costs for qualified individuals. Fees are calculated after the plan has saved the claim cost.



## **Insurance Program Managers Group**

### **Gregg Peterson, Chief Executive Officer**

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At Insurance Program Managers Group, we are committed to helping our partners and clients thrive by delivering superlative insurance products and services that can bring transformative change. That's why our mission, for over 25 years, has been to create comprehensive insurance solutions for those who trust in IPMG.

## **Midwest Employers Casualty**

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Midwest Employers Casualty (MEC) provides tailored workers' compensation excess insurance products to individual employers, groups and insurance companies nationwide. Midwest Employers Casualty helps customers take greater control of their costs by providing innovative solutions that will lower their total cost of risk. A+ rated. Member Company of W.R. Berkley Corporation.

## **Novo Connection, LLC**

### **Melissa Saturnino, Chief Operating Officer**

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Novo Connection is a self-funded technology platform that includes analytics, recommendations, quoting, program building, stop-loss shopping, and reporting capabilities all under one roof. By mining claims data, our platform makes intelligent recommendations to lower costs. Novo Connection offers everything from competitive stop-loss shopping to vendor implementation, making self-funding easy!

## **Ocozzio**

### **Zach Swenson, Vice President, Business Development**

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Ocozzio's team of self-funded marketing experts use industry knowledge and experience to help generate new business opportunities and drive revenue growth for our clients. From marketing intelligence and strategy to messaging, execution and reporting, Ocozzio is the marketing department you've always dreamed of but never thought you could afford.



# IPMG

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### **Robert Ferraro, Vice President of Sales**

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### **Robert Vogel, President**

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Pro Group Management oversees operations for management and investment strategies, as well as claims management of five Self-Insured Workers' Comp Groups insuring over 2,800 employers with 5,000 business locations and 80,000 Nevada employees. The Nevada Self-Insured Groups and their employer members represent over \$3.1 billion in Tangible Net Worth.

## **RAS - Risk Administration Services, Inc.**

### **Eddie Riveiro, Executive Vice President, Chief Revenue Officer**

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RAS is a leading monoline workers' compensation insurance provider in the Upper Midwest. As one of the largest writers of work comp insurance in the region, we offer a wide variety of services, including insured and self-insured work comp insurance, claims handling, managed care, and loss control.

## **Trilogy Consulting Group, Inc.**

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Trilogy is a focused consulting practice specializing in the performance of claim administration audits and operational reviews of all types - self-funded, excess loss and fully insured. Trilogy's clients include group employers, Taft-Hartley Funds, TPAs, MGUs, HMOs, Carriers, and Reinsurers. Trilogy also publishes The Trilogy Claims Administrative Handbook.

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