



**AGENDA AND REPORTS**

**July 19, 2023**

**1:30 PM**

Join Zoom Meeting

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## STATEMENT OF COMPLIANCE WITH OPEN PUBLIC MEETINGS ACT

Adequate Notice and Electronic Notice of this meeting was given by:

1. Sending advance written notice to The Asbury Park Press
2. Filing advance written notice of this meeting with the Clerk/ Administrator of each member municipality.
3. Sending advance electronic mail notice of this meeting to the Clerk/ Administrator of each member municipality.
4. Posting electronic notice of this meeting on the Fund's website which notice provided the time, date and instructions for: (i) access to the Remote Public Meeting, (ii) how to provide public comment and (iii) how to access the agenda.
5. Posting a copy of the meeting notice on the public bulletin board of all member municipalities.
6. During the business session portion of this Remote Public Meeting the audio of all members of the public attending the meeting will be muted. At the end of the business session of the meeting, a time for public comment will be available. Members of the public who desire to provide comment shall raise their virtual hand in the Zoom application and/or submit a written comment via the text message section of the application. The meeting moderator will queue the members of the public that wish to provide comment and the Chairperson will recognize them in order. Public comment shall be concise and to the point and shall not contain abusive, defamatory, or obscene language.

**CENTRAL JERSEY HEALTH INSURANCE FUND**  
**AGENDA MEETING: July 19, 2023**  
**1:30 PM**

**MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ**

**FLAG SALUTE**

**ROLL CALL OF 2023 EXECUTIVE COMMITTEE**

Thomas Nolan , Chair - Borough of Brielle  
Brian Brach, Secretary- Manasquan RRSA  
Diane Lapp, Executive Committee - Township of Manchester  
Brian Valentino, Executive Committee- Western Monmouth MUA  
Brian Dempsey, Executive Committee - Spring Lake Borough  
Peter O'Reilly, Executive Committee - Borough of Lakewood  
Louis Amoruso, Executive Committee - Toms River  
Angela Morin, Executive Committee Alternate - Aberdeen

**APPROVAL OF MINUTES: MAY 17, 2023 Open:** Appendix I

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**CORRESPONDENCE - None**

**REPORTS:**

**EXECUTIVE DIRECTOR (PERMA)**

Monthly Report.....Page 1

**PROGRAM MANAGER- (Conner Strong & Buckelew)**

Monthly Report.....Page 9

**TREASURER - (Stephen Mayer)**

June and July 2023 Voucher List.....Page 13

Confirmation of Claims Paid/Certification of Transfers

Ratification of Treasurers Report

**ATTORNEY - (John C. Sahradnik, Esq.)**

Monthly Report

**NETWORK & THIRD PARTY ADMINISTRATOR - (Aetna)**

Monthly Report.....Page 19

**NETWORK & THIRD PARTY ADMINISTRATOR - (AmeriHealth)**

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**PRESCRIPTION ADMINISTRATOR - (Express Scripts)**

Monthly Report..... Page 26

**DENTAL ADMINISTRATOR - (Delta Dental)**

Monthly Report .....N/A

**CONSENT AGENDA.....Page 33**

Resolution 27-23: 2023 Wellness Grant Programs.....Page 34

Resolution 28-23: Approval of the June and July 2023 Bills Lists .....Page 35

**OLD BUSINESS**

**NEW BUSINESS**

**PUBLIC COMMENT**

**RESOLUTION - EXECUTIVE SESSION FOR CERTAIN SPECIFIED PURPOSES**

**PERSONNEL - CLAIMS - LITIGATION**

**MEETING ADJOURNED**

**Central Jersey Health Insurance Fund**  
**Executive Director's Report**  
**July 19, 2023**

**FINANCE AND CONTRACTS**

**PRO FORMA REPORTS**

- **Fast Track Financial Report** – as of May 31, 2023 (page 4)

**REQUESTS FOR PROPOSALS**

The below contracts compliance spreadsheet has been updated through 7/7/2023.

Fund Professional	Sent to	Contract Sent	Contract Received	Signed/ Countersigned	Employee Information Report Cert	General Liab	Auto Liab	Workers Comp	Professional Liab(E&O)	Bond	Contract Term
Administration	PERMA										1/1/2022-12/31/2024
Attorney	Jack Sahradnick	email 6/26			2/15/2026						1/1/2023- 12/31/2023*
Treasurer	Steve Mayer	email 6/26									1/1/2023- 12/31/2023*
Auditor	Mercadien	email 6/26	6/28/2023		4/15/2025	7/1/2023		7/1/2023	11/1/2023		1/1/2023- 12/31/2023*
Program Manager	Conner Strong										1/1/2022-12/31/2024
Actuary	John Vataha	email 6/26									1/1/2023- 12/31/2023*
TPA - Aetna											1 year renewal negotiated
TPA - AmeriHealth											1 year renewal negotiated
TPA - Delta Dental	Brian Remlinger	email 6/26				7/7/2023	7/7/2023	7/7/2023			1 year renewal negotiated

**The Professional Contracts:** The Actuary, Auditor, Attorney, and Treasurer have one additional extension, according to the RFP performed in 2021. As our professional have been performed as expected and it is our recommendation to extend for one final year.

**MOTION:** *Motion to extend the Professional Service contracts for Fund Actuary, Auditor, Attorney, Treasurer effective January 1, 2024 through December 31, 2024.*

**Medical TPA:** At the February MRHIF meeting, action was taken to release an RFP for a Medical TPA, State-wide. Since a 3 year contract exceeds \$12.5 million, the Fund's QPA submitted the RFP to the State Comptroller's office. The OSC believes that the MRHIF cannot RFP on behalf of the local Funds and select more than one vendor. PERMA, the MRHIF Attorney and QPA are working with the DCA to get an additional opinion. In the meantime, due to the time sensitivity, we are requesting the CJHIF issue its own RFP for Medical TPA for one year. Should we get authorization to proceed at the MRHIF level for multiple vendors, the MRHIF may issue the RFP for 2025 for 3 years.

**MOTION:** *Motion to release an EUS RFP for Medical Third Party Administrator for a one year contract effective January 1, 2024.*

**CITY OF ASBURY PARK**

This group had joined for dental only in 2018. In April, the Fund received notification of termination for July 1, 2023. As of July 11, 2023, the group has an outstanding balance of \$9,223 from missed 2023 invoices. It is our recommendation to reduce their closed year balance, should we not receive the monies by September 30.

**2023 WELLNESS GRANT APPLICATIONS**

Toms River requested a wellness grant for 2023 which has been approved by the Wellness Committee. The Township chose to do biometric screenings and host a few wellness centered days. The cost is about \$20,000. Resolution 27-23 updates the approval including Toms River.

**MRHIF MEETING**

The MRHIF meet on June 14, 2023. The 2022 Fund Audit was approved with no comments or recommendations. It is available on the MRHIF website.

The following RFPs are being facilitated at the MRHIF level and being issued shortly:

1. Benefits Administration System
2. Medical TPA
3. Dental TPA
4. Near Site Health Centers
5. Marketing Consultant
6. Reinsurance

All RFPs will be reviewed by the MRHIF contracts committee before approval in September. The Contracts Committee recently lost some membership and is seeking new Commissioners! *Any Commissioner may join the Committee!*

A State-Wide new Business status was provided. All Funds are gaining membership in light of the SHBP renewal:

<b>New Members by Fund</b>	
<b>July 1 - August 1, 2023</b>	
	<b>New Groups</b>
BMED	3
Metro	4
NJHIF	5
CJHIF	3
SNJHIF	8
Coastal	1
SHIF	13

Also, the Commissioners approved to quote a new Fund, the Metropolitan HIF, which is currently a sub-Fund of the BMED and expected to become independent on 1/1/2024.

**Please Note:** When Sayreville joined the CJHIF, the option was communicated to move to the Metro Fund once its independent Fund status was approved. We are working with the City’s broker to discuss their options to either stay as a CJHIF member or terminate and become a Metro member. There would be no financial impact to CJHIF should they leave – their closed year balance will follow the City.

Lastly, the MRHIF Attorney and Program Manager finalized a stop loss confidentiality agreement with AmeriHealth between the Funds that have a contract with the carrier.

### **PATIENT-CENTERED OUTCOMES RESEARCH INSTITUTE (PCORI) FEE**

The PCORI is an independent, nonprofit research organization that seeks to empower patients and others with actionable information about their health and healthcare choices.

As part of the Affordable Care Act (ACA) group health plans are required to pay an annual fee, which is a certain dollar amount per enrollee contributing to the PCORI effort. The fee is considered in the Fund's budget development and paid by the PERMA Accounting team on behalf of all our medical groups.

**CENTRAL JERSEY HEALTH INSURANCE FUND  
FINANCIAL FAST TRACK REPORT**

		<b>AS OF</b>	<b>May 31, 2023</b>		
		<i>THIS</i>	<i>YTD</i>	<i>PRIOR</i>	<i>FUND</i>
		<i>MONTH</i>	<i>CHANGE</i>	<i>YEAR END</i>	<i>BALANCE</i>
<b>UNDERWRITING INCOME</b>		<b>5,182,852</b>	<b>25,195,778</b>	<b>844,244,915</b>	<b>869,440,693</b>
<b>CLAIM EXPENSES</b>					
Paid Claims		4,543,320	21,424,396	685,068,831	706,493,227
IBNR		87,479	538,828	3,842,911	4,381,740
Less Specific Excess		-	(429,561)	(18,029,217)	(18,458,779)
Less Aggregate Excess		-	-	(1,000,000)	(1,000,000)
<b>TOTAL CLAIMS</b>		<b>4,630,798</b>	<b>21,533,663</b>	<b>669,882,525</b>	<b>691,416,188</b>
<b>EXPENSES</b>					
MA & HMO Premiums		340,009	1,649,187	24,379,105	26,028,292
Excess Premiums		186,382	907,255	38,788,756	39,696,011
Administrative		320,694	1,574,731	49,218,914	50,793,645
<b>TOTAL EXPENSES</b>		<b>847,085</b>	<b>4,131,172</b>	<b>112,386,776</b>	<b>116,517,948</b>
<b>UNDERWRITING PROFIT/(LOSS) (1-2-3)</b>		<b>(295,031)</b>	<b>(469,057)</b>	<b>61,975,614</b>	<b>61,506,557</b>
<b>INVESTMENT INCOME</b>		<b>20,885</b>	<b>132,919</b>	<b>3,639,678</b>	<b>3,772,598</b>
<b>DIVIDEND INCOME</b>		<b>0</b>	<b>0</b>	<b>8,016,763</b>	<b>8,016,763</b>
<b>STATUTORY PROFIT/(LOSS) (4+5+6)</b>		<b>(274,146)</b>	<b>(336,138)</b>	<b>73,632,055</b>	<b>73,295,918</b>
<b>DIVIDEND</b>		<b>0</b>	<b>0</b>	<b>59,107,813</b>	<b>59,107,813</b>
<b>Transferred Surplus</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>STATUTORY SURPLUS (7-8+9)</b>		<b>(274,146)</b>	<b>(336,138)</b>	<b>14,524,242</b>	<b>14,188,104</b>
		<b>SURPLUS (DEFICITS) BY FUND YEAR</b>			
<b>Closed</b>	<b>Surplus</b>	11,504	85,441	7,558,871	7,644,312
	<b>Cash</b>	10,277	(164,942)	7,834,702	7,669,761
<b>2021</b>	<b>Surplus</b>	(1,250)	(172,849)	(75,420)	(248,269)
	<b>Cash</b>	(1,310)	(171,864)	(115,023)	(286,887)
<b>2022</b>	<b>Surplus</b>	(152,602)	(118,144)	2,908,632	2,790,488
	<b>Cash</b>	(230,858)	1,312,084	858,649	2,170,732
<b>LAKESWOOD</b>	<b>Surplus</b>	189,779	180,894	4,132,158	4,313,053
	<b>Cash</b>	4,007,546	1,000,802	3,006,744	4,007,546
<b>2023</b>	<b>Surplus</b>	(321,577)	(311,480)		(311,480)
	<b>Cash</b>	2,169,691	1,094,446		1,094,446
<b>TAL SURPLUS (DEFICITS)</b>		<b>(274,146)</b>	<b>(336,138)</b>	<b>14,524,242</b>	<b>14,188,104</b>
<b>TAL CASH</b>		<b>5,955,346</b>	<b>3,070,526</b>	<b>11,585,071</b>	<b>14,655,597</b>
		<b>CLAIM ANALYSIS BY FUND YEAR</b>			
<b>TOTAL CLOSED YEAR CLAIMS</b>		<b>(1,031)</b>	<b>(17,716)</b>	<b>541,579,061</b>	<b>541,561,345</b>
<b>FUND YEAR 2021</b>					
Paid Claims		1,922	178,161	26,263,509	26,441,670
IBNR		-	0	0	0
Less Specific Excess		-	0	(160,235)	(160,235)
Less Aggregate Excess		-	0	0	0
<b>TOTAL FY 2021 CLAIMS</b>		<b>1,922</b>	<b>178,161</b>	<b>26,103,274</b>	<b>26,281,435</b>
<b>FUND YEAR 2022</b>					
Paid Claims		223,808	3,104,683	31,219,544	34,324,227
IBNR		(67,889)	(2,511,887)	2,715,552	203,665
Less Specific Excess		0	(429,561)	(148,454)	(578,015)
Less Aggregate Excess		0	0	0	0
<b>TOTAL FY 2022 CLAIMS</b>		<b>155,919</b>	<b>163,234</b>	<b>33,786,642</b>	<b>33,949,877</b>
<b>LAKESWOOD</b>					
Paid Claims		991,821	5,320,790	69,453,554	74,774,344
IBNR		65,682	55,749	1,127,359	1,183,109
Less Specific Excess		0	0	(2,167,367)	(2,167,367)
Less Aggregate Excess		0	0	0	0
<b>TOTAL LAKESWOOD CLAIMS</b>		<b>1,057,503</b>	<b>5,376,539</b>	<b>68,413,547</b>	<b>73,790,085</b>
<b>FUND YEAR 2023</b>					
Paid Claims		3,326,799	12,838,478		12,838,478
IBNR		89,686	2,994,966		2,994,966
Less Specific Excess		0	0		0
Less Aggregate Excess		0	0		0
<b>TOTAL FY 2023 CLAIMS</b>		<b>3,416,485</b>	<b>15,833,444</b>		<b>15,833,444</b>
<b>MBINED TOTAL CLAIMS</b>		<b>4,630,798</b>	<b>21,533,663</b>	<b>669,882,524</b>	<b>691,416,187</b>



## CENTRAL JERSEY REGIONAL EMPLOYEE BENEFITS FUND RATIOS

<b>CENTRAL JERSEY HEALTH INSURANCE FUND</b>							
<b>RATIOS</b>							
							<b>FY2023</b>
<b>INDICES</b>	<b>2022</b>	<b>JAN</b>	<b>FEB</b>	<b>MAR</b>	<b>APR</b>	<b>MAY</b>	<b>JUN</b>
Cash Position	11,585,071	\$ 11,718,028	\$ 9,953,482	\$ 14,264,087	\$ 12,833,577	\$ 14,655,597	
IBNR	3,842,911	\$ 4,258,102	\$ 4,149,630	\$ 4,263,978	\$ 4,294,261	\$ 4,381,740	
Assets	18,799,786	\$ 19,020,740	\$ 18,069,838	\$ 18,178,719	\$ 18,987,764	\$ 18,804,512	
Liabilities	4,275,549	\$ 4,591,950	\$ 4,322,121	\$ 4,450,980	\$ 4,525,519	\$ 4,616,413	
Surplus	14,524,237	\$ 14,428,789	\$ 13,747,716	\$ 13,727,739	\$ 14,462,245	\$ 14,188,099	
Claims Paid -- Month	3,133,724	\$ 3,892,106	\$ 3,923,664	\$ 4,563,215	\$ 4,506,805	\$ 4,544,570	
Claims Budget -- Month	4,011,475	\$ 4,167,378	\$ 4,171,640	\$ 4,165,918	\$ 4,164,236	\$ 4,279,974	
Claims Paid -- YTD	45,322,363	\$ 3,892,106	\$ 7,815,770	\$ 12,378,986	\$ 16,885,790	\$ 21,430,360	
Claims Budget -- YTD	48,493,558	\$ 4,167,378	\$ 8,339,018	\$ 12,504,538	\$ 16,651,440	\$ 20,931,414	
<b>RATIOS</b>							
Cash Position to Claims Paid	3.70	3.01	2.54	3.13	2.85	3.22	
Claims Paid to Claims Budget -- Month	0.78	0.93	0.94	1.1	1.08	1.06	
Claims Paid to Claims Budget -- YTD	0.93	0.93	0.94	0.99	1.01	1.02	
Cash Position to IBNR	3.01	2.75	2.40	3.35	2.99	3.34	
Assets to Liabilities	4.40	4.14	4.18	4.08	4.2	4.07	
Surplus as Months of Claims	3.62	3.46	3.30	3.3	3.47	3.31	
IBNR to Claims Budget -- Month	0.96	1.02	0.99	1.02	1.03	1.02	

**Central Jersey Health Insurance Fund**

**2023 Budget Report**

AS OF MAY 31, 2023

				Cumulative	\$ Variance	% Variance
Expected Losses	Cumulative	Annual	Latest Filed	Expensed		
Medical Claims AmeriHealth 12/31 Renew	3,120	7,488	14,976			
Medical Claims AmeriHealth 6/30 Renew	107,069	284,069	267,750			
Medical Claims Aetna 12/31 Renewal	12,500,147	29,999,407	30,386,516			
Medical Claims Aetna 6/30 Renewal	174,205	419,486	474,704			
<b>Subtotal Medical Claims</b>	<b>12,784,541</b>	<b>30,710,450</b>	<b>31,143,946</b>	<b>12,755,216</b>	<b>40,618</b>	<b>0%</b>
Prescription Claims 12/31 Renewal	2,506,203	6,024,037	6,063,440			
Prescription Claims 6/30 Renewal	76,702	174,899	177,111			
Less Rx Rebates	(774,871)	(1,859,679)	(1,872,165)			
<b>Subtotal Prescription Claims</b>	<b>1,808,034</b>	<b>4,339,257</b>	<b>4,368,386</b>	<b>2,398,551</b>	<b>(590,517)</b>	<b>-33%</b>
Dental Claims 12/31 Renewal	732,270	1,761,828	1,648,979			
Dental Claims 6/30 Renewal	8,061	18,770	20,196			
<b>Subtotal Dental Claims</b>	<b>740,331</b>	<b>1,780,598</b>	<b>1,669,175</b>	<b>679,678</b>	<b>60,653</b>	<b>8%</b>
Vision Claims	11,293	27,216	26,456	<b>Included in Medical Claims</b>		
<b>Lakewood SIR Claims</b>						
Medical	4,175,070	10,614,162	9,417,439	4,343,556	(168,486)	-4%
Prescription	1,412,145	3,520,026	3,214,522	1,032,983	379,162	27%
<b>Subtotal Claims</b>	<b>20,931,414</b>	<b>50,991,709</b>	<b>49,839,924</b>	<b>21,209,983</b>	<b>(278,569)</b>	<b>-1%</b>
Medicare Advantage / EGWP	1,363,719	3,292,000	3,270,620	<b>1,636,815</b>	<b>(13,190)</b>	<b>-1%</b>
Medicare Advantage - Rx	259,906	626,514	605,606	<b>Included in Medicare Advantage / EGWP</b>		
DMO Premiums	13,910	20,053	37,962	<b>13,576</b>	<b>334</b>	<b>2%</b>
<b>Reinsurance</b>						
Specific	453,274	1,091,449	1,092,154			
Lakewood - ICH	454,320	1,127,178	1,119,469			
<b>Subtotal Reinsurance</b>	<b>907,594</b>	<b>2,218,627</b>	<b>2,211,623</b>	<b>907,255</b>	<b>339</b>	<b>0%</b>
Loss Fund Contingency	151,779	364,269	364,269	<b>0</b>	<b>151,779</b>	<b>100%</b>
<b>Total Loss Fund</b>	<b>23,628,322</b>	<b>57,513,171</b>	<b>56,330,004</b>	<b>23,767,629</b>	<b>(139,307)</b>	<b>-1%</b>
<b>Expenses</b>						
Legal	15,483	37,159	37,159	<b>15,483</b>	<b>(0)</b>	<b>0%</b>
Treasurer	5,313	12,750	12,750	<b>5,313</b>	<b>-</b>	<b>0%</b>
Administrator	221,565	525,992	520,368	<b>221,920</b>	<b>(354)</b>	<b>0%</b>
Program Manager	808,841	1,933,370	1,923,903	<b>814,762</b>	<b>329</b>	<b>0%</b>
Actuary	6,917	16,600	16,600	<b>6,917</b>	<b>(0)</b>	<b>0%</b>
Auditor	8,542	20,500	20,500	<b>8,540</b>	<b>2</b>	<b>0%</b>
TPA - Aetna	422,727	1,024,488	1,030,899	<b>426,498</b>	<b>(114)</b>	<b>0%</b>
TPA - AmeriHealth	3,656	9,385	9,046	<b>Included above in TPA - Aetna</b>		
Plan Documents	6,250	15,000	15,000	<b>Included in Program Manager</b>		
Dental TPA	34,131	79,939	80,387	<b>34,122</b>	<b>10</b>	<b>0%</b>
Wellness	52,083	125,000	125,000	<b>52,085</b>	<b>(2)</b>	<b>0%</b>
Affordable Care Act	5,332	12,929	12,688	<b>4,253</b>	<b>1,079</b>	<b>20%</b>
A4 Retiree Surcharge	6,078	15,265	15,998	<b>5,964</b>	<b>114</b>	<b>2%</b>
Misc/Cont	8,827	21,185	21,185	<b>3,304</b>	<b>5,523</b>	<b>63%</b>
<b>Total Expenses</b>	<b>1,605,745</b>	<b>3,849,562</b>	<b>3,841,483</b>	<b>1,599,159</b>	<b>6,586</b>	<b>0%</b>
<b>Total Budget</b>	<b>25,234,067</b>	<b>61,362,733</b>	<b>60,171,487</b>	<b>25,366,788</b>	<b>(132,721)</b>	<b>-1%</b>

## Central Jersey Health Insurance Fund

### CONSOLIDATED BALANCE SHEET

AS OF MAY 31, 2023

#### BY FUND YEAR

	CJ HIF 2023	CJ HIF 2022	CJ HIF 2021	CLOSED YEAR	LAKEWOOD	FUND BALANCE
<b>ASSETS</b>						
Cash & Cash Equivalents	1,094,446	2,170,732	(286,887)	7,669,761	4,007,546	14,655,597
Assesments Receivable (Prepaid)	908,168	510,900	1,983	-	1,130,126	2,551,177
Interest Receivable	(116)	1,691	514	4,539	2,266	8,895
Specific Excess Receivable	-	444,668	36,121	-	39,975	520,765
Aggregate Excess Receivable	-	-	-	-	-	-
Dividend Receivable	-	-	-	-	-	-
Prepaid Admin Fees	1,383	-	-	-	-	1,383
Other Assets	750,447	-	-	-	316,248	1,066,695
<b>Total Assets</b>	<b>2,754,328</b>	<b>3,127,991</b>	<b>(248,269)</b>	<b>7,674,300</b>	<b>5,496,161</b>	<b>18,804,512</b>
<b>LIABILITIES</b>						
Accounts Payable	-	-	-	-	-	-
IBNR Reserve	2,994,966	203,665	-	-	1,183,109	4,381,740
A4 Retiree Surcharge	5,964	6,570	-	-	-	12,534
Dividends Payable	-	-	-	(3)	-	(3)
Retained Dividends	-	-	-	29,995	-	29,995
Accrued/Other Liabilities	64,878	127,268	-	-	-	192,146
<b>Total Liabilities</b>	<b>3,065,808</b>	<b>337,503</b>	<b>-</b>	<b>29,992</b>	<b>1,183,109</b>	<b>4,616,413</b>
<b>EQUITY</b>						
Surplus / (Deficit)	(311,480)	2,790,488	(248,269)	7,644,307	4,313,053	14,188,099
<b>Total Equity</b>	<b>(311,480)</b>	<b>2,790,488</b>	<b>(248,269)</b>	<b>7,644,307</b>	<b>4,313,053</b>	<b>14,188,099</b>
<b>Total Liabilities &amp; Equity</b>	<b>2,754,328</b>	<b>3,127,991</b>	<b>(248,269)</b>	<b>7,674,300</b>	<b>5,496,161</b>	<b>18,804,512</b>
<b>BALANCE</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>

This report is based upon information which has not been audited nor certified  
by an actuary and as such may not truly represent the condition of the fund.  
Fund Year allocation of claims have been estimated.

**REGULATORY**  
**CENTRAL JERSEY HEALTH INSURANCE FUND**  
**YEAR: 2023**

<b><u>Monthly Items</u></b>	<b><u>Filing Status</u></b>
Budget	Filed
Assessments	Filed
Actuarial Certification	Filed
Reinsurance Policies	Filed
Fund Commissioners	Filed
Fund Officers	Filed
Renewal Resolutions	Filed
Indemnity and Trust	Filed
New Members	N/A
Withdrawals	N/A
Risk Management Plan and By Laws	Filed
Cash Management Plan	Filed
Unaudited Financials	Filed
Annual Audit	Filed
Budget Changes	N/A
Transfers	N/A
Additional Assessments	N/A
Professional Changes	N/A
Officer Changes	Filed
RMP Changes	N/A
Bylaw Amendments	N/A
Contracts	Filed
Benefit Changes	N/A

# CENTRAL JERSEY REGIONAL HEALTH INSURANCE FUND

## Program Manager

July 2023

Program Manager: Conner Strong & Buckelew

Online Enrollment Training: [kkidd@permainc.com](mailto:kkidd@permainc.com)

Enrollments/Eligibility/Billing: [cjhifenrollments@permainc.com](mailto:cjhifenrollments@permainc.com)

Brokers: [brokerservice@permainc.com](mailto:brokerservice@permainc.com)

## ELIGIBILITY/ENROLLMENT

Please direct any eligibility, enrollment, or system related questions to our dedicated CJHIF enrollment team. To contact the team, email [cjhifenrollments@permainc.com](mailto:cjhifenrollments@permainc.com) or fax to 856-552-2175.

System training (new and refresher) is provided to all contacts with WEX access **every 3<sup>rd</sup> Wednesday at 10AM**. Please contact Austin Flinn, [aflinn@permainc.com](mailto:aflinn@permainc.com) for additional information or to request an invite.

In the subject line of the email, please include: **Training – Fund Name and Client Name**. Please be sure to add the date of the training you would like to attend in your email so an invite can be sent.

## COVERAGE UPDATES

Plumsted Township has not officially added their dental or vision to their current benefits in the HIFs. The Program Manager will advise when there are updates.

## EXPRESS-SCRIPTS UPDATE

CMS Annual Open Enrollment period for the 2024 plan year is October 15 – December 7. ESI has begun gathering information needed for their annual mailing campaign for the 2024 Notice of Creditable Coverage (NOCC). To meet the CMS requirement, Express Scripts will mail the NOCC letters the week of September 18<sup>th</sup> to those age 65 and older enrolled in ESI coverage through the HIFs. The Program Manager team has provided ESI with an updated letter template for the new plan year in preparation of the mailing.

## OPERATIONAL UPDATES

**COVID National Emergency** – On April 10, 2023, President Biden signed legislation to end the COVID National Emergency immediately. As a result, the outbreak period for extended COBRA/HIPAA Special Enrollment Period deadlines ended July 10, 2023

## 2023 LEGISLATIVE REVIEW: COVID-19

1. **National Emergency Declaration** - On January 30, 2023, the federal government announced the two national emergencies addressing COVID-19, the public health emergency (PHE) and the national emergency will end May 11, 2023. As a result, the Program Manager recommends the following effective July 1, 2023:
  - COVID-19 vaccines, including boosters – cover at \$0 copay at in network locations only. (Previously covered at any location).
  - COVID-19 At Home Testing Kits – no longer covered by the plan at any retail location or mail order through ESI. Members would be responsible for the full costs of the kit.
  - Diagnostic testing and providers – covered at member cost share.

**Resolution 25-23 for the above recommendations was passed at the May 2023 meeting.**

2. **At Home COVID-19 Testing - Covered through June 30, 2023.** On January 10th, the Biden Administration issued a mandate that takes effects on January 15, 2022, requiring the coverage of At Home/Over the Counter COVID-19 test kits by Employer sponsored health plans. As outlined in the communication sent on January 14, 2022, the HIF will cover the kits under the pharmacy plan (ESI). For groups contracted outside of HIF for their pharmacy benefit, the group should contact their PBM or broker to implement a coverage solution.

In 2022, the Central Jersey HIF paid \$3,608.40 in total plan costs for At Home COVID-19 test kits: \$2,467.60 in retail costs and \$1,140.80 in mail order costs.

3. **FREE Tests from the Government** – Effective **June 1, 2023**, the government has suspended the free at-home COVID-19 test kits to preserve the remaining supply. The program is no longer accepting orders. All orders placed before 11:59PM on May 31, 2023 will be delivered.

At-Home COVID-19 tests kits remain available at local retailers and pharmacies. Additional information on where to purchase test kits can be found at <https://www.covid.gov/tests>

4. **Vaccine Mandates** – **Covered at \$0 at in network location.** November 4, 2021, OSHA released the *Emergency Temporary Standard*. Which implemented a “vaccine or test,” requirement for Employers over 100 Employees. The Mandate is still not in effect as it has gone through multiple State and Federal Court appeals. Most recently, on January 13, 2022, the US Supreme Court blocked the enforcement of vaccine or testing mandate for businesses with at least 100 employees.

**As a reminder testing as an occupational requirement are not covered under Employer Health Plans.  
Medical and Rx Reporting**

**2022 Filings** – Deadline for carriers to submit the filings for 2022 plan year is June 1, 2023. Aetna, AHA and ESI will submit on behalf of the HIFs. The Program Manager will provide carriers all information needed for submission. Groups do not need to file on an individual basis.

**2020 & 2021 Filings - Federal Extension Granted** – the Centers for Medicare and Medicaid Services (CMS), U.S. Departments of Labor, Health and Human Services, and the Treasury published an FAQ that provided an extension to the filing period for 2020 and 2021 prescription drug and health care spending reporting. The Departments have provided a submission grace period through January 31, 2023 and will not consider a plan or issuer to be out of compliance with the requirements provided a good faith submission of 2020 and 2021 data is made on or before the date. Carriers will be filing their full reporting on behalf of clients prior to January 31, 2023.

The Medical and Rx Reporting provision (section 204) of the Consolidated Appropriations Act (CAA) requires health plans and payors to report information on plan medical costs and prescription drug spending to the Secretaries of Health and Human Services, Labor, and the Treasury on an annual basis. This requirement applies to insurers and self-funded health plans offering group or individual health insurance coverage.

On Aug. 20, 2021, the government released additional guidance on Consolidated Appropriations Act (CAA) implementation in a [Frequently Asked Questions \(FAQs\)](#) document. In the FAQ, the Departments of Health and Human Services, Labor, and Treasury indicated that enforcement of the first Medical and Rx report submission will be deferred, pending the issuance of regulations or further guidance. Until regulations or further guidance is

issued, the Departments strongly encouraged plans and issuers to start working to ensure that they are in a position to be able to begin reporting the required information with respect to **2020 and 2021 data by Dec. 27, 2022.**

On Nov. 17, 2021, the departments released an interim final rule with request for comments (IFC). Based on the IFC guidance, Express Scripts will submit an aggregated file for Rx data only to the government during the mandated filing period of Dec.1 – Dec.27, 2022. The Program Manager Team has provided ESI with the requested information to submit the filing.

Aetna and AmeriHealth will submit filings to the government on behalf of the HIFs using information in their system.

**No Surprise Billing and Transparency – Continued Delays**

The Health Insurance Funds, including Central Jersey protect plan members from surprise billing with involuntary out of network balance bills with a hold harmless clause:

- Example: an in-network surgeon contracts with an out of network anesthesiologist. Should the out of network anesthesiologist balance bill the patient, the Funds would hold the member harmless, paying up to the invoiced amount.

The law also imposes certain requirements on the Carriers, PBMs and healthcare providers. Many of these requirements continue to be delayed, but we will continue to work with the insurance providers to assure the Central Jersey HIF remains compliant.

- Issuing updated ID Cards with additional out of pocket information
- Providing transparency in coverage machine-readable files
- Providing price comparison tools
- Healthcare providers should work with insurance carriers to provide potential patients with good faith estimates of costs

**2023 Specialized Audits**

As approved through an RFP through the Program Manager’s contract, the HIFs has acquired the services of AIM to conduct specialized audits for the Central New Jersey Health Insurance Fund (CJHIF). AIM will begin with completing medical claims audits for claims administered by Aetna. The claim audit being performed will determine Aetna’s claim processing and financial accuracy of medical claims. AIM will also perform an Operation Review. Aim will perform an in-depth evaluation of the controls employed by the Aetna to ensure quality administration. **See Appendix.**

**Carrier Appeals:**

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
5/9/2023	Medical/Aetna	CJHIF-2023-06-01	PA for Bariatric Surgery	Upheld	5/19/2023
4/18/2023	Medical/Aetna	CJHIF-2023-06-02	PA for Additional Services during Spine Surgery	Upheld	4/25/2023

**IRO Submissions:**

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
6/19/2023	Medical/Aetna	CJHIF-2023-06-01	PA for Bariatric Surgery	Overtured	7/6/2023
6/23/2023	Medical/Aetna	CJHIF-2023-06-02	PA for Additional Services during Spine Surgery	Overtured	7/5/2023



# CENTRAL JERSEY HEALTH INSURANCE FUND BILLS LIST

Confirmation of Payment.

JUNE 2023

WHEREAS, the Treasurer has certified that funding is available to pay the following bills:

**BE IT RESOLVED** that the Central Jersey Health Insurance Fund's Executive Board, hereby authorizes the Fund treasurer to issue warrants in payment of the following claims; and

**FURTHER**, that this authorization shall be made a permanent part of the records of the Fund.

**FUND YEAR 2022**

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002276			
002276	HQSI, INC.	REVIEW SERVICES Y/E 2022 5/23	500.00
			<b>500.00</b>
<b>Total Payments FY 2022</b>			<b>500.00</b>

**FUND YEAR 2023**

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002277			
002277	AETNA HEALTH MANAGEMENT LLC	MEDICARE ADVANTAGE 6/23	322,971.83
			<b>322,971.83</b>
002278			
002278	Flagship Health System	DENTAL- MONTGOMERY 6/1/23	507.97
002278	Flagship Health System	DENTAL- CITY OF ASBURY 6/1/23	418.77
			<b>926.74</b>
002279			
002279	DELTACARE USA	ASBURY PARK ACCT F1-7871700002 6/23	1,847.86
			<b>1,847.86</b>
002280			
002280	AETNA LIFE INSURANCE COMPANY	VISION TPA 6/23	132.86
002280	AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 6/23	85,248.24
			<b>85,381.10</b>
002281			
002281	AMERIHEALTH ADMINISTRATORS	WELLNESS CREDIT 6/23	-25.00
002281	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 6/23	778.85
			<b>753.85</b>
002282			
002282	DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 6/23	6,797.62
			<b>6,797.62</b>
002283			
002283	PERMA RISK MANAGEMENT SERVICES	POSTAGE 5/23	45.37
002283	PERMA RISK MANAGEMENT SERVICES	ADMIN FEE 6/23	44,427.75
			<b>44,473.12</b>
002284			
002284	BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEE 6/23	3,096.58
			<b>3,096.58</b>
002285			
002285	STEPHEN MAYER	TREASURER FEE 6/23	1,062.50
			<b>1,062.50</b>

002286			
002286	CONNER STRONG & BUCKELEW	PLAN DOCUMENTS 06/23	1,250.00
002286	CONNER STRONG & BUCKELEW	NEW MEMBER COMMISSION 06/23	68,159.68
002286	CONNER STRONG & BUCKELEW	PROGRAM MGR FEES 06/23	85,680.63
002286	CONNER STRONG & BUCKELEW	DENTAL COMMISSION 06/23	574.95
002286	CONNER STRONG & BUCKELEW	FUND COORDINATOR 06/23	5,261.04
002286	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 06/23	2,045.44
			<b>162,971.74</b>
002287			
002287	ACCESS	DEPT 420 INV 10261365 5/31/23 FOR JUNE	83.34
002287	ACCESS	DEPT 420 INV 10205200 4/30/23 FOR MAY	71.02
			<b>154.36</b>
002288			
002288	MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 6/23	90,307.75
			<b>90,307.75</b>
002289			
002289	WESTPORT INSURANCE CORP	SPECIFIC REINS. FEES- SINGLE 6/23	15,517.92
002289	WESTPORT INSURANCE CORP	AGGREGATE 06/23	3,720.08
002289	WESTPORT INSURANCE CORP	SPECIFIC REINS. FEE- FAMILY 6/23	76,396.75
			<b>95,634.75</b>
		<b>Total Payments FY 2023</b>	<b>816,379.80</b>
		<b>TOTAL PAYMENTS ALL FUND YEARS</b>	<b>816,879.80</b>

\_\_\_\_\_  
Chairperson

Attest:

Dated: \_\_\_\_\_

I hereby certify the availability of sufficient unencumbered funds in the proper accounts to fully pay the above claims.

\_\_\_\_\_  
Treasurer

# CENTRAL JERSEY HEALTH INSURANCE FUND BILLS LIST

**Resolution**

**JULY 2023**

**WHEREAS**, the Treasurer has certified that funding is available to pay the following bills:

**BE IT RESOLVED** that the Central Jersey Health Insurance Fund’s Executive Board, hereby authorizes the Fund treasurer to issue warrants in payment of the following claims; and

**FURTHER**, that this authorization shall be made a permanent part of the records of the Fund.

**FUND YEAR 2022**

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002290			
002290	MERCADIEN, PC	FINAL AUDIT FOR FINANCIAL STMT Y/E 22	10,500.00
			<b>10,500.00</b>
		<b>Total Payments FY 2022</b>	<b>10,500.00</b>

**FUND YEAR 2023**

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002291			
002291	AETNA HEALTH MANAGEMENT LLC	MEDICARE ADVANTAGE 7/23	318,196.45
			<b>318,196.45</b>
002292			
002292	Flagship Health System	DENTAL- MONTGOMERY 7/1/23	530.23
			<b>530.23</b>
002293			
002293	AETNA LIFE INSURANCE COMPANY	VISION TPA 7/23	131.95
002293	AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 7/23	86,078.58
			<b>86,210.53</b>
002294			
002294	AMERIHEALTH ADMINISTRATORS	WELLNESS CREDIT 7/23	-27.50
002294	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 7/23	856.74
			<b>829.24</b>
002295			
002295	PAYFLEX	OCEANPORT FOR 06/23	117.00
002295	PAYFLEX	OCEANPORT FOR 05/23	114.00
002295	PAYFLEX	MANASQUAN FOR 05/23	18.00
002295	PAYFLEX	MANASQUAN FOR 06/23	18.00
			<b>267.00</b>
002296			
002296	DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 7/23	6,543.05
			<b>6,543.05</b>
002297			
002297	PERMA RISK MANAGEMENT SERVICES	POSTAGE 06/23	35.14
002297	PERMA RISK MANAGEMENT SERVICES	ADMIN FEE 7/23	43,623.00
			<b>43,658.14</b>
002298			
002298	ACTUARIAL SOLUTIONS, LLC	ACTUARY FEE - 3RD QTR 2023	4,150.00
			<b>4,150.00</b>

002299				
002299	BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEE 7/23	3,096.58	
				<b>3,096.58</b>
002300				
002300	STEPHEN MAYER	TREASURER FEE 07/23	1,062.50	
				<b>1,062.50</b>
002301				
002301	CONNER STRONG & BUCKELEW	NEW MEMBER COMMISSION 07/23	67,843.07	
002301	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 07/23	2,067.06	
002301	CONNER STRONG & BUCKELEW	PLAN DOCUMENTS 07/23	1,250.00	
002301	CONNER STRONG & BUCKELEW	PROGRAM MGR FEES 07/23	84,971.77	
002301	CONNER STRONG & BUCKELEW	DENTAL COMMISSION 07/23	371.60	
002301	CONNER STRONG & BUCKELEW	FUND COORDINATOR 07/23	5,214.34	
				<b>161,717.84</b>
002302				
002302	MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 7/23	91,446.74	
				<b>91,446.74</b>
002303				
002303	WESTPORT INSURANCE CORP	SPECIFIC-FAMILY FEES 07/23	78,449.20	
002303	WESTPORT INSURANCE CORP	SPECIFIC REINS. FEES- SINGLE 7/23	14,900.73	
002303	WESTPORT INSURANCE CORP	AGGREGATE 07/23	3,734.64	
				<b>97,084.57</b>
		<b>CHECK TOTAL</b>		<b>825,292.87</b>
W7231				
W7231	DEPARTMENT OF TREASURY	PCORI FEES 7/23	15,822.00	
				<b>15,822.00</b>
		<b>WIRE TOTAL</b>		<b>15,822.00</b>
		<b>Total Payments FY 2023</b>		<b>830,614.87</b>
		<b>TOTAL PAYMENTS ALL FUND YEARS</b>		<b>841,114.87</b>

-----  
Chairperson

Attest:

Dated: \_\_\_\_\_

I hereby certify the availability of sufficient unencumbered funds in the proper accounts to fully pay the above claims.

-----  
Treasurer

Central Jersey Municipal Employee Benefits Fund											
SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED											
Current Fund Year: 2023 Month Ending: May		Medical	Dental	Rx	Vision	Reinsurance	DMO Premiums	Dividend Reserve	Admin	0	TOTAL
OPEN BALANCE		7,928,015.74	449,386.65	4,647,174.00	58,333.92	(194,910.21)	7,718.02	29,963.47	(92,104.55)	0.00	12,833,577.04
RECEIPTS											
Assessments		5,624,146.00	225,123.32	966,847.92	3,231.50	269,171.12	3,598.97	0.00	539,450.32	0.00	7,631,569.15
Refunds		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts		10,783.06	623.86	6,553.14	68.38	0.64	8.83	34.28	337.77	0.00	18,409.96
Invest Adj		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Subtotal Invest		10,783.06	623.86	6,553.14	68.38	0.64	8.83	34.28	337.77	0.00	18,409.96
Other *		28,998.33	0.00	1,260.00	0.00	0.00	0.00	0.00	0.00	0.00	30,258.33
TOTAL		5,663,927.39	225,747.18	974,661.06	3,299.88	269,171.76	3,607.80	34.28	539,788.09	0.00	7,680,237.44
EXPENSES											
Claims Transfers		3,853,151.30	173,736.89	989,002.92	0.00	0.00	0.00	0.00	0.00	0.00	5,015,891.11
Expenses		337,303.88	2,705.00	0.00	0.00	186,381.73	0.00	0.00	315,935.82	0.00	842,326.43
Other *		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL		4,190,455.18	176,441.89	989,002.92	0.00	186,381.73	0.00	0.00	315,935.82	0.00	5,858,217.54
END BALANCE		9,401,487.95	498,691.94	4,632,832.14	61,633.80	(112,120.18)	11,325.82	29,997.75	131,747.72	0.00	14,655,596.94

Central Jersey Municipal Employee Benefits Fund										
Month		May								
Current Fund Year		2023								
		1.	2.	3.	4.	5.	6.	7.	8.	
Policy Year	Coverage	Calc. Net Paid Thru Last Month	Monthly Net Paid May	Monthly Recoveries May	Calc. Net Paid Thru May	TPA Net Paid Thru May	Variance To Be Reconciled	Delinquent Unreconciled Variance From	Change This Month	
2023	Medical	7,426,143.72	2,608,891.07	0.00	10,035,034.79	0.00	10,035,034.79	7,426,143.72	2,608,891.07	
	Dental	412,063.44	173,736.89	0.00	585,800.33	0.00	585,800.33	412,063.44	173,736.89	
	Rx	2,268,854.93	700,495.09	0.00	2,969,350.02	0.00	2,969,350.02	2,268,854.93	700,495.09	
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	<b>Total</b>	<b>10,107,062.09</b>	<b>3,483,123.05</b>	<b>0.00</b>	<b>13,590,185.14</b>	<b>0.00</b>	<b>13,590,185.14</b>	<b>10,107,062.09</b>	<b>3,483,123.05</b>	

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS					
Central Jersey Municipal Employee Benefits Fund					
ALL FUND YEARS COMBINED					
CURRENT MONTH	May				
CURRENT FUND YEAR	2023				
	<b>Description:</b>	<b>N.J.C.M.F.</b>	<b>Investments</b>	<b>Ocean First Admin.</b>	
	<b>ID Number:</b>				
	<b>Maturity (Yrs)</b>				
	<b>Purchase Yield:</b>				
	<b>TOTAL for All</b>				
	<b>Accts &amp; instruments</b>				
<b>Opening Cash &amp; Investment Balance</b>	<b>\$12,833,576.80</b>	<b>0</b>	<b>5715047</b>	<b>7118529.8</b>	
<b>Opening Interest Accrual Balance</b>	<b>\$6,379.78</b>	<b>0</b>	<b>6379.78</b>	<b>0</b>	
1	Interest Accrued and/or Interest Cost	\$3,083.95	\$0.00	\$3,083.95	\$0.00
2	Interest Accrued - discounted Instr.s	\$0.00	\$0.00	\$0.00	\$0.00
3	(Amortization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00
4	Accretion	\$0.00	\$0.00	\$0.00	\$0.00
5	Interest Paid - Cash Instr.s	\$15,263.73	\$0.00	\$4,412.53	\$10,851.20
6	Interest Paid - Term Instr.s	\$568.74	\$0.00	\$568.74	\$0.00
7	Realized Gain (Loss)	\$2,577.50	\$0.00	\$2,577.50	\$0.00
8	Net Investment Income	\$20,925.18	\$0.00	\$10,073.98	\$10,851.20
9	Deposits - Purchases	\$7,661,827.48	\$0.00	\$0.00	\$7,661,827.48
10	(Withdrawals - Sales)	-\$5,858,217.54	\$0.00	\$0.00	-\$5,858,217.54
	Ending Cash & Investment Balance	\$14,655,596.71	\$0.00	\$5,722,605.77	\$8,932,990.94
	Ending Interest Accrual Balance	\$8,894.99	\$0.00	\$8,894.99	\$0.00
	Plus Outstanding Checks	\$199,731.95	\$0.00	\$0.00	\$199,731.95
	(Less Deposits in Transit)	\$0.00	\$0.00	\$0.00	\$0.00
	<b>Balance per Bank</b>	<b>\$14,855,328.66</b>	<b>\$0.00</b>	<b>\$5,722,605.77</b>	<b>\$9,132,722.89</b>



**CENTRAL JERSEY HEALTH INSURANCE FUND**

**Monthly Claim Activity Report**

*July 19, 2023*



**CENTRAL JERSEY HEALTH INSURANCE FUND**

	<u>MEDICAL CLAIMS PAID 2022</u>	<u># OF EES</u>	<u>PER EE</u>	<u>MEDICAL CLAIMS PAID 2023</u>	<u># OF EES</u>	<u>PER EE</u>
JANUARY	\$2,880,916	2,158	\$ 1,335	\$3,609,993	2,143	\$ 1,685
FEBRUARY	\$2,916,816	2,143	\$ 1,361	\$2,923,452	2,138	\$ 1,367
MARCH	\$3,647,050	2,139	\$ 1,705	\$3,416,354	2,127	\$ 1,606
APRIL	\$3,059,121	2,140	\$ 1,429	\$3,334,315	2,129	\$ 1,566
MAY	\$3,475,512	2123	\$ 1,637	\$4,258,066	2,161	\$ 1,970
JUNE	\$2,787,005	2,124	\$ 1,312			
JULY	\$2,546,763	2,135	\$ 1,193			
AUGUST	\$3,260,485	2,105	\$ 1,549			
SEPTEMBER	\$3,692,857	2,100	\$ 1,759			
OCTOBER	\$2,622,624	2,102	\$ 1,248			
NOVEMBER	\$3,070,780	2,106	\$ 1,458			
DECEMBER	\$3,329,912	2,117	\$ 1,573			
<b>TOTALS</b>	<b>\$37,289,841</b>			<b>\$17,542,181</b>		
				<b>2023 Average</b>	<b>2,140</b>	<b>\$ 1,639</b>
				<b>2022 Average</b>	<b>2,124</b>	<b>\$ 1,463</b>



## Large Claimant Report (Drilldown) - Claims Over \$50000

**Plan Sponsor Unique ID :** All  
**Customer:** Central New Jersey Health Insurance Fund  
**Group / Control:** 00143735,00285786,00659552,00737415,00866354,SI362223

**Paid Dates:** 04/01/2023 - 04/30/2023  
**Service Dates:** 01/01/2011 - 04/30/2023  
**Line of Business:** All

	<b>Billed Amt</b>	<b>Paid Amt</b>
	\$446,873.28	\$234,994.58
	\$181,831.74	\$143,589.73
	\$256,913.50	\$56,011.22
<b>Total:</b>	<b>\$885,618.52</b>	<b>\$434,595.53</b>

### Large Claimant Report (Drilldown) - Claims Over \$50000

**Plan Sponsor Unique ID :** All  
**Customer:** Central New Jersey Health Insurance Fund  
**Group / Control:** 00143735,00285786,00659552,00737415,00866354,SI362223

**Paid Dates:** 05/01/2023 - 05/31/2023  
**Service Dates:** 01/01/2011 - 05/31/2023  
**Line of Business:** All

	Billed Amt	Paid Amt
	\$204,962.17	\$144,021.73
	\$697,560.21	\$105,226.29
	\$148,985.18	\$95,899.81
	\$94,149.33	\$87,530.42
	\$113,329.11	\$71,424.29
	\$141,880.84	\$66,856.74
	\$90,382.63	\$64,520.27
	\$95,111.76	\$62,386.59
	\$215,743.35	\$53,085.01
	\$140,719.95	\$52,165.74
<b>Total:</b>	<b>\$1,942,824.53</b>	<b>\$803,116.89</b>



**Medical Claims Paid :**  
**January 2023 - May 2023**

Total Medical Paid per EE: **\$1,639**

**Network Discounts**

Inpatient:	<b>62.1%</b>
Ambulatory:	<b>65.1%</b>
Physician/Other:	<b>66.8%</b>
<b>TOTAL:</b>	<b>65.2%</b>

**Provider Network**

% Admissions In-Network:	<b>97.6%</b>
% Physician Office:	<b>90.8%</b>

**Aetna Book of Business:**  
Admissions 98.6%; Physician 90.9%

**Top Facilities Utilized**  
**(by total Medical Spend)**

- Jersey Shore Medical
- Community Medical Center
- Monmouth Medical Center
- Ocean University Medical Center
- Riverview Medical Center

**Catastrophic Claim Impact**  
**January 2023 – May 2023**

Number of Claims Over \$50,000: **45**  
Claimants per 1000 members: **8.6**  
Avg. Paid per Claimant: **\$102,349**  
Percent of Total Paid: **28.4%**

- Aetna BOB- HCC account for an average of **42.2%** of total Medical Cost

**Aetna One Flex Member Outreach:**  
**Through May 2023**

Total Members Identified: **955**  
Members Targeted for 1:1 Nurse Support : **215**  
Members Targeted for Digital Activity: **740**  
Member 1:1 outreach completed: **210**  
Member 1:1 Outreach in Progress: **5**

**Teladoc Activity:**  
**January 2023– May 2023**

Total Registrations: **53**  
Total Online Visits: **166**  
Total Net Claims Savings: **\$79,637**  
Total Visits w/ Rx: **115**  
Mental Health Visits: **6**  
Dermatology Visits: **6**

**Allentown Service Center**  
**Performance Goal Metrics YTD 2022**

**Customer Service Performance**

1 <sup>st</sup> Call Resolution:	<b>94.08%</b>
Abandonment Rate:	<b>0.73%</b>
Avg. Speed of Answer:	<b>19.5 sec</b>

**Claims Performance**

Financial Accuracy:	<b>99.66%</b>
(Q4 22)	
90% processed w/in:	<b>9.0 days</b>
95% processed w/in:	<b>19.5 days</b>

\*\*\*\*\*

**Claims Performance (Monthly)**  
(May 2023)

90% processed w/in:	<b>17.9 days</b>
95% processed w/in:	<b>27.3 days</b>

(Note: This is not a PG metric)

\*\*\*\*\*

**Performance Goals**

1 <sup>st</sup> Call Resolution:	<b>90%</b>
Abandonment Rate less than:	<b>3.0%</b>
Average Speed of Answer:	<b>30 sec</b>

**Financial Accuracy:** **99%**

**Turnaround Time**

90% processed w/in:	<b>14 days</b>
95% processed w/in:	<b>30 days</b>





2022 Central HIF						2023 Central HIF					
		MEDICAL CLAIMS PAID 2022	TOTAL	# OF EES	PER EE			MEDICAL CLAIMS PAID 2023	TOTAL	# OF EES	PER EE
JANUARY		\$32,550.64	\$32,550.64	21	\$1,550.03	JANUARY		\$18,830.18	\$18,830.18	19	\$991.05
FEBRUARY		\$28,606.05	\$28,606.05	21	\$1,362.19	FEBRUARY		\$36,311.57	\$36,311.57	19	\$1,911.13
MARCH		\$21,255.39	\$21,255.39	21	\$1,012.16	MARCH		\$53,195.75	\$53,195.75	20	\$2,659.78
APRIL		\$26,860.85	\$26,860.85	26	\$1,033.10	APRIL		\$43,552.88	\$43,552.88	20	\$2,177.64
MAY		\$19,086.93	\$19,086.93	21	\$908.90	MAY		\$25,227.03	\$25,227.03	20	\$1,261.35
JUNE		\$20,333.68	\$20,333.68	21	\$968.27	JUNE		\$42,298.41	\$42,298.41	20	\$2,114.92
JULY		\$17,348.99	\$17,348.99	21	\$826.14	JULY					
AUGUST		\$18,790.86	\$18,790.86	21	\$864.80	AUGUST					
SEPTEMBER		\$16,550.86	\$16,550.86	19	\$871.09	SEPTEMBER					
OCTOBER		\$26,932.30	\$26,932.30	19	\$1,417.48	OCTOBER					
NOVEMBER		\$32,348.13	\$32,348.13	19	\$1,702.53	NOVEMBER					
DECEMBER		\$27,532.01	\$27,532.01	19	\$1,449.05	DECEMBER					
TOTALS		\$288,196.69				TOTALS		\$219,415.82		19.66666667	\$1,852.65
			2022 Average	21	\$1,163.81						



**EXPRESS SCRIPTS®**

Central Jersey Health Insurance Fund

Total Component/ Date of Service (Month)	2022 01	2022 02	2022 03	2022 Q1	2022 04	2022 05	2022 06	2022 Q2	2022 07	2022 08	2022 09	2022 Q3	2022 10	2022 11	2022 12	2022 Q4	2022 YTD
Membership	3,065	3,062	3,057	3,061	3,060	3,064	3,071	3,065	3,069	3,036	3,005	3,037	3,012	3,022	3,020	3,018	3,045
Total Days	122,231	107,143	123,032	352,406	109,613	115,997	117,017	342,627	111,640	122,724	102,934	337,298	118,760	117,313	108,796	345,012	1,377,343
Total Patients	1,137	1,062	1,188	1,748	1,101	1,136	1,130	1,743	1,118	1,143	1,073	1,734	1,183	1,190	1,202	1,862	2,517
Total Plan Cost	\$562,553	\$566,723	\$679,414	\$1,808,690	\$530,168	\$608,968	\$663,919	\$1,803,055	\$621,206	\$693,630	\$544,098	\$1,858,934	\$668,018	\$591,460	\$536,992	\$1,799,100	\$7,269,779
Generic Fill Rate (GFR) - Total	85.7%	84.9%	86.7%	85.9%	86.4%	85.9%	84.9%	85.7%	86.1%	83.9%	84.3%	84.8%	81.3%	83.8%	84.0%	83.0%	84.8%
<b>Plan Cost PMPM</b>	<b>\$183.54</b>	<b>\$185.08</b>	<b>\$222.25</b>	<b>\$196.94</b>	<b>\$173.26</b>	<b>\$198.75</b>	<b>\$216.19</b>	<b>\$196.09</b>	<b>\$202.41</b>	<b>\$228.47</b>	<b>\$181.06</b>	<b>\$204.05</b>	<b>\$221.79</b>	<b>\$195.72</b>	<b>\$177.81</b>	<b>\$198.71</b>	<b>198.94</b>
Total Specialty Plan Cost	\$188,196	\$264,065	\$337,295	\$789,556	\$225,808	\$288,971	\$342,244	\$857,023	\$298,438	\$324,540	\$219,068	\$842,045	\$341,596	\$243,333	\$224,717	\$809,647	\$3,298,271
Specialty % of Total Specialty Plan Cost	33.5%	46.6%	49.6%	43.7%	42.6%	47.5%	51.5%	47.5%	48.0%	46.8%	40.3%	45.3%	51.1%	41.1%	41.8%	45.0%	45.4%

Total Component/ Date of Service (Month)	2023 01	2023 02	2023 03	2023 Q1	2023 04	2023 05	2023 06	2023 Q2	2023 07	2023 08	2023 09	2023 Q3	2023 10	2023 11	2023 12	2023 Q4	2023 YTD
Membership	2,984	2,990	2,993	2,989	2,993	3,001											
Total Days	127,933	112,223	118,710	358,894	119,678	122,064											
Total Patients	1,212	1,149	1,180	1,809	1,110	1,165											
Total Plan Cost	\$627,280	\$520,265	\$572,443	\$1,719,993	\$675,794	\$641,934											
Generic Fill Rate (GFR) - Total	83.5%	84.7%	84.5%	84.2%	85.1%	86.4%											
<b>Plan Cost PMPM</b>	<b>\$210.21</b>	<b>\$174.00</b>	<b>\$191.26</b>	<b>\$191.81</b>	<b>\$225.79</b>	<b>\$213.91</b>											
<b>%Change Plan Cost PMPM</b>	<b>14.5%</b>	<b>-6.0%</b>	<b>-13.9%</b>	<b>-2.6%</b>	<b>30.3%</b>	<b>7.6%</b>											
Total Specialty Plan Cost	\$240,775	\$223,675	\$228,988	\$693,438	\$308,751	\$273,943											
Specialty % of Total Specialty Plan Cost	38.4%	43.0%	40.0%	40.3%	45.7%	42.7%											

PMPM	
2022 Q1	\$196.94
2023 Q1	\$191.81
<b>Trend - 2023</b>	<b>-2.6%</b>

# Central Jersey Health Insurance Fund

Q1 2023





# Top Line Performance Metrics

Central Jersey Health Insurance Fund			
Description	1Q23	1Q22	Change
Avg Subscribers per Month	1,217	1,225	-0.7%
Avg Members per Month	2,989	3,061	-2.4%
Number of Unique Patients	1,809	1,748	3.5%
Pct Members Utilizing Benefit	60.5%	57.1%	3.4
Plan Cost Net	\$1,047,396	\$1,182,813	-11.4%
Total Days	358,894	352,406	1.8%
Total Adjusted Rxs	13,762	13,245	3.9%
Average Member Age	35.9	35.8	0.2%
Plan Cost Net PMPM	\$116.81	\$128.80	-9.3%
Plan Cost Net/Day	\$2.92	\$3.36	-13.0%
Plan Cost Net per Adjusted Rx	\$76.11	\$89.30	-14.8%
Nbr Adjusted Rxs PMPM	1.53	1.44	6.4%
Generic Fill Rate	84.6%	85.2%	-0.7
90 Day Utilization	71.3%	71.7%	-0.4
Retail - Maintenance 90 Utilization	28.6%	27.6%	1.0
Home Delivery Utilization	42.6%	44.1%	-1.5
Member Cost Net %	21.8%	19.0%	2.8
Specialty Percent of Plan Cost Net	41.3%	46.3%	-5.0
Specialty Plan Cost Net PMPM	\$48.26	\$59.63	-19.1%
Formulary Compliance Rate	98.1%	96.5%	1.6

Government - Northeast Region	
1Q23	Change
41.8	-0.2%
\$153.53	6.4%
\$2.98	3.6%
\$80.34	3.3%
1.91	3.0%
86.1%	-0.1
71.2%	0.2
26.5%	1.9
44.7%	-1.7
13.2%	1.2
48.6%	-1.2
\$74.67	3.9%
98.1%	0.4



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# Key Statistics: Specialty Detailed

Central Jersey Health Insurance Fund						
Description	Non-Specialty			Specialty		
	1Q23	1Q22	Change	1Q23	1Q22	Change
Avg Subscribers per Month	1,217	1,225	-0.7%	1,217	1,225	-0.7%
Avg Members per Month	2,989	3,061	-2.4%	2,989	3,061	-2.4%
Number of Unique Patients	1,804	1,741	3.6%	54	51	5.9%
Pct Members Utilizing Benefit	60.4%	56.9%	3.5	1.8%	1.7%	0.1
Total Plan Cost Net	\$614,688	\$635,187	-3.2%	\$432,708	\$547,626	-21.0%
Percent of Total Plan Cost Net	58.7%	53.7%	5.0	41.3%	46.3%	-5.0
Total Days	354,566	348,527	1.7%	4,328	3,879	11.6%
Total Adjusted Rx	13,607	13,101	3.9%	155	144	7.6%
Percent of Total Adjusted Rx	98.87%	98.91%	0.0	1.13%	1.09%	0.0
Plan Cost Net PMPM	\$68.55	\$69.17	-0.9%	\$48.26	\$59.63	-19.1%
Plan Cost Net/Day	\$1.73	\$1.82	-4.9%	\$99.98	\$141.18	-29.2%
Plan Cost Net per Adjusted Rx	\$45.17	\$48.48	-6.8%	\$2,791.66	\$3,802.95	-26.6%
Nbr Adjusted Rx PMPM	1.52	1.43	6.4%	0.02	0.02	10.2%
Generic Fill Rate	85.3%	86.0%	-0.7	20.0%	13.2%	6.8
Member Cost Net %	8.9%	8.2%	0.7	34.8%	28.7%	6.2

  

Specialty Government - Northeast Region	
1Q23	Change
\$74.67	3.9%
\$118.99	-3.9%
\$3,321.64	-4.0%
0.02	8.3%
22.8%	0.2
14.9%	2.7



# Top 10 Indications

Top Indications by Plan Cost Net															
1Q23										1Q22				% Change	
Rank	Peer Rank	Indication	Adjusted		Plan Cost Net	Peer Generic		Plan Cost Net	Rank	Adjusted		Plan Cost Net	Generic Fill Rate	Plan Cost Net	Plan Cost Net
			Rxs	Patients		Fill Rate	Fill Rate			Rxs	Patients				
1	1	INFLAMMATORY CONDITIONS	81	29	\$159,685	44.4%	49.7%	\$17.81	1	96	30	\$200,124	42.7%	\$21.79	-18.3%
2	2	CANCER	68	24	\$151,778	79.4%	84.1%	\$16.93	2	73	27	\$131,392	79.5%	\$14.31	18.3%
3	3	DIABETES	1,175	164	\$119,568	30.3%	36.0%	\$13.33	3	1,122	151	\$123,572	32.4%	\$13.46	-0.9%
4	18	SEIZURES	280	88	\$62,088	86.4%	95.2%	\$6.92	5	278	82	\$76,153	84.5%	\$8.29	-16.5%
5	10	MENTAL/NEURO DISORDERS	138	43	\$42,824	75.4%	86.8%	\$4.78	8	111	40	\$31,768	75.7%	\$3.46	38.1%
6	52	HEREDITARY ANGIOEDEMA	3	1	\$42,247	0.0%	0.0%	\$4.71	4	7	2	\$109,937	14.3%	\$11.97	-60.6%
7	33	NARCOLEPSY	3	1	\$41,495	0.0%	0.0%	\$4.63	6	3	1	\$41,522	0.0%	\$4.52	2.3%
8	13	MIGRAINE HEADACHES	81	40	\$33,906	39.5%	53.8%	\$3.78	17	57	26	\$20,306	49.1%	\$2.21	71.0%
9	5	ANTICOAGULANT	94	33	\$27,597	7.4%	20.4%	\$3.08	12	109	36	\$28,256	18.3%	\$3.08	0.0%
10	8	ASTHMA	641	233	\$27,439	78.0%	71.3%	\$3.06	11	570	218	\$28,479	74.4%	\$3.10	-1.3%
Total Top 10:			2,564		\$708,627	51.9%		\$79.03		2,426		\$791,509	51.7%	\$86.19	-8.3%
Differences Between Periods:			138		-\$82,882	0.2%		-\$7.17							

The largest financially impactful change was in Hereditary Angioedema, driving \$67.7K in reduced net cost for a 60.6% decrease in Net PMPM

Migraine Headaches trend increased 71.0%, contributing an additional \$1.57 to Net PMPM

Represent 67.7% of your total Plan Cost Net

Peer = Express Scripts Peer 'Government - Northeast Region' market segment



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# Top 25 Drugs

Top Drugs by Plan Cost Net																
1Q23										1Q22					% Change	
Peer Rank	Rank	Brand Name	Indication	Adj. Rxs	Pts.	Plan Cost Net	Plan Cost Net PMPM	Peer Plan Cost Net PMPM	Rank	Adj. Rxs	Pts.	Plan Cost Net	Plan Cost Net PMPM	Plan Cost Net PMPM	Peer Plan Cost Net PMPM	Peer Plan Cost Net PMPM
1	3	STELARA*	INFLAMMATORY CONDITIONS	14	5	\$85,536	\$7.91	\$4.71	1	12	5	\$74,480	\$8.11	\$8.11	-9.9%	2.7%
2	50	LENVIMA*	CANCER	3	1	\$44,855	\$4.98	\$0.67								73.4%
3	45	SPRYCEL*	CANCER	5	2	\$43,949	\$4.90	\$0.73	5	5	2	\$39,000	\$4.25	\$4.25	15.4%	14.4%
4	1	HUMIRA(CF) PEN*	INFLAMMATORY CONDITIONS	10	4	\$42,929	\$4.72	\$6.59	6	9	4	\$38,590	\$4.20	\$4.20	12.3%	6.1%
5	235	HAEGARDA*	HEREDITARY ANGIOEDEMA	3	1	\$42,247	\$4.71	\$0.13	3	4	1	\$44,608	\$4.86	\$4.86	-3.0%	-2.2%
6	58	XYWAV*	NARCOLEPSY	3	1	\$41,495	\$4.83	\$0.60	4	3	1	\$41,522	\$4.52	\$4.52	2.3%	43.9%
7	2	OZEMPIC	DIABETES	89	31	\$33,567	\$3.74	\$4.91	14	43	13	\$17,537	\$1.91	\$1.91	96.0%	88.2%
8	42	TAGRISSO*	CANCER	3	1	\$33,442	\$3.73	\$0.77	8	3	1	\$31,523	\$3.43	\$3.43	8.6%	30.8%
9	21	IBRANCE*	CANCER	3	1	\$28,780	\$3.21	\$1.15	9	3	1	\$27,302	\$2.97	\$2.97	8.0%	-6.8%
10	22	HUMIRA PEN*	INFLAMMATORY CONDITIONS	6	2	\$28,572	\$3.19	\$1.13	20	5	2	\$13,909	\$1.51	\$1.51	110.4%	-24.2%
11	546	RIFINAMIDE	SEIZURES	2	1	\$18,085	\$2.01	\$0.04	12	3	1	\$23,018	\$2.51	\$2.51	-19.6%	-35.2%
12	10	FLOWFLEX COVID-19 AG HOME TEST	DIAGNOSTIC AIDS	197	175	\$17,269	\$1.83	\$1.65	86	48	48	\$3,166	\$0.34	\$0.34	458.4%	466.2%
13	52	XIFAXAN	GI DISORDERS	9	6	\$16,577	\$1.85	\$0.67	21	6	2	\$13,764	\$1.50	\$1.50	23.3%	19.7%
14	88	PROMACTA*	BLOOD CELL DEFICIENCY	2	1	\$16,575	\$1.85	\$0.36								-24.7%
15	4	ELJQUIS	ANTICOAGULANT	50	17	\$15,967	\$1.78	\$4.20	22	39	15	\$12,207	\$1.33	\$1.33	34.0%	10.2%
16	65	LATUDA	MENTAL/NEURO DISORDERS	14	5	\$14,343	\$1.60	\$0.52	88	3	1	\$3,135	\$0.34	\$0.34	368.5%	-35.3%
17	912	GLATIRAMER ACETATE*	MULTIPLE SCLEROSIS	3	1	\$13,759	\$1.53	\$0.02								84.9%
18	337	BRIVIACT	SEIZURES	4	1	\$12,805	\$1.43	\$0.08	28	3	1	\$9,882	\$1.08	\$1.08	32.7%	-17.1%
19	62	IBRELVY	MIGRAINE HEADACHES	15	9	\$12,775	\$1.42	\$0.55	46	8	5	\$5,408	\$0.59	\$0.59	141.9%	43.1%
20	201	AVONEX*	MULTIPLE SCLEROSIS	3	1	\$12,723	\$1.42	\$0.16	23	3	1	\$12,059	\$1.31	\$1.31	8.0%	5.2%
21	18	XARELTO	ANTICOAGULANT	37	13	\$11,459	\$1.28	\$1.40	15	50	15	\$15,330	\$1.67	\$1.67	-23.4%	-1.1%
22	53	OFEV*	IDIOPATHIC PULMONARY FIBROSIS	1	1	\$11,088	\$1.24	\$0.63	7	3	1	\$32,074	\$3.49	\$3.49	-64.6%	-9.8%
23	93	BRILINTA	BLOOD MODIFYING	33	11	\$9,862	\$1.10	\$0.34	50	18	6	\$5,199	\$0.57	\$0.57	94.3%	6.8%
24	55	ICOSAPENT ETHYL	HIGH BLOOD CHOLESTEROL	36	12	\$9,747	\$1.09	\$0.63	176	4	2	\$1,139	\$0.12	\$0.12	776.2%	254.9%
25	96	AIUSTEDO*	TARDIVE DYSKINESIA	3	1	\$9,708	\$1.08	\$0.33								-0.5%
Total Top 25:				548		\$607,279	\$67.72	\$32.97	275			\$464,851	\$50.62	\$50.62	33.8%	18.2%
Differences Between Periods:				273		\$142,428	\$17.10	\$5.08								

\*Specialty Drug

Represent 52.3% of your total Plan Cost Net and comprise 17 indications

14 of your top 25 are specialty drugs, making up 71.6% of your Top 25 spend

Peer = Express Scripts Peer 'Government - Northeast Region' market segment



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**CENTRAL JERSEY HEALTH INSURANCE FUND  
CONSENT AGENDA  
July 19, 2023**

The following Resolutions listed on the Consent Agenda will be enacted in one motion. Copies of all Resolutions are available to any person upon request. Any Commissioner wishing to remove any Resolution(s) to be voted upon, may do so at this time, and said Resolution(s) will be moved and voted separately.

**Resolutions**

**Subject Matter**

**Motion** \_\_\_\_\_

**Second** \_\_\_\_\_

Resolution 27-23: 2023 Wellness Grant Programs.....**Page 34**  
Resolution 28-23: Approval of the June and July 2023 Bills Lists .....**Page 35**

**RESOLUTION NO. 27-23**

**CENTRAL JERSEY HEALTH INSURANCE FUND  
ADOPTING 2023 WELLNESS GRANT PROGRAMS**

**WHEREAS**, the Central Jersey Health Insurance Fund is duly constituted as a Health Benefits Joint Insurance Fund and is subject to certain requirements of the Local Public Contracts Law; and;

**WHEREAS**, the Commissioners set forth a budget for the Central Jersey Health Insurance Fund members for the year of January 1, 2023 through December 31, 2023. This budget includes \$125,000 for individual member wellness grants;

**WHEREAS**, the Central Jersey Health Insurance Fund Executive Committee requested grant applications from Fund members which were received and reviewed by the Committee and deemed appropriate and within budget;

Group Name	Biometric Screenings (option 1)	Option 2 (Wellness Days)	Option 3 (Build Own)	Amount Requested	Wellness Champion Stipend	Total	Notes
Oceanport			X	\$3,780.00		\$3,780.00	Preferred Behavior EHP plan for all employees;
Aberdeen					\$700.00	\$25,585.00	farm fresh program, health fair, biometric screening
Bedminster			X			\$7,500.00	Kickball tournament with healthy lunch; step challenge; free membership for winner;
Atlantic Highlands			X			\$9,700.00	Medication Review by local pharmacy; blood glucose and A1C checks; Bone density checks; Gym memberships
Lakewood Twp			X		\$1,500.00	\$17,000.00	Health Challenges; Wellness Workshops; Wellness Fair; Office Wellbeing Initiatives; CPR Courses
Montgomery Twp			X			\$11,670.00	Health Well Solutions - Educational platform offering various wellness topics; biometric screenings; health fair
Toms River		X			\$2,500.00	\$20,000.00	Comprehensive Biometric Screenings and 2-3 Wellness Days
<b>Totals</b>						<b>\$95,235.00</b>	
<b>Remainder available for Grants</b>						<b>\$29,765.00</b>	

**WHEREAS**, on July 19, 2023, the Commissioners of Central Jersey Health Insurance Fund approved Wellness Grant Programs totaling \$20,000:

**CENTRAL JERSEY HEALTH INSURANCE FUND  
ADOPTED: July 19, 2023**

**BY:** \_\_\_\_\_  
**CHAIRPERSON**

**ATTEST:**  
\_\_\_\_\_  
**SECRETARY**

**CENTRAL JERSEY HEALTH INSURANCE FUND  
APPROVAL OF THE JUNE ANF JULY 2023 BILLS LISTS**

**WHEREAS**, the Central Jersey Health Insurance Fund held a Public Meeting on **July 19, 2023** for the purposes of conducting the official business of the Fund; and

**WHEREAS**, The Treasurer for the Fund presented bills lists to satisfy outstanding costs incurred for operating the Fund during the months of June and July 2023 for consideration and approval of the Executive Committee; and

**WHEREAS**, The Treasurer for the Fund presented a Treasurers Report which detailed the claims payments and imprest transfers for the Fund for the Month of May for all Fund Years for consideration and approval of the Executive Committee; and

**WHEREAS**, a quorum of the Executive Committee was present thereby conforming with the By-laws of the Fund to conduct official business of the Fund,

**NOW THEREFORE BE IT RESOLVED** the Commissioners of the Executive Committee of the Central Jersey Health Insurance Fund hereby approve the Bills List for June and July 2023 prepared by the Treasurer of the Fund and duly authorize and concur said bills to be paid expeditiously, in accordance with the laws and regulations promulgated by the State of New Jersey for Municipal Health Insurance Funds.

**NOW, THEREFORE BE IT FURTHER RESOLVED**, the Commissioners of the Executive Committee of the Central Jersey Health Insurance Fund hereby approve the Treasurers Report as furnished by the Treasurer of the Fund and concur with actions undertaken by the Treasurer, in accordance with the laws and regulations promulgated by the State of New Jersey for Municipal Health Insurance Funds.

**ADOPTED: July 19, 2023**

**BY:** \_\_\_\_\_  
**CHAIRPERSON**

**ATTEST:**  
  
\_\_\_\_\_  
**SECRETARY**

# APPENDIX I



**CENTRAL JERSEY HEALTH INSURANCE FUND  
OPEN MINUTES  
MAY 17, 2023  
ZOOM MEETING  
1:30 PM**

Meeting called to order by Chairman Thomas Nolan. The Open Public Meeting notice read into record.

**PLEDGE OF ALLEGIANCE  
MEETING OF EXECUTIVE COMMITTEE CALLED TO ORDER  
ROLL CALL OF 2023 EXECUTIVE COMMITTEE**

<b>CHAIRPERSON</b>		
Thomas Nolan	Borough of Brielle	Present
<b>SECRETARY</b>		
Brian Brach	Manasquan RRSA	Present
<b>EXECUTIVE</b>	<b>COMMITTEE</b>	
Diane Lapp	Township of Manchester	Present
Brian Valentino	Western Monmouth MUA	Absent
Brian Dempsey	Spring Lake Borough	Present
Peter O'Reilly	Borough of Lakewood	Present
<b>ALTERNATES:</b>		
Louis Amoruso	Toms River	Present
Angela Morin	Aberdeen	Absent

**APPOINTED OFFICIALS PRESENT:**

Executive Director/Administrator	PERMA Risk Management Services	<b>Brandon Lodics Emily Koval Jordyn DeLorenzo</b>	Present Present Present
Program Manager	Conner Strong & Buckelew	<b>Crystal Bailey</b>	Present
Attorney	Berry, Sahradnik, Kotzas & Benson	<b>Jack Sahradnik</b>	Present
Treasurer		<b>Stephen Mayer</b>	Present
Network & Medical Claims Service	Aetna	<b>Jason Silverstein</b>	Present
Network & Medical Claims Service	AmeriHealth	<b>Kristina Strain</b>	Present
Dental Claims Service	Delta Dental	<b>Brian Remlinger</b>	Present
Rx Administrator	Express Scripts	<b>Charles Yuk</b>	Present
Auditor	Mercadien	<b>Digesh Patel Jack Hammell</b>	Present Present

**OTHERS PRESENT:**

Beata Roefaro	Tami Novak
Chris Mullins	Darren
Brooke Frapwell	Robert Ferragina
Alison Kelly	Robin Ray
Diane Peterson	Tina Zavalas
Tyler Jackson	Scott Davenport
Joe Gentile	Tom Flarity
Jim Diaz	
D. Scoblete	

**APPROVAL OF MINUTES: MARCH 15, 2023 OPEN:**

**MOTION TO APPROVE OPEN MINUTES OF MARCH 15, 2023**

<b>MOTION:</b>	Commissioner Lapp
<b>SECOND:</b>	Commissioner Amoruso
<b>VOTE:</b>	All in Favor
	Brach - Abstained

**CORRESPONDENCE:** None

**EXECUTIVE DIRECTOR'S REPORT**

Emily Koval reviewed the Financials through February 28, 2023. She stated that the month of February and January were a little higher than expected. She stated that the Aetna report does show high claimants so that could be reflected in the financials but there is nothing to be concerned about. The statutory surplus is still very high at about \$14 Million.

**AUDITOR AND ACTUARY YEAR-END REPORTS**

Mr. Digesh Patel from Mercadien reviewed the presentation that was sent to the Fund Commissioners. The Finance Committee reviewed prior to the meeting and approved the draft. Mr. Patel stated that there is were no findings and the opinion was unmodified and clean. Mr. Hammell reviewed the financial highlights included in the presentation. He stated that assets decreased due to the dividend that was declared in Fund year 2022. He stated that the year was healthy and had growth. He stated that there were no changes to the scope of the Audit. He stated that they received full cooperation of management and there were no disagreements.

Mrs. Koval noted that there is a Lobbyist that works for the Fund who is continuously giving information on legislation changes and keeping the fund compliant.

Resolution 21-23 approving and authorization to file with the state is included in the consent agenda, along with the affidavit to be signed by all present Commissioners.

Mrs. Koval stated that once this audit is filed, PERMA recommends the closure of Fund Year 2021. All IBNR has been expensed and there are no outstanding accounts receivable or payable. Resolution 22-23 allows for closing this year and it is included in consent.

**REQUESTS FOR PROPOSALS** - Mrs. Koval stated that at the last meeting, the Fund approved the QPA to release competitive contracting RFPs for our professional services. The RFPs will be released early this summer with responses due prior the budget process. The contracts committee will be contacted to perform the evaluations.

**NEW MEMBERS** - Mrs. Koval stated the Fund continues to see more applications from local entities. The below new member status report has been updated. There is one group that has passed a resolution to join the Fund. She stated that Monmouth County Bayshore Outfall Authority will join 7/1. Resolution 23-23 offers membership to the Authority and it is in consent.

**2023 WELLNESS GRANT APPLICATIONS** - Mrs. Koval stated that applications for a 2023 wellness grant were emailed to the membership last month. The total budget is \$125,000 for all medical members.

Montgomery Twp requested a grant for 2023. Their application is included in the appendix IV. The total additional request is \$11,670. The Wellness Committee reviewed and approved. Resolution 24-23 approves this and is in the Consent Agenda. There are about \$49,000 in grants still available to the membership. The **due date is June 30, 2023** for all members that are interested. The **due date is June 30, 2023** for all members that are interested.

Wellness Grant Applications are in the Appendix.

**GASB 75 REPORTS** - Mrs. Koval stated that the Fund contracts with an Actuary to provide GASB 75 reports on behalf of its medical members. Please reach out to Jordyn DeLorenzo if your audit requires a full report or update to last year's report. During its 'busy' season, reports can take up to 4 weeks to turn around.

### **PROGRAM MANAGER'S REPORT**

Ms. Bailey reviewed the agenda reports.

### **ELIGIBILITY/ENROLLMENT:**

Please direct any eligibility, enrollment, or system related questions to our dedicated CJHIF enrollment team. To contact the team, email [cjhifenrollments@permainc.com](mailto:cjhifenrollments@permainc.com) or fax to 856-552-2175. System training (new and refresher) is provided to all contacts with WEX access **every 3<sup>rd</sup> Wednesday at 10AM**. Please contact Austin Flinn, [aflinn@permainc.com](mailto:aflinn@permainc.com) for additional information or to request an invite.

### **COVERAGE UPDATES:**

Plumsted Township has requested to add dental and vision to their current benefits (medical/Rx) through CJHIF. Their current dental plan is with Aetna and will be moved to Delta Dental, mirroring the current dental benefits. They currently do not have a vision plan, the vision benefits will be with Aetna. The change is due to take place on or around 8/1/23.

**MOTION TO APPROVE TO ALLOW PLUMSTEAD TOWNSHIP TO ADD DENTAL AND VISION TO THEIR CURRENT BENEFITS IN THE HIF ON OR AROUND 8/1/2023:**

**MOTION:** Commissioner Brach  
**SECOND:** Commissioner Dempsey  
**VOTE:** All in Favor

**EXPRESS-SCRIPTS UPDATE**

Ms. Bailey reviewed the following reports:

**2022 SafeGuardRx Savings** –SafeGuardRX provides condition-specific patient engagement tools and innovative cost containment strategies to protect plans from higher costs while promoting healthier members. The program engages with member with conditions such as cardiovascular, diabetes, hepatitis, HIV, inflammatory and atopic conditions, multiple sclerosis, neurological, cancer and rare diseases. As a result, the CJHIF has saved \$13,736. The savings will be provided to the CJHIF in the form of invoice credits by ESI.

**Fraud, Waste and Abuse:** Due to the recent fraud and abuse issue identified for the drug Ozempic, ESI has changed their requirements for members prescribed the drug. The drug is only FDA approved for patients with Type 2 diabetes, however, it has been prescribed for weight loss which is not approved by the FDA. Weight loss drugs are not covered by the Fund. Effective 4/1/23 those who were given a new script for Ozempic will be required to go through the prior authorization process to confirm they have met the criteria to be prescribed the drug. Those who were taking the drug prior to 4/1/23 will be grandfathered, prior authorization will not be required unless the member’s script for the drug has changed.

**1Q2023 SaveOn Savings** – In the 1Q2023 (1/1/2023 – 3/19/2023), The CJHIF saved \$115,488 for members enrolled in SaveOn. There were 28 participants in the program, for an average savings per prescription of \$2,179.

**2023 LEGISLATIVE REVIEW**

**OPERATIONAL UPDATES:**

**COVID National Emergency** – On April 10, 2023, President Biden signed legislation to end the COVID National Emergency immediately. As a result, the outbreak period for extended COBRA/HIPAA Special Enrollment Period deadlines will end July 10, 2023

**COVID -19**

**2023 LEGISLATIVE REVIEW: COVID-19**

1. **National Emergency Declaration** - On January 30, 2023, the federal government announced the two national emergencies addressing COVID-19, the public health emergency (PHE) and the national emergency will end May 11, 2023. As a result, the Program Manager recommends the following effective July 1, 2023:
  - o COVID-19 vaccines, including boosters – cover at \$0 copay at in network locations only. (Previously covered at any location).
  - o COVID-19 At Home Testing Kits – no longer covered by the plan at any retail location

or mail order through ESI. Members would be responsible for the full costs of the kit.

- o Diagnostic testing and providers - covered at member cost share.

**2. At Home COVID-19 Testing - Covered through June 30, 2023**

In 2022, the Central Jersey HIF paid \$33,284.11 in total plan costs for At Home COVID-19 test kits: \$15,335.47 in retail costs and \$17,948.64 in mail order costs.

FREE Tests from the Government - COVID-19 at home test kits are available through the government. Every U.S. household is eligible to order 4 free COVID-19 at home tests.

<https://www.covid.gov/tests>

**3. Vaccine Mandates - Covered at \$0 at in network location.**

As a reminder testing as an occupational requirement are not covered under Employer Health Plans.

**2022 Filings** - Deadline for carriers to submit the filings for 2022 plan year is June 1, 2023. Aetna, AHA and ESI will submit on behalf of the HIFs. The Program Manager will provide carriers all information needed for submission. Groups do not need to file on an individual basis.

**Appeals**

**Carrier Appeals:**

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
3/16/2023	Medical/Aetna	CJHIF-2023-03-02	OON Anesthesia Payment	Upheld	3/23/2023

**IRO Submissions: None**

**TREASURER** - Fund Treasurer Steve Mayer stated that the bills are in the agenda and the Resolution is in the consent agenda.

**ATTORNEY:** Mr. Sahradnik stated he has nothing to report.

**AETNA:** Mr. Silverstein reviewed the claims for the month of February and March 2023. He stated that there were 6 high cost claimants over the threshold of \$50,000 for the month of February and 10 for the month of March. He stated that all dashboard metrics continue to perform well.

**AMERIHEALTH:** Kristina Strain reviewed the claims for April 2023. There were no high claimants for the month of April.

**EXPRESS SCRIPTS:** Charles Yuk reviewed the claims for Q1 2023. He stated that the numbers are looking positive. He stated that the numbers are showing a decrease compared to Q1 2022 with a -2.7% trend.

**DELTA DENTAL:** Brian Remlinger reviewed the Dental No Visit Statistics. HE stated that there was 36% of members who did not see a dentist for 2 years. He stated that there is an increased risk when there are no visits. He stated that not going to the dentist costs more in the long run because there is no preventative visits.

**MOTION TO APPROVE THE CONSENT AGENDA WHICH INCLUDES THE FOLLOWING:**

- Resolution 21-23: Approving the 2022 Audit
- Resolution 22-23: Approval to Close Fund Year 2021
- Resolution 23-23: New Member Approval
- Resolution 24-23: Adopting 2023 Wellness Grant Programs
- Resolution 25-23: Amending Coverage after PE Term
- Resolution 26-23: Approval of the April and May 2023 Bills Lists

<b>MOTION:</b>	Commissioner Lapp
<b>SECOND:</b>	Commissioner Amoruso
<b>ROLL CALL:</b>	6 Ayes, 0 Nays

**OLD BUSINESS:** None

**NEW BUSINESS:** None.

**PUBLIC COMMENT:** None.

**MOTION TO ADJOURN MEETING:**

<b>MOTION:</b>	Commissioner Dempsey
<b>SECOND:</b>	Commissioner Lapp
<b>VOTE:</b>	All in Favor

**MEETING ADJOURNED: 2:30 pm**

**Minutes Prepared by: Jordyn DeLorenzo , Assisting Secretary**

**Next Meeting: July 19, 2023 1:30 pm, Zoom Meeting**

## **APPENDIX II**

## **Central Jersey Health Insurance Fund 2023 Operations Review and Medical Claims Audit**

A health care claims audit is designed to assess whether claims are being adjudicated correctly, in accordance with the provisions of the plan of benefits, and paid only on behalf of eligible participants as determined by the provisions of the plan. Best practice is to look beyond just the claims and to identify operational or administrative issues that may lead to broader claims processing and service issues, allowing for real-world recommendations for resolution.

AIM will perform an Operations Review of Aetna, which is an in-depth evaluation of the controls employed by the administrator to ensure quality administration.

- In an Operations Review (OR), a comprehensive Request for Information (RFI) is prepared and sent to Aetna in advance of the scheduled OR meeting.
- During the OR, interviews are conducted with key management and operations personnel to review Aetna's responses, procedures and methodologies.
- The OR encompasses such areas as system capabilities, staffing levels and turnover, performance standards, quality assurance for claim processing and customer service, Aetna's actual performance vs. client-specific and/or industry standards for accuracy, timeliness of claims adjudication, reporting capabilities, coordination with other administrative areas/vendors, and cost-management activities such as overpayment recovery, pricing controls and TPL investigations.
- Findings are compared to industry best practices.
- An OR can identify weaknesses in administrative controls that lead to poor performance.

In conjunction with the Operations Review, a medical claims audit will also be conducted on the administration by Aetna for the HIF employee medical plan. The medical claims audit will be conducted on a sample of claims finalized during the identified audit period. The audit will assess whether claims are being adjudicated correctly, in accordance with the provisions of the HIF plan of benefits and paid on behalf of eligible participants as determined by the provisions of the plan.

The purpose of the audit is to provide an assessment of Aetna's overall claims processing and financial accuracy performance during the audit period versus industry standards and applicable contractual standards.

**Claim Audit Methodology** - The principal objective of the claims audit will be to determine Aetna's claim processing accuracy and financial accuracy on medical claims. The financial accuracy calculation will identify the financial impact (and potential recoveries) for payment errors. In addition, a critical component of the audit process will be to identify the causes of errors. AIM's audit findings and recommendations will specifically identify these causes and recommend solutions that can help Aetna improve its claims administration and eliminate the kinds of errors identified through the audit process.