

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND
OPEN MINUTES
SEPTEMBER 25, 2017
BELLMAWR BOROUGH
6:00 PM**

Meeting of Executive Committee called to order by Chair Mevoli. Open Public Meetings notice read into record.

PLEDGE OF ALLEGIANCE AND MOMENT OF SILENCE

WELCOME - Commissioner DiAngelo welcomed the Committee to Bellmawr Borough

ROLL CALL OF 2017 EXECUTIVE COMMITTEE:

Michael Mevoli, Chairman	Borough of Brooklawn	Present
M. Joseph Wolk, Secretary	Borough of Mt. Ephraim	Present
Richard Michielli	Borough of Magnolia	Present
Louis Di Angelo	Borough of Bellmawr	Present
Terry Shannon	Borough of Barrington	Present
Jack Lipsett	Gloucester City	Present
Neal Rochford	Haddonfield	Present
Edward Hill	CCBOSS	Absent

APPOINTED PROFESSIONALS PRESENT:

Executive Director/Administrator PERMA Risk Management Services
Paul Laracy
Karen Kamprath

Program Manager Conner Strong & Buckelew
Brandon Lodics
Maggie Friel

Attorney Ken Harris

Deputy Treasurer Ken Verrill
Lorraine Verrill

Aetna Kim Ward

AmeriHealth Lisa DiDio
Mike Murphy

Express Scripts Ken Rostkowski

Also Present:

Eleanor Kelly, Runnemedede
Sarah Scala, Hardenbergh Insurance
Group
Robert Maybury, Mt. Holly MUA
Kim Porter, CHB Group

APPROVAL OF MINUTES: August 28, 2017 Open

MOTION TO APPROVE OPEN MINUTES OF AUGUST 28, 2017:

Moved: Commissioner DiAngelo
Second: Commissioner Wolk
Vote: Unanimous

CORRESPONDENCE - None

Fast Track Financial Reports - as of July 31, 2017

Executive Director said July was a very good month for the Fund with a gain in surplus of \$609,000. He said after paying a dividend to the members and also the SHIF and Coastal Fund’s there is a surplus of over \$16 million.

EXECUTIVE DIRECTOR’S REPORT

2018 BUDGET ADOPTION

Executive Director said the budget was introduced at the August meeting and the narrative is included in the Agenda. He said there is a small difference because Aenta was able to reduce the Medicare Advantage rates. He said the overall increase is 2.18%. He said CCBOSS is receiving a larger increase.

In response to Chair Mevoli, Executive Director said Conner Strong is working with CCBOSS to try and lower their increase. He said their retiree costs are very high. Executive Director said one condition of the budget is transitioning the retirees to the Medicare Advantage RX program. He said all retirees will be mapped in to plans that are equal to or better than their current plans at a lower cost to the Fund.

MOTION TO OPEN THE PUBLIC HEARING ON THE 2018 BUDGET:

Moved: Commissioner Wolk
Second: Commissioner DiAngelo
Vote: Unanimous

MOTION TO CLOSE THE PUBLIC HEARING:

Moved: Commissioner Wolk
Second: Commissioner Michielli

Vote: Unanimous

MOTION TO ADOPT THE 2018 SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND BUDGET IN THE AMOUNT OF \$44,629,039:

Moved: Commissioner Diangelo
Second: Commissioner Shannon
Vote: 7 AYES, 0 NAYS

CLAIMS FUND

Medical claims are increasing by .75% for all members except for CCBOSS. CCBOSS medical claims are increasing by 15.82%.

Prescription claims are dropping by 20.51% for CCBOSS while they are flat for all other members.

The budget reflects a credit for Rx claims due to the application of formulary rebates and savings from the implementation of a prescription plan for Medicare retirees.

Dental claims are dropping by 5% due to improved network pricing.

REINSURANCE AND INSURED PROGRAMS

The reinsurance line is decreasing by 19.14% for specific claims coverage and aggregate claims reinsurance is staying flat. This change assumes that the HIF specific retention will rise from \$300,000 to \$325,000. The increase reflects very good overall experience at the MRHIF layer, and excellent loss experience for the SNJ HIF.

The Medicare Advantage renewal is rising by 17.69% which is a reflection of some high claims and the implementation of an ACA tax worth 3%. This tax may be repealed if ACA reform efforts are successful.

LOSS FUND CONTINGENCY

This item can be adjusted at the discretion of the Executive Committee. No money is currently budgeted for this item due to the priority placed on keeping the budget increase as low as possible.

CONTRACTS AND EXPENSES

Some expenses are proposed to rise by 2%.

The budget includes funding for a data analysis system. We implemented a system in past years but it could not produce timely and effective reports. Conner Strong and Buckelew has a new claims analysis system that, they expect, will be more effective.

ASSESSMENTS

Assessments are prepared using Fund policy developed over the last several years:

- There is no rate change for medical or Rx

- Dental rates are dropping by 6%
- In addition, loss ratio adjustment factors of +/-2.5% are applied at the entity level. This results in an average reduction in assessments of .88% for members other than CCBOSS.
- CCBOSS is rating on its own experience and is receiving a 15.54% increase on Medical and 20.51% decrease in Rx.

MRHIF MEETING

Executive Director said the MRHIF Executive Committee met on September 13th. At the meeting, the Committee introduced the 2018 budget which had an overall decrease of almost 10%. Because of good loss experience, the SNJHIF is receiving a decrease of 12.82%. In addition, the Committee approved a new 3 year renegotiated contract term with Express Scripts which will produce an 8% savings for the local Funds. The Committee also approved Aetna for a voluntary vision provider.

DIVIDENDS / SUPPLEMENTAL ASSESSMENTS

Executive Director said the financial position of the HIF is very strong and a dividend similar to the one declared in 2017 can be considered for 2018:

SNJ Municipal and County Members	
Surplus Objective	2 Month Target
Surplus Target	\$ 6,216,321
Surplus	\$ 15,623,417
Less Shares of Former Members	\$ 2,001,791
Available	\$ 7,405,305
Paid in 2015	\$ 750,000
Paid in 2016	\$ 1,500,000
Paid in 2017	\$ 3,649,475
Option 1: Pay 1/2 of Amount Available	\$ 3,702,653
Option 2: Pay Same as 2017	\$ 3,649,475

The Commissioners agreed to declare a dividend of \$3.6 million to be distributed in January. He said a formal resolution will be adopted at the October meeting.

Introduced Budget

Southern NJ Municipal Employee Benefits Fund					
2018 Certified Budget					
Census:	Total Monthly Census	Annual Census			
Medical - Aetna	1,614	19,368			
Medical - AmenHealth NJ	-	-			
Medical - AmenHealth Admin	112	1,344			
Rx	1,704	20,448			
Dental	1,637	19,644			
Medicare Advantage - Medical	713	8,556			
Rx No Medical (Incl in Rx above)	248	2,976			
Dental Only (Incl in Dental above)	768	9,216			
Medicare Adv Only (Incl above)	279	3,348			
DMO Only	1	12			
LINE ITEMS	2017 Annualized Budget	2018 Proposed Budget	\$ Change	% Change	
Claims					
1 Medical Claims - All Other	\$ 17,313,397	\$ 17,443,681	\$ 130,284	0.75%	
2 Medical Claims - CCBOSS	\$ 8,733,591	\$ 10,115,542	\$ 1,381,952	15.82%	
3 Subtotal Medical	\$ 26,046,988	\$ 27,559,224	\$ 1,512,236	5.81%	
4 Prescription Claims - All Other	\$ 5,990,323	\$ 5,990,323	\$ -	0.00%	
5 Prescription Claims - CCBOSS	\$ 3,590,086	\$ 2,853,599	\$ (736,486)	-20.51%	
6 Subtotal Prescription	\$ 9,580,409	\$ 8,843,923	\$ (736,486)	-7.69%	
7 Rx Rebates and EGWP Savings	\$ (360,000)	\$ (532,103)	\$ (172,103)	47.81%	
8 Dental Claims - All Other	\$ 1,267,095	\$ 1,203,740	\$ (63,355)	-5.00%	
9 Dental Claims - CCBOSS	\$ 234,835	\$ 223,141	\$ (11,744)	-5.00%	
10 Subtotal Dental	\$ 1,501,980	\$ 1,426,881	\$ (75,099)	-5.00%	
11 Subtotal Claims	\$ 36,769,377	\$ 37,297,925	\$ 528,547	1.44%	
12					
13 Loss Fund Contingency	\$ -	\$ -	\$ -	0.00%	
Insured Programs					
14 HMO Premiums	\$ 5,826	\$ 5,826	\$ -	0.00%	
15 Medicare Advantage - All Other	\$ 756,448	\$ 901,259	\$ 144,812	19.14%	
16 Medicare Advantage - CCBOSS	\$ 2,410,456	\$ 2,842,626	\$ 432,170	17.93%	
Subtotal Insured Programs	\$ 3,172,730	\$ 3,749,711	\$ 576,981	18.19%	
17					
Reinsurance					
19 Specific	\$ 1,093,801	\$ 953,580	\$ (140,220)	-12.82%	
20 Aggregate*	\$ 100,674	\$ 100,674	\$ -	0.00%	
21					
22 Subtotal Reinsurance	\$ 1,194,475	\$ 1,054,254	\$ (140,220)	-11.74%	
23					
24 Total Loss Fund	\$ 41,136,582.01	\$ 42,101,890.74	\$ 965,308.73	2.35%	
25					
Expenses					
27 Legal	\$ 20,074	\$ 20,475	\$ 402	2.00%	
28 Treasurer	\$ 14,280	\$ 14,566	\$ 286	2.00%	
29 Administrator	\$ 296,640	\$ 302,572	\$ 5,933	2.00%	
30 Program Manager	\$ 721,828	\$ 736,265	\$ 14,437	2.00%	
31 Brokerage	\$ 236,916	\$ 241,661	\$ 4,745	2.00%	
32 TPA - Med Aetna	\$ 993,966	\$ 1,013,915	\$ 19,949	2.01%	
33 TPA - Med AmenHealth Admin	\$ 57,036	\$ 57,036	\$ -	0.00%	
34 TPA - Dental	\$ 60,896	\$ 60,896	\$ -	0.00%	
35 Actuary	\$ 22,440	\$ 22,440	\$ -	0.00%	
36 Auditor	\$ 12,250	\$ 12,500	\$ 250	2.04%	
37 Subtotal Expenses	\$ 2,436,326	\$ 2,482,326	\$ 46,000	1.89%	
38					
39 Misc Contingency	\$ 19,425	\$ 19,425	\$ -	0.00%	
40 Enrollment Audits	\$ -	\$ -	\$ -	0.00%	
41 Data Analysis System	\$ 27,301	\$ 15,000	\$ (12,301)	-45.06%	
42 Wellness and Prevention Programs	\$ -	\$ -	\$ -	0.00%	
43 Affordable Care Act Taxes	\$ 10,252	\$ 10,252	\$ -	0.00%	
44 Plan Documents	\$ 20,000	\$ 15,000	\$ (5,000)	-25.00%	
45					
46 Total Expenses	\$ 2,513,305	\$ 2,542,004	\$ 28,699	1.14%	
47					
48 Total Budget	\$ 43,649,887	\$ 44,643,895	\$ 994,008	2.28%	
49 Total Billing	\$ 43,678,770	\$ 44,643,894	\$ 965,124	2.21%	
50					
51 Reconciliation	\$ 28,884	\$ (0)			

For Adoption

Southern NJ Municipal Employee Benefits Fund				
2018 Certified Budget				
Census:	Total Monthly Census	Annual Census		
Medical - Aetna	1,614	19,368		
Medical - AmenHealth NJ	-	-		
Medical - AmenHealth Admin	112	1,344		
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11	Subtotal Claims	\$ 36,769,377	\$ 37,297,928	\$ 528,547	1.44%
12					
13	Loss Fund Contingency	\$ -	\$ 1,003	\$ 1,003	0.00%
14	Insured Programs				
14	HMO Premiums	\$ 5,826	\$ 5,826	\$ -	0.00%
15	Medicare Advantage - All Other	\$ 756,448	\$ 901,259	\$ 144,812	19.14%
16	Medicare Advantage - CCBOSS	\$ 2,410,456	\$ 2,826,767	\$ 416,311	17.27%
	Subtotal Insured Programs	\$ 3,172,730	\$ 3,733,852	\$ 561,123	17.69%
17					
18	Reinsurance				
19	Specific	\$ 1,093,801	\$ 953,580	\$ (140,220)	-12.82%
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24	Total Loss Fund	\$ 41,136,582	\$ 42,087,035	\$ 950,453	2.31%
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26	Expenses				
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46	Total Expenses	\$ 2,513,305	\$ 2,542,004	\$ 28,699	1.14%
47					
48	Total Budget	\$ 43,649,887	\$ 44,629,039	\$ 979,152	2.24%
49	Total Billing	\$ 43,678,770	\$ 44,629,038	\$ 950,268	2.18%
50					
51	Reconciliation	\$ 28,884	\$ (0)		

Assessment Summary				
Group Name	2017	2018	Change \$	Chance %
BOROUGH OF BARRINGTON	\$ 1,316,100	\$ 1,282,032	\$ (34,068)	-2.59%
BOROUGH OF BELLMAWR	\$ 2,553,912	\$ 2,486,424	\$ (67,488)	-2.64%
BOROUGH OF BROOKLAWN	\$ 361,092	\$ 367,068	\$ 5,976	1.65%
BOROUGH OF GIBBSBORO	\$ 221,772	\$ 226,164	\$ 4,392	1.98%
BOROUGH OF LINDENWOLD	\$ 91,149	\$ 85,773	\$ (5,376)	-5.90%
BOROUGH OF MAGNOLIA	\$ 416,484	\$ 413,712	\$ (2,772)	-0.67%
BOROUGH OF MEDFORD LAKES	\$ 16,992	\$ 15,960	\$ (1,032)	-6.07%
BOROUGH OF MOUNT EPHRAIM	\$ 1,017,744	\$ 1,014,828	\$ (2,916)	-0.29%
BOROUGH OF RUNNEMEDE	\$ 965,352	\$ 944,784	\$ (20,568)	-2.13%
CHESILHURST BOROUGH	\$ 111,216	\$ 108,132	\$ (3,084)	-2.77%
GLOUCESTER CITY	\$ 3,075,324	\$ 3,141,288	\$ 65,964	2.14%
HADDONFIELD BOROUGH	\$ 2,410,320	\$ 2,373,984	\$ (36,336)	-1.51%
TOWNSHIP OF BORDENTOWN	\$ 1,019,220	\$ 998,256	\$ (20,964)	-2.06%
TOWNSHIP OF WILLINGBORO	\$ 15,060	\$ 14,220	\$ (840)	-5.58%
BOROUGH OF PITMAN	\$ 1,052,940	\$ 1,025,304	\$ (27,636)	-2.62%
BOROUGH OF WENONAH	\$ 340,440	\$ 331,524	\$ (8,916)	-2.62%
PINE HILL BOROUGH	\$ 899,484	\$ 878,604	\$ (20,880)	-2.32%
BOROUGH OF PAULSBORO	\$ 1,209,396	\$ 1,179,312	\$ (30,084)	-2.49%
BOROUGH OF MERCHANTVILLE	\$ 489,000	\$ 493,368	\$ 4,368	0.89%
PENNSAUKEN TOWNSHIP	\$ 209,232	\$ 197,496	\$ (11,736)	-5.61%
NORTH HANOVER TWP	\$ 9,804	\$ 9,180	\$ (624)	-6.36%
BOROUGH OF SOMERDALE	\$ 639,653	\$ 634,193	\$ (5,460)	-0.85%
MT. HOLLY MUNICIPAL UTILITIES AUTHO	\$ 1,195,992	\$ 1,220,040	\$ 24,048	2.01%
WINSLOW TWP FIRE DISTRICT #1	\$ 524,081	\$ 510,089	\$ (13,992)	-2.67%
BOROUGH OF WESTVILLE	\$ 593,208	\$ 578,484	\$ (14,724)	-2.48%
FRANKLIN TWP	\$ 1,353,252	\$ 1,363,956	\$ 10,704	0.79%
CAMDEN COUNTY BOARD OF SOCIAL SERVICES	\$ 16,049,868	\$ 17,241,996	\$ 1,192,128	7.43%
LUMBERTON TOWNSHIP	\$ 770,676	\$ 787,164	\$ 16,488	2.14%
BOROUGH OF HADDON HEIGHTS	\$ 1,158,552	\$ 1,129,800	\$ (28,752)	-2.48%
MANTUA TOWNSHIP	\$ 2,030,112	\$ 2,019,348	\$ (10,764)	-0.53%
TOWNSHIP OF MAPLE SHADE	\$ 1,477,812	\$ 1,477,812	\$ -	0.00%
TOWNSHIP OF BERLIN	\$ 37,620	\$ 35,448	\$ (2,172)	-5.77%
TOWNSHIP OF WATERFORD	\$ 45,912	\$ 43,296	\$ (2,616)	-5.70%
Totals:	\$ 43,678,770	\$ 44,629,038	\$ 950,268	2.18%

PROGRAM MANAGER'S REPORT

EGWP (EMPLOYEE GROUP WAIVER PLAN)

Program Manager reviewed the EGWP presentation that was distributed prior to the meeting. A sample communication piece was also included in the agenda. He said this will go into place on January 1, 2018 for Medicare eligible retirees with prescription through the Fund. He said Aetna will be the carrier who will be contracted by Medicare part D to act as Medicare and the secondary coverage. Currently the Fund acts in place of Medicare and secondary coverage. He said high risk members will be transitioned into a fully insured plan. Program Manager said CCBOSS transitioned its population in 2015 and this was a positive transition for them. He said members would have 1 ID card which will act as Medicare part A, B, D and secondary coverage. He said 7 plans have been built that are all equal to or better than the current plan. He said the most notable impacts to the members will be mail order and prior authorizations will not transfer, however the member would not have mandatory mail order.

In response to Commissioner Shannon, Program Manager said the member can not opt out, however that language is required in the letter. In response to Chair Mevoli, Program Manager said the drug would not be denied due to the formulary, but the member could have a higher copay depending on plan design. In response to Commissioner Shannon, Program Manager said members can contact Conner Strong with questions if they are not able to reach Aetna, however Aetna will have the specified number up and running prior to roll out. In response to Commissioner DiAngelo, Ms. Ward said this has been rolled out for other entities and the transition was seamless so far.

OPEN ENROLLMENT

The SNJREBF will be hosting the 2018 open enrollment for January 1, 2018. Open Enrollment will begin in mid-October and run through mid-November. New this year, as we addressed at our previous meeting, Open Enrollment packets will be sent electronically to each group for distribution to their employees. However, there is a 2002 Department of Labor Regulation (DOL Regulation §2520.104b-1(c)) pertaining to the electronic distribution of required health & retirement plan information to employees which we are researching with our legal and compliance teams. We would like to have a discussion about this at the meeting.

Highlights:

- Retirees and COBRA enrollees will receive the information directly at their residencies
- Medicare Advantage retirees will not be included in this open enrollment

VISION RFP UPDATE

Program Manager said the MRHIF recently released an RFP for a stand-alone vision product which resulted in 3 proposals. The MRHIF chose Aetna as their preferred vendor. He said there is no cost unless a group decides to implement.

ESI 2018 FORMULARY

ESI has announced changes to the National Preferred Formulary (NPF) guide which will take effect on January 1, 2018. New exclusions in the NPF are expected to deliver an additional \$2.5 billion in 10 savings among their full book of business. ESI has informed us that (based on claim data for the last 130 days) there will be 62 members/patients impacted by the changes.

Impacted members will be receiving a mailed notification from Express Scripts notifying them of their impacted medication and the preferred alternatives. The NPF allows for members who may not take preferred medication due to a clinical need an opportunity to file for an authorization for a no preferred medication to be covered.

The updated guide excludes 46 multi-source brands including Benicar/Benicar HCT, Strattera and Vytorin. A summary list of the exclusions was distributed prior to the meeting.

TELE-MEDICINE

Program Manager said as of January 1, 2018 all members will have access to Tele-Medicine for a \$0 copay. He said Aetna will offer Teledoc and AmeriHealth will offer MdLive. In response to Commissioner Shannon, Program Manager said there will be safeguards and they will not be prescribing narcotics over the phone. He said this is added to the plan at no additional charge from the carriers.

SAVEON UPDATE

As discussed at the prior meeting, we continue to work on the January 1, implementation of the SaveOn program with Express Scripts and SaveOn. Included in this agenda is a draft of the initial member communication we will be mailing on or about November 1, 2017 to approximately 38 SNJREBF members who have been identified as eligible for the SaveOn program (page 18). SaveOn will send a second letter to those members who do not respond to the initial communication followed by 3 phone call attempts to reach non-responsive members.

APPEAL REVIEW:

During the month of August we were presented with 1 Rx appeal, which was originally denied as not medically necessary. It was sent to 2nd Level IRO and the denial was upheld

TREASURER'S REPORT - Deputy Treasurer reviewed the September 2017 Bills List and Treasurer's report.

Resolution 24-17: Payment of September 2017 Bills List

FY 2016	\$6,500
FY 2017	\$574,233.69
TOTAL	\$580,723.69

MOTION TO APPROVE RESOLUTION 24-17, APPROVAL OF SEPTEMBER 2017 BILLS LIST IN THE AMOUNT OF \$580,723.69.

Motion: Commissioner Wolk
Second: Commissioner DiAngelo
Vote: 7 Ayes, 0 Nays

MOTION TO APPROVE THE REMAINDER OF THE TREASURER'S REPORT

Motion: Commissioner Wolk
Second: Commissioner Michielli
Vote: 7 Ayes, 0 Nays

FUND ATTORNEY: Fund Attorney said the Graham-Cassidy bill most likely does not have enough votes to go through. If passed, the bill would give the State authority to waive out of certain ACA provisions. He said the amount each State receives for Medicaid would be on a per capita basis.

AETNA: Ms. Ward said the July claims are slightly below average with 2 claims over \$50,000.

AMERIHEALTH: Ms. DiDio said there were no high level claimants for July. She said AmeriHealth is moving their preferred lab arrangement to LabCorp beginning October 1, 2014. She said Quest will now be covered as Out of Network. She introduced Mike Murphy who will be taking over her position at AmeriHealth and will be attending future meetings. She thanked the Fund for their partnership.

EXPRESS SCRIPTS: Mr. Rostkowski said overall there is no change from August. He said the Fund performance is strong, and there has been a drop in cost due to the completion of therapy for a few Hep C patients and generic utilization has increased.

DENTAL ADMINISTRATOR: None

OLD BUSINESS: None

NEW BUSINESS: None

PUBLIC COMMENT: None

MOTION TO ADJOURN:

Moved: Commissioner Michielli
Second: Commissioner Wolk
Vote: Unanimous

MEETING ADJOURNED:

NEXT MEETING: October 23, 2017

BELLMAWR BOROUGH

Emily Koval , Assisting Secretary
for

JOSEPH WOLK, SECRETARY