AGENDA & REPORTS MAY 24, 2021 CONFERENCE CALL 6:00 PM

Join Zoom Meeting

https://permainc.zoom.us/j/95934689266

Meeting ID: 959 3468 9266

Dial by your location

+1 929 205 6099 US (New York) +1 301 715 8592 US (Washington D.C) +1 312 626 6799 US (Chicago)

Meeting ID: 959 3468 9266

STATEMENT OF COMPLIANCE WITH OPEN PUBLIC MEETINGS ACT

Pursuant to Executive Order Number 103 dated March 9, 2020, Governor Murphy declared a Public Health Emergency and a State of Emergency in New Jersey. On March 20, 2020 P.L. 2020 Chapter 11 amended the Open Public Meetings Act to allow local public bodies to conduct Remote Public Meetings by use of electronic communications technology during a period declared as a Public Health Emergency or a State of Emergency.

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

- 1. Sending advance written notice to The Courier Post and the Burlington County Times
- 2. Filing advance written notice of this meeting with the Clerk/Administrator of each member.
- 3. Sending advance electronic mail notice of this meeting to the Clerk/Administrator of each member.
- 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 members.
- 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.

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND AGENDA

MEETING: MAY 24, 2021 CONFERENCE CALL 6:00 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

FLAG SALUTE - MOMENT OF SILENCE

ROLL CALL OF 2021 EXECUTIVE COMMITTEE

Michael Mevoli, Chairman
Joseph Wolk, Secretary
Louis DiAngelo, Executive Committee Member
Terry Shannon, Executive Committee Member
Neal Rochford, Executive Committee Member
Edward Hill, Executive Committee Member
Robert Maybury, Executive Committee Member
Gary Passanante, Executive Committee Alternate

APPROVAL OF MINUTES: April 26, 20	21	Open	(Appendix I)	
CORRESPONDENCE - None				
REPORTS:				
EXECUTIVE DIRECTOR (PERMA)				
Monthly Report		••••••		Page 1
PROGRAM MANAGER- (Conner Stron	og & Buckelew)			
Monthly Report		•••••	•••••	Page 8
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TREASURER - (Michael Zambito/Verril May 2021 Voucher List (Resolu	•			Ρ2σο 11
Treasurers Report				
Resolution 17-21: May 2021 Bill				
Confirmation of Claims Paid/C				
Ratification of Treasurers Repor				
ATTORNEY - (J. Kenneth Harris)				
Monthly Report				
NETWORK & THIRD PARTY ADMINI	STRATOR - (Aei	nta)		
Monthly Report	•	•	•••••	Page 16
NETWORK & THIRD PARTY ADMINI	STRATOR - (Am	eriHe2	1th)	
Monthly Report	`		,	Page 20
<i>J</i> 1				U

PRESCRIPTION ADMINISTRATOR - (Express Scripts) Monthly ReportTBD
DENTAL ADMINISTRATOR - (Delta Dental) Monthly Percent
Monthly Report
OLD BUSINESS
NEW BUSINESS
PUBLIC COMMENT
RESOLUTION - EXECUTIVE SESSION FOR CERTAIN SPECIFIED PURPOSES PERSONNEL - CLAIMS - LITIGATION
MEETING ADJOURNED

Southern New Jersey Regional Employee Benefits Fund Executive Director's Report May 24, 2021

FINANCE AND CONTRACTS

PRO FORMA REPORTS

Fast Track Financial Report – as of March 31, 2021 (page 2)

REQUESTS FOR PROPOSALS

Under the Local Public Contracts law, the following positions need to go out for RFP for a three-year term starting January 1, 2022: Executive Director and Program Manager.

MOTION: Motion to issue and advertise Requests for Proposals for professional services contracts on behalf of the Fund for Executive Director and Program Manager.

PHARMACY BENEFIT MANAGER - RFP

The MRHIF has issued an RFP for the contract currently held by Express Scripts. We have received 7 responses all of which are offering material savings over current costs. We have developed a list of finalists and are obtaining final pricing offers. We will be consulting with the MRHIF Contracts Committee, the MRHIF Executive Committee, and the SNJREBF Contracts Committee as this process matures and are targeting decisions for mid-June.

FINANCIAL DISCLOSURE STATEMENTS

As is done on the local level and required by State law, each Fund Commissioner is required to complete a Financial Disclosure Statement through the Department of Community Affairs. The 2021 notice with instructions has been released. The original deadline to file was April 30, 2021, However, that has been extended until June 30, 2021. Commissioners that have not yet filed will receive an email notification.

	50	0				FUND
			AS OF	IAL FAST TRACK REI March 31, 2021	PORT	
			T.U.C	·	20100	FUND
			THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
	FOUNDITING INC	2245				
	ERWRITING INCO	JME	3,658,072	10,937,549	1,273,942,755	1,284,880,3
CLAIN	1 EXPENSES		2 222 754	0.040.000	1 004 104 040	4 040 400
	Paid Claims		2,838,761	8,948,862	1,034,181,010	1,043,129,
	IBNR		38,996	248,791	2,490,000	2,738,
	Less Specific Exces		(68,626)	(68,626)	(19,184,698)	(19,253,
	Less Aggregate Exc	ess			(1,807,360)	(1,807,
	AL CLAIMS		2,809,132	9,129,027	1,015,678,952	1,024,807,9
EXPEN						
	MA & HMO Premiu	ms	338,752	1,008,391	27,777,460	28,785,
	Excess Premiums		60,181	180,401	47,663,208	47,843,
	Administrative	_	214,239	646,296	115,823,339	116,469,
TOTA	AL EXPENSES		613,172	1,835,088	191,264,007	193,099,0
UNDE	RWRITING PROFIT	(1-2-3)	235,768	(26,566)	66,999,796	66,973,
INVES	TMENT INCOME		7,128	22,815	3,368,595	3,391,
DIVIDE	END INCOME		0	0	11,184,436	11,184,
STATU	JTORY PROFIT (4+	+5+6)	242,896	(3,751)	81,552,827	81,549,0
DIVIDE	END		0	0	69,789,455	69,789,
						03,763,
	ferred Surplus		0	0	0	
STAT	UTORY SURPLUS	(7-8+9)	242,896	(3,751)	11,763,371	11,759,6
			SURPLUS (DE	FICITS) BY FUND YEAR		
Closed	1	Surplus	5,426	(96,693)	5,815,138	5,718,
Ciosco		Cash	(147,117)	(1,535,125)	11,275,670	9,740,
2019		Surplus	(2,253)	3,331	4,270,513	4,273,
		Cash	(2,738)	1,782	4,270,273	4,272,
2020		Surplus	68,747	(13,632)	1,677,720	1,664,
		Cash	85,636	(1,932,913)	3,131,888	1,198,
2021		Surplus	170,976	103,243	2, 2, 22	103,
		Cash	2,458,780	1,697,380		1,697,
TALS	URPLUS (DEFICIT		242,896	(3,751)	11,763,371	11,759,6
TAL C	•	,	2,394,562	(1,768,877)	18,677,832	16,908,9
IALC	АЗП			• • • • • • • •	10,077,032	10,908,9
			CLAIIVI ANAI	YSIS BY FUND YEAR		
TOTAL	L CLOSED YEAR CLA	IMS	(1,294)	106,475	950,769,554	950,876,
	L CLOSED YEAR CLA YEAR 2019	IMS	(1,294)	106,475	950,769,554	950,876,
		IMS	(1,294) 5,901	106,475 6,916	950,769,554 32,736,244	
FUND	YEAR 2019	IMS				
FUND	YEAR 2019 Paid Claims			6,916	32,736,244	32,743,
FUND	YEAR 2019 Paid Claims IBNR	S	5,901	6,916 0	32,736,244	32,743,
FUND	YEAR 2019 Paid Claims IBNR Less Specific Exces	S	5,901	6,916 0 (485)	32,736,244 0 (691,587)	32,743, (692,
TOTAL	YEAR 2019 Paid Claims IBNR Less Specific Exces Less Aggregate Exc	S	5,901 - (485)	6,916 0 (485)	32,736,244 0 (691,587)	32,743, (692,
TOTAL	Paid Claims IBNR Less Specific Exces Less Aggregate Exc	S	5,901 - (485)	6,916 0 (485)	32,736,244 0 (691,587)	32,743, (692, 32,051,
TOTAL	YEAR 2019 Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2019 CLAIMS YEAR 2020	S	5,901 - (485) - 5,415	6,916 0 (485) 0 6,431	32,736,244 0 (691,587) 0 32,044,657	32,743, (692, 32,051, 33,190,
TOTAL	Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2019 CLAIMS YEAR 2020 Paid Claims	sscess	5,901 - (485) - 5,415 266,332	6,916 0 (485) 0 6,431	32,736,244 0 (691,587) 0 32,044,657	32,743, (692, 32,051, 33,190, 190,
TOTAI FUND	Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2019 CLAIMS YEAR 2020 Paid Claims IBNR	sess	5,901 - (485) - 5,415 266,332 (267,317)	6,916 0 (485) 0 6,431 2,384,494 (2,299,842)	32,736,244 0 (691,587) 0 32,044,657 30,805,796 2,490,000	32,743, (692, 32,051, 33,190, 190,
TOTAL	Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2019 CLAIMS YEAR 2020 Paid Claims IBNR Less Specific Exces	sess	5,901 - (485) - 5,415 266,332 (267,317) (68,140)	6,916 0 (485) 0 6,431 2,384,494 (2,299,842) (68,140)	32,736,244 0 (691,587) 0 32,044,657 30,805,796 2,490,000 (431,054)	32,743, (692, 32,051, 33,190, 190, (499,
TOTAL	Paid Claims IBNR Less Specific Exces Less Aggregate Exc FY 2019 CLAIMS YEAR 2020 Paid Claims IBNR Less Specific Exces Less Aggregate Exc	sess	5,901 - (485) - 5,415 266,332 (267,317) (68,140) 0	6,916 0 (485) 0 6,431 2,384,494 (2,299,842) (68,140) 0	32,736,244 0 (691,587) 0 32,044,657 30,805,796 2,490,000 (431,054) 0	32,743, (692, 32,051, 33,190, 190, (499,
TOTAL	Paid Claims IBNR Less Specific Exces Less Aggregate Exc FY 2019 CLAIMS YEAR 2020 Paid Claims IBNR Less Specific Exces Less Aggregate Exc Less Aggregate Exc	sess	5,901 - (485) - 5,415 266,332 (267,317) (68,140) 0 (69,125)	6,916 0 (485) 0 6,431 2,384,494 (2,299,842) (68,140) 0	32,736,244 0 (691,587) 0 32,044,657 30,805,796 2,490,000 (431,054) 0	32,743, (692, 32,051, 33,190, 190, (499,
TOTAL	PEAR 2019 Paid Claims IBNR Less Specific Exces Less Aggregate Exc FY 2019 CLAIMS YEAR 2020 Paid Claims IBNR Less Specific Exces Less Aggregate Exc Less Aggregate Exc FY 2020 CLAIMS YEAR 2021	sess	5,901 - (485) - 5,415 266,332 (267,317) (68,140) 0 (69,125)	6,916 0 (485) 0 6,431 2,384,494 (2,299,842) (68,140) 0 16,512 6,450,977	32,736,244 0 (691,587) 0 32,044,657 30,805,796 2,490,000 (431,054) 0	32,743, (692, 32,051, 33,190, 190, (499,
TOTAL	Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2019 CLAIMS YEAR 2020 Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2020 CLAIMS YEAR 2021 Paid Claims IBNR	s cess	5,901 - (485) - 5,415 266,332 (267,317) (68,140) 0 (69,125) 2,567,823 306,313	6,916 0 (485) 0 6,431 2,384,494 (2,299,842) (68,140) 0 16,512 6,450,977 2,548,633	32,736,244 0 (691,587) 0 32,044,657 30,805,796 2,490,000 (431,054) 0	32,743, (692, 32,051, 33,190, 190, (499,
TOTAL FUND	Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2019 CLAIMS YEAR 2020 Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2020 CLAIMS YEAR 2021 Paid Claims IBNR Less Specific Exces	s cess	5,901 - (485) - 5,415 266,332 (267,317) (68,140) 0 (69,125)	6,916 0 (485) 0 6,431 2,384,494 (2,299,842) (68,140) 0 16,512 6,450,977	32,736,244 0 (691,587) 0 32,044,657 30,805,796 2,490,000 (431,054) 0	32,743, (692, 32,051, 33,190, 190, (499,
TOTAL FUND TOTAL FUND	Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2019 CLAIMS YEAR 2020 Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2020 CLAIMS YEAR 2021 Paid Claims IBNR	s cess	5,901 - (485) - 5,415 266,332 (267,317) (68,140) 0 (69,125) 2,567,823 306,313 0	6,916 0 (485) 0 6,431 2,384,494 (2,299,842) (68,140) 0 16,512 6,450,977 2,548,633 0	32,736,244 0 (691,587) 0 32,044,657 30,805,796 2,490,000 (431,054) 0	32,743, (692, 32,051, 33,190, 190, (499, 32,881, 6,450, 2,548,
TOTAL FUND	Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2019 CLAIMS YEAR 2020 Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2020 CLAIMS YEAR 2021 Paid Claims IBNR Less Specific Exces Less Aggregate Exc LFY 2020 CLAIMS YEAR 2021 Paid Claims IBNR Less Specific Exces Less Aggregate Exces Less Aggregate Exces	s cess	5,901 - (485) - 5,415 266,332 (267,317) (68,140) 0 (69,125) 2,567,823 306,313 0 0	6,916 0 (485) 0 6,431 2,384,494 (2,299,842) (68,140) 0 16,512 6,450,977 2,548,633 0 0	32,736,244 0 (691,587) 0 32,044,657 30,805,796 2,490,000 (431,054) 0	950,876, 32,743, (692, 32,051, 33,190, 190, (499, 32,881, 6,450, 2,548, 8,999, 1,024,807,9

Southern New Jersey Regional Employee Benefits Fund CONSOLIDATED BALANCE SHEET

AS OF MARCH 31, 2021

BY FUND YEAR

	SNJREBF 2021	SNJREBF 2020	SNJREBF 2019	CLOSED YEAR	FUND BALANCE
ASSETS					
Cash & Cash Equivalents	1,697,380	1,198,975	4,272,056	9,740,545	16,908,955
Assesstments Receivable (Prepaid)	539,760	(55,156)	9,381	119,957	613,942
Interest Reœivable	-	60	(26)	(34)	0
Specific Excess Receivable	-	499,194	(72)	-	499,123
Aggregate Excess Receivable	-	-	-	-	-
Dividend Reœivable	-	-	-	517,797	517,797
Prepaid Admin Fees	-	-	-	-	-
Other Assets	428,802	247,654	-	-	676,456
Total Assets	2,665,941	1,890,728	4,281,339	10,378,264	19,216,272
LIABILITIES					
Accounts Payable	-	31	_	_	31
IBNR Reserve	2,548,633	190,158	-	-	2,738,791
A4 Retiree Surcharge	-	-	-	-	_
Dividends Payable	-	-	-	4,659,826	4,659,826
Accrued/Other Liabilities	14,066	36,450	7,495	-	58,011
Total Liabilities	2,562,699	226,639	7,495	4,659,826	7,456,660
EQUITY					
Surplus / (Defiat)	103,243	1,664,089	4,273,844	5,718,438	11,759,612
Total Equity	103,243	1,664,089	4,273,844	5,718,438	11,759,612
Total Liabilities & Equity	2,665,941	1,890,728	4,281,339	10,378,264	19,216,272
BALANCE	-	-	-	-	-

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.

RATIOS				
NDICES	2020	JAN	FEB	MAR
Cash Position	18,677,832	\$ 15,178,801	\$ 14,514,393	\$ 16,908,955
IBNR	2,850,521	\$ 2,990,203	3,060,316	3,099,312
Assets	20,687,548	\$ 20,241,581	\$ 19,303,223	\$ 19,216,272
Liabilities	8,924,184	\$ 8,405,504	7,786,506	7,456,660
Surplus	11,763,364	\$ 11,836,077	\$ 11,516,717	\$ 11,759,612
Claims Paid Month	2,209,786	\$ 3,041,585	\$ 3,068,516	\$ 2,838,761
Claims Budget Month	2,870,280	\$ 3,025,918	\$ 3,025,918	\$ 3,025,918
Claims Paid YTD	32,769,858	\$ 3,041,585	\$ 6,110,101	\$ 8,948,862
Claims Budget YTD	34,443,363	\$ 3,025,918	\$ 6,051,836	\$ 9,077,753
RATIOS				
Cash Position to Claims Paid	8.45	4.99	4.73	5.96
Claims Paid to Claims Budget Month	0.77	1.01	1.01	0.94
Claims Paid to Claims Budget YTD	0.95	1.01	1.01	0.99
Cash Position to IBNR	6.55	5.08	4.74	5.46
Assets to Liabilities	2.32	2.41	2.48	2.58
Surplus as Months of Claims	4.10	3.91	3.81	3.89
IBNR to Claims Budget Month	0.99	0.99	1.01	1.02

Southern NJ Municipal Employee Benefits Fund 2021 Budget Status Report

as of March 31, 2021

		·				
Evens et ad I page of	VTD Dudgeted	Ammod	Latest Filed	YTD	\$ Variance	% Varaiance
Expected Losses Medical Claims - All Other	4,508,907	Annual 18,076,573	18,047,505	Expensed		
Medical Claims - All Other Medical Claims AmeriHealth - All Other			2,053,426			
Medical Claims - CCBOSS	498,120	1,982,714	8,701,317			
Subtotal Medical	2,045,250	8,152,491		7 254 079	(202 901)	20/
	7,052,277	28,211,778	28,802,249	7,256,078	(203,801)	-3%
Prescription Claims - All Other	1,475,886	5,926,468	5,623,611			
Prescription Claims - CCBOSS	643,228	2,566,758	2,872,216	1 445 624	244 (55	140/
Subtotal Prescription	1,690,312	6,774,618	6,776,697	1,445,634	244,677	14%
Rx Rebates	(428,802)	(1,718,608)	(1,719,131)			
Dental Claims - All Other	273,790	1,097,813	1,073,682			
Dental Claims - CCBOSS	42,826	172,284	163,464	205 005	10.710	60/
Subtotal Dental	316,616	1,270,097	1,237,146	297,897	18,718	6%
Subtotal Claims	9,059,205	36,256,493	36,816,091	8,999,610	59,595	1%
Loss Fund Contingency	0	0	0			
DMO Premiums	770	3,078	3,078	1,667	(897)	-117%
Medicare Advantage - All Other	477,927	2,120,472	1,119,982	-,,-	(22.1)	
Medicare Advantage - CCBOSS	528,090	1,934,435	1,842,089			
Subtotal Insured Programs	1,006,787	4,057,985	2,965,149	1,006,724	(707)	0%
Reinsurance						
Specific	180,045	720,750	727,725	180,401	(356)	0%
Total Loss Fund	10,246,036	41,035,227	40,508,966	10,188,402	57,635	1%
Expenses						
Legal	5,432	21,728	21,728	5,432	-	0%
Treasurer	3,828	15,312	15,312	3,828	-	0%
Administrator	89,979	361,041	303,643	90,121	(142)	0%
Program Manager	210,621	844,885	787,661	281,200	(286)	
Brokerage	70,292	281,415	273,628	Included above	in Program Man	ager
TPA - Med Aetna	221,394	886,383	899,207	232,987	4,788	2%
TPA - Med AmeriHealth Admin	16,382	65,485	67,617	Included above i	n TPA	
TPA - Dental	17,201	69,005	67,167	17,254	(53)	0%
Actuary	2,750	11,000	11,000	2,750	0	0%
Auditor	4,750	19,000	19,000	4,749	1	0%
Subtotal Expenses	642,628	2,575,254	2,465,963	638,320	4,308	1%
Misc/Cont	4,012	16,049	16,049	1,548	2,464	61%
Data Analysis System	0	0	0	0	-	#DIV/0!
Affordable Care Act Taxes	2,504	10,025	10,122	2,506	(2)	
Plan Documents	3,750	15,000	15,000	3,750	-	0%
Total Expenses	652,895	2,616,328	2,507,134	646,124	6,771	1%
Total Budget	10,898,931	43,651,555	43,016,100	10,834,526	64,405	1%

REGULATORY

Monthly Items Filing Status

Budget Filed
Assessments Filed
Actuarial Certification Filed
Reinsurance Policies Filed
Fund Commissioners Filed
Fund Officers Filed
Renewal Resolutions Filed

Indemnity and Trust Compliance List included on page 7

New Members

N/A

Withdrawals

Risk Management Plan and By Laws

Cash Management Plan

Filed

Filed

Unaudited Financials 12/31/2020 Filed Annual Audit 12/31/2019 filed

Budget Changes N/A **Transfers** N/A **Additional Assessments** N/A **Professional Changes** N/A **Officer Changes** N/A **RMP Changes** N/A **Bylaw Amendments** N/A Contracts File **Benefit Changes** N/A

Professional	Contract Received	Insurance Received	Contract Term
Executive Director	Yes	Yes	1/1/2019 - 12/31/2021
Program Manager	Yes	Yes	1/1/2019 - 12/31/2021
Attorney	Yes	Yes	1/1/2021-12/31/2022
Treasurer	Yes	Yes	1/1/2021-12/31/2022
Auditor	Yes	Yes	1/1/2021-12/31/2022
Deputy Treasurer	Yes	Yes	1/1/2021-12/31/2022
Actuary	Yes	Yes	1/1/2021-12/31/2022
Aetna	Yes	in progress	*1 year renewal negotiated
AmeriHealth	Yes	in progress	*1 year renewal negotiated
Delta Dental	Yes		*1 year renewal negotiated
United Healthcare	Yes	in progress	1/1/2020-12/31/2021

INDEMNITY & TRUST AGREEMET COMPLIANCE

Member	I&T end date
TOWNSHIP OF WILLINGBORO	email sent 1/19/2021
HADDONFIELD BOROUGH	12/31/2021
BOROUGH OF SOMERDALE	12/31/2021
BOROUGH OF BROOKLAWN	12/31/2021
BOROUGH OF MAGNOLIA	12/31/2021
BOROUGH OF MERCHANTVILLE	12/31/2021
BOROUGH OF LINDENWOLD	12/31/2021
BOROUGH OF MOUNT EPHRAIM	12/31/2021
BOROUGH OF WENONAH	12/31/2021
NORTH HANOVER TWP	12/31/2021
WINSLOW TWP FIRE DISTRICT #1	12/31/2021
PINE HILL BOROUGH	12/31/2021
MT. HOLLY MUNICIPAL UTILITIES AUTHO	12/31/2021
LUMBERTON TOWNSHIP	12/31/2021
BOROUGH OF RUNNEMEDE	12/31/2021
CAMDEN COUNTY BOARD OF SOCIAL SERVICES	12/31/2021
Township of Winslow	12/31/2021
WINSLOW TOWNSHIP	12/31/2021
PALMYRA	12/31/2021

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND PROGRAM MANAGERS REPORT

May 2021

Program Manager: Conner Strong & Buckelew
Online Enrollment Training: kkidd@permainc.com
Enrollments/Eligibility/Billing: southernnj_enrollments@permainc.com

Brokers: <u>brokerservice@permainc.com</u>

ONLINE ENROLLMENT SYSTEM TRAINING

PERMA offers a virtual training and a refresher class on the online enrollment system the third Wednesday of each month. The sessions provide an overview of the Fund's enrollment system and shows users how perform tasks in the system. To use the enrollment system, each HR user must complete a system access form. Please email Austin Flinn at aflinn@permainc.com and indicate which of the sessions below you would like to attend. Please include this information in the subject line: Training - Fund Name and Client Name.

- Wednesday, June 16th 10:00 am 11:00 am
- Wednesday, July 14th 10:00 am 11:00 am
- Wednesday, August 18th 10:00 am 11:00 am
- Wednesday, September 15th 10:00 am 11:00 am
- Wednesday, October 20th 10:00 am 11:00 am
- Wednesday, November 17th 10:00 am 11:00 am

ENROLLMENT & ELIGIBILITY CONTACT

Please continue to direct any eligibility, enrollment, billing or system related questions to our dedicated Southern NJ Enrollment Team. The team can be reached by email at southernnj_enrollments@permainc.com. Attached please find an updated SNJREBF Enrollment Contact Information sheet.

MONTHLY BILLING

As a reminder, please be sure to check your monthly invoice for accuracy. If you find a discrepancy, please report it to the SNJREBF enrollment team. The Fund's policy is to limit retro corrections, *including terminations*, to 60 days. We have noticed an increase in requests for enrollment changes, billing changes, terminations and additions well past the 60 day time frame. Moving forward, it is of the utmost importance to review bills for rate and enrollment accuracy on a monthly basis. If there is an error, please bring it to the enrollment team's attention.

BROKER CONTACT INFORMATION

Please direct any escalated claims, benefit coverages, prescription coverage, Medicare advantage or appeal related questions to our dedicated SNJREBF Client Servicing Team. The team can be reached by email at brokerservices@permainc.com.

New Group Implementations

Effective for implementations beginning on September 1st, all new business implementations coming from a non-fund carrier or claims administrator will require the completion of a "New Group Benefit Intake" Form. This is a process improvement to ensure 100% benefit accuracy and ensure benefits

not accurately represented in SBCs, Benefit Summaries, or Plan documents are implemented as per the current plan design.

CONNER STRONG COVID-19 RESOURCES

- Conner Strong & Buckelew has compiled a database of COVID-19 resources available to Fund members: https://www.connerstrong.com/insights/covid-19-resource-center/
- The State of NJ has a helpful COVID-19 website with up to date information including vaccine rollout: www.Covid19.nj.gov

COVID-19 Updates

COVID Vaccine Administrative Fee Change - Effective March 15, 2021, Medicare updated the Fee for Service payment rate for administration of COVID-19 vaccines to \$40 per injection. The Fund plans have been updated to align with the new payment rate. Prior to March 15th the rates for vaccine administration were:

- \$16.94 for first dose
- \$28.39 for the second dose (for vaccines requiring 2 doses)
- \$28.39 for single dose vaccines

EXPRESS-SCRIPTS UPDATE

National Preferred Formulary Update (NPF) - ESI announced their NPF update for July 1, 2021. 70 additional products will be added to the exclusion list (included with your agenda). There are 8 (eight) Fund members identified as having filled scripts for one or more of these products in the past year. Impacted members will receive notification from ESI that includes therapeutically equivalent alternatives and, are encouraged to discuss them with their physician.

BENEFIT EXPRESS (BE) UPDATE

Benefit Express-WEX Acquisition - A leading financial technology service provider, WEX, recently announced that it is acquiring Benefit-Express. BE is a preferred partner of Conner Strong and provides the benefit administration system utilized by the HIFs. The two companies have worked together for many years and we do not anticipate any changes in our day-to-day operations or system functionality. We have been advised that the BE team will continue as is and, are confident that the services provided by BE including Benefit Administration, COBRA, Direct-billing, will continue with no interruption.

LEGISLATIVE UPDATE

COBRA Subsidy Compliance - PERMA is working with Benefit Express to identify members who had their health benefits terminated during the National COVID-19 Health Emergency. PERMA will work with the group enrollment contacts to determine who was involuntarily termed due to a lay-off or reduction in hours. Notices required by the recent legislation concerning the availability of COBRA premium subsidies from 4/1/2021 through 9/30/2021, will be mailed those members. A new field is being added to Benefit Express to track members who involuntarily lose their health benefits (due to lay-off or reduction in hours) through 9/30/2021.

PCORI Fee Update

As you know, last year the PCORI fee was extended for another 10 years through September 30th, 2029. All applicable plans with plan years ending within the 2020 calendar year will be subject to pay the PCORI fee. The fee for plans ending September 30th, 2020 or before is \$2.54 per member, per year. The fee for plans ending after September 30th, 2020 is \$2.66 per member, per year. As in previous years, these fees are built into the rates and the fund pays on behalf of the group entities.

ADMINISTRATIVE AUTHORIZATIONS

No Administrative Authorizations at this time.

SOUTHERN NJ REGIONAL EMPLOYEE BENEFITS FUND BILLS LIST

FUND YEAR 2020

Resolution 17-21 MAY 2021

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

BE IT RESOLVED that the Southern NJ Regional Employee Benefit 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 2020 Check Number	Vendor Name	Comment	Invoice Amount
002324 002324	DELTA DENTAL OF NEW JERSEY INC	DENTAL TPA 10/20	5,622.24 5,622.24
		Total Payments FY 2020	5,622.24
FUND YEAR 2021 Check Number	Vendor Name	Comment	Invoice Amount
002325 002325	AETNA HEALTH MANAGEMENT LLC	MEDICARE ADVANTAGE 5/21	114,466.60 114,466.60
002326 002326	UHC-MEDICARE ADVANTAGE	MEDICARE ADVANTAGE 5/21	227,025.82 227,025.82
002327		D.V.O. DD.T.V.W.V.O. 4.04	22.52
002327 002327	FLAGSHIP HEALTH SYSTEMS INC FLAGSHIP HEALTH SYSTEMS INC	DMO PREMIUMS 5/21 DMO PREMIUMS 5/21	226.62 29.88
002327	FLAGHIF HEALTH STSTEMS INC	DIVIO PREMIONIS 3/21	256.50
002328 002328	DELTA DENTAL OF NEW JERSEY INC	DENTAL TPA 5/21	5,715.84 5,715.84
002329 002329	AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 5/21	73,164.06 73,164.06
002330			
002330	AMERIHEALTH ADMINISTRATORS	WELLNESS/MARKETING 2/21	-167.50
002330 002330	AMERIHEALTH ADMINISTRATORS AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 5/21 2020 ADJUSTMENT	5,501.25 -629.00
002330	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 2/21	5,683.00
002330	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 3/21	5,270.00 15,657.75
002331 002331	PERMA	ADMINISTRATION FEES 5/21	30,057.99 30,057.99
002332 002332	J. KENNETH HARRIS, ATTY AT LAW	ATTORNEY FEE 5/21	1,810.67 1,810.67
002333 002333	VERRILL & VERRILL, LLC	TREASURER FEE 5/21	770.91 770.91
002334 002334	MICHAEL S. ZAMBITO	TREASURER FEE 5/21	505.08 505.08
002335			
002335	CONNER STRONG & BUCKELEW	RX - PROGRAM MGR FEES 5/21	9,117.90
002335	CONNER STRONG & BUCKELEW	MEDICAL - PROGRAM MGR FEES 5/21	55,493.15
002335 002335	CONNER STRONG & BUCKELEW CONNER STRONG & BUCKELEW	BROKER FEES 5/21 DENTAL - PROGRAM MGR FEES 5/21	23,525.24 5,038.00
002335	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 5/21	602.64 93,776.93
002336			93,770.93
002336	ALLSTATE INFORMATION MANAGEMNT	ACCT# 419 - ARC. AND STOR 4.30.21	93.61 93.61
002337 002337	CONNER STRONG	SFCIC - POLICY #B6024116 - 5/1/21-5/1/22	1,982.00 1,982.00
002338 002338	WELLNESS COACHES USA	WELLNESS COACHING - CCBOSS 5/21	6,032.00 6,032.00
002339 002339	MUNICIPAL REINSURANCE HIF	REINSURANCE 5/21	59,576.07 59,576.07
		Total Payments FY 2021	630,891.83
		TOTAL PAYMENTS ALL FUND YEARS	636,514.07
	Chairperson		
	Attest:	Details	
I h	nereby certify the availability of sufficient unencumber.	Dated:ed funds in the proper accounts to fully pay the above claims	

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

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND ALL FUND YEARS COMBINED CURRENT MONTH April

	Description: ID Number:	SNJ Inv.	Investors Bank	Parke Bank	Republic Bank	Republic Bank - General Account	Republic Bank - Admin Account	Ocean First Investment Account	New Jersey Cash Management	William Penn Banl Money Market Account
	Maturity (Yrs) Purchase Yield:	0.03	0.50	0.70	0.75	0.75	0.75	0.25	0.04	0.50
	TOTAL for All Accts & instruments									
Opening Cash & Investment Balance Opening Interest Accrual Balance	\$16,908,946.75 \$ \$0.13 \$	5,173.00			\$ 5,998,345.60					
pening interest Accrual Balance	50.13 5	0.13	s - s		s .	s .	s -	s -	s -	s -
1 Interest Accrued and/or Interest Cost	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2 Interest Accrued - discounted Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3 (Amortization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4 Accretion	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5 Interest Paid - Cash Instr.s	\$9,810.28	\$0.13	\$0.96	\$2,442.88	\$3,581.47	\$3,399.05	\$140.20	\$139.48	\$1.96	\$104.1
6 Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 Realized Gain (Loss)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8 Net Investment Income	\$9,810.28	\$0.13	\$0.96	\$2,442.88	\$3,581.47	\$3,399.05	\$140.20	\$139.48	\$1.96	\$104.15
9 Deposits - Purchases	\$5,172,920.81	\$0.00	\$0.00	\$0.00	\$0.00	\$4,544,920.81	\$628,000.00	\$0.00	\$0.00	\$0.00
0 (Withdrawals - Sales)	-\$4,746,640.71	-\$1.03	\$0.00	\$0.00	-\$628,000.00	-\$3,490,625.73	-\$628,013.95	\$0.00	\$0.00	\$0.00
		OK	OK.	OK	OK	OK	ок о	OK.	ок	ок
nding Cash & Investment Balance	\$17,345,037.13	\$5,172.10	\$2,338.90	\$4,248,393.50	\$5,373,927.07	\$6,681,396.95	\$46,711.73	\$678,899.05	\$54,663.33	\$253,534.50
nding Interest Accrual Balance	\$0.13	\$0.13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
us Outstanding Checks	\$410,289.07	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$410,289.07	\$0.00	\$0.00	\$0.00
ess Deposits in Transit)	-\$1,103,130.76	\$0.00	\$0.00	\$0.00	\$0.00	-\$1,103,130.76	\$0.00	\$0.00	\$0.00	\$0.00
alance per Bank	\$16,652,195.44	\$5,172.10	\$2,338,90	\$4,248,393.50	\$5,373,927.07	\$5,578,266,19	\$457,000.80	\$678,899.05	\$54,663.33	\$253,534.50

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED

Current Fund Year:	2021							1. 4		
Month Ending:	April									
	Med	Dental	Rx	Vision	1edicare Advantag	Reinsurance	Dividend Reserve	Future	Admin	TOTAL
OPEN BALANCE	7,496.16	392,471.42	3,400,304.40	0.00	7,814,325.37	461,649.71	4,251,480.18	1,286,021.46	(704,801.96)	16,908,946.74
RECEIPTS										
Assessments	2,594,741.58	98,422.28	622,196.13	0.00	369,361.62	65,958.78	0.00	0.00	243,721.02	3,994,401.41
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts	2,497.67	184.07	1,490.35	0.00	3,160.11	197.01	1,719.30	520.07	41.69	9,810.27
Invest Adj	0.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.02
Subtotal Invest	2,497.69	184.07	1,490.35	0.00	3,160.11	197.01	1,719.30	520.07	41.69	9,810.29
Other *	550,519.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	550,519.40
mom.v.										
TOTAL	3,147,758.67	98,606.35	623,686.48	0.00	372,521.73	66,155.79	1,719.30	520.07	243,762.71	4,554,731.10
EXPENSES										
Claims Transfers	2,640,126.70	87,163.33	763,335.70	0.00	0.00	0.00	0.00	0.00	0.00	3,490,625.73
Expenses	340,902.48	59.76	0.00	0.00	0.00	59,682.86	0.00	0.00	227,368.85	628,013.95
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.03	1.03
TOTAL	2,981,029.18	87,223.09	763,335.70	0.00	0.00	59,682.86	0.00	0.00	227,369.88	4,118,640.71
END BALANCE	174,225.65	403,854.68	3,260,655.18	0.00	8,186,847.10	468,122.64	4,253,199.48	1,286,541.53	(688,409.13)	17,345,037.13

CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

Month Current Fund Year April 2021

3. Monthly Recoveries April 5. TPA Net Paid Thru April 1. Calc. Net Paid Thru Last Month 7,261,762.69 303,193.58 1,822,908.81 Calc. Net
Paid Thru
April Monthly Net Paid Variance To Be Delinque Unreconciled Variance From 7,261,762.69 303,193.58 1,822,908.81 0.00 Delinquent Unreconciled Change This Policy To Be Reconciled 9,901,889.39 390,356.91 2,586,244.51 0.00 Year 2021 Coverage Med April 2,640,126.70 87,163.33 763,335.70 0.00 Month 9,901,889.39 390,356.91 2,586,244.51 0.00 0.00 0.00 0.00 0.00 2,640,126.70 87,163.33 763,335.70 0.00 0.00 0.00 0.00 0.00 Dental Rx Vision 0.00 Total 9,387,865.08 3,490,625.73 0.00 12,878,490.81 0.00 12,878,490.81 9,387,865.08 3,490,625.73

RESOLUTION NO. 17-21

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND APPROVAL OF THE MAY 2021 BILLS LISTS

WHEREAS, the Southern New Jersey Regional Employee Benefits Fund held a Public Meeting on **May 24**, **2021** 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 April 2021 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 Southern New Jersey Regional Employee Benefits Fund hereby approve the Bills List for May 2021 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 Southern New Jersey Regional Employee Benefits 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.

ADO	TED: MAY 24, 2021
BY:	
	CHAIRPERSON
ATTE	ST:
	SECRETARY

ADODTED MANAGE 0001



SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

Monthly Claim Activity Report

MAY 24, 2021

		44	ant	na			
SOUT	HERN NEW JERS			MPLOYEE BENEF	ITS FUI	ND	
3331							
ME	PAID 2020	# OF EES	PER EE	MEDICAL CLAIMS + CAP PAID 2021	# OF EES	PI	ER EE
IANII IA DV	PO 504 770	4 044	ф 4 555	ФО 404 04F	4.550	<u></u>	4 207
JANUARY	\$2,504,772	1,611	\$ 1,555	\$2,161,645	1,558	\$	1,387
FEBRUARY	\$2,167,425	1,607	\$ 1,349	\$2,514,368	1,573	\$	1,598
MARCH	\$2,818,446	1,607	\$ 1,754	\$2,693,678	1,553	\$	1,734
APRIL	\$1,816,987	1,603	\$ 1,133				
MAY	\$1,579,035	1,602	\$ 986				
JUNE	\$2,691,735	1,585	\$ 1,698				
JULY	\$1,896,448	1,574	\$ 1,205				
AUGUST	\$2,210,069	1,577	\$ 1,401				
SEPTEMBER	\$1,983,530	1,577	\$ 1,258				
OCTOBER	\$2,646,583	1,567	\$ 1,689				
NOVEMBER	\$2,124,203	1,562	\$ 1,360				
DECEMBER	\$2,450,166	1,554	\$ 1,577				
TOTALS	\$26,889,399			\$7,369,692			
				2020 Average	1,561	\$	1,573
				2019 Average	1,586	\$	1,414

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

Plan Sponsor Unique ID: All

Customer: SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

Group / Control: 00737391,00866357,Sl030217,Sl416902,Sl431318

Subgroup / Suffix: All

 Paid Dates:
 03/01/2021 - 03/31/2021

 Service Dates:
 01/01/2011 - 03/31/2021

Line of Business: All Funding Category: All

Paid Amt	Billed Amt
\$115,759.15	\$506,929.20
\$111,708.86 \$60,328.00	\$567,841.27 \$96,049.30
\$56,466.10	\$139,685.64
\$51,007.33	\$83,546.00
\$395,269.44	\$1,394,051.41

Total: \$1,394,051.41 \$395,269.44



SNJ Regional Employee Benefits Fund

4/1/20 thru 3/31/21 (unless otherwise noted)



Medical Claims Paid:

January 2021 thru March 2021 Total Medical Paid per EE: \$1,573

Network Discounts

Inpatient: 67.9% Ambulatory: 67.0% Physician/Other: 61.9% TOTAL: 65.5%

Provider Network

% Admissions In-Network: 98.5% % Physician Office: 98.6%

Aetna Book of Business:

Admissions 98.4%; Physician 92.4%

Top Facilities Utilized (by total Medical Spend)

- Cooper Hospital
- Virtua-West Jersey
- Kennedy Health
- · Thomas Jefferson
- · Our Lady of Lourdes

Catastrophic Claim Impact January 2021 – March 2021

Number of Claims Over \$50,000: 18 Claimants per 1000 members: 4.7 Avg. Paid per Claimant: \$98,555 Percent of Total Paid: 28.8%

 Aetna BOB- HCC account for an average of 40.3% of total Medical Cost

Nurse Case Member Outreach: Through Q1 2021

Unique Members Identified: **57**Outreach Opportunities Identified: **58**

Outreach in Progress: 1
Completed Outreach: 48
Newly engaged cases: 14
Unable to Reach: 34
Member Declined: 0

Teladoc Activity:

January 2021 - March 2021

Total Registrations: 16 Total Online Visits: 24

Total Net Claims Savings: \$3,710

New

Total Visits w/ Rx: 12

Mental Health Visits: Dermatology Visits: Allentown Service Center
Performance: Metrics thru April 2021

Customer Service Performance

1st Call Resolution:95.1%Abandonment Rate:2.9%Avg. Speed of Answer:69.49 sec

Claims Performance

Financial Accuracy: 97.7%

(Q4 2020)

90% processed w/in: 5.0 days 95% processed w/in: 7.3 days

Performance Goals

1st Call Resolution: 90%
Abandonment Rate less than: 3.0%
Average Speed of Answer: 30 sec

Financial Accuracy: 99%

Turnaround Time

90% processed w/in: 14 days 95% processed w/in: 30 days



	AmeriHe													
	2020 S	NJ HIF			2021 SNJ HIF									
														Γ
	MEDICAL CLAIMS PAID 2020	TOTAL	# OF EES	PER EE					MEDICAL CLAIMS PAID 2021	TOTAL	# OF EES		PER EE	
IANUARY	\$ 124,253.00	\$ 124,253.00	135	\$ 920.39	JANUARY				\$ 108,744.80	\$ 108,744.80	134		\$ 811.75	H
FEBRUARY	\$ 163,740.17	\$ 163,740.17	135	\$ 1,212.89	FEBRUARY				\$ 166,874.00	\$ 166,874.00	134		\$ 1,245.32	Ė
MARCH	\$ 115,953.08	\$ 115,953.08	135	\$ 858.91	MARCH				\$ 271,663.00	\$ 271,663.00	135		\$2,012.31	Ē
APRIL	\$ 255,467.18	\$ 255,467.18	135	\$ 1,892.34	APRIL				\$ 268,064.89	\$ 268,064.89	135		\$ 1,985.66	F
MAY	\$ 181,114.61	\$ 181,114.61	135	\$ 1,341.58	MAY									L
UNE	\$ 147,203.50	\$ 147,203.50	135	\$ 1,090.39	JUNE									L
ULY	\$ 92,020.36	\$ 92,020.36	142	\$648.03	JULY									Г
AUGUST	\$ 98,771.91	\$ 98,771.91	142	\$ 695.57	AUGUST									L
SEPTEMBER	\$ 94,904.00	\$ 94,904.00	138	\$ 687.71	SEPTEMBER									L
OCTOBER	\$ 103,050.79	\$ 103,050.79	137	\$752.18	OCTOBER									Ė
NOVEMBER	\$ 129,893.21	\$ 129,893.21	137	\$ 948.12	NOVEMBER									Ė
DECEMBER	\$ 350,638.54	\$ 350,638.54	138	\$ 2,540.85	DECEMBER									L
TOTALS	\$ 1,857,010.35	\$ 1,857,010.35		\$ 1,132.41	TOTALS				\$815,346.69					F
		2000 4	45-							2004 4	42.		A 4 542 55	L
		2020 Average	137	\$ 1,132.41						2021 Average	134		\$ 1,513.76	L
		2019 Average	135	\$1,361						2020 Average	135		\$ 1,360.98	L

Amerillealth Group: Southern New Jersey HIF Paid Dates: 4/1/21 thru 4/30/2021 Network Service ALL Paid Diagnosis Symptoms; Signs; And III- Defined Conditions 2 3 4 5 5 5 5 6 7 Claimant Diagnosis Symptoms; Signs; And III- Defined Conditions		=	PLAN SPONSOR INFORMATION SERVICES								
Paid Dates: 4/1/21 thru 4/30/2021 Line of Business: All Network Service ALL Product Line: All Claimant Paid Diagnosis Symptoms; Signs; And III-Defined Conditions 2 Service ALL Product Line: All		AmeriHealth.	Large Clai	mant Report- Claims O	ver \$50,000.0	0					
Paid Dates: 4/1/21 thru 4/30/2021 Line of Business: All Network Service ALL Product Line: All Claimant Paid Diagnosis Symptoms; Signs; And III- Defined Conditions 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		Group:	Southern New Jerse	ev HIF	Service Dates:	-					
Claimant Paid Diagnosis Symptoms; Signs; And III- Defined Conditions 2 3 4		•		•	Line of Busines	s: All					
Symptoms; Signs; And III- 1 \$88,626.41 Defined Conditions 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	1	Network Service	ALL		Product Line: A	I					
1 \$88,626.41 Defined Conditions 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		Claimant	Paid	Diagnosis							
3 4		1	\$88,626.41								
4											
ONFIDENTIALITY NOTICE: This Report is intended only for the use of the entity indicated above and may contain information that is privileged,					_						



SOUTHERN NEW JERSEY HIF - 0002096174

Claims Incurred between 3/1/2020 and 5/17/2021 and Paid between 3/1/2020 and 5/17/2021

COVID19 Claims currently are consider to be claims with Procedure codes 0001A, 0002A, 0011A, 0012A, 0031A, 0202U, 0223U, 0224U, 0225U, 0226U, 0240U, 0241U, 86328, 86408, 86409, 86413, 86769, 87426, 87428, 87635, 87636, 87637, 87811, 91300, 91301, 91303, C9803, G2023, G2024, M0239, M0243, M0245, Q0239, Q0243, Q0245, U0001, U0002, U0003, U0004 or a Dx Code of B34.2, B97.29, U07.1, Z11.52, Z20.822

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
<1	2	2	\$178.00	\$89.00	\$2.25
1-5	5	6	\$537.72	\$89.62	\$1.79
6-18	13	32	\$2,387.88	\$74.62	\$3.52
19-25	24	61	\$5,994.28	\$98.27	\$9.62
26-39	31	72	\$8,277.98	\$114.97	\$8.60
40-64	67	154	\$42,338.28	\$274.92	\$24.15
65+	5	21	\$36,161.85	\$1,721.99	\$207.83
Unknown	0	0	\$0.00	\$0.00	\$0.00

REL TO INS	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Employee	74	196	\$76,806.33	\$391.87	\$37.82
Spouse	32	60	\$11,187.60	\$186.46	\$12.02
Dependent	38	92	\$7,882.06	\$85.67	\$4.90

GENDER	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Female	82	214	\$58,671.39	\$274.17	\$24.92
Male	62	134	\$37,204.60	\$277.65	\$16.80
Undisclosed	0	0	\$0.00	\$0.00	\$0.00

ST CD	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
FL	1	1	\$100.00	\$100.00	\$16.67
NJ	143	347	\$95,775.99	\$276.01	\$21.09

Summary by Service Type - Outpatient and Professional Claims

Service Types are Limited to: Emergency Room, Pathology (Laboratory), Urgent Care, Retail Clinic, Telemedicine, Emergency Room, Pathology (Laboratory), Urgent Care, Retail Clinic, Telemedicine, Office Physician Visit, Other Physician Visit, Emergency Room With Observation Bed, and Observation Bed

SRVC TP DSC	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Emergency Room	8	9	\$3,727.21	\$414.13	\$0.82
Emergency Room With Observation	3	3	\$5,685.29	\$1,895.10	\$1.24
Bed Office Physician Visit	10	11	\$1,422.93	\$129.36	\$0.31
Other Physician Visit	2	2	\$149.68	\$74.84	\$0.03
Pathology (Laboratory)	121	241	\$20,944.52	\$86.91	\$4.58
Telemedicine	14	17	\$1,904.49	\$112.03	\$0.42
Urgent Care	15	18	\$2,342.03	\$130.11	\$0.51

Inpatient Cost and Utlization by Age Band

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	ADM CNT	NET PAY	ADM PER 1000	COST PER ADM	COST PMPM	AVG LOS
<1	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
1-5	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
6-18	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
19-25	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
26-39	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
40-64	1	2	2	\$21,973.27	13.20	\$10,986.64	\$12.53	4.00
65+	1	1	1	\$33,342.59	68.40	\$33,342.59	\$191.62	5.00
Unknown	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00

TOP PROVIDERS(TOP 25 BY NET PAYMENT)

PROVIDER NAME	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
KENNEDY UNIVERSITY HOSPITAL GAC	13	14	\$35,833.52	\$2,559.54	\$7.84
Inspira Medical Center Mullica Hill	9	14	\$28,733.11	\$2,052.36	\$6.29
Labcorp Raritan	63	93	\$8,268.64	\$88.91	\$1.81
GENESIS LABORATORY MANAGEMENT	7	7	\$2,212.50	\$316.07	\$0.48
Hackensack University Medical Group	13	21	\$1,962.64	\$93.46	\$0.43
Cooper University Hospital	19	31	\$1,733.16	\$55.91	\$0.38
Quest Diagnostics Inc	17	19	\$1,682.62	\$88.56	\$0.37
EPA of South Jersey	2	2	\$1,309.54	\$654.77	\$0.29
ACUTIS DIAGNOSTICS INC	4	6	\$1,264.31	\$210.72	\$0.28
Inspira Health Network Medical Group	5	9	\$1,262.47	\$140.27	\$0.28
PROHEALTH CARE ASSOC LLP	7	7	\$1,208.20	\$172.60	\$0.26
Cooper Physician Offices PA	1	5	\$861.74	\$172.35	\$0.19
Kennedy Health Alliance	2	3	\$828.48	\$276.16	\$0.18
Inspira Medical Center Vineland	5	7	\$509.65	\$72.81	\$0.11
ROWANSOM DEPT OF FAMILY PRACTICE	3	6	\$426.18	\$71.03	\$0.09
Cooper University Emergency Physicians	1	1	\$396.64	\$396.64	\$0.09
THE COUNSELING AND CRITICAL INCIDENT DEBRIEFING CENTER LLC	1	1	\$396.36	\$396.36	\$0.09
Accu Reference Medical Lab	2	2	\$360.00	\$180.00	\$0.08
Minute Clinic Diagnostic of New Jersey LLC	13	17	\$349.54	\$20.56	\$0.08
Penn Family and Internal Medicine Mt Laurel	1	2	\$337.36	\$168.68	\$0.07
Atlantic Diagnostic Lab Llc	2	3	\$300.00	\$100.00	\$0.07
Accurate Diagnostic Labs	2	2	\$300.00	\$150.00	\$0.07
Patient Care Now	1	2	\$300.00	\$150.00	\$0.07
Virtua West Jersey Health System Inc	3	5	\$296.40	\$59.28	\$0.06
Inspira Health Network Urgent Care PC	2	2	\$289.00	\$144.50	\$0.06

 $\textbf{COVID19 Vaccine Claims with Procedure codes 0001A, 0002A, 0011A, 0012A, 0031A \,, 91300, 91301, 91303}$

AGE BAND	Single Dose Vaccines CLAIMANT COUNT	1st Dose Vaccine CLAIMANT COUNT	2nd Dose Vaccine CLAIMANT COUNT	NET PAY	COST PER CLAIMANT
<1	0	0	0	\$0.00	
1-5	0	0	0	\$0.00	
6-18	0	0	0	\$0.00	
19-25	0	3	2	\$277.98	\$55.60
26-39	0	7	1	\$321.03	\$40.13
40-64	0	8	1	\$411.56	\$45.73
65+	0	1	1	\$148.20	\$74.10
Unknown	0	0	0	\$0.00	

COVID19 Claims for Urgent Care and Retail Clinics Only

Urgent Care

3				
AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIMANT
<1	0	0	\$0.00	\$0.00
1-5	0	0	\$0.00	\$0.00
6-18	3	4	\$500.00	\$166.67
19-25	3	3	\$505.33	\$168.44
26-39	3	3	\$200.00	\$66.67
40-64	6	8	\$1,136.70	\$189.45
65+	0	0	\$0.00	\$0.00
Unknown	0	0	\$0.00	\$0.00

Retail Clinic

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIMANT
<1	0	0	\$0.00	\$0.00
1-5	0	0	\$0.00	\$0.00
6-18	0	0	\$0.00	\$0.00
19-25	0	0	\$0.00	\$0.00
26-39	0	0	\$0.00	\$0.00
40-64	0	0	\$0.00	\$0.00
65+	0	0	\$0.00	\$0.00
Unknown	0	0	\$0.00	\$0.00



△ DELTA DENTAL®

Dental Action Report

Brian Remlinger Account Manager bremlingen@deltadentalnj.com

4,006 Members were continuously enrolled Q1 2020 - Q4 2020

National Benchmark Your Oral Health Score: 53/100 30th Percentile National benchmark data comes from Healthentic's database of over 50 million members from all 50 states

Peer Comparison

Your peers are 29 groups similar to your own, nationwide:

- Insurance Carriers and Related Activities
- 2500+ members

△ DELTA DENTAL

Healthentic*



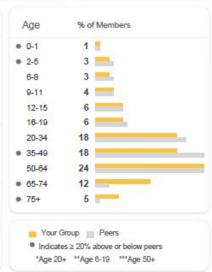


preventive care and treatment





Oral Health Indicators	Type of Service	% of Members With Care
Healthy	 Oral Exams 	48
Behaviors	Cleanings	46
o charlors	 Perio Maintenance* 	16
	 Sealants** 	5 🏪
	 Fluoride 	12
ooth	Fillings	17
Decay	Crowns	7 🚟
,	 Root Canals 	4 🟴
Gum	Non-Surgical Perio*	2 👭
Disease	 Surgical Perio* 	0
Tooth	Implants*	0 1
oss	Dentures***	2



APPENDIX I

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

OPEN MINUTES APRIL 26, 2021 ZOOM MEETING 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

ROLL CALL OF THE 2021 EXECUTIVE COMMITTEE

Michael Mevoli, Chairman	Borough of Brooklawn	Present
M. Joseph Wolk, Secretary	Borough of Mt. Ephraim	Present
Louis Di Angelo	Borough of Bellmawr	Present
Terry Shannon	Borough of Barrington	Present
Neal Rochford	Haddonfield	Present
Edward Hill	CCBOSS	Present
Robert Maybury	Mt. Holly MUA	Present
Gary Passanate	Borough of Somerdale	Present

APPOINTED PROFESSIONALS PRESENT:

Executive Director/Adm. PERMA Risk Management Services

Paul Laracy Emily Koval

Program Manager Conner Strong & Buckelew

Maggie Friel Jozsef Pfeiffer

Attorney J. Kenneth Harris, Esq.

Medical TPA - AmeriHealth Kristina Strain

Medical TPA – Aetna Jason Silverstein

Express Scripts Kyle Colalillo

Treasurer Mike Zambito

Lorraine Verrill

Delta Dental Brian Remlinger

PRESENT FUND COMMISSIONERS AND PROFESSIONALS:

APPROVAL OF MINUTES: March 22, 2021 Open

MOTION TO APPROVE OPEN MINUTES OF MARCH 22, 2021:

Moved: Commissioner Wolk Second: Commissioner Shannon

Vote: Unanimous

CORRESPONDENCE - None

EXECUTIVE DIRECTOR'S REPORT

FAST TRACK FINANCIAL REPORT – as of February 28, 2021- Executive Director Koval said the Fund had a higher than usual month for February. Aetna had about \$500,000 in high claims which could have contributed.

PHARMACY BENEFIT MANAGER RFP - Executive Director Koval said the PBM RFP is underway. Responses were received from 6 companies: Express Scripts, Aetna, AHA, Magellan, Ingenio Rx and OptumRx. Our Pharmacy Benefits Consultant is currently reviewing the financials. The MRHIF Contracts Committee will review and we expect to have a recommendation by the June MRHIF meeting.

MEL/MR-HIF/ CEL EDUCATIONAL SEMINAR – Executive Director Koval said the 2021 seminar will be held virtually on the mornings of Friday, May 14th and Friday, May 21^{st.} The agenda includes two ethics courses, and presentations on implicit bias, insurance market conditions, proposals to change the Workers' Compensation law and a discussion of proposed changes to the Affordable Care Act.

GASB 75 REPORT - Executive Director Koval said the GASB 75 reports are available through the Fund. Most members will either need a full report or an update this year. The turn around time is a few weeks - please reach out to Karen Kamprath at PERMA to start the process.

FINANCIAL DISCLOSURE STATEMENTS - Executive Director Koval said As done in prior years and required by State law, each Fund Commissioner is required to complete a Financial Disclosure Statement through the Department of Community Affairs. Commissioners could begin filing on April 5, 2021. The deadline to file is April 30, 2021 however, The board has extended the date they would take enforcement action against non-filers to June 30, 2021. Local Finance Notice 2021-08 containing filing information for local government officers, will be distributed to commissioners once available.

PROGRAM MANAGERS REPORT

ONLINE ENROLLMENT SYSTEM TRAINING

Program Manager Pfeiffer said PERMA offers a virtual training and a refresher class on the online enrollment system the third Wednesday of each month. The sessions provide an overview of the Fund's enrollment system and shows users how perform tasks in the system. To use the enrollment system, each HR user must complete a system access form. Please email Austin Flinn at aflinn@permainc.com and indicate which of the sessions below you would like to attend. Please include this information in the subject line: Training - Fund Name and Client Name.

- Wednesday, April 21st 10:00 am 11:00 am
- Wednesday, May 19th 10:00 am 11:00 am
- Wednesday, June 16th 10:00 am 11:00 am
- Wednesday, July 14th 10:00 am 11:00 am
- Wednesday, August 18th 10:00 am 11:00 am
- Wednesday, September 15th 10:00 am 11:00 am
- Wednesday, October 20th 10:00 am 11:00 am
- Wednesday, November 17th 10:00 am 11:00 am

COBRA SUBSIDY - Program Manager Pfeiffer said they were able to identify a list of all members terminated in the past year and our operations team will be reaching out to those members to determine who was involuntarily terminated. He said the subsidy are for those members who were involuntarily terminated.

ENROLLMENT & ELIGIBILITY CONTACT

Please continue to direct any eligibility, enrollment, billing or system related questions to our dedicated Southern NJ Enrollment Team. The team can be reached by email at southernnj_enrollments@permainc.com. Attached please find an updated SNJREBF Enrollment Contact Information sheet.

MONTHLY BILLING

As a reminder, please be sure to check your monthly invoice for accuracy. If you find a discrepancy, please report it to the SNJREBF enrollment team. The Fund's policy is to limit retro corrections, *including terminations*, to 60 days. We have noticed an increase in requests for enrollment changes, billing changes, terminations and additions well past the 60 day time frame. Moving forward, it is of the utmost importance to review bills for rate and enrollment accuracy on a monthly basis. If there is an error, please bring it to the enrollment team's attention.

BROKER CONTACT INFORMATION

Please direct any escalated claims, benefit coverages, prescription coverage, Medicare advantage or appeal related questions to our dedicated SNJREBF Client Servicing Team. The team can be reached by email at brokerservices@permainc.com.

CONNER STRONG COVID-19 RESOURCES

- Conner Strong & Buckelew has compiled a database of COVID-19 resources available to Fund members: https://www.connerstrong.com/insights/covid-19-resource-center/
- The State of NJ has a helpful COVID-19 website with up to date information including vaccine rollout: www.Covid19.nj.gov

COVID-19 Updates

COVID Vaccine Administrative Fee Change - Program Manager Pfeiffer said effective March 15, 2021, Medicare updated the Fee for Service payment rate for administration of COVID-19 vaccines to \$40 for each dose. Aetna will be follow the new payment rate and has updated the Fund plans accordingly.

AETNA UPDATE

Network Negotiation Deborah Heart and Lung - Program Manager said as previously reported, Aetna has been in negotiations with Deborah Heart and Lung. Aetna advised that a new three-year contract was successfully negotiated and begins on May 1, 2021. These facilities remain in-network.

EXPRESS-SCRIPTS UPDATE

National Preferred Formulary Update (NPF) - Program Manager Pfeiffer said ESI announced their NPF update for July 1, 2021. 70 additional products will be added to the exclusion list (included with your agenda). There are 8 (eight) Fund members identified as having filled scripts for one or more of these products in the past year. Impacted members will receive notification from ESI that includes therapeutically equivalent alternatives and, are encouraged to discuss them with their physician.

BENEFIT EXPRESS (BE) UPDATE

Benefit Express-WEX Acquisition - A leading financial technology service provider, WEX, recently announced that it is acquiring Benefit-Express. BE is a preferred partner of Conner Strong and provides the benefit administration system utilized by the HIFs. The two companies have worked together for many years and we do not anticipate any changes in our day-to-day operations or system functionality. We have been advised that the BE team will continue as is and, are confident that the services provided by BE including Benefit Administration, COBRA, Direct-billing, will continue with no interruption.

ADMINISTRATIVE AUTHORIZATIONS

Medical Authorization presented 3/10/2021 - Approved

TREASURER'S REPORT - Fund Treasurer reviewed the bills list and treasurers report.

Resolution 16-21 – April 2021 Bills List

FY2021	\$627,563.95
TOTAL	\$627,563.95

MOTION TO APPROVE RESOLUTION 16-21 AND THE REMAINDER OF THE TREASURERS REPORT:

Moved: Commissioner Di Angelo Second: Commissioner Shannon

Vote: 8 Ayes, 0 Nays

FUND ATTORNEY: Fund Attorney said executive order 235 was signed to continue the public health emergency for another 30 days.

AETNA: Mr. Silverstein reviewed the claims for February 2021. He said there were 5 claims over 50,000 for this reporting period. He also reviewed the covid reporting including with the Agenda.

AMERIHEALTH: Ms. Strain reviewed the claims for March 2021. She said this was a little bit of a higher month. She said there were no high claims for this reporting period. She also reviewed the Covid reporting included with the Agenda.

EXPRESS SCRIPTS: Mr. Colalillo said the current trend for the Fund is negative 8.3% for January, February and March. He also reviewed the additional covid reporting and vaccine information.

DENTAL ADMINISTRATOR: None

OLD BUSINESS: None

NEW BUSINESS: In response to Commissioner Shannon, Program Manager Lodics said the Fund will reach out with a spread sheet and they can input the information through benefit express.

PUBLIC COMMENT: None

MOTION TO ADJOURN:

Moved: Commissioner Shannon Second: Commissioner Di Angelo

Vote: Unanimous

MEETING ADJOURNED:
NEXT MEETING: MAY 24, 2021

Emily Koval , Assisting Secretary for

JOSEPH WOLK, SECRETARY