



North Carolina Insurance Guaranty Association

Annual Report



2013

INSURANCE GUARANTY ASSOCIATION

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General Organizational Information

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MESSAGE FROM THE CHAIRMAN

The past year has been busy for the North Carolina Insurance Guaranty Association. Of note:

- The Association refunded \$12.7 million to member companies. Three assessments totaling \$1.43 million were made during the year.
- The association activated for three insolvencies during the report year.
- The Board, Staff and Counsel continue to be engaged actively in a domestic company in rehabilitation to ensure that policyholders are provided the safety network promised by the Guaranty Act. This particular matter has proven to be more complex than past insolvencies and rehabilitations with which the Association has been involved, Staff and Counsel are doing an outstanding job in managing the matter at hand.
- Staff continues to remain heavily engaged at the national level of the guaranty fund system. This involvement helps protect the interests of our own Association as decisions made nationally have a direct impact on what ultimately transpires in North Carolina.

While working on all of the above, management has been able to reduce the Association's operating expenses by 5% and came in under budget for calendar year 2012.

The Board and management understand their roles as fiduciaries to both the citizens of North Carolina and to the member companies of the Association. That is why so much scrutiny is given to managing expenses. Additionally, the Association has an outstanding system of internal controls, and management is always looking for ways to improve such controls.

We certainly hope for a less eventful year ahead, but regardless of what may come, the Association is well prepared to handle it.

Allen Houck

Sincerely,
Allen Houck

BOARD OF DIRECTORS

The Plan of Operation provides that the Board of Directors consists of eight directors: seven elected directors, all of whom are member insurers, who shall serve three-year terms or until their successors have been elected and qualified, and one non-voting director, who shall be a property and casualty insurance agent authorized to write insurance for a member company and who is appointed by the Commissioner of Insurance to serve for a three-year term at the pleasure of the Commissioner.

Members	Representative
Allstate Insurance Company	Nancy Lemke
Integon Indemnity Corporation	Art Lyon
Liberty Mutual Insurance Company	Douglas W. Queenin
Nationwide Mutual Insurance Company	Jeanie Seidelmann
NC Farm Bureau Mutual Insurance Company	Allen Houck *
State Farm Mutual Auto Insurance Company	David Stoller **
Travelers Indemnity Company	Jessica Mayer
Non-voting Member	
Property & Casualty Agent	Delaine Bradsher

SUBCOMMITTEE

The Audit Committee oversees the financial activities of the Association and formulates recommendations for presentation to the Board of Directors.

Members	Representative
NC Farm Bureau Mutual Insurance Company	Allen Houck *
Liberty Mutual Insurance Company	Douglas W. Queenin
Nationwide Mutual Insurance Company	Jeanie Seidelmann

* Chairman

** Secretary-treasurer

MANAGING SECRETARY'S REPORT



Ray Evans
MANAGING SECRETARY, IGA

Those of you reading this who are management must have the same thoughts I occasionally have self-questioning the business decisions we make. Are the decisions correct, and do they remain correct as time passes? At the Guaranty Association, we remain responsible for insolvent insurers, often for decades, so decisions we make have lengthy timeframes and, in my mind, require us to reevaluate them periodically. A few of the more important decisions are maintaining a more than skeleton staff of insurance professionals, maintaining funds equivalent to claims reserves for most insolvencies and continuing to upgrade our processes, procedures and electronic support. These are decisions that have been made over a period of time to guide us and make certain that our primary purposes, "...to provide a mechanism for the payment of covered claims...to avoid excessive delay in payment...to avoid financial loss to claimants or policyholders of insurer insolvencies...and to provide an association to assess the cost of such protection among insurers," are fulfilled.

Well, perhaps we needn't wonder any longer as each of these, as a result of several recent insolvencies, has been put to the test the past several months, and it appears they are still correct and relevant. Let me explain. These insolvencies primarily involve two carriers, one of which has been in run-off for about 10 years, and the other a relatively sudden event. These insolvencies involve nearly 200 claims, primarily workers' compensation. Not overwhelming perhaps, but consider that for one of the insolvencies, the claims are at least ten years old, and for the other insolvency, claims were handled by more than a dozen independent third party administrators (TPA's), rather than the carrier. All the TPA's had different claim systems and methodologies,

and most concerning, the files and supporting data are in a state of disrepair at best, with conflicting data becoming available.

What's the big deal you might ask? Well, the big deal is that since we have a person or two more than the claims count might suggest is appropriate (that is, we retain experienced associates), we have built up reserves for existing insolvencies (eliminating the need for new insolvencies to compete for assessments), and we have a robust platform on which to work (able to handle multiple formats), we can manage the new ones and respond to them and maintain the purposes of the Guaranty Association by taking care of customers and insurers. Over the past two months, I have averaged a couple of calls a day from claimants, adjusters, agents, attorneys and medical vendors about particular claims. In every case, I take the information and tell the caller I will switch it to one of our claims staff, but, if there is a problem and you don't believe you are being helped, call me back. Thus far I have heard from exactly no one.

What this means is that our strategy, with advice from counsel and support from the Board, has survived another test and enabled us to respond to a couple of hundred new claimants, most likely with many millions of dollars in future claims, "to avoid financial loss." It is also really important to have an experienced staff who understand and care that we fulfill our obligations.

A handwritten signature in black ink that reads "Ray Evans". The signature is written in a cursive, flowing style.

FINANCE DIRECTOR'S REPORT



David Sink
DIRECTOR, FINANCE

\$430,000 during the past year.

The Association realized net investment income of just over \$1.3 million, which represents a yield of about 1.7%. The low-interest-rates environment continued through the past year, but the Association's portfolio remains appropriately positioned to meet our liquidity requirements and forecasted obligations. Reports reflecting the portfolio activity are provided to the Audit Committee of the Board each quarter, and all transactions were in compliance with the Cash Management and Investment Guidelines at the time of purchase.

Net claim and claim expense payments approximated \$6.0 million, which represents a decrease of \$1.7 million—just under 22%—from the prior year. The administrative expenses increased about 10% from the previous year, which is primarily attributable to the increased activity involving Counsel due to the complexity of recent and pending insolvencies. As of the end of this report period, the Association's claim and claim expense liabilities totaled \$78.8 million, which represents an increase of approximately 25% over the last 12 months.

We believe we are prepared to face the challenges of the recent insolvencies while we ascertain more definitive reserve information. Until then, we will rely on the current financial position of the Association and will try to minimize assessments to the extent possible. We wish to express our appreciation to our Board of Directors, Committees, Counsel and member companies for their assistance in fulfilling our statutory responsibilities.

David Sink

David E. Sink
Director, Finance

As another year and report period come to a close, the North Carolina Insurance Guaranty Association's financial position remains strong and stable. In spite of the Association's activation with respect to new insolvencies, the more mature insolvencies remained well funded based on our recent estimate of reserves. The assets of the Association approximated \$72.9 million as of August 31, 2013—albeit down about 7% or \$5.2 million from a year ago. Substantial distributions from various insolvency liquidators during the past year enabled the Association to refund \$12.8 million to its member companies for several older insolvencies, while a few less-funded ones necessitated assessments of only

REPORT OF NCIGA COUNSEL

In the past year, after a period where there were relatively few new insurer insolvencies, the Association activated in connection with three new insurer insolvencies. After long times in rehabilitation, Frontier Insurance Company and The Lumbermen's Mutual Group were placed into liquidation in New York and Illinois, respectively. In addition, the Association activated in connection with ULLICO Insurance Company, a Delaware insurer. The outstanding claims against these insolvent insurers are predominately workers' compensation claims, and the Association is actively administering the claims. To this point, none of the claims has involved direct claims against the Association, and counsel and the Association staff will continue to monitor any developments that could lead to litigation involving the Association.

In North Carolina, the Association has been involved in outstanding issues related to two North Carolina domestic insurers. In connection with CAGC Insurance Company, currently in rehabilitation, the Association has been actively involved in proceedings pending in the Superior Court for Wake County. In that rehabilitation proceeding, the Association has intervened and sought a declaratory ruling from the Court that the Association has no obligation for certain claims arising prior to July 1, 2008, because those claims arose as self-insured claims against a former group self-insurer, CompTrustAGC of North Carolina. The Association expects a resolution of these claims at the trial court level by the end of 2013. In the case of Commercial Casualty Insurance Company, the Association continues an active role monitoring developments on behalf of all state insurance guaranty associations.

The Association has continued its focus on legal issues arising from insolvent insurer estates. In the domiciliary receivership proceedings in Pennsylvania for Reliance Insurance Company and Legion Insurance Company, the Association continues to work with the domiciliary receivers on expense and reinsurance claim audits, large deductible recoveries and early access payments. In Virginia, the receiver of Reciprocal of America continues to consider a transaction that will transfer any of the remaining liabilities of that insolvent insurer to an assuming insurer, which will have the effect of terminating the Association's liabilities for any remaining claims. As the receivers make claim priority determinations for different categories of claims, the Association will defend its interests, as necessary, to ensure that the Association receives the maximum recovery on its claims against these insolvent insurer estates.

The Association and counsel remain proactive in monitoring events and developments that may impact the Association.



Christopher J. Blake
PARTNER,
NELSON MULLINS RILEY
& SCARBOROUGH LLP



Joseph W. Eason
PARTNER,
NELSON MULLINS RILEY
& SCARBOROUGH LLP



R. Mike Newton
DIRECTOR, IGA

DIRECTOR'S REPORT

In preparation for writing this year's Director's Message, I decided to review some prior Annual Reports for guidance in developing a timely topic. On review of those Reports, I found a common topic either discussed by Mr. Evans, our Managing Secretary, or myself, and that was stating our understanding of the Board of Directors' directives to the management staff. Those directives continue to be to carry out our duties as established by the NC Insurance Guaranty Association Act, to be prompt and fair in carrying out those duties, to continue working on improving our operations considering cost efficiencies and improvements of processes and infrastructure and to prepare for the next round of insolvencies.

Mr. Evans, in this Annual Report, reflected on the struggle to match resources to the workload while maintaining the "fire house" requirement of being able to respond quickly to a new insolvency and provide the insurance consumer safety network, which is the main responsibility of the guaranty fund system. The Association would receive major criticism by regulatory, legislative, trade industry or consumer bodies over a perceived failure of the Association to deliver in its role as the safety network. It is the Board's purview as to determining how efficient management was in providing that safety network.

With staff salaries comprising nearly 45 percent of the Association's annual budget, prudent stewardship requires

that we are "working smart" and remain mindful of the cost of providing this safety network. In evaluating our operation, one should note that, while our associates work together as "the team," we have two distinct roles: Claims Adjustment and Administrative.

The claims adjustment team, composed of adjusters and supervisory personnel, carries out the crucial role of adjudicating the entire claims process and effectively delivering on the promise to pay covered claims, to avoid excessive delay in those payments and to avoid financial loss to claimants or policyholders of insolvent insurers.

The administrative team is composed of direct Association management along with a portion of the shared resources of information services, human resources and accounting/financial services. This team is charged with such diverse duties as preparation for receipt of an insolvency; conducting board and audit committee meetings; serving on industry boards and committees; assessment for and investment of funds; recovery of net worth, reinsurance and large deductible obligations as required by statute to reduce our net payout; import and export of various data to multiple parties to perfect our creditor claim against the various insolvencies; providing the operational infrastructure in a secure setting and providing needed services for the associates.

Calendar Year	Net Claims and Expense Payments	Recoveries of Large Deductibles, Net worth, Estate Distributions	Assessments of Members	Refunds to Members
2008	\$ 12.4 million	\$ 6.2 million	\$ 11.6 million	\$ 0
2009	\$ 9.1 million	\$ 7.5 million	\$ 2.0 million	\$ 11.0 million
2010	\$ 9.6 million	\$ 21.0 million	\$ 7.5 million	\$ 10.3 million
2011	\$ 7.8 million	\$ 12.6 million	\$ 8.0 million	\$ 17.0 million
2012	\$ 7.0 million	\$ 8.7 million	\$ 1.4 million	\$ 12.8 million
Total	\$ 47.9 million	\$ 56.0 million	\$ 30.5 million	\$ 51.1 million

Our efforts for the last four years of operations in carrying out both the adjustment and administrative roles are reflected in the following table:

The table should reflect that, while the adjustment role of the Association was slowing its operations due to the closing of active files, the administrative side was quite active in its recovery and data transference roles. Again, our position was that the adjustment role required a minimum number of associates to be immediately ready to answer future insolvencies as their knowledge has to cover both policy and statute requirements. Indeed, our latest insolvencies of Lumbermen's Mutual Group (LMG) and ULLICO Insurance Company confirms our position as we have received in nearly 200 claims within a month's duration with liabilities estimated at \$20 million or more.

So what does the early stage of these insolvencies require of the associates so that we might begin fulfilling our duties of paying claims? On the administration side we participated

as members of the respective coordinating committees for these insolvencies from rehabilitation to liquidation status. The coordinating committees are populated by fellow state guaranty fund management and legal staff from the National Conference of Insurance Guaranty Funds. We met with the insurance regulatory parties overseeing the troubled companies to determine state fund exposures and work out the logistics of assuming the role as claims administrators of the claims from the failing companies. This required financial data conversion to a Uniform Data Standard (UDS) as required by the National Association of Insurance Committees (NAIC), determining the location and formatting of the claim files (both paper and electronic in both insolvencies), working out arrangements that eight weeks of temporary total disability payments were advanced to the Workers' compensation recipients so that payment was not disrupted, and working on the download procedures of the claims data into our core claims management and financial tracking software system.

Consequently we received the claim files or part of the files (as it developed) along with a paper mite infestation. The adjusters are still in the process of piecing together incomplete paper and electronic files that simply consisted of hundreds of PDFs, JPEGs, and Tiff images with no proper identification or clear prior adjusting notes. This is clearly forensic claims adjusting as we are in the process of contacting insureds, defense attorneys, plaintiff attorneys, prior case management workers, the NC Industrial Commission, medical providers, etc to get a clear picture of the claims and their status.

Additionally, most files require review of the policies as the deductibles, self-insured retentions, buy backs and commutation of certain policies (in LMG), and the difficulty in determining exactly who the insured is (Professional Employment Organization policies in ULLICO) bring into question the ultimate proper ownership the Claims. Now the process of actually adjusting the claims may begin!

Guess what? The Association is getting all this done in a timely fashion, thanks in large part to being veterans of the guaranty fund system. This ability to create clarity from chaos in prompt fashion is what allows us to continue fulfilling our roles as the consumer safety network.

R. Mike Newton

R. Mike Newton

Director, IGA

CLAIMS PAID DETAIL

	WC			Auto		
	Indemnity Paid	Expense Paid	Total Paid	Indemnity Paid	Expense Paid	Total Paid
Atlantic Mutual Ins. Co.	\$ 326,027	\$ 52,069	\$ 378,096			
Casualty Reciprocal	63,878	16,468	80,346			
Centennial Ins. Co.	108,660	7,880	116,541			
Credit General	259,088	33,246	292,334			
Employers Casualty	37,313	1,285	38,598			
Fremont Indemnity Co.	108,947	5,017	113,964			
Frontier Ins. Co.	1,971	-	1,971			
Home Insurance	154,683	43,987	198,670			
Imperial Casualty	97,498	12,325	109,823			
INSCORP Ins.	92,245	6,704	98,949			
Legion Insurance Co.	500,934	62,327	563,261			
Lumbermens Mut. Group	572,162	13,818	585,980			
Park Ave P&C	-	1,703	1,703			
PHICO Insurance	11,639	0	11,639			
Reliance Insurance Co.	1,596,297	127,847	1,724,144			
ROA Insurance Co.	127,949	-3,922	124,027			
Shelby Insurance Co.	27,380	19,824	47,205			
South Carolina Ins.	498,956	70,369	569,325			
ULLICO Cas. Co.	185,907	34,288	220,195			
Villanova Insurance Co.	1,421	41	1,462			
888 Mutual Trust	580,636	55,296	635,933			
999 Stock Trust	75,943	5,283	81,226			
TOTAL	\$ 5,429,533	\$ 565,855	\$ 5,995,389			

CLAIMS RESERVED DETAIL

	WC				Auto			
	Indemnity Reserve	Expense Reserve	Total Reserve	Files Pending	Indemnity Reserve	Expense Reserve	Total Reserve	Files Pending
Atlantic Mutual Ins. Co.	\$ 5,623,713	\$ 178,355	\$ 5,802,069	13	\$	\$	\$	
Casualty Reciprocal	1,453,607	66,113	1,519,721	8				
Centennial Ins. Co.	448,454	18,527	466,981	4				
Credit General	2,387,943	61,298	2,449,241	4				
Employers Casualty	410,965	35,688	446,653	4				
Fremont Indemnity Co.	1,029,194	20,547	1,049,741	2				
Frontier Ins. Co.	13,818	1,000	14,818	1				
Home Insurance	2,776,243	253,333	3,029,576	33				
Imperial Casualty	619,729	11,367	631,096	1				
INSCORP Ins.	794,786	45,721	840,506	3				
Legion Insurance Co.	6,490,947	228,738	6,719,686	29				
Lumbermens Mut. Group	13,829,393	258,082	14,087,475	48	195,711		195,711	3
Park Ave P&C	1,958,924	31,652	1,990,575	1				
PHICO Insurance	122,467	2,000	124,467	1				
Reliance Insurance Co.	18,354,130	1,079,782	19,433,912	69				
ROA Insurance Co.	2,726,839	91,596	2,818,435	12				
Shelby Insurance Co.	287,597	24,083	311,680	2	29,000	7,275	36,275	2
South Carolina Ins.	3,859,564	81,148	3,940,712	7	48,918	14,222	63,140	2
ULLICO Cas. Co.	4,311,601	759,812	5,071,413	86	2,000		2,000	1
Villanova Insurance Co.	130,465	6,433	136,898	2				
888 Mutual Trust	5,118,732	241,559	5,360,291	43				
999 Stock Trust	1,140,199	34,947	1,175,146	3				
TOTAL	\$ 73,889,309	\$ 3,531,781	\$ 77,421,090	376	\$ 275,629	\$ 21,496	\$ 297,126	8

	All Other		Total Paid	Total
	Indemnity Paid	Expense Paid		
Atlantic Mutual Ins. Co.		\$ -17,730	\$ -17,730	\$ 360,366
Casualty Reciprocal				80,346
Centennial Ins. Co.				116,541
Credit General				292,334
Employers Casualty				38,598
Fremont Indemnity Co.				113,964
Frontier Ins. Co.				1,971
Home Insurance				198,670
Imperial Casualty				109,823
INSCORP Ins.				98,949
Legion Insurance Co.				563,261
Lumbermens Mut. Group				585,980
Park Ave P&C				1,703
PHICO Insurance				11,639
Reliance Insurance Co.				1,724,144
ROA Insurance Co.				124,027
Shelby Insurance Co.				47,205
South Carolina Ins.				569,325
ULLICO Cas. Co.				220,195
Villanova Insurance Co.				1,462
888 Mutual Trust				635,933
999 Stock Trust				81,226
TOTAL		\$ -17,730		\$ 5,977,661
			Unearned Premium	
			Net Total	\$ 5,977,659
			Recoveries	502,563
			Gross Total Expenditure	\$ 6,480,222

CLAIMS PAID DETAIL

	All Other				Total	
	Indemnity Reserve	Expense Reserve	Total Reserve	Files Pending	Total Reserve	Total Pending
Atlantic Mutual Ins. Co.	\$ 60,002	\$ 86,382	\$ 146,384	3	\$ 5,948,453	16
Casualty Reciprocal					1,519,721	8
Centennial Ins. Co.					466,981	4
Credit General					2,449,241	4
Employers Casualty					446,653	4
Fremont Indemnity Co.					1,049,741	2
Frontier Ins. Co.	71,005		71,005	3	85,823	4
Home Insurance					3,029,576	33
Imperial Casualty					631,096	1
INSCORP Ins.					840,506	3
Legion Insurance Co.					6,719,686	29
Lumbermens Mut. Group	47,017		47,017	6	14,330,203	57
Park Ave P&C					1,990,575	1
PHICO Insurance	600,000	200,000	800,000	2	924,467	3
Reliance Insurance Co.	602	200	802	8	19,434,714	69
ROA Insurance Co.					2,818,435	12
Shelby Insurance Co.					347,954	4
South Carolina Ins.					4,003,852	9
ULLICO Cas. Co.					5,073,413	87
Villanova Insurance Co.					136,898	2
888 Mutual Trust					5,360,291	43
999 Stock Trust					1,175,146	3
TOTAL	\$ 778,626	\$ 286,582	\$ 1,065,209	22	\$ 78,783,425	398

CLAIMS RESERVED DETAIL

INSURANCE GUARANTY ASSOCIATION

BALANCE SHEET

Year Ending	August 31, 2013 (Preliminary)	August 31, 2012
Assets		
Cash (Checking Account)	\$ 1,200,000	\$ 2,739,856
Investments	71,700,000	74,903,776
Assessments Receivable	-	453,034
Other Assets	-	-
Total Assets	\$ 2,900,000	\$ 78,096,666
Liabilities & Fund Equity		
Accounts Payable	\$ -	\$ -
Claims Liability	74,950,000	60,088,580
Unearned Premium Liability	-	-
Claims Expense Liability	3,850,000	2,964,852
Other Liabilities	(1,689)	(1,689)
Total Liabilities	\$ 78,798,311	\$ 63,051,743
Fund Equity	(5,898,311)	15,044,923
Total Liabilities & Fund Equity	\$ 72,900,000	\$ 78,096,666

INCOME STATEMENT

Year Ending	August 31, 2013 (Preliminary)	August 31, 2012
Income		
Membership Fees	\$ 750	\$ 900
Interest Income	1,350,000	1,818,202
Assessments Income	430,003	1,599,453
Miscellaneous Income	14,300,000	7,271,035
Total Income	\$ 16,080,753	\$ 10,689,590
Expenses		
Refund to Commissioner/Liquidators	\$ -	\$ 328,618
Refund to Member Insurers	12,749,950	16,699,998
Operating Expenses	2,141,000	1,955,196
Claims Paid (Net)	5,450,000	6,584,865
Claim Expenses	550,000	1,092,072
Premium Refunds	-	-
Total Expenses	\$ 20,890,950	\$ 26,660,749
Net Income (Loss)	\$ (4,810,197)	\$ (15,971,159)

SHARED SERVICES



Vicki Godbold

DIRECTOR, HUMAN RESOURCES AND ADMINISTRATIVE SERVICES

Human Resources (HR) is the strategic and comprehensive approach to managing our Organization's most valued assets—the people. HR responsibilities include administering HR policies, programs and practices and providing a safe work environment, professional development opportunities and work-life balance for our associates. Administrative Services provide facility management of our building, mail services and receptionist responsibilities.

On-site training this year consisted of 24 exercise sessions along with six wellness and professional development classes for management and associates, and two financial workshops.

HR continues to support a strong wellness program for associates which includes the addition of an exercise room. We also helped to facilitate the associate's community service projects for the United Way and the NC Food Bank.

Associate service milestones for the IGA this year included Bill Delbridge, celebrating 15 years.



David Sink

DIRECTOR, FINANCE

The Finance Department is responsible for providing accounting and investment services to the organizations. This responsibility includes financial payments and the proper allocation of expenses between the accounts of the association and the respective insolvencies. The Finance Director also coordinates the annual audit of the Association's financial records by an outside firm.



Shelley Chandler

DIRECTOR, INFORMATION SERVICES

The Information Services department (IS) is responsible for Customer Service, Process Documentation and Information Technology, including Software Development. In the Information Center, our goals remain focused on quality as we continue to bring new ideas and improved efficiencies to our daily processes.

The process documentation services team remains committed in its efforts to create a process-driven environment. In response to our move in 2012, the team has been focused on revamping documentation for our building facility processes to ensure the safety of our associates and to reinforce our business continuity plan.

In the Information Technology area, we remain focused on improving our security posture in an ever-increasing culture of cyber-risk. The Software Development area is working with the IGA business team to lead the charge in evaluating technical needs for the future.

Across both the IT Services and Software Development areas, we continue to upgrade to newer technologies to help ensure long-term viability of our technology-rich environment. Our goal is to pursue opportunities that help drive IT efficiencies. By positioning our staff to react swiftly and intelligently to potential vulnerabilities, we can mitigate any direct losses or exposure to our organizations while maintaining support to our customers.

IGA MANAGEMENT STAFF



William Delbridge
MANAGER, CLAIMS



Rowena Ball
SUPERVISOR, WORKERS'
COMPENSATION CLAIMS



Donna Kallianos
SUPERVISOR, CASUALTY
CLAIMS



North Carolina Insurance Guaranty Association

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