

FROM SIIA MEMBERS

SIIA Diamond, Gold & Silver Member News

SIIA Diamond, Gold, and Silver member companies are leaders in the self-insurance/captive insurance marketplace. Provided below are news highlights from these upgraded members. News items should be submitted to membernews@siia.org. All submissions are subject to editing for brevity. Information about upgraded memberships can be accessed online at www.siia.org. For immediate assistance, please contact Jennifer Ivy at jivy@siia.org. If you would like to learn more about the benefits of SIIA's premium memberships, please contact Jennifer Ivy at jivy@siia.org.

DIAMOND MEMBERS

THE PHIA GROUP OPENS NEW OFFICE IN LOUISVILLE

Louisville, KY - The Phia Group, LLC is pleased to announce the opening of a new office in Louisville, KY. Under the leadership of the newly appointed Vice President of Operations and Total Quality Management, Scott Byerley, Esq., this new location strengthens The Phia Group's presence in the central United States - just as it did in the west with its Boise, ID, office - continuing to allow The Phia Group to identify, recruit, and hire the most talented professionals, nationwide.

With a focus on subrogation and claims recovery, as well as other cost containment activities, the Louisville team shares the same passion as the entirety of the "Phia Family," to deliver robust yet affordable health benefits to as many hard working

Americans as possible. "We're very excited to bring The Phia Group to Louisville. This is a continuation of year after year growth for The Phia Group," remarked Mr. Byerley. "The Phia Family made this happen with their dedication and passion for everything cost containment and reducing the costs of healthcare."

"These days, it seems like everyone wants to meet virtually... but at The Phia Group, we feel being there still matters. By continuously expanding our physical presence, we are not only able to draw from an ever-expanding talent-pool, but we can also proudly say that our partners are also our neighbors," said Adam V. Russo, CEO of The Phia Group.



For more information regarding The Phia Group's Louisville Office, or to learn more about any of The Phia Group's other locations and services, please contact Tim Callender by email at tcallender@ phiagroup.com or by phone at 781-535-5631.

About The Phia Group

The Phia Group, LLC, headquartered in Braintree, Massachusetts, is an experienced provider of health care cost containment techniques offering comprehensive claims recovery, plan document and consulting services designed to control health care costs and protect plan assets. By providing industry leading consultation, plan drafting, subrogation and other cost containment solutions, The Phia Group is truly Empowering Plans. Visit www. PhiaGroup.com.

ARLENE CAYETANO AND JIM MCENTEE JOIN ELMC RISK SOLUTIONS' IOA RE DIVISION, EXPANDING THEIR LABOR AND **PUBLIC SECTOR FOCUS**

East Norriton, PA -- IOA Re, LLC ("IOA"), a subsidiary of ELMC Risk Solutions, LLC, ("ELMC") is pleased to announce that Arlene Cayetano and Jim McEntee have joined IOA effective September 1, 2019 and will head a new division of IOA under the brand, CM Risk Management.

The addition of Cayetano and McEntee as the leaders of the CM Risk Management team enhances IOA's reputation as a national leader in providing managing general underwriting services and strengthens ELMC's

growing portfolio of stop loss, reinsurance, and consulting services offered through IOA Re, RxReins, Sequoia Reinsurance, Rockport Benefits, AST Risk, and ELMC Rx Solutions.

Both Ms. Cayetano, who will be General Manager and Executive Vice President of the CM Risk Management Division, and Mr. McEntee, who will serve as Senior Vice President of Sales, are well known industry veterans with extensive experience in working with Taft-Harley Health Plans popular in the labor and public sector markets. CM Risk Management's team will be based primarily out of Indianapolis, Indiana.

Ms. Cayetano has more than 30 years of employee benefits underwriting and management experience. Prior to joining IOA Re, she served as the President and CEO of Greymatter. Prior to that she was with AIG Benefit Solutions as the Vice President of Underwriting.

Mr. McEntee has more than 30 years of experience in sales and business development within the public sector and labor markets. Prior to serving as Executive VP of Sales at Greymatter, he was the Vice President of Taft Hartley Sales for AIG, VP of Taft Harley Sales for HCC Life and also held leadership positions with Pacific Mutual Group, Safeco and Stop Loss International.

Richard J. Fleder, CEO of ELMC, stated "Arlene and Jim's knowledge of the Labor and Public Sector stop loss marketplace will allow us to serve these clients from the start with the highest standards of integrity, quality, professionalism, and performance."

John O. Parker, President of IOA is enthusiastic about bringing the CM team aboard, "We have great respect for Arlene and Jim, and believe their skills are an asset to and complement IOA's strengths. Their knowledge of the labor and public sector markets and sales and underwriting expertise combined with our superior back office and operations platform will broaden our appeal to the market."

Flexible health plan solutions for self-funded employers

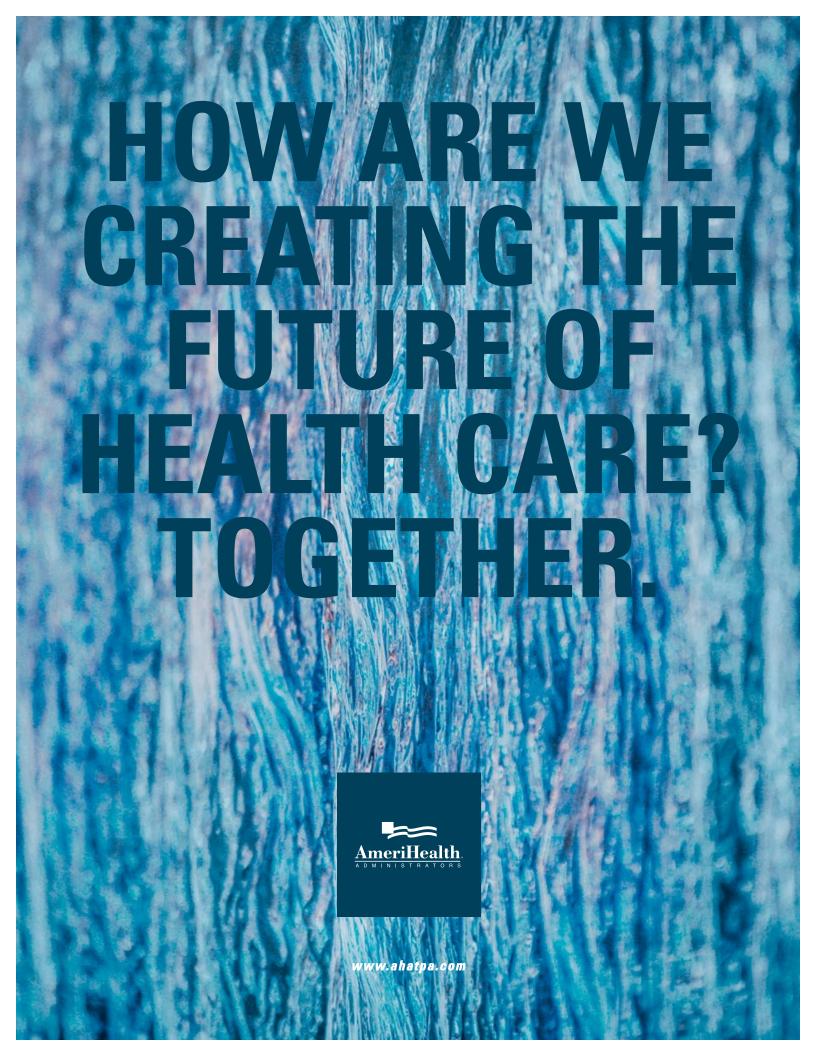
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Arlene Cayetano agrees with Parker's sentiment, "Joining the IOA team $\,$ will bring numerous benefits to clients, brokers and TPAs. IOA's resources will allow us to focus on delivering best in class stop loss solutions to the marketplace. We have been impressed with IOA's client-focused approach to its business and partners and believe this approach will bring the best of both worlds to clients and producers."

About ELMC

ELMC owns, manages and seeks to acquire premier MGUs across the nation that specialize in underwriting stop loss insurance for self-funded health plans as well as reinsurance for providers and managed care companies. ELMC provides a best-in-class platform for delivering solutions to brokers, carriers and clients. Visit www.elmcgroup.com.

About IOA

IOA Re has operated in the insurance/reinsurance marketplace for more than 40 years and provided Medical Stop Loss services for more than 35 years. IOA Re is recognized as leader in the Medical Stop Loss industry for its creative, innovative, and profitable underwriting and the caliber of the services provided to clients. Visit www.ioare.com.

SYMETRA APPOINTS MIGLENA ROGAN VICE PRESIDENT OF UNDERWRITING FOR STOP LOSS

BELLEVUE, WA -- Symetra Life Insurance Company, a leading medical stop loss carrier for more than 40 years, announced that Miglena Rogan has joined the company as vice president, stop loss underwriting.

Ms. Rogan brings 14 years of strategic experience in medical stop loss and group benefits to her new role. Most recently, she led the Stop Loss Collaborative at Willis Towers Watson in St. Louis, where she also served as a director in their Health & Benefits division. She previously held senior actuarial roles at Ascension Health and Towers Watson in St. Louis.

"Symetra's stop loss unit is a cornerstone of our Benefits Division business line and a critical component of the solutions-driven product suite we offer employers looking to effectively manage their healthcare costs. Miglena's broad group benefits industry expertise spans strategic planning, risk management, plan design and

implementation. We are pleased to have her lead Symetra's stop loss underwriting team as we further expand and strengthen our position in the market," said Jeremy Freestone, senior vice president, Stop Loss.

Ms. Rogan reports to Mr. Freestone and is based out of Symetra's Enfield, Connecticut office.

Ms. Rogan is a Fellow of the Society of Actuaries, a member of the American Academy of Actuaries, and a Chartered Enterprise Risk Analyst. She earned bachelor's degrees in mathematics and in business administration with a concentration in finance from Truman State University in Kirksville, Missouri.

About Symetra

Symetra Life Insurance Company is a subsidiary of Symetra Financial Corporation, a diversified financial services company based in Bellevue, Washington. In business since 1957, Symetra provides employee benefits, annuities and life insurance through a national network of benefit consultants, financial institutions, and independent agents and advisors. Contact Diana McSweeney at (425) 256-6167, diana. mcsweeney@symetra.com and visit www.symetra.com.

AMWINS GROUP, INC. TO **ACQUIRE SPECIALTY GENERAL** AGENT STEALTH PARTNER **GROUP**

CHARLOTTE, NC -- AmWINS Group, Inc., a global distributor of specialty insurance products and services,

announced that it has signed a definitive agreement to acquire Stealth Partner Group ("Stealth"), an Arizona-based, independent full-service general agent (GA) specializing in medical stop-loss insurance.

In early 2020, Stealth will combine with Stop Loss Insurance Services ("SLIS"), an AmWINS Group company, to form the premier stop-loss general agency in the United States. Operating under the Stealth brand and led by Patricia Berridge and Harley Barnes, the combined firm will be part of AmWINS' Group Benefits division.

Berridge and Barnes will be highly focused on combining the best of both firms in order to provide exceptional products and service to retailers and their self-funded clients.

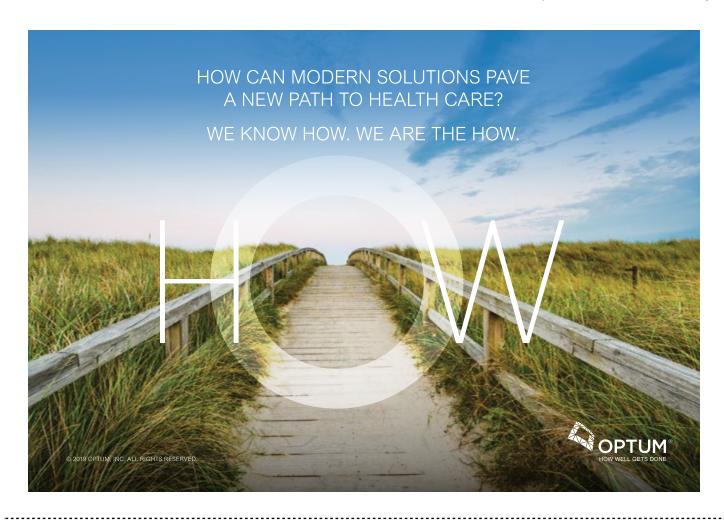
"We're excited to partner with Patty, Harley, and the entire team at Stealth," said Scott M. Purviance, Chief Executive Officer of AmWINS. "As the number of self-funded employer groups continues to increase, the addition of Stealth significantly expands our ability to empower brokers to provide stop-loss and cost containment solutions to their self-funded clients."

Based in Scottsdale, Ariz., Stealth has seven regional sales offices throughout the country. The incredible growth of the firm since its creation in 2009 demonstrates

how Stealth's comprehensive approach has resonated in the specialty GA space.

"We are looking forward to joining the AmWINS family and expanding our offering through this partnership," said Patty Berridge, co-founder of Stealth. "We know our employees and clients will benefit from the merger of two highly specialized firms, rooted deeply in the stop-loss space."

"The partnership between Stealth and SLIS will generate incredible value and opportunity for group benefits brokers and their clients," said Harley Barnes, co-founder of Stealth. "We look forward to working with Rebecca Bocek, Gerry Gates and the entire team at SLIS. Together, our two firms will provide us with unique access to all of the leading





and handles premium placements in excess of \$16 billion dollars annually. Visit www.amwins.com.

About Stealth Partner Group

Stealth Partner Group was founded in 2009 and has arown to be one of the largest specialized general agencies in the country. The firm partners with brokers, consultants, and third-party administrators (TPAs) to negotiate, implement, and assist in managing medical stop loss and ancillary benefits with the nation's top-tier carriers. With offices in Phoenix, Atlanta, Dallas, San Francisco, Denver,

stop-loss markets and enable us to build a wide range of other value-added capabilities that support our carrier partners, retail brokers, and their selffunded clients."

The transaction is expected to close in the fourth quarter of 2019, pending regulatory approval and customary closing conditions. Dowling Hales served as financial advisor to Stealth, Terms of the transaction were not disclosed.

About AmWINS Group, Inc.

AmWINS Group, Inc. is the largest independent wholesale distributor of specialty insurance products in the United States, dedicated to serving retail insurance brokers by providing property and casualty products, specialty group benefit products and administrative services. Based in Charlotte, N.C., the company operates through more than 115 offices globally Detroit and Charleston, Stealth offers its clients more than 125 years of collective experience in the stop loss and ancillary insurance marketplace. Visit www. stealthpartnergroup.com.

About Stop Loss Insurance Services, Inc.

Stop Loss Insurance Services, Inc. is the result of AmWINS Group's acquisition and concurrent merger of three of the leading medical stop loss insurance wholesalers in the industry in 2009: American Stop Loss, Health Benefits Solutions, and MedEx. Stop Loss Insurance Services, Inc. is one of the largest wholesale distributors of medical stop-loss insurance in the United States, representing over \$190 Million in annualized stop-loss premium. With over 30 years of experience, the company is able to leverage its collective expertise and relationships to provide clients with high-quality services and innovative solutions. Visit stoploss.amwins.com.

HM INSURANCE GROUP ANNOUNCES ROBERT MELILLO AS MANAGED CARE REINSURANCE VICE PRESIDENT

PITTSBURGH - Robert Melillo has joined HM Insurance Group (HM) in the role of vice president, sales and account management, for the company's managed care reinsurance line of business. In this role, he will be responsible for product distribution and new business development, along with the expansion of HM's market presence in the managed care reinsurance space.

"I've known Rob for years, and his understanding of reinsurance is exceptional," Tom Doran, president, HM Insurance Group, said. "He uses his high-level market knowledge to bring a consultative approach when working with partners and clients, and that aligns well with how we do business at HM."

Melillo has more than 20 years of insurance experience in underwriting, sales and product/business development across a variety of group benefit products, including managed care services.

Most recently, he served as a principal consultant for RJM Consulting where he provided subject matter expertise to the self-funded health care marketplace. Prior to that, he served as the second vice president and head of stop loss at Guardian Life and national vice president, Risk Financing Solutions, at USI.

Additionally, Melillo has worked at several other top insurance companies, including Sun Life Financial and GE Insurance Solutions (ERC), as well as in the Lloyd's of London market.

HM's managed care reinsurance product line includes health plan reinsurance and provider excess insurance. These products are designed to cover excess risk and work to reflect the changing dynamics of the health care market, aligning well with the company's employer stop loss products and solutions.

About HM Insurance Group

HM Insurance Group (HM) works to protect businesses from the potential financial risk associated with catastrophic health care costs. The company provides reinsurance solutions that address risk situations confronting employers, providers and payers. A recognized leader in employer stop loss, HM also offers managed

care reinsurance nationally. Through its insurance companies, HM Insurance Group holds insurance licenses in 50 states and the District of Columbia and maintains sales offices across the country. Visit hmig.com.

GOLD MEMBERS

WINDSOR STRATEGY PARTNERS APPOINTS PAUL FALLISI AS PRESIDENT, FOUNDER DAVID WILSON WILL CONTINUE AS CHIEF EXECUTIVE OFFICER

PRINCETON, NJ -- Windsor Strategy Partners Inc., a leading health care actuarial firm, announced that Paul Fallisi, FSA, MAAA has been appointed president. Fallisi succeeds David Wilson, FSA, FCIA, MAAA, founder of the company, who will remain in the role of Chief Executive Officer. His appointment is effective immediately.





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Fallisi has more than 30 years of health care actuarial and reinsurance experience. Prior to joining Windsor Strategy Partners in 2017, Fallisi served as president and CEO of Munich Re Stop Loss.

He was also a co-founder of Cairnstone Re, which was later purchased by Munich Re, and held actuarial and senior leadership positions at John Alden Life Insurance Company. Fallisi attained a FSA designation from the Society of Actuaries and is a Member of the American Academy of Actuaries (MAAA). He earned a bachelor's degree in Actuarial Science from Temple University.

"As Windsor Strategy Partners prepares for its next phase of growth, we wanted a leader with direct experience in helping companies achieve their goals," said Wilson. "I've worked with Paul in various capacities over the past 30 years and have always been impressed with his leadership, innovation and commitment to excellence. We believe Paul is an outstanding choice to serve as our company's next president and we look forward to his many contributions."

"I am very excited to accept the role of president," said Fallisi. "Since joining Windsor Strategy Partners, I have seen first-hand the organization's commitment and dedication to finding solutions to health care issues our clients are facing. I am very excited about serving in this important position and to build upon the organization that Dave and his amazing team have created and strengthen our position as a leading actuarial firm in the health care industry."

"I am thrilled to have Paul become part of our executive management team," said Jim Tillett, Windsor Strategy Partners' chief operating officer and chairman of the board of directors. "This is an exciting time for our company and the health care insurance industry. Paul has the experience, skills, passion and innovation to help take us to the next level."

About Windsor Strategy Partners

Windsor Strategy Partners is a leading healthcare actuarial firm specializing in pricing, program evaluation, product development, and portfolio risk management. Based in Princeton, NJ and founded in 2004, the firm provides actuarial services to a wide range of health care industry stakeholders including insurance companies, managed care organizations, investment groups, plan sponsors and health care entrepreneurs. Visit www.wspactuaries.com.

BERKSHIRE HATHAWAY SPECIALTY INSURANCE ADDS MIKE GASTINEAU TO MEDICAL STOP LOSS TEAM

Stop Loss Actuary, Michael "Mike" Gastineau has joined the Berkshire Hathaway Specialty Insurance Medical Stop Loss team.

Mike comes to BHSI from Tokyo Marine HCC and will provide his expertise in stop loss pricing to his new team. It will be a smooth transition as he has worked with several BHSI team members at previous companies. His contribution has always been of the highest value, and the BHSI stop loss team is excited to have him on board. Contact Mike at Michael.Gastineau@bhspecialty.com.

About Berkshire Hathaway Specialty Insurance Medical Stop Loss

We make choosing your Medical Stop Loss insurer simple. As part of Berkshire Hathaway Specialty Insurance, we come to the table with a name you know and trust. People with industry track records that span decades. And the financial strength to tailor your coverage, pay covered claims quickly...and keep pace with your evolving needs, year after year. Visit www.bhspecialty.com.

AMPS ENHANCES ITS STRATEGIC CONSULTING SERVICES WITH THE ACQUISITION OF INVENTAVIS

ATLANTA, GA -- Advanced Medical Pricing Solutions (AMPS), the pioneer in cost containment for the self-insurance industry, announced the acquisition of Inventavis, LLC, a leading strategic consulting firm founded by Lawrence Thompson and Steve Manzelli.

Inventavis services a wide range of customers through innovative, expert strategic guidance on a variety of business elements including new customer markets, programs, services and products for the Health plan vertical. Customer segments include health systems, insurance carriers, technology vendors, Third Party Administrators, employer groups, Taft Hartley organizations, associations, healthcare investors and select brokers/consultants.

"The acquisition of Inventavis strengthens our ability to form partnerships with health systems, Association Groups, TPAs and other strategic channels to deliver cost containment solutions to the health care market," explained Kirk Fallbacher, AMPS CEO and President.

With the acquisition of Inventavis, Lawrence Thompson is joining AMPS as Chief Strategy Officer. Larry brings 40 years of success in the benefit industry and will lead AMPS strategic initiatives with health systems, association plans, TPAs and other strategic channel segments.

His knowledge of administration, technology, compliance, plan design, reinsurance and the market will make him a critical resource for AMPS strategic partnerships and clients. Larry has worked for major insurance carriers, the Blues, TPAs and technology companies. He is a nationally recognized speaker on healthcare, has served on several association Boards and frequently works on State & Federal healthcare regulation.

Kirk continued, "We are pleased to have Larry join our team as Chief Strategy Officer. The rapid changes in the health care market require all companies to be strategic and nimble. We look forward to Larry helping position AMPS for continued growth.

Mr. Thompson said, "I am pleased to be joining the AMPS leadership team as I feel that the cost of US healthcare is the most significant problem our system has, and AMPS provides tools to address this issue. I look forward to guiding AMPS as we innovate and work with both health systems and self-funded employers in managing the cost of care based on value."

About AMPS

Advanced Medical Pricing Solutions (AMPS) provides market leading healthcare cost containment services for self-funded employers, public entities, brokers, TPAs, and reinsurers. AMPS mission is to help clients attain their goals of reducing healthcare costs while keeping members satisfied with quality healthcare benefits. AMPS leverages 15 years of experience in auditing and pricing medical claims to deliver "fair for all" pricing both pre-care and post-care. AMPS offers



innovative dashboards and analytics to provide clients with insights based on Plan performance. Visit www. advancedpricing.com.

PARTNERRE NAMES NICOLAS BURNET AS CFO TO SUCCEED RETIRING MARIO BONACCORSO

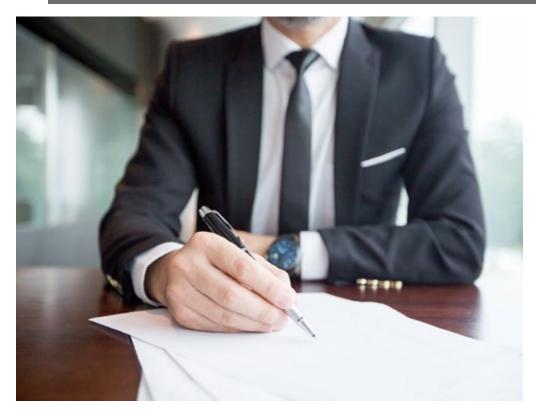
PartnerRe Ltd. has named Nicolas Burnet to succeed Mario Bonaccorso, executive vice president and chief financial officer, who will retire from the company on March 31. Mr. Burnet will join PartnerRe on Feb. 3.

He joins the reinsurer from the Zurich Insurance Group, where he was most recently chief risk officer and chief financial officer.

Mr. Bonaccorso, who is leaving to pursue an entrepreneurial venture with financial support from PartnerRe owner and Turin, Italy-based Exor S.p.A, will be invited to join the PartnerRe board of directors as a non-voting observer, the statement said.

"Nick brings deep experience in risk, capital, and finance functions in both the Life and Non-Life businesses that will benefit us as we continue to grow as a composite reinsurance company," PartnerRe President and CEO Emmanuel Clarke said in the statement.

Additionally, Andrew Gibbs was named to the newly created role of executive vice president and chief operations officer, effective Oct. 14, with responsibility for the company's end-to-end underwriting processes, including underwriting support, reinsurance accounting, claims, payments and collections, as well as its



legal, compliance and internal audit services, the statement said.

He joins from Maiden Reinsurance Ltd., where he most recently was executive chairman. Mr. Burnet and Mr. Gibbs will be based at the company's Bermuda headquarters.

SILVER MEMBERS

MAESTRO HEALTH ANNOUNCES DEPARTURE OF FOUNDER ROB BUTLER; APPOINTS CRAIG MALONEY AS NEW CHIEF EXECUTIVE **OFFICER**

CHICAGO -- Maestro Health, a leading all-in employee health and benefits company, announced its Board of Directors has accepted the resignation of Founder Rob Butler from the position of Chief Executive Officer and has appointed Craig Maloney as its next CEO, effective Oct. 7, 2019.

"The past five years at Maestro Health have been filled with major accomplishments, including the company's acquisition by AXA," said Butler.

"Together, we've enhanced our product and service offerings and gained operational efficiencies, and both AXA and I believe unwaveringly in our company's future success. Given the strength of our partnership and headway we've made in the market, I've decided that now is the right time to exit. I am grateful to the Board of Directors for supporting me in this decision to pursue new challenges. With AXA and our Maestro Health employees, let me be the first to welcome Craig to the Maestronite family."

Craig Maloney most recently served as president of Aon Voluntary Benefits and Enrollments Solutions Division, where he spent 20 years of his career.

Prior to Aon, he spent nearly ten years at Marsh Inc., a global leader in insurance and risk management. Bringing his rich experience in employee health and benefits, Maloney is prepared to further Maestro Health's mission and lead the company to its next phase of growth.

"I've observed Maestro Health from afar since its founding and have a great deal of respect for the company's history, vision, unmistakable culture and progress under Rob's leadership," said Maloney. "I am excited to join the company for many reasons, not the least of which is the mission to make employee health and benefits people-friendly again. My experience in the employee benefits space paired with Maestro Health's commitment to improving the healthcare experience for all will enable us to accelerate the execution of the company's key initiatives. I look forward to building upon the momentum I've seen thus far, together with a very talented team."

Maestro Health was created to simplify and personalize how people shop, enroll and live with their healthcare benefits. Upon its acquisition in 2018 by AXA, the worldwide leader in insurance and asset management, Maestro Health has expedited the shared mission to lower

healthcare costs, reduce complexity and empower consumers. Fully committed to helping transform the U.S. healthcare market, AXA has continued to invest in Maestro Health to help the company scale and industrialize their solutions.

"Rob Butler has been instrumental in maintaining Maestro Health's continued success," said Guillaume Borie, Chief Innovation Officer, AXA. "On behalf of the Board, we thank Rob for his passion and commitment to Maestro Health, its customers and employees, and wish him the best in his future endeavors. I am very happy to welcome Craig and have great confidence that he will further position Maestro Health for success. AXA is looking forward to accelerating the development of Maestro Health and

pursuing its efforts to bring new solutions and services to the U.S. healthcare market under Craig's leadership."

Maestro Health works with leading employers of all sizes and its customer base continues to grow rapidly, currently serving over 700 groups on its maestroEDGE™ platform.

With nearly 400 employees, including more than 80 hires since the start of 2019, it has also been recognized with some of the industry's most prestigious awards and accolades, including Fortune's "Coolest Companies to Work For," Chicago Tribune's "Top Workplaces," and ChicagoInno's "Coolest Companies." Maestro Health has also been recognized by the American Business Awards in the "Most Innovative Company of the Year" and "Tech Startup of the Year" categories.

I've become familiar with the business and its culture, and I'm confident in Maestro Health's strategy to improve health outcomes for consumers while lowering costs for employer and employee alike," continued Maloney. "I look forward to working in close coordination with the Board and the rest of the talented Maestro Health team to serve customers while acting as a disruptor in the space."



From operating rooms to board rooms, QBE is there.

No matter where you do business, you can trust QBE to deliver flexible solutions for self-funded and alternative risk structures. As an integrated specialist insurer, QBE applies deep technical expertise to deliver future-ready products, customized underwriting solutions and superior service — all backed by a strong balance sheet and well-diversified portfolio. Turn to QBE for the certainty you need to manage your business across the globe and discover what's possible, wherever you are.

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About Maestro Health™

Maestro Health makes employee health & benefits people-friendly again by delivering an all-in platform that works together to improve the health of employees while lowering costs and administrative burdens for employers. Maestro Health owns and operates the three most strategic components of an effective employee health & benefits program: (me) SELF-FUNDED BENEFITS™. (me) BENEFITS ADMIN 2.0™ and (me) BENEFIT ACCOUNTS™. The flexible solutions are designed and unified on a tech-meets-service platform, maestroEDGE™, so customers can customize their own HR suite based on what works best for their unique needs-all to optimize and simplify the way employees and employers shop, enroll and live with their benefits. Contact Lauren Metsig at 312.517.3521, Imetsig@maestrohealth. com and visit www.maestrohealth.com.

effectively. She will also support Niblack in ensuring that resource allocation and utilization reflects and facilitates the achievement of ACS' goals and strategic vision.

Davidson comes to ACS from Wake Forest Baptist Health/High Point Regional Health, where she has served for the past seven years as Controller and Director of Accounting. While there, she directed the accounting, consolidated reporting, and oversaw budgets, payroll, accounts payable, and audits.

Prior to working with the hospital systems, Davidson was the VP of Finance and Administration at United Way of Greater Greensboro for ten years, where she directed all financial operations and Human Resource functions. Before that, she worked as an auditor and tax manager.

"Lana brings an incredible breadth of knowledge and experience to the table," said Niblack. "Her stellar financial background and proven track record as a leader will be invaluable as we continue to maximize results for our clients, deliver profitable growth and drive business value across our product lines. We couldn't be more thrilled to welcome her to the ACS family!"

About ACS Benefit Services

Founded in 1982, ACS Benefit Services was formed on the realization that there needed to be better benefit solutions and health plans available in the marketplace. Since then, ACS has grown to be a leading third-party administrator by focusing on the future of the industry, creating long-term solutions, and predicting the benefit administration needs of our employer groups. Contact Kari L. Niblack, JD, SPHR, Chief Executive Officer, at KNiblack@ACSbenefitservices.com and visit ACSbenefitservices.com.

ACS BENEFIT SERVICES ANNOUNCES NEW CFO, LANA **DAVIDSON**

Winston-Salem, NC - Following a national candidate search, ACS Benefit Services has announced the addition of Lana Davidson, CPA, as the company's new Chief Financial Officer.

As a key member of ACS' executive team, Davidson will report directly to ACS CEO Kari Niblack and be responsible for directing the fiscal function of the company, including managing all financial activities and ensuring that day-today operations proceed efficiently and

GILSBAR, LLC NAMES DERREK BARFIELD STRATEGIC SALES DIRECTOR

COVINGTON, LA -- Gilsbar is proud to announce a title and role change expansion for Derrek Barfield from Senior National Sales Executive to Strategic Sales Director.

With this role expansion, Mr. Barfield will continue to grow Gilsbar in the Carrier Outsourcing marketplace with a focus on building relationships and creating partnerships.

Working with carrier and affinity partners has been a central part of Gilsbar's 60-year history, and this expansion is a commitment to investing in the capabilities to make those partnerships an even larger part of Gilsbar's organization.

With almost 20 years of experience, Mr. Barfield has successfully executed the role of Employee Benefits Department Manager, overseeing the reinsurance and account management functions for self-funded employer business.

In addition, he has managed several national life, medical and ancillary programs for carriers, and executed outside sales responsibilities for Gilsbar's fully-insured agency business.

"Gilsbar has been fortunate to partner with various insurance carriers and affinity/association groups across the country, especially in the past several years," shared Mr. Barfield. "As an independent administrator with a national footprint, we believe we are well positioned today and are eager to invest in additional capabilities to expand those carrier and affinity partnerships tomorrow."

Ryan Haun, Gilsbar Vice President, stated, "Gilsbar remains committed to investment and growth of this component of our business. Having industry leaders such as Derrek on our team will ensure success, and he has earned the recognition of his talent and efforts."

About Gilsbar, LLC

Established in 1959, Gilsbar, LLC® is one of the largest privately-held insurance services organizations in the country. Recognized as a catalyst for creating healthy businesses, Gilsbar, LLC® offers self-funded and fully-insured benefit plan management services, along with Wellness, Advocacy, and overall Population Health Management. Gilsbar, LLC's integrated delivery model improves the health and well-being of its members, resulting in significant health plan savings for its clients.

Gilsbar, LLC® has been honored by Inc. magazine for its sustained growth,
Modern Healthcare and Business Insurance magazines as a Best Place to Work,
and WELCOA and the American Heart Association for its proven wellness
methodology. Visit www.Gilsbar.com.



SIIA 2019

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