Rick Sigler

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**SUMMARY**

Career managed healthcare and IT executive with extensive software development and data analytics experience. Well versed in all aspects of managed healthcare and healthcare analytics. Recent work included high level responsibility for several Consumer driven healthcare applications, including Cost Transparency and Benefit Modeling. 34+ years of experience working exclusively with health plan clients.

**WORK EXPERIENCE**

**STARS, LLC , Grand Rapids, MI Jan 2014 – Present**

**(a wholly owned subsidiary of Advanced Radiology, PC)**

***Director of Decision Support and Information Systems****, January 2014 - Present*

* Primary responsibility for all data and analytical needs for the nation’s third largest privately owned Radiology Group (120+ Physicians and 100+ staff)
* As the Director of Decision Support, I directly supervise the analytic staff and also oversee the Data Management and Information Systems Teams.
* Accountable for the development and delivery of high level analytics and data reporting to assist the organization in managing a large diverse physician staff and patient billing operations.
* Currently developing a comprehensive strategic data warehouse, redefining roles and moving our analytics into big data and predictive modeling.
* Director level position with participation on the Quality and Leadership sub committees.
* Tasked with introducing Agile development techniques to the organization and rolling out the framework for all departments.
* Accomplishment – developed an analysis to rework our 3D Digital Mammography contracts to increase revenue from $66K to $139K per year.
* Accomplishment – Reduced outside consulting and contract programming from $100K+ per year, to $12K per year.
* Accomplishment – Saved $85k per year by replacing board of director software..
* Designed and implemented a Physician Productivity Program reducing required Physician FTE costs by $2million per year.

**Truven Health Analytics, Ann Arbor, MI Jan 2012 – Jan 2014**

**(now part of IBM Watson Health)**

*Core Product Manager, March 2013 – January 2014*

* Product Manager for all Consumer Applications at Truven.
* As the Core Product Manager for the consumer healthcare team, I championed product innovations from design and development through launch, delivering solutions that support business unit strategy.
* Accountable for the success of existing consumer products, as well as leading new market innovations through development.
* Products under my supervision included; Informed Enrollment, Treatment Cost Calculator, Personalized Messaging and Personal Health Insights.
* Key Clients included; GE, Cigna, Coventry Health and Kaiser.
* Lead product SME for client facing demonstrations, RFP’s and Webinars.

*Business Analyst, February 2012 – March 2013*

* Business Analyst for Consumer Products. Provided high level consulting and design expertise and served as the primary architect for their Estimated Out of Pocket calculations and solutions directed at Health Exchanges.
* Served as lead developer for an internal testing tool for our Informed Enrollment Product.
* Provided technical and business support for the 2012 Informed Enrollment season, resulting in the highest number of implementations in the products history.
* Primary lead on solution enhancements and industry knowledge for four separate Consumer based Healthcare applications
* After just ten months at Truven, I was asked to become the lead analyst for their Treatment Cost Calculator Product.
* Provided assistance on Prospect Demonstrations and RFPs as needed.

**The Griffin Consulting Group, Inc. Jul 1988 – Present**

*Independent Managed Healthcare Consultant*

* IT and management consulting and development in the Managed Healthcare Industry with extensive technology, database, reporting, analytical and systems experience. Positions include SQL Developer, Software Developer, Data Analyst, Business Analyst, Systems Analyst, Report Developer, Financial Analyst and IT Manager.
* Worked with dozens of health plans and organizations including:

AlohaCare Health Plan, Honolulu, HI; Medica Health Plans, Minneapolis, MN; Carolina Care Plan, Columbia, SC ; Total Health Care, Detroit, MI ; Grand Valley Health Plan, Grand Rapids, MI ; Prohealth, Indianapolis, IN ; Secure Health Plan, Macon, GA ; JMH Health Plan, Miami, FL ; Chartered Health Plan, Washington, DC ; Arnett Health Plan, Lafayette, IN; Inter Valley Health Plan, Pomona, CA ; Palmer & Cay, Milwaukee, WI, MVP Health Plan, Schenectady, NY ; MetroPlus Health Plan, New York, NY ; Network Health Plan, Appleton, WI ; Managed Care Services, Fort Wayne, IN ; Great Lakes Health Plan, Southfield, MI ; Queens Long Island Medical Group, Garden City, NY ; (many others)

* Key Client; Medica Health Plans – Minneapolis, MN; August 2009 to August 2011

Completed a 2+ year development effort with Medica to develop a comprehensive Book of Business Reporting system to support ongoing Medical Loss Ratio tracking. This involved triaging data from several different system platforms and designing a ground up product to provide MLR for all of Medicas’ business segments, including Fully Insured, Self Insured, Individual and Government. This solution was the first to tie out successfully to full year financial statements across all business segments and all employer groups.

* Key Client; AlohaCare Health Plan, Honolulu, HI; October 2010 to June 2011

Completed a ground up development of a company wide data warehouse and reporting data marts. Source claims system is Trizetto’s Qnxt. Architected a complete extraction from Qnxt into a more manageable reporting database with extensive custom management reporting capabilities.

* Key Client; JMH Health Plan, Miami, FL; November 2005 to 2012

Designed and maintain two separate data warehouses for JMH (80,000 Medicaid Members). One is based on extraction of claims data from IKA and the other from PowerMHC.

* Key client; DC Chartered Health Plan, Washington, DC; Jan 2008 to Aug 2009

Developed their corporate data warehouse; integrating data from several sources (110,000 Medicaid Members). Also developed numerous data import and export packages to support third party vendor relationships, including MedDecisions, Express Scripts, Vision, Dental and Lab Data and Managed Care.com

**Inter Valley Health Plan, Pomona, CA Dec 1984 – Jul 1988**

*Manager – Information Systems*

* Managed and supervised the work of 10+ employees. Responsible for all aspects of the Information Systems and Infrastructure for this Southern California HMO.

**CSC Healthcare Systems, Michigan Sep 1983 – Dec 1984**

*Programmer/Analyst*

* Provided programming, development and technical support for their Health Plan solutions.

#### ADDITIONAL

**Languages**: SQL, PICK

**Environments**: DB2, Sybase, SQL Server, Oracle, PICK, Perl, PostGres

**Applications**: Visio, Access, Excel, PowerPoint, Project, Word, Crystal Reports, Xcelsius, Cognos, iDashboards

**Training**: Internal Certificate for Agile Development techniques, Advanced Excel, internal HIPPA security Certificates, Certified by Pragmatic Marketing

**Agile Development**: Expertise with Rally Software Agile Development framework.

**Healthcare Systems**: Diamond, PowerMHC, PowerMHS, Amisys, Eldorado, Qnxt, Facets, United UP, Cosmos, Express Scripts, IKA, Trimed, HealthPac, EPIC

**Other healthcare experience and skill sets**: ETG’s, MEG’s, Ingenix, Advantage Suite, MarketScan, First Data Bank, ACG’s, 270/271 Transactions, 835/837 Transactions, HIPAA, HEDIS, HCFA-1500, UB Claims, DRGs, Medical Loss Ratio, Small Group Rating, Medicaid, Medicare, Health Exchanges, Radiology Group Billing and Operations

**EDUCATION**

**Oakland University, Rochester, Michigan Graduated: 1983**

*Bachelor of Science – Management Information Systems*