

# Southern Jersey <sup>FUND</sup>



SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

## **AGENDA & REPORTS**

**FEBRUARY 27, 2023**

**4:15 PM**

**COLLINGSWOOD COMMUNITY CENTER**

30 W Collings Ave, Collingswood NJ 08108

## **STATEMENT OF COMPLIANCE WITH OPEN PUBLIC MEETINGS ACT**

NOTICE OF THIS MEETING WAS GIVEN BY (1) SENDING SUFFICIENT NOTICE HERewith TO THE BURLINGTON COUNTY TIMES AND THE COURIER POST

(2) FILING ADVANCE WRITTEN NOTICE OF THIS MEETING WITH THE CLERK/ADMINISTRATOR OF EACH MEMBER MUNICIPALITY AND (3) POSTING A COPY OF THE MEETING NOTICE ON THE PUBLIC BULLETIN BOARD OF ALL MEMBER MUNICIPALITIES.

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND**  
**AGENDA**  
**MEETING: FEBRUARY 27, 2023**  
**COLLINGSWOOD COMMUNITY CENTER**  
**4:15 PM**

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

**FLAG SALUTE - MOMENT OF SILENCE**

**ROLL CALL OF 2023 EXECUTIVE COMMITTEE**

Michael Mevoli, Chairman

Joseph Wolk, Secretary

Louis DiAngelo, Executive Committee Member

Terry Shannon, Executive Committee Member

Edward Hill, Executive Committee Member

Robert Maybury, Executive Committee Member

Gary Passanante, Executive Committee Member

Brian Morrell, Executive Committee Alternate

**APPROVAL OF MINUTES:** January 23, 2023

Open (Appendix I)

**CORRESPONDENCE - None**

**REPORTS:**

**EXECUTIVE DIRECTOR (PERMA)**

Monthly Report.....Page 1

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

Monthly Report.....Page 9

**TREASURER - (Verrill & Verrill)**

January 2023 Voucher List (Resolution 19-23) .....Page 15

Treasurers Report.....Page 18

Confirmation of Claims Paid/Certification of Transfers

Ratification of Treasurers Report

**ATTORNEY - (J. Kenneth Harris)**

Monthly Report

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

Monthly Report.....Page 21

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

Monthly Report.....Page 26

**PRESCRIPTION ADMINISTRATOR - (Express Scripts)**

Monthly Report.....Page 33

**DENTAL ADMINISTRATOR - (Delta Dental)**

## Monthly Report

<b>CONSENT AGENDA.....</b>	<b>Page 35</b>
Revised Resolution 6-23: Designation of Bank Depositories & CMP .....	Page 36
Resolution 15-23: New Member Approval .....	Page 40
Resolution 16-23: Shared Services with MRHIF .....	Page 41
Resolution 17-23: RFP Competitive Contracting .....	Page 42
Resolution 18-23: Authorizing the use of E-Procurement.....	Page 44
Resolution 19-23: Approval of the January 2023 Bills List .....	Page 45

### **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  
February 27, 2023**

**FINANCE AND CONTRACTS**

**PRO FORMA REPORTS**

- **Fast Track Financial Report** – as of December 31, 2022 (page 3)

**NEW MEMBERS**

The fund received applications from Township of Medford and the Borough of Laurel Springs. They will renew with the rest of the fund on 1/1/2024. The size and demographics of both groups make them good SNJHIF candidates. The Actuary fully vetted this proposal and certified the projection and the Finance Committee are recommending membership. The Underwriting details are below.

**MOTION:** *Motion to Approve Resolution 15-23 Offering membership to the Township of Medford and the Borough Laurel Springs.*

**REVISED CASH MANAGEMENT PLAN**

Included in the agenda is Revised Resolution 6-23 which includes a name change from Investors Bank to Citizens Bank which is a Fund investment account.

**MUNICIPAL REINSURANCE HEALTH INSURANCE FUND**

The MRHIF executive committee met on February 9 to reorganize for 2023.

In addition, three major RFPs were approved at the guidance of the Fund's QPA – Medical and Dental TPA and Enrollment system.

**COMPETITIVE CONTRACTING**

The MRHIF hired a QPA to handle the contract procurements for the Funds across the State. It is his recommendation to change the Fund's process to Competitive Contracting under the Local public contract laws. The MRHIF will release these services under a shared service agreement through Resolution 16-23

The Fund does not have any RFPs to release at this time but would like to have the appropriate resolutions moved for when the Fund is in need.

Resolution 17-23 allows for the competitive contracting and releases the RFPs for the positions listed above. Resolution 18-23 allows for our QPA to use E-bidding.

**MOTION:** *Motion to approve resolutions 16-23, 17-23 and 18-23 for competitive contracting through the Municipal Reinsurance Health Insurance Fund's QPA.*

## **GASB 75 REPORTS**

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.

### **2023 MEL, MR HIF & NJCE JIF Educational Seminar:**

The 12th annual seminar will be conducted virtually on 2 half-day sessions: Friday April 21st and Friday April 28th from 9AM to 12PM.

The seminar qualifies for Continuing Educational Credits including CFO/CMFO, Public Works, Clerks, Insurance Producers and Purchasing Agents. There is no fee for employees, insurance producers, as well as personnel who work for services companies associated with the Municipal Excess Liability Joint Insurance Fund (MEL JIF), Municipal Reinsurance Health Insurance Fund (MR HIF) and New Jersey Counties Excess Joint Insurance Fund (NJCE JIF). We are in the process of preparing to distribute this notice to all members and risk managers.

Enclosed in Appendix IV is the latest in a series of Power of Collaboration advertisement to be published in the League of Municipalities magazine which highlights the educational seminar.

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND						
FINANCIAL FAST TRACK REPORT						
		AS OF	December 31, 2022			
		THIS MONTH	YTD CHANGE		PRIOR YEAR END	FUND BALANCE
1.	UNDERWRITING INCOME	4,719,646	54,337,129		1,317,785,394	1,372,122,523
2.	CLAIM EXPENSES					
	Paid Claims	4,627,623	46,228,639		1,070,869,641	1,117,098,280
	IBNR	(34,809)	652,753		3,442,882	4,095,635
	Less Specific Excess	(2,442)	(382,172)		(19,238,761)	(19,620,933)
	Less Aggregate Excess	-	-		(1,807,360)	(1,807,360)
TOTAL CLAIMS		4,590,373	46,499,220		1,053,266,402	1,099,765,622
3.	EXPENSES					
	MA & HMO Premiums	426,798	4,879,178		31,817,441	36,696,619
	Excess Premiums	74,029	849,092		48,343,585	49,192,677
	Administrative	269,079	2,988,142		118,378,290	121,366,432
TOTAL EXPENSES		769,907	8,716,412		198,539,316	207,255,728
4.	UNDERWRITING PROFIT/(LOSS) (1-2-3)	(640,633)	(878,503)		65,979,676	65,101,173
5.	INVESTMENT INCOME	32,320	164,439		3,460,928	3,625,367
6.	DIVIDEND INCOME	0	109,474		11,536,489	11,645,963
7.	STATUTORY PROFIT/(LOSS) (4+5+6)	(608,313)	(604,590)		80,977,093	80,372,503
8.	DIVIDEND	0	0		72,674,656	72,674,656
9.	Transferred Surplus	0	0		0	0
STATUTORY SURPLUS (7-8+9)		(608,313)	(604,590)		8,302,437	7,697,847
SURPLUS (DEFICITS) BY FUND YEAR						
Closed		Surplus	20,023	177,051	8,764,877	8,941,928
		Cash	(8,102)	(805,780)	14,534,816	13,729,036
2021		Surplus	25,546	(556,414)	(462,441)	(1,018,854)
		Cash	(30,960)	(1,876,073)	934,699	(941,374)
2022		Surplus	(653,882)	(225,227)		(225,227)
		Cash	(1,467,369)	(1,568,827)		(1,568,827)
TOTAL SURPLUS (DEFICITS)		(608,313)	(604,590)		8,302,437	7,697,847
TOTAL CASH		(1,506,431)	(4,250,680)		15,469,515	11,218,835
CLAIM ANALYSIS BY FUND YEAR						
TOTAL CLOSED YEAR CLAIMS		(4,220)	20,152		1,016,323,712	1,016,343,864
FUND YEAR 2021						
	Paid Claims	39,842	4,258,937		33,706,067	37,965,004
	IBNR	(54,953)	(3,442,882)		3,442,882	-
	Less Specific Excess	(1,553)	(159,905)		(206,257)	(366,162)
	Less Aggregate Excess	0	0		0	0
TOTAL FY 2021 CLAIMS		(16,664)	656,150		36,942,692	37,598,842
FUND YEAR 2022						
	Paid Claims	4,592,002	41,942,356			41,942,356
	IBNR	20,144	4,095,635			4,095,635
	Less Specific Excess	(889)	(215,072)			(215,072)
	Less Aggregate Excess	0	0			0
TOTAL FY 2022 CLAIMS		4,611,257	45,822,919			45,822,919
COMBINED TOTAL CLAIMS		4,590,373	46,499,220		1,053,266,404	1,099,765,624
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.						

**Southern New Jersey Regional Employee Benefits Fund**  
**CONSOLIDATED BALANCE SHEET**  
AS OF DECEMBER 31, 2022  
BY FUND YEAR

	SNJREBF 2022	SNJREBF 2021	CLOSED YEAR	FUND BALANCE
<b>ASSETS</b>				
Cash & Cash Equivalents	(1,568,827)	(941,374)	13,729,036	11,218,835
Assessments Receivable (Prepaid)	2,252,224	(158,584)	137,989	2,231,629
Interest Receivable	-	-	13	13
Specific Excess Receivable	889	81,104	-	81,993
Aggregate Excess Receivable	-	-	-	-
Dividend Receivable	-	-	109,474	109,474
Prepaid Admin Fees	-	-	-	-
Other Assets	3,270,085	-	-	3,270,085
<b>Total Assets</b>	<b>3,954,371</b>	<b>(1,018,854)</b>	<b>13,976,512</b>	<b>16,912,028</b>
<b>LIABILITIES</b>				
Accounts Payable	78	(0)	-	78
IBNR Reserve	4,095,635	0	-	4,095,635
A4 Retiree Surcharge	-	-	-	-
Dividends Payable	-	-	0	0
Retained Dividends	-	-	5,034,583	5,034,583
Accrued/Other Liabilities	83,886	-	-	83,886
<b>Total Liabilities</b>	<b>4,179,598</b>	<b>0</b>	<b>5,034,583</b>	<b>9,214,182</b>
<b>EQUITY</b>				
Surplus / (Deficit)	(225,227)	(1,018,854)	8,941,928	7,697,847
<b>Total Equity</b>	<b>(225,227)</b>	<b>(1,018,854)</b>	<b>8,941,928</b>	<b>7,697,847</b>
<b>Total Liabilities &amp; Equity</b>	<b>3,954,371</b>	<b>(1,018,854)</b>	<b>13,976,512</b>	<b>16,912,028</b>
<b>BALANCE</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.

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND													
RATIOS													
FY2022													
INDICES	2021	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Cash Position	15,469,515	\$ 13,777,456	\$ 13,039,982	\$ 14,884,691	\$ 15,797,902	\$ 16,042,608	\$ 13,980,450	\$ 12,943,612	\$ 12,729,841	\$ 12,743,749	\$ 13,398,701	\$ 12,725,266	\$ 11,218,835
IBNR	3,442,882	\$ 3,870,793	\$ 4,153,514	\$ 4,301,835	\$ 4,365,466	\$ 4,397,482	\$ 3,610,892	\$ 4,001,812	\$ 4,077,478	\$ 4,125,468	\$ 4,128,810	\$ 4,130,444	\$ 4,095,635
Assets	17,959,222	\$ 18,794,371	\$ 17,867,933	\$ 16,910,408	\$ 16,664,539	\$ 16,733,743	\$ 16,328,383	\$ 17,024,579	\$ 16,778,792	\$ 16,709,611	\$ 16,819,028	\$ 17,526,379	\$ 16,912,028
Liabilities	9,656,786	\$ 9,915,504	\$ 9,488,305	\$ 9,602,630	\$ 9,635,522	\$ 9,647,405	\$ 8,814,504	\$ 9,170,636	\$ 9,223,223	\$ 9,255,167	\$ 9,238,236	\$ 9,220,220	\$ 9,160,967
Surplus	8,302,437	\$ 8,878,867	\$ 8,379,629	\$ 7,307,779	\$ 7,029,017	\$ 7,086,337	\$ 7,513,879	\$ 7,853,943	\$ 7,555,568	\$ 7,454,444	\$ 7,580,792	\$ 8,306,160	\$ 7,751,062
Claims Paid -- Month	2,973,600	\$ 2,668,627	\$ 3,865,842	\$ 4,593,206	\$ 3,855,057	\$ 3,604,209	\$ 4,351,361	\$ 3,251,619	\$ 4,120,758	\$ 4,195,924	\$ 3,890,286	\$ 3,204,128	\$ 4,627,623
Claims Budget -- Month	2,967,287	\$ 3,615,026	\$ 3,620,002	\$ 3,617,974	\$ 3,618,943	\$ 3,629,654	\$ 3,617,101	\$ 3,885,799	\$ 3,892,852	\$ 3,900,934	\$ 3,885,361	\$ 3,885,626	\$ 3,880,661
Claims Paid -- YTD	36,688,631	\$ 2,668,627	\$ 6,534,469	\$ 11,127,676	\$ 14,982,733	\$ 18,586,941	\$ 22,938,302	\$ 26,189,921	\$ 30,310,679	\$ 34,506,603	\$ 38,396,888	\$ 41,601,016	\$ 46,228,639
Claims Budget -- YTD	35,830,197	\$ 3,615,026	\$ 7,235,029	\$ 10,853,003	\$ 14,471,945	\$ 18,101,599	\$ 21,718,701	\$ 25,604,499	\$ 29,497,351	\$ 33,398,285	\$ 37,283,646	\$ 41,169,271	\$ 45,049,932
RATIOS													
Cash Position to Claims Paid	5.20	5.16	3.37	3.24	4.1	4.45	3.21	3.98	3.09	3.04	3.44	3.97	2.42
Claims Paid to Claims Budget -- Month	1.00	0.74	1.07	1.27	1.07	0.99	1.2	0.84	1.06	1.08	1	0.82	1.19
Claims Paid to Claims Budget -- YTD	1.02	0.74	0.90	1.03	1.04	1.03	1.06	1.02	1.03	1.03	1.03	1.01	1.03
Cash Position to IBNR	4.49	3.56	3.14	3.46	3.62	3.65	3.87	3.23	3.12	3.09	3.25	3.08	2.74
Assets to Liabilities	1.86	1.90	1.88	1.76	1.73	1.73	1.85	1.86	1.82	1.81	1.82	1.9	1.85
Surplus as Months of Claims	2.80	2.46	2.31	2.02	1.94	1.95	2.08	2.02	1.94	1.91	1.95	2.14	2.00
IBNR to Claims Budget -- Month	1.16	1.07	1.15	1.19	1.21	1.21	1	1.03	1.05	1.06	1.06	1.06	1.06



Southern NJ Municipal Employee Benefits Fund						
2022 Budget Status Report						
as of December 31, 2022						
				YTD	\$ Variance	% Variance
Expected Losses	YTD Budgeted	Annual	Latest Filed	Expensed		
Medical Claims - All Other	26,613,745	26,613,745	18,348,245			
Medical Claims AmeriHealth - All Other	1,555,205	1,555,205	1,513,813			
Medical Claims - CCBOSS	9,866,497	9,866,497	10,570,521			
Subtotal Medical	38,035,447	38,035,447	30,432,580	38,741,661	(706,214)	-2%
Prescription Claims - All Other	5,678,168	5,678,168	5,416,332			
Prescription Claims - CCBOSS	2,485,635	2,485,635	2,648,461			
Rx Rebates	(2,449,140)	(2,449,140)	(2,419,438)			
Subtotal Prescription	5,714,663	5,714,663	5,645,355	5,948,297	(233,634)	-4%
Dental Claims - All Other	1,130,575	1,130,575	1,109,717			
Dental Claims - CCBOSS	169,246	169,246	173,930			
Subtotal Dental	1,299,821	1,299,821	1,283,646	1,132,960	166,862	13%
Subtotal Claims	45,049,932	45,049,932	37,361,580	45,822,919	(772,987)	-2%
Loss Fund Contingency	0	0	0			
DMO Premiums	1,088	1,088	3,078	857	231	21%
Medicare Advantage - All Other	2,999,415	2,999,415	2,163,048			
Medicare Advantage - CCBOSS	1,875,456	1,875,456	1,876,343			
Subtotal Insured Programs	4,875,959	4,875,959	4,042,469	4,878,321	(3,450)	0%
Reinsurance						
Specific	849,092	849,092	687,766	849,092	(0)	0%
Total Loss Fund	50,774,983	50,774,983	42,091,815	51,551,188	(776,205)	-2%
Expenses						
Legal	22,163	22,163	22,163	22,508	(345)	-2%
Treasurer	15,618	15,618	15,618	15,618	0	0%
Administrator	403,689	403,689	368,018	403,689	(0)	0%
Program Manager	1,017,915	1,017,915	859,429	1,457,629	(15,680)	-1%
Brokerage	424,034	424,034	291,468	Included above in Program Manager		
TPA - Med Aetna	933,109	933,109	745,287	995,096	626	0%
TPA - Med AmeriHealth Admin	62,613	62,613	60,758	Included above in TPA		
TPA - Dental	69,732	69,732	68,927	69,732	-	0%
Actuary	11,200	11,200	11,200	11,200	(0)	0%
Auditor	19,767	19,767	19,767	19,767	0	0%
Subtotal Expenses	2,979,840	2,979,840	2,462,636	2,995,239	(15,400)	-1%
Misc/Cont	20,219	20,219	20,219	20,301	(82)	0%
Data Analysis System	0	0	0	0	-	#DIV/0!
Affordable Care Act Taxes	12,195	12,195	9,878	11,066	1,130	9%
Plan Documents	15,000	15,000	15,000	15,000	-	0%
Total Expenses	3,027,254	3,027,254	2,507,733	3,041,605	(14,351)	0%
Total Budget	53,802,237	53,802,237	44,599,548	54,592,794	(790,556)	-1%

<b>New Member Overview</b>	
<b>Fund</b>	Southern NJ HIF
<b>Entity</b>	<b>Medford Township</b>
<b>County</b>	Burlington County
<b>Effective Date</b>	4/1/2023 - 12/31/2023
<b>Lines of Coverage</b>	Medical and Prescription
<b>Eligible Employees</b>	65
<b>Retiree Coverage</b>	Yes - U65 and Medicare eligible
<b>Current Arrangement</b>	State Health Benefits
<b>Actuary Certification</b>	Yes: Standard Underwriting Methodolgy
<b>Run Out Claims</b>	State Health Benefits
<b>Member approval?</b>	Resolution Passed; waiting on Indemnity and Trust
<b>Special Requests</b>	None

<b>New Member Overview</b>	
<b>Fund</b>	Southern NJ HIF
<b>Entity</b>	<b>Medford Township</b>
<b>County</b>	Burlington County
<b>Effective Date</b>	4/1/2023 - 12/31/2023
<b>Lines of Coverage</b>	Medical and Prescription
<b>Eligible Employees</b>	65
<b>Retiree Coverage</b>	Yes - U65 and Medicare eligible
<b>Current Arrangement</b>	State Health Benefits
<b>Actuary Certification</b>	Yes: Standard Underwriting Methodolgy
<b>Run Out Claims</b>	State Health Benefits
<b>Member approval?</b>	Resolution Passed; waiting on Indemnity and Trust
<b>Special Requests</b>	None

## REGULATORY

### Monthly Items

Budget

Assessments

Actuarial Certification

Reinsurance Policies

Fund Commissioners

Fund Officers

Renewal Resolutions

Indemnity and Trust

New Members

Withdrawals

Risk Management Plan and By Laws

Cash Management Plan

Unaudited Financials

Annual Audit

Budget Changes

Transfers

Additional Assessments

Professional Changes

Officer Changes

RMP Changes

Bylaw Amendments

Contracts

Benefit Changes

### Filing Status

Filed

Filed

Filed

Filed

To Be Filed pending reorg

To Be Filed pending reorg

To Be Filed pending reorg

To Be Filed pending reorg

To Be Filed

N/A

To Be Filed pending reorg

To Be Filed pending reorg

9/30/2021 Filed

12/31/2021 filed

N/A

N/A

N/A

N/A

N/A

N/A

N/A

To Be Filed pending reorg

N/A

## **SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND**

### **Program Manager**

February 2023

Program Manager: Conner Strong & Buckelew

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

Enrollments/Eligibility/Billing: [southernnj\\_enrollments@permainc.com](mailto:southernnj_enrollments@permainc.com)

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

### **ELIGIBILITY/ENROLLMENT:**

Please direct any eligibility, enrollment, or system related questions to our dedicated SNJREBF enrollment team. To contact the team, email [southernnj\\_enrollments@permainc.com](mailto:southernnj_enrollments@permainc.com) or fax to 856-685-2249.

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:**

#### **COVID-19 Oral Prescriptions:**

The Food & Drug Administration has approved 2 oral antiviral medications for Emergency Use Authorizations (EUA). With a EUA certification, plan sponsors are expected to cover the medications with a \$0 copay. The Government will be purchasing the medications and distributing to local pharmacies for adjudication through Pharmacy plans (Express Scripts). The approved functions of these medications are to assist in reducing the severity of complications as a result of COVID-19 in individuals who test positive with present symptoms. As of today, the medications will require a prescription from a physician for access.

- 1- *Pfizer- Paxlovid*
- 2- *Merck- Molnupiravir*

Express Scripts has proactively begun updating their adjudication systems to ensure plans meet the expectations of the Federal Government:

- Associated Costs:
  - Plan - \$0 Ingredient cost during the period that the medications are purchased by the Federal Government
  - Member - \$0 copay
  - Program Fee- \$2.50 per prescription
  - Dispensing Fee- TBD; additional legislative guidance is needed for local pharmacies
- Plan Impact
  - Addition of medications to covered Formulary
  - Member educational pieces
  - Quantity Limit – 1 course of treatment every 180 days

### **EXPRESS SCRIPTS UPDATE**

Due to the frequency in which plans and benefits can change, effective April 1, 2023, ESI will no longer issue physical ID cards. Digital ID cards are available with the most up to date information. This will eliminate the need to reissue ID cards each time plan and/or benefit information has changed on a member's ID card.

- New members, members without an email address on file or members that do not respond to the email sent by ESI, will be contacted via direct mail with instructions. The instructions will explain how to register and access their digital ID card online or request a printed card if necessary.
- If members are set up in ESI's portal with an email address, they will receive a welcome kit that explains their pharmacy benefit and how to print their digital ID card.
- Members who do not have access to the internet, do not have a smartphone, or who prefer not to register on express-scripts.com can request a physical ID card by calling Express Scripts Customer Service at the number on their onboarding communications.
- Due to HIPAA, digital ID cards cannot be emailed to members, they must be accessed from the member's personal registered account with ESI.

**Please note there is not an option to request a group have the option for their employees to continue to receive physical ID cards in lieu of digital ID cards. The above information was shared with brokers on February 10, 2023.**

**2022 SaveOn Savings** – In the 2022 plan year SNJHIF saved \$439,676 for members enrolled in SaveOn. There were 60 participants in the program, for an average savings per prescription of \$1,198.

## **AETNA UPDATE**

**Aetna/Virtua Negotiations** – Aetna and Virtua Health have come to an agreement. The contract is in place for 4 years (actual agreement is 3 years and 11 months), effective 2/1/23. There have been no interruption to member access as an agreement was reached prior to the contracts extension termination date of March 31, 2023. Aetna will send retraction letters on 2/15/23.

## **OPERATIONAL UPDATES:**

### **End of Year/Wellness Incentive Program Reporting**

In addition to the End of Year report, a Wellness Incentive Program report has been provided reflecting employees who received a gym reimbursement in 2022, as this is taxable income. Wellness incentives provided directly to members that do not go towards their health insurance premiums are considered taxable income regardless of the amount. It is the employer's responsibility to report any wellness incentive as income on the employee's W-2 and withhold all appropriate income tax.

Please note the following:

- The report includes the participant's full name and total amount received in 2022
  - Aetna - up to \$240 per eligible participant
  - AHA – up to \$150 or \$240 depending on the group
- Initial report will be for reimbursements issued for the time period of **January 1, 2022 through October 31, 2022**
  - Reports were sent to group billing contacts the week of January 2<sup>nd</sup>
- An additional report will be provided in late January 2023 for reimbursements issued for the time period of **November 1, 2022 through December 31, 2022**

- Employers are responsible for updating an employee's W-2 withholdings once received
- **Final reports were sent to the group billing contacts the week of January 30th**
- All eligible employees, spouses and dependents (those over age 18) who received a reimbursement will be included in the report separately
  - We recommend groups confirm with their tax advisor if reimbursements for spouses and dependents should be included in the employee's reporting

Please note there is not an option to receive the latter report sooner than late January as the data is not available

## 2022 LEGISLATIVE REVIEW

### COVID -19

1. National Emergency Declaration - Extended through May 11, 2023. The extension is in effect for 90 days. A decision to terminate the declaration or let it expire will be provided with a 60 days' notice prior to termination.
  - Qualified Beneficiaries may wait one year to elect COBRA but must then start to make premium payments
  - Individual has a maximum of one year from date of payment originally would have due, including any applicable grace period
  - Under special transition rule- certain premium payments are not required to be made before 11/1/21.
2. At Home COVID-19 Testing- On January 10<sup>th</sup>, 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.
  - a. Coverage Highlights:
    - Date- Starting on January 15, 2022, going forward
    - Network – the legislation encourages healthcare insurers to develop a network of locations at which the tests can be purchased with \$0 member cost share at point of service
    - Dollar Limit- Up to \$12 per test
    - Quantity Limit- Up to 8 tests per individual per 30 days

**FREE Tests from the Government – COVID-19 at home tests 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>.

#### ESI Highlights:

- Point of service option is now available for members to get tests at the pharmacy counter.
  - Mail order options is also available through ESI.
    - Ordering for more than one participant must be done separately.
  - ESI will allow up to 8 tests per covered individual per 30 days, regardless of the source used to obtain the kits.
  - Communication update was sent on February 11, 2022, outlining the retail and mail order process through ESI. Member communications were included for distribution.
1. Vaccine Mandates – 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 and 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.

## **Mental Health Parity and Addiction Equity Act (MHPAE)**

In December of 2020 Congress passed into Law the Consolidated Appropriateness Act. The Law addresses how the DOL, HHS and IRS will assess how well plan sponsors and insured plans are keeping up with compliance requirements under MHPAE (passed in 2008).

Plans and plans sponsors will be required to complete a detailed analysis of the plan, confirming compliance.

On behalf of all self-insured groups, Conner Strong & Buckelew, is working with our TPA and PBM partners to request assistance for our clients in providing the analysis. We will continue to keep you updated on the progress and efforts on the Fund's next steps.

<https://www.dol.gov/sites/dolgov/files/EBSA/laws-and-regulations/laws/mental-health-parity/self-compliance-tool.pdf>

## No Surprise Billing and Transparency Act – Continued Delays

The Health Insurance Funds, including SNJHIF 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 SNJHIF 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 Southern New Jersey Health Insurance Fund (NJHIF). AIM will complete 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.**

## 2023 IRMAA Charge

The standard Part B premium amount in 2023 is \$164.90 (reduced from 2022 premium of \$170.10). Most participants pay the standard Part B premium amount. If the participants modified adjusted gross income as reported on their IRS tax return from 2 years ago is above a certain amount, they will pay the standard premium amount and an Income Related Monthly Adjustment Amount (IRMAA). IRMAA is an extra charge added to your premium.

Beneficiaries who file individual tax returns with modified adjusted gross income:	Beneficiaries who file joint tax returns with modified adjusted gross income:	Income-related monthly adjustment amount	Total monthly premium amount
Less than or equal to	Less than or equal to	\$0.00	\$164.90



\$97,000	\$194,000		
Greater than \$97,000 and less than or equal to \$123,000	Greater than \$194,000 and less than or equal to \$246,000	65.90	230.80
Greater than \$123,000 and less than or equal to \$153,000	Greater than \$246,000 and less than or equal to \$306,000	164.80	329.70
Greater than \$153,000 and less than or equal to \$183,000	Greater than \$306,000 and less than or equal to \$366,000	263.70	428.60
Greater than \$183,000 and less than \$500,000	Greater than \$366,000 and less than \$750,000	362.60	527.50
Greater than or equal to \$500,000	Greater than or equal to \$750,000	395.60	560.50

**Carrier Appeals:**

No New Appeals

**IRO Submissions:**

No New Appeals

**Small Claims Committee:** None

# SOUTHERN NJ REGIONAL EMPLOYEE BENEFITS FUND

## BILLS LIST

Confirmation of Payment

JANUARY 2023

**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 2022**

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002709	Windslow Township Fire District	REIMBURSE DUPLICATE PAYMENT 12/22	53,215.00
			<b>53,215.00</b>
		<b>Total Payments FY 2022</b>	<b>53,215.00</b>
		<b>TOTAL PAYMENTS ALL FUND YEARS</b>	<b>53,215.00</b>

\_\_\_\_\_  
Chairperson

Attest:

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

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

\_\_\_\_\_  
Treasurer

# SOUTHERN NJ REGIONAL EMPLOYEE BENEFITS FUND

## BILLS LIST

**Resolution**

**JANUARY 2023**

**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.

### **CLOSED YEAR 2022**

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002710			
002710	WELLNESS COACHES	WELLNESS COACH CAMDEN CTY BOSS 1/23	6,032.00
			<b>6,032.00</b>
		<b>Total Payments FY Closed Year</b>	<b>6,032.00</b>

### **FUND YEAR 2022**

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002711			
002711	PERMA	POSTAGE 1222	45.15
002711	PERMA	AATRIX 1099 FILING 12/22	32.50
			<b>77.65</b>
		<b>Total Payments FY 2022</b>	<b>77.65</b>

### **FUND YEAR 2023**

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002712			
002712	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 1/23	5,179.10
			<b>5,179.10</b>
002713			
002713	PERMA	ADMINISTRATION FEES 01/23	41,017.81
			<b>41,017.81</b>
002714			
002714	ACTUARIAL SOLUTIONS, LLC	1ST QUARTER 2023 ACTUARY FEES	4,300.00
			<b>4,300.00</b>
002715			
002715	J. KENNETH HARRIS, ATTORNEY AT LAW	ATTORNEY SERVICES 01/23	1,883.83
002715	J. KENNETH HARRIS, ATTORNEY AT LAW	PLAN DOCUMENT PREPARATION 01/23	6,647.00
002715	J. KENNETH HARRIS, ATTORNEY AT LAW	ATTORNEY SERVICES 02/23	1,883.83
			<b>10,414.66</b>

002716			
002716	VERRILL & VERRILL LLC	TREASURER FEE 01/23	802.05
			<b>802.05</b>
002717			
002717	ELIZABETH PIGLIACELLI	TREASURER FEE 01/23	525.49
			<b>525.49</b>
002718			
002718	MUNICIPAL REINSURANCE HIF	SPECIFIC REINSURANCE 01/23	74,246.46
			<b>74,246.46</b>
W123			
W123	UHC-MEDICARE ADVANTAGE	MEDICARE ADVANTAGE 1/23	282,959.16
			<b>282,959.16</b>
W1231			
W1231	FLAGSHIP HEALTH SYSTEMS	DMO PREM - BOROUGH LINDWOLD 1/23	24.41
W1231	FLAGSHIP HEALTH SYSTEMS	DMO PREM BOROUGH SOMERDALE 2/23	70.23
W1231	FLAGSHIP HEALTH SYSTEMS	DMO PREM . BOROUGH LINDWOLD 2/23	24.41
W1231	FLAGSHIP HEALTH SYSTEMS	DMO PREM BOROUGH SOMERDALE 1/23	70.23
			<b>189.28</b>
W1232			
W1232	AETNA-MEDICARE ADVANTAGE	MEDICARE ADVANTAGE 01/23	387,193.52
			<b>387,193.52</b>
W1233			
W1233	AETNA	MEDICAL TPA 01/23	78,565.98
			<b>78,565.98</b>
W1234			
W1234	DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 01/23	6,062.49
			<b>6,062.49</b>
W1235			
W1235	CONNER STRONG & BUCKELEW	RX - PROGRAM MANAGER FEES 1/23	10,233.66
W1235	CONNER STRONG & BUCKELEW	MEDICAL - PROGRAM MANAGER FEES 1/23	86,233.18
W1235	CONNER STRONG & BUCKELEW	BROKER FEES 01/23	36,588.62
W1235	CONNER STRONG & BUCKELEW	DENTAL - PROGRAM MANAGER FEES 1/23	5,450.43
W1235	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 01/23	794.42
			<b>139,300.31</b>
		<b>Total Payments FY 2023</b>	<b>1,030,756.31</b>
		<b>TOTAL PAYMENTS ALL FUND YEARS</b>	<b>1,036,865.96</b>

\_\_\_\_\_  
Chairperson

Attest:

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

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

\_\_\_\_\_  
Treasurer

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND										
SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED										
Current Fund Year: 2022 Month Ending: December										
	Med	Dental	Rx	Vision	Medicare Advantage	Reinsurance	Dividend Reserve	Future	Admin	TOTAL
OPEN BALANCE	1,730,740.35	(125,469.53)	(2,310,772.33)	0.00	8,193,548.51	29,607.89	5,037,504.60	0.00	170,106.03	12,725,265.52
RECEIPTS										
Assessments	2,892,116.85	79,730.26	428,164.46	0.00	362,368.87	63,389.45	0.00	0.00	267,411.95	4,093,181.84
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts	15,789.42	0.00	1,284.48	0.00	14,870.90	53.73	9,142.83	0.00	308.73	41,450.09
Invest Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Subtotal Invest	15,789.42	0.00	1,284.48	0.00	14,870.90	53.73	9,142.83	0.00	308.73	41,450.09
Other Receipts *	84,610.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	84,610.31
TOTAL	2,992,516.58	79,730.26	429,448.94	0.00	377,239.77	63,443.18	9,142.83	0.00	267,720.68	4,219,242.24
EXPENSES										
Claims Transfers	3,950,040.98	79,418.65	892,781.86	0.00	0.00	0.00	0.00	0.00	0.00	4,922,241.49
Expenses	426,653.83	0.00	0.00	0.00	0.00	74,028.89	12,064.00	0.00	265,494.01	778,240.73
Other Expenses *	25,190.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,190.75
TOTAL	4,401,885.56	79,418.65	892,781.86	0.00	0.00	74,028.89	12,064.00	0.00	265,494.01	5,725,672.97
END BALANCE	321,371.37	(125,157.92)	(2,774,105.25)	0.00	8,570,788.28	19,022.18	5,034,583.43	0.00	172,332.70	11,218,834.79

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS											
SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND											
ALL FUND YEARS COMBINED											
CURRENT MONTH	December										
CURRENT FUND YEAR	2022										
Description:		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 Bank Money Market Account	
ID Number:											
Maturity (Yrs)											
Purchase Yield:		0.03	0.50	0.70	0.75	0.75	0.75	0.25	0.05	0	
TOTAL for All Accts & instruments											
Opening Cash & Investment Balance	\$12,725,265.52	5189.5	2364.3	4319646.09	5193236.44	1733372.466	53816.5	79594.42	1071294.08	266751.72	
Opening Interest Accrual Balance	\$11.41	11.41	0	0	0	0	0	0	0	0	
1 Interest Accrued and/or Interest Cost	\$1.76	\$1.76	\$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	\$41,450.09	\$11.41	\$4.52	\$13,757.78	\$14,109.20	\$7,554.68	\$1,664.88	\$87.27	\$3,569.72	\$690.63	
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	\$41,451.85	\$13.17	\$4.52	\$13,757.78	\$14,109.20	\$7,554.68	\$1,664.88	\$87.27	\$3,569.72	\$690.63	
9 Deposits - Purchases	\$7,933,034.05	\$0.00	\$0.00	\$0.00	\$0.00	\$7,152,601.40	\$780,432.65	\$0.00	\$0.00	\$0.00	
10 (Withdrawals - Sales)	-\$9,480,914.87	\$0.00	\$0.00	\$0.00	-\$3,000,000.00	-\$5,702,674.14	-\$778,240.73	\$0.00	\$0.00	\$0.00	
Ending Cash & Investment Balance	\$11,218,834.79	\$5,200.91	\$2,368.82	\$4,333,403.87	\$2,207,345.64	\$3,190,854.41	\$57,673.30	\$79,681.69	\$1,074,863.80	\$267,442.35	
Ending Interest Accrual Balance	\$13.17	\$13.17	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Plus Outstanding Checks	\$629,079.69	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$629,079.69	\$0.00	\$0.00	\$0.00	
(Less Deposits in Transit)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Balance per Bank	\$11,847,914.48	\$5,200.91	\$2,368.82	\$4,333,403.87	\$2,207,345.64	\$3,190,854.41	\$686,752.99	\$79,681.69	\$1,074,863.80	\$267,442.35	

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND**20



**SOUTHERN NEW JERSEY REGIONAL  
EMPLOYEE BENEFITS FUND**

**Monthly Claim Activity Report**

***January 27, 2023***



22

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

Plan Sponsor Unique ID : All  
 Customer: SNJ Regional Employee Benefits Fund  
 Group / Control: 00737391,00866357,SI030217,SI416902,SI431318

Paid Dates: 12/01/2022 - 12/31/2022  
 Service Dates: 01/01/2011 - 12/31/2022  
 Line of Business: All

	Billed Amt	Paid Amt
	\$319,756.49	\$101,689.63
	\$144,971.73	\$78,183.91
	\$129,957.67	\$69,291.04
	\$231,084.69	\$68,857.31
	\$378,795.20	\$66,663.46
	\$178,714.91	\$59,269.07
	\$106,599.00	\$55,077.73
<b>Total:</b>	<b>\$1,489,879.69</b>	<b>\$499,032.15</b>



**Medical Claims Paid:**

**January 2022 thru December 2022**

Total Medical Paid per EE: **\$1,598**

**Network Discounts**

Inpatient: **65.0%**  
Ambulatory: **70.5%**  
Physician/Other: **60.4%**  
**TOTAL: 65.8%**

**Provider Network**

% Admissions In-Network: **99.3%**  
% Physician Office: **97.8%**

Aetna Book of Business:  
Admissions 98.7%; Physician 91.6%

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

- Virtua-West Jersey
- Cooper Hospital
- Kennedy Health
- Virtua Our Lady of Lourdes
- CHOP

**Catastrophic Claim Impact**

**January 2022 – December 2022**

Number of Claims Over \$50,000: **95**  
Claimants per 1000 members: **19.7**  
Avg. Paid per Claimant: **\$127,126**  
Percent of Total Paid: **38.3%**  
• Aetna BOB- HCC account for an average of 38.1% of total Medical Cost

**Aetna One Flex Member Outreach:**  
**Through December 2022**

Total Members Identified: **996**  
Members Targeted for 1:1 Nurse Support: **205**  
Members Targeted for Digital Activity: **791**  
Member 1:1 outreach completed: **295**  
Member 1:1 Outreach in Progress: **10**

**Teladoc Activity**

**January 2022 – December 2022**

Total Registrations: **120**  
Total Online Visits: **228**  
Total Net Claims Savings: **\$109,882**  
Total Visits w/ Rx: **166**

Mental Health Visits: **18**  
Dermatology Visits: **4**

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

**Customer Service Performance**

1<sup>st</sup> Call Resolution: **93.38%**  
Abandonment Rate: **1.06%**  
Avg. Speed of Answer: **20.8 sec**

**Claims Performance**

Financial Accuracy: **99.66%**

90% processed w/in: **9.0 days**  
95% processed w/in: **18.1 days**

**Claims Performance (Monthly)**  
(December 2022)

90% processed w/in: **5.1 days**  
95% processed w/in: **8.1 days**  
(Note: This is not a PG metric)

**Performance Goals**

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

Financial Accuracy: **99%**

**Turnaround Time**

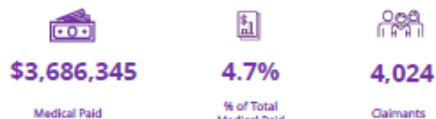
90% processed w/in: **14 days**  
95% processed w/in: **30 days**

## At a glance COVID-19 All-time experience

Time period: Jan 2020 - Jan 2023, paid through January 2023

Average Members: 4,369

### Key Statistics (Medical Claims Only)



More detailed information is found on the next page to help you answer critical questions:

- ✓ How is COVID-19 impacting our health care spend? What is the context of trends and spend distribution across cost categories?
- ✓ How many members are affected?
- ✓ How many claims-based tests have been conducted for the virus and antibodies?
- ✓ How many individuals have received vaccinations?
- ✓ How is COVID spend trending in 2021 compared to 2020?

Additional views and detailed data tables following the main report also provide specific cost and utilization metrics across age band categories as well as service categories

### Claimant Distribution\*

How your total claimants break down based on diagnosis code information



\*Refer to Report Items on page 1

### COVID-19 population risk\*

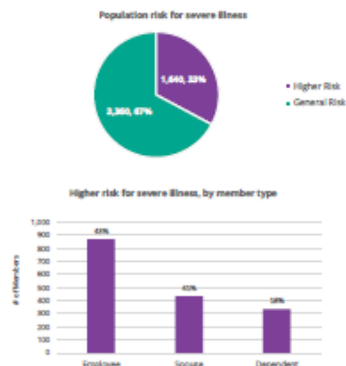


General risk for contracting COVID-19 exists across the population. Age and underlying health conditions are associated with higher risk for severe illness with the potential for severe symptoms, hospitalizations, ICU services, and poorer outcomes.

The pie chart shows the number and percent of your population with COVID-identified "higher risk for severe illness" status.

The bar chart displays this information by member type.

\* See page one for High Risk definition.



### Testing



### Vaccine Administration (Medical & Pharmacy)\*



\*Includes claims paid under the Aetna Pharmacy benefit plan if applicable

\*\*The unique count of members ≥ 5 years of age who have received all of the required doses based on claims received





2022 SNJ HIF					
		<u>MEDICAL CLAIMS PAID 2022</u>	<u>TOTAL</u>	<u># OF EES</u>	<u>PER EE</u>
JANUARY		\$ 139,776.07	\$ 139,776.07	138	\$ 1,012.87
FEBRUARY		\$ 641,299.80	\$ 641,299.80	138	\$ 4,646.59
MARCH		\$ 661,613.69	\$ 661,613.69	139	\$ 4,759.81
APRIL		\$ 190,416.63	\$ 190,416.63	136	\$ 1,400.12
MAY		\$ 317,487.55	\$ 317,487.55	134	\$ 2,369.31
JUNE		\$ 379,694.04	\$ 379,694.04	132	\$ 2,876.00
JULY		\$ 198,984.26	\$ 198,984.26	134	\$1,484.95
AUGUST		\$ 288,665.62	\$ 288,665.62	135	\$ 2,138.26
SEPTEMBER		\$ 233,667.06	\$ 233,667.06	137	\$ 1,705.59
OCTOBER		\$ 205,421.03	\$ 205,421.03	135	\$1,521.63
NOVEMBER		\$ 158,694.60	\$ 158,694.60	132	\$ 1,202.23
DECEMBER		\$ 592,198.28	\$ 592,198.28	134	\$ 4,419.39
TOTALS		\$ 4,007,918.63		135	\$ 2,461.40
			2022 Average	135	\$ 2,461.40

2023 SNJ HIF					
		<u>MEDICAL CLAIMS PAID 2023</u>	<u>TOTAL</u>	<u># OF EES</u>	<u>PER EE</u>
JANUARY		\$57,161	\$57,161	138	\$ 414.21
FEBRUARY					
MARCH					
APRIL					
MAY					
JUNE					
JULY					
AUGUST					
SEPTEMBER					
OCTOBER					
NOVEMBER					
DECEMBER					
TOTALS		\$57,161.00		138	\$ 414.21
			2021 Average	134	\$ 414.21
			2020 Average	135	\$ 1,360.98



## SOUTHERN NEW JERSEY HIF - 0002096174

Claims Incurred between 3/1/2020 and 2/14/2023 and Paid between 3/1/2020 and 2/14/2023

COVID19 Claims currently are consider to be claims with Procedure codes 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0031A, 0034A, 0041A, 0042A, 0051A, 0052A, 0053A, 0054A, 0064A, 0071A, 0072A, 0202U, 0223U, 0224U, 0225U, 0226U, 0240U, 0241U, 86328, 86408, 86409, 86413, 86769, 87426, 87428, 87635, 87636, 87637, 87811, 91300, 91301, 91303, 91304, 91305, 91306, 91307, C9803, G2023, G2024, J0248, M0201, M0220, M0221, M0222, M0223,

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
<1	12	29	\$6,337.67	\$218.54	\$29.34
1-5	17	65	\$10,763.90	\$165.60	\$13.84
6-18	43	115	\$16,712.98	\$145.33	\$9.58
19-25	33	117	\$37,766.43	\$322.79	\$28.70
26-39	65	240	\$50,221.95	\$209.26	\$20.08
40-64	98	431	\$323,417.07	\$750.39	\$77.99
65+	14	120	\$361,377.95	\$3,011.48	\$828.85
Unknown	0	0	\$0.00	\$0.00	\$0.00

REL TO INS	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Employee	119	636	\$642,756.81	\$1,010.62	\$132.09
Spouse	53	171	\$115,531.23	\$675.62	\$49.86
Dependent	89	310	\$48,309.91	\$155.84	\$12.21

GENDER	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Undisclosed	0	0	\$0.00	\$0.00	\$0.00
Undisclosed	0	0	\$0.00	\$0.00	\$0.00
Female	142	708	\$487,817.45	\$689.01	\$84.71
Male	119	409	\$318,780.50	\$779.41	\$59.26
Undisclosed	0	0	\$0.00	\$0.00	\$0.00
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	260	1116	\$806,497.95	\$722.67	\$72.59

#### 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	31	49	\$41,659.66	\$850.20	\$3.74
Emergency Room With Observation Bed	6	9	\$77,676.59	\$8,630.73	\$6.97
Observation Bed	1	1	\$0.00	\$0.00	\$0.00
Office Physician Visit	58	77	\$8,439.02	\$109.60	\$0.76
Other Physician Visit	39	53	\$7,179.92	\$135.47	\$0.64
Pathology (Laboratory)	221	623	\$57,647.86	\$92.53	\$5.18
Urgent Care	87	125	\$24,480.70	\$195.85	\$2.20



# **Inpatient Cost and Utilization 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	1	2	2	\$21,494.46	18.00	\$10,747.23	\$16.33	4.00
26-39	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
40-64	6	7	7	\$244,906.97	20.40	\$34,986.71	\$59.06	5.67
65+	2	7	5	\$200,488.66	138.00	\$40,097.73	\$459.84	22.50
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
Virtua West Jersey Health System Inc	12	21	\$253,703.39	\$12,081.11	\$22.78
Kennedy University Hospital	29	44	\$161,941.48	\$3,680.49	\$14.54
Inspira Medical Center Mullica Hill	28	45	\$93,651.00	\$2,081.13	\$8.41
Capital Health System	1	1	\$79,329.65	\$79,329.65	\$7.12
Inspira Medical Center Elmer	2	2	\$57,642.05	\$28,821.02	\$5.18
Pennsylvania Hospital of the University of Pennsylvania Health System	1	3	\$21,562.46	\$7,187.49	\$1.94
Labcorp Raritan	105	173	\$16,227.82	\$93.80	\$1.46
Virtua Primary Care TeleHealth	7	23	\$7,135.57	\$310.24	\$0.64
GENESIS LABORATORY MANAGEMENT	16	20	\$6,964.50	\$348.22	\$0.63
Inspira Health Network Urgent Care PC	17	23	\$6,640.00	\$288.70	\$0.60
Quest Diagnostics Inc	38	55	\$5,992.22	\$108.95	\$0.54
Cooper Physician Offices PA	7	21	\$5,756.22	\$274.11	\$0.52
Optum Urgent Care	24	32	\$5,568.20	\$174.01	\$0.50
Cooper University Hospital	35	66	\$4,808.70	\$72.86	\$0.43
Patient First Maryland Physicians Group Pc	22	26	\$4,350.25	\$167.32	\$0.39
EPA of South Jersey	6	6	\$3,298.52	\$549.75	\$0.30
Emergency Care Services Of Nj	6	6	\$3,088.57	\$514.76	\$0.28
Nemours Children's Health	3	4	\$2,627.31	\$656.83	\$0.24
MD Medical Goup	18	25	\$2,529.54	\$101.18	\$0.23
Inspira Woodbury	2	2	\$2,468.75	\$1,234.38	\$0.22
Inspira Health Network Medical Group PC	9	22	\$2,401.41	\$109.16	\$0.22
Virtua Home Care At W Jersey	1	2	\$2,368.00	\$1,184.00	\$0.21
Inspira Medical Center Vineland	10	15	\$2,355.10	\$157.01	\$0.21
Advantage Therapy Centers	1	4	\$2,185.00	\$546.25	\$0.20
HMHMG Specialty Care	13	21	\$1,962.64	\$93.46	\$0.18

**COVID19 Vaccine Claims with Procedure codes 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0031A, 0034A, 0041A, 0042A, 0051A, 0052A, 0053A, 0054A 0064A 0071A 0072A 91300 91301 91303 91304 91305 91306 91307**

AGE BAND	Single Dose Vaccines CLAIMANT COUNT	1st Dose Vaccine CLAIMANT COUNT	2nd Dose Vaccine CLAIMANT COUNT	3rd Dose Vaccine CLAIMANT COUNT	Booster Vaccine CLAIMANT COUNT	NET PAY	COST PER CLAIMANT
<1	0	0	0	0	0	\$0.00	
1-5	0	0	0	0	0	\$0.00	
6-18	1	5	1	1	0	\$619.77	\$77.47
19-25	0	4	5	0	2	\$792.04	\$72.00
26-39	0	8	5	3	0	\$1,007.42	\$62.96
40-64	1	13	9	0	6	\$2,083.74	\$71.85
65+	0	4	0	0	0	\$263.82	\$65.96
Unknown	0	0	0	0	0	\$0.00	

**COVID19 Claims for Urgent Care and Retail Clinics Only**

**Urgent Care**

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIMANT
<1	1	1	\$165.00	\$165.00
1-5	2	6	\$927.07	\$463.54
6-18	9	12	\$2,075.14	\$230.57
19-25	10	16	\$4,218.23	\$421.82
26-39	23	32	\$6,170.01	\$268.26
40-64	38	49	\$9,472.97	\$249.29
65+	6	9	\$1,452.28	\$242.05
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



**EXPRESS SCRIPTS®**

Southern New Jersey Regional Employee Benefits Fund

Total Component/Date of Service (Month)	2021 01	2021 02	2021 03	2021 Q1	2021 04	2021 05	2021 06	2021 Q2	2021 07	2021 08	2021 09	2021 Q3	2021 10	2021 11	2021 12	2021 Q4	2021 YTD
Membership	3,808	3,825	3,825	3,819	3,811	3,811	3,806	3,809	3,798	3,794	3,798	3,797	3,793	3,804	3,801	3,799	3,806
Total Days	148,560	141,424	162,203	452,187	153,420	167,793	152,654	473,867	147,439	160,138	155,141	462,718	150,121	156,323	151,983	458,427	1,847,199
Total Patients	1,343	1,302	1,447	1,989	1,398	1,432	1,405	2,031	1,384	1,449	1,438	2,095	1,420	1,474	1,452	2,093	2,801
Total Plan Cost	\$699,036	\$443,833	\$675,343	\$1,818,213	\$750,940	\$653,546	\$660,460	\$2,064,947	\$615,455	\$645,316	\$684,023	\$1,944,795	\$550,242	\$613,300	\$633,582	\$1,797,124	\$7,625,079
Generic Fill Rate (GFR) - Total	84.9%	84.5%	84.5%	84.6%	84.6%	86.2%	85.2%	85.3%	87.4%	87.1%	86.9%	87.1%	87.4%	86.7%	87.8%	87.3%	86.1%
Plan Cost PMPM	\$183.57	\$116.03	\$176.56	\$158.68	\$197.05	\$171.49	\$173.53	\$180.69	\$162.05	\$170.09	\$180.10	\$170.75	\$145.07	\$161.23	\$166.69	\$157.67	\$166.95
Total Specialty Plan Cost	\$286,736	\$88,910	\$272,467	\$648,113	\$343,693	\$215,486	\$266,539	\$825,717	\$265,299	\$230,876	\$296,541	\$792,715	\$192,096	\$237,938	\$238,054	\$668,088	\$2,934,634
Specialty % of Total Specialty Plan Cost	41.0%	20.0%	40.3%	35.6%	45.8%	33.0%	40.4%	40.0%	43.1%	35.8%	43.4%	40.8%	34.9%	38.8%	37.6%	37.2%	38.5%

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	4,596	4,586	4,598	4,593	4,596	4,605	4,600	4,600	5,000	5,014	5,024	5,013	4,997	4,998	4,984	4,993	4,800
Total Days	178,960	171,953	187,498	538,411	178,596	188,051	183,697	550,344	183,335	204,617	191,864	579,816	195,352	195,610	198,768	592,766	2,261,485
Total Patients	1,642	1,639	1,747	2,463	1,678	1,743	1,741	2,551	1,752	1,858	1,817	2,697	1,966	1,964	1,946	2,968	3,803
Total Plan Cost	\$641,761	\$621,784	\$698,429	\$1,961,974	\$616,769	\$768,231	\$695,354	\$2,080,354	\$835,921	\$778,927	\$793,969	\$2,408,816	\$732,533	\$744,007	\$869,205	\$2,425,952	\$8,877,516
Generic Fill Rate (GFR) - Total	87.6%	85.8%	87.1%	86.9%	87.6%	87.2%	87.3%	87.4%	87.5%	86.1%	87.1%	86.9%	81.6%	84.6%	85.4%	83.7%	86.1%
Plan Cost PMPM	\$139.63	\$135.58	\$151.90	\$142.38	\$134.20	\$166.83	\$151.16	\$150.74	\$167.18	\$155.35	\$158.04	\$160.18	\$146.59	\$148.86	\$174.40	\$161.96	\$154.13
% Change Plan Cost PMPM	-24.0%	16.8%	-14.0%	-10.3%	-31.9%	-2.7%	-12.9%	-16.6%	3.2%	-8.7%	-12.2%	-6.2%	1.1%	-7.6%	4.7%	2.8%	-7.7%
Total Specialty Plan Cost	\$258,321	\$238,408	\$258,476	\$755,205	\$211,002	\$339,439	\$290,418	\$840,859	\$378,061	\$312,245	\$368,494	\$1,058,801	\$260,900	\$316,084	\$390,697	\$1,035,059	\$3,689,924
Specialty % of Total Specialty Plan Cost	40.3%	38.3%	37.0%	38.5%	34.2%	44.2%	41.8%	40.4%	45.2%	40.1%	46.4%	44.0%	35.6%	42.5%	44.9%	42.7%	41.6%

PMPM	
October-December 2021	\$157.67
October-December 2022	\$161.96
Trend October-December 2022	2.7%

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND  
CONSENT AGENDA  
FEBRUARY 27 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**\_\_\_\_\_

**Resolutions**

**Subject Matter**

Revised Resolution 6-23: Designation of Bank Depositories & CMP .....	Page 36
Resolution 15-23: New Member Approval .....	Page 40
Resolution 16-23: Shared Services with MRHIF .....	Page 41
Resolution 17-23: RFP Competitive Contracting .....	Page 42
Resolution 18-23: Authorizing the use of E-Procurement.....	Page 44
Resolution 19-23: Approval of the January 2023 Bills List .....	Page 45

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND**

**2023 CASH MANAGEMENT AND INVESTMENT POLICY**

1.) **Cash Management and Investment Objectives**

The SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND (hereinafter referred to as the FUND) objectives in this area are:

- a.) Preservation of capital.
- b.) Adequate safekeeping of assets.
- c.) Maintenance of liquidity to meet operating needs, claims settlements and dividends.
- d.) Diversification of the FUND's portfolio to minimize risks associated with individual investments.
- e.) Maximization of total return, consistent with risk levels specified herein.
- f.) Investment of assets in accordance with State and Federal Laws and Regulations.
- g.) Accurate and timely reporting of interest earnings, gains and losses by line of coverage in each Fund year.
- h.) Where legally permissible, cooperation with other local municipal joint insurance funds, and the New Jersey Division of Investment in the planning and execution of investments in order to achieve economies of scale.
- i.) Stability in the value of the FUND's economic surplus.

2.) **Permissible Investments**

Investments shall be limited to the following:

- a.) Bonds or other obligations of the United States of America or obligations guaranteed by the United States of America.
- b.) Any federal agency or instrumentality obligation authorized by Congress that matures within 397 days from the date of purchase, and has a fixed rate of interest not dependent on any index or external factors.
- c.) Bonds or other obligations of the local unit or bonds or other obligations of school districts of which the local unit is a part or within which the school district is located; or
- d.) Bonds or other obligations, having a maturity date not exceeding 397 days, approved by the Division of Investment of the Department of Treasury for investment by local units.
- e.) Debt obligations of federal agencies or government corporations with maturities not greater than five (5) years from the date of purchase, excluding mortgage backed obligations, providing that such investments are purchased through the New Jersey Division of Investment and are consistent the Division's own

investment guidelines, and providing that the investment a fixed rate of interest not dependent on any index or external factors.

- f.) Repurchase agreements of fully collateralized securities, subject to rules and conditions establish by the N.J. Department of Community Affairs.

No investment or deposit shall have a maturity longer than five (5) years from date of purchase.

3.) **Authorized Depositories**

In addition to the above, the FUND is authorized to deposit funds in certificates of deposit and other time deposits in banks covered by the Governmental Unit Depository Protection Act, NJSA 17:9-14 et seq. (GUDPA). Specifically authorized depositories are as follows:

Citizens Bank

Parke Bank

Republic Bank

Oceans First

William Penn Bank

The FUND is also authorized to invest its assets in the New Jersey Cash Management Fund.

4.) **Authority for Investment Management**

The Treasurer is authorized and directed to make investments, with a maturity of three months or longer, through Wilmington Trust and other asset managers that may be selected by the Executive Board. Such asset managers shall be discretionary trustees of the FUND.

Their actions and decisions shall be consistent with this plan and all appropriate regulatory constraints.

In executing investments, asset managers shall minimize transaction costs by querying prices from at least three (3) dealers and purchasing securities on a competitive basis. When possible, federal securities shall be purchased directly from the US Treasury. Transactions shall not be processed through brokerages which are organizationally affiliated with the asset manager. Transactions may also be processed through the New Jersey Division of Investment by the Fund's asset managers.

5.) **Preservation of Capital**

Securities shall be purchased with the ability to hold until maturity.

6.) **Safekeeping**

Securities purchased on behalf of the FUND shall be delivered electronically or physically to the FUND's custodial bank, which shall maintain custodial and/or safekeeping accounts for such securities on behalf of the FUND.



7.) **Selection of Asset Managers, Custodial Banks and Operating Banks**

Asset managers, custodial banks and operating banks shall be retained for contract periods of one (1) year. Additionally, the FUND shall maintain the ability to change asset managers and/or custodial banks more frequently based upon performance appraisals and upon reasonable notice, and based upon changes in policy or procedures.

8.) **Reporting**

Asset managers will submit written statements to the treasurer and executive director describing the proposed investment strategy for achieving the objectives identified herein. Asset managers shall also submit revisions to strategy when justified as a result of changing market conditions or other factors. Such statements shall be provided to the Treasurer and Executive Director. The statements shall also include confirmation that all investments are made in accordance with this plan. Additionally, the Investment Manager shall include a statement that verifies the Investment Manager has reconciled and determined the appropriate fair value of the Funds portfolio based on valuation guidelines that shall be kept on file in the Executive Director's office.

The Treasurer shall report to the Executive Committee at all regular meetings on all investments. This report shall include information on the balances in all bank and investment accounts, and purchases, sales, and redemptions occurring in the prior month.

9.) **Audit**

This plan, and all matters pertaining to the implementation of it, shall be subject to the FUND's annual audit.

10.) **Cash Flow Projections**

Asset maturity decisions shall be guided by cash flow factors payout factors supplied by the Fund Actuary and reviewed by the Executive Director and the Treasurer.

11.) **Cash Management**

All moneys turned over to the Treasurer shall be deposited within forty-eight (48) hours in accordance with NJSA 40A:5-15.

In the event a check is made payable to the Treasurer rather than the Fund, the following procedure is to be followed:

- a.) The Treasurer endorses the check to the Fund and deposits it into the Fund account.
- b.) The Treasurer notifies the payer and requests that in the future any check be made payable to the Fund.

The Treasurer shall minimize the possibility of idle cash accumulating in accounts by assuring that all amounts in excess of negotiated compensating balances are kept in interest bearing accounts or promptly swept into the investment portfolio.

The method of calculating banking fees and compensating balances shall be documented to the Executive Committee by the Treasurer at least annually.

Cash may be withdrawn from investment pools under the discretion of asset managers only to fund operations, claims imprest accounts, or approved dividend payments.

The Treasurer shall escheat to the State of New Jersey checks which remain outstanding for twelve or more months after the date of issuance. However, prior to implementing such procedures, the Treasurer, with the assistance of the claims agent, as needed, shall confirm that the outstanding check continues to represent a valid claim against the FUND.

The rate of interest on delinquent assessments shall be 10% per annum from the due date for any such assessment.

**BE IT FURTHER RESOLVED** that the attached Cash and Investment Management Plan, which includes the designation of authorized depositories, be and is hereby adopted.

**ADOPTED: FEBRUARY 27, 2023**

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

**ATTEST:**

\_\_\_\_\_

**RESOLUTION NO. 15-23**

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND  
RESOLUTION TO OFFER MEMBERSHIP**

**WHEREAS**, the Southern New Jersey Regional Employee Benefits Fund (hereinafter the Fund) is duly constituted as a joint insurance fund and is subject to certain requirements of the Local Public Contracts Law; and;

**WHEREAS**, the Fund held a Public Meeting on **February 27, 2023** for the purposes of conducting the official business of the Fund; and

**WHEREAS**, the Executive Director and Actuary of the Fund has reviewed the risk, underwriting detail, and actuarial projections for the Township of Medford Township and Borough of Laurel Springs and recommend offers of membership; and

**WHEREAS**, the Finance Committee has reviewed the following new member submission and has approved membership to the entity contingent upon a fully executed Indemnity and Trust agreement to join the Fund

1. Medford Township – Medical and Rx
2. Borough of Laurel Springs - Medical and Rx

**BE IT RESOLVED**, it has been determined that the admission to membership in the Fund of the above mentioned municipalities would be in the best interests of the Fund and the inclusion of the entity in the Fund is consistent with the Fund's By-laws;

**BE IT RESOLVED**, that the Southern New Jersey Regional Employee Benefits Fund hereby offers membership to the above mentioned entity's for medical and prescription coverage, contingent upon receipt of the Fund's authorizing resolution to join the Fund and its executed Indemnity and Trust agreement.

**ADOPTED: February 27, 2023**

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

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

**RESOLUTION NO. 16-23**

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND  
RESOLUTION AUTHORIZING SHARED SERVICES AGREEMENT WITH THE MUNICIPAL  
REINSURANCE HEALTH INSURANCE FUND FOR QPA SERVICES**

**WHEREAS** the “Uniform Shared Services and Consolidation Act” N.J.S.A. 40A:11-4.1 et seq authorizes local units of this State to enter into a contract with any other local unit or units for the joint provision within their several jurisdictions of any service which any party to the agreement is empowered to render within its own jurisdiction; and

**WHEREAS**, the Parties have identified an area where working together through shared services will result in positive outcomes for both joint insurance Funds; and

**WHEREAS**, the Parties wish to enter into a Shared Services Agreement (“Agreement”) for Qualified Purchasing Agent (“QPA”) related services,

**WHEREAS**, the Municipal Reinsurance Health Insurance Fund has agreed to provide the Southern New Jersey Regional Employee Benefits Fund with the services of its QPA pursuant to the terms and conditions set forth in a Shared Services Agreement between the Parties.

**NOW, THEREFORE, BE IT RESOLVED** by the Executive Committee of the Southern New Jersey Regional Employee Benefits Fund that it hereby authorizes and directs the Fund Administrator to execute a Shared Services Agreement in a form substantially similar to the Agreement attached hereto and made part hereof with the Municipal Reinsurance Health Insurance Fund QPA services for a fee of \$12,500 annually,

**ADOPTED: February 27, 2023**

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

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

**RESOLUTION NO. 17-23**

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND  
RESOLUTION AUTHORIZING THE HIRING  
OF PROFESSIONAL SERVICES/ CONSULTANTS THROUGH THE COMPETITIVE  
CONTRACTING PROCESS**

**WHEREAS**, the Southern New Jersey Regional Employee Benefits Fund (Hereinafter the "Fund") has a need for the following services to be provided for the efficient operation of the Fund;

Auditor

Actuary

Attorney

Treasurer

**WHEREAS**, such desired services are currently available to be provided through the competitive contracting process under the New Jersey Local Publics Contract Law, (N.J.S.A. 19:44A-20.5 et. Seq.), and

**WHEREAS**, the Fund desires to evaluate such service offerings from Vendors within the procedures as set forth in the New Jersey Local Publics Contract Law, (N.J.S.A. 19:44A-20.5 et. Seq.), and

**WHEREAS**, the competitive contracting process satisfies the fair and open requirement as established under (N.J.S.A. 19:44A-20.5 et. Seq.), and

**WHEREAS**, the Fund desires to enter into a contract that will satisfy the needs of the Fund; and

**WHEREAS**, as per statute the process will be administered by the Qualified Purchasing Agent (N.J.S.A. 19:44A-20.5 et. Seq.),

**OW, THEREFORE, BE IT RESOLVED** by the Board of Fund Commissioners of the Municipal Reinsurance Health Insurance Fund resolve to authorize the Qualified Purchasing Agent to procure the Professional Services, Consulting, and other services through the competitive contacting process in accord with (N.J.S.A. 19:44A-20.5 et. Seq.), as follows:

Auditor

Actuary

Attorney

Treasurer

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND**

**ADOPTED: February 27, 2023**

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

**CHAIRPERSON**

**ATTEST:**

---

**SECRETARY**

**RESOLUTION NO. 18-23**

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND  
AUTHORIZING THE QUALIFIED PURCHASING AGENT TO RECEIVE CERTAIN BIDS IN  
ACCORD WITH N.J.A.C.5:34-5.1,  
E- PROCUREMENT**

**WHEREAS**, the Municipal Reinsurance Health Insurance Fund (FUND) has appointed a Qualified Purchasing Agent in accord with N.J.S.A. 40A:11-9; and

**WHEREAS**, the State of New Jersey in Administrative Code in response to the Covid 19 crisis has promulgated rules to allow for electronic receipt of bids with the rules at N.J.A.C. 5:34-1 et. Seq. and

**WHEREAS**, Sean P. Canning, QPA has recommended the use of Bidnet Direct software which complies with all the administrative rule as required by the New Jersey Administrative Rules; and

**WHEREAS**, the electronic procurement platform is available to other officials as required to virtually observe bid openings in a transparent manner and provide for bids available for public inspection; and

**WHEREAS**, the cost to the FUND and to the Vendors wishing to conduct business with the FUND is a zero cost.

**NOW, THEREFORE, BE IT RESOLVED** by the Southern New Jersey Regional Employee Benefits Fund as follows:

1. That Sean P. Canning QPA of The Canning Group LLC is hereby authorized to conduct bid openings and procurement in accord with N.J.S.A.40A:11-9 through E-Procurement in accord with N.J.A.C. 5:34-1 et. Seq., through Bidnet Direct at a zero cost to the FUND and to vendors for bid response.

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND**

**ADOPTED: FEBRUARY 27, 2023**

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

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

**RESOLUTION NO. 19-23**

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND  
APPROVAL OF THE JANURAY 2023 BILLS LIST**

**WHEREAS**, the Southern New Jersey Regional Employee Benefits Fund held a Public Meeting on **February 27, 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 January 2023 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 January 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 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.

**ADOPTED: FEBRAURY 27, 2023**

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

**ATTEST:**

\_\_\_\_\_  
**SECRETARY**



# APPENDIX I

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND**  
**OPEN MINUTES**  
**JANUARY 23, 2023**  
**ZOOM MEETING**  
**4:15 PM**

---

SINE DIE MEETING:

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 2022 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
Edward Hill	CCBOSS	Present
Robert Maybury	Mt. Holly MUA	Present
M. Gary Passanante	Borough of Somerdale	Present
Brian Morrell	Gloucester City	Present

**APPOINTED PROFESSIONALS PRESENT:**

Executive Director/Adm.	PERMA Risk Management Services <b>Brandon Lodics</b> <b>Emily Koval</b> <b>Jordyn DeLorenzo</b>
-------------------------	--

Program Manager	Conner Strong & Buckelew <b>Crystal Bailey</b> <b>Peter Mina</b>
-----------------	--

Attorney	<b>J. Kenneth Harris, Esq.</b>
----------	--------------------------------

Medical TPA – AmeriHealth	<b>Kristina Strain</b>
---------------------------	------------------------

Medical TPA – Aetna	<b>Jason Silverstein</b>
---------------------	--------------------------

Express Scripts	<b>Charles Yuk</b>
-----------------	--------------------

Treasurer	<b>Lorraine Verrill</b>
-----------	-------------------------

Delta Dental	<b>Brian Remlinger</b>
--------------	------------------------

**PRESENT FUND COMMISSIONERS (listed under roll call below) AND PROFESSIONALS:**

Bernadette Twist  
AmyAnn Powers  
Diane Peterson  
Jacque Maddren  
Susan Panto  
Steve Whalen  
Scott Davenport  
Joe Madera  
John Saville  
Karen Kidd  
Kim Porter  
Suzanne Wood  
Michael Zangrilli

**APPROVAL OF MINUTES: November 28, 2022 Open**

**MOTION TO APPROVE OPEN MINUTES OF November 28, 2022:**

Moved: Commissioner Wolk  
Second: Commissioner DiAngelo  
Vote: All In Favor

**CORRESPONDENCE – none.**

**ROLL CALL OF 2023 FUND COMMISSIONERS**

<b>MEMBER ENTITY</b>	<b>COMMISSIONER/CONTACT</b>	<b>Attendance Response</b>
Borough of Lawnside	Angelique Rankins	Absent
Franklin Township	Barbara Freijomil	Absent
Lumberton Township	Bobbi Quinn	Absent
Mantua	Jemmica Bileci	Absent
Township of Berlin	Catherine Underwood	Absent
Lindenwold	Dawn Thompson	Absent
Palmyra	Donna Condo	Absent
Merchantville	Edward Brennan	Absent
CCBOSS	Edward Hill	Present
Runnemede	Eleanor Kelly	Present
Somerdale, Boro of	Gary Passanante	Present
Paulsboro	Gary Stevenson	Present
Gibbsboro	Jack Flynn	Absent
Wenonah	Karen Sweeney	Absent

Haddon Heights	Kelly Santosusso	Absent
Winslow Township Fire District	Lorraine Azzarano	Present
Bellmawr	Louis DiAngelo	Present
Mt Ephraim	M. Joseph Wolk	Present
Magnolia	Steve Whalen	Present
North Hanover Twp	Mary Picariello	Absent
Brooklawn	Michael Mevoli	Present
Pitman	Michael Razze	Absent
Bordentown	Michael Theokas	Absent
Haddonfield	Kevin Roche	Present
Pine Hill	Pat Hendricks	Absent
Medford Lakes	Robert Burton	Absent
Mount Holly MUA	Robert Maybury	Present
Westville Borough	Ryan Giles	Absent
Barrington	Terry Shannon	Present
Chesilhurst	William Hales	Absent
Gloucester City	Brian Morrell	Present
Pennsauken	Elizabeth Peddicord	Present
Willingboro	Dwayne Harris	Absent
Township of Waterford	Ralph Condo	Absent
Gloucester Township	OPEN	Absent
Merch/Pennsauken Water Commission	Jack Killion	Present
Winslow Twp	Joseph Gallagher	Present
West Deptford	Mike Kwasizur	Present
Riverside	Meghan Jack	Absent
Camden City	OPEN	Absent

## **ELECTION OF OFFICERS, EXECUTIVE COMMITTEE & ALTERNATES**

### Recommended Slate:

Michael Mevoli, Chairman

Joseph Wolk, Secretary

Louis DiAngelo, Executive Committee Member

Terry Shannon, Executive Committee Member

Edward Hill, Executive Committee Member

Robert Maybury, Executive Committee Member

Gary Passanante, Executive Committee Member

Brian Morrell, Executive Committee Alternate

### **MOTION TO APPROVE THE RECCOMENDED SLATE:**

**MOTION:** Commissioner DiAngelo

**SECOND:** Commissioner Roche

**ROLL CALL VOTE:** 17 Aye, 0 Nays

Brandon Lodics opened the floor to any other nominations for the 2023 Executive Committee. No other recommendation was given.

## **ROLL CALL OF THE PRESENT FUND COMMISSIONERS TO ELECT THE 2023 EXECUTIVE COMMITTEE**

### **OATH OF OFFICE**

### **MEETING OF EXECUTIVE COMMITTEE CALLED TO ORDER**

### **ROLL CALL OF 2023 EXECUTIVE COMMITTEE**

Chairman Mevoli thanked everyone for entrusting this slate to represent the Fund.

### **EXECUTIVE DIRECTOR'S REPORT**

**FAST TRACK FINANCIAL REPORT** – as of November 31, 2022 –Executive Director Brandon Lodics stated that the month of November was a strong month for the fund. November generated about \$725,000 in surplus. He stated that this was due to a large rebate payout the fund received from Express Scripts on claims through September 2022. He stated that the rebates that the fund received was a big higher than what was budgeted so there was the opportunity to add to surplus.

**2023 REORGANIZATION** – Mr. Lodics reviewed the reorganization resolutions included in the agenda. Mr. Lodics noted that Resolution 5-23 sets the meeting dates for 2023. A physical location and zoom is included, as well as the new time that was discussed and approved at the Executive Committee level of the HIF and JIF. He stated that Resolution 7-23 is a listing of the Current Signatories that will continue to be Michael Mevoli, Joseph Wolk, Terry Shannon, Treasurer and Deputy Treasurer. Resolution 8-23 RMP, Mr. Lodics stated the changes have been highlighted in the agenda including the stop loss amount and the claims and operational audit. Mr. Lodics stopped at Resolution 9-23 to ask the committee whether they wanted to keep the MRHIF representatives the same or elect others to take the position. The Executive Committee decided to keep Joseph Wolk and Terry Shannon as the representatives.

### **MOTION TO APPROVE CONSENT AGENDA:**

Moved:	Commissioner Shannon
Second:	Commissioner DiAngelo
Vote:	8 Aye

### **PROGRAM MANAGER CONTRACT AMENDMENT - CLAIMS AND OPERATIONAL AUDIT -**

Mr. Lodics stated that as approved in the budget adoption, \$40,000 has been included for annual Carrier operation and claims audits. He stated that the Program Manager will be subcontracting with AIM, a subsidiary of Conner Strong and Buckelew, to perform the annual specialized audits. AIM is a boutique employee benefits, audit and compliance firm that specializes in self-insured claims, compliance, and operational audits to assure self-inured client's plans are being administered accurately financially and managed appropriately within the guidelines of the plan documents and adopted policies and

procedures. He stated that Resolution 12-23 is in consent agenda which amends the Program Manager contract to include AIM.

**NEW MEMBER – DELRAN TWP** – Mr. Lodics stated that the township of Delran has agreed to join the fund effective March 1, 2023. Underwriting information was provided in the agenda and Resolution 13-23 offers membership.

He stated that he just got word last week that Medford is also going to be joining the Fund and there will be a resolution in the next meeting to offer membership.

Mr. Lodics introduced Karen Kidd who manages the new business implementations, billing and eligibility. We thank Karen for all her hard work.

**COMMITTEE APPOINTMENTS** – Mr. Lodics reviewed the information below stating if any commissioners are interested in joining a 2023 Subcommittee to please reach out to Jordyn DeLorenzo or Chairman Mevoli and they will assist.

**Contracts**

Lou DiAngelo, Chair

Robert Maybury

Edward Hill

**Claims**

Joseph Wolk, Chair

OPEN

Terry Shannon

**Finance**

Terry Shannon, Chair

Gary Passanante

Lou DiAngelo

**Nominating**

Joseph Wolk, Chair

Lou DiAngelo

Terry Shannon

**JANUARY MEMBER BILLS** – Mr. Lodics stated that due to the rate update and audit process with the 1/1 renewal, the January bills were delayed. February bills should be back to the normal schedule.

**PROGRAM MANAGERS REPORT**

Program Manager Crystal Bailey reviewed the agenda reports.

**ELIGIBILITY/ENROLLMENT:**

Please direct any eligibility, enrollment, or system related questions to our dedicated SNJREBF enrollment team. To contact the team, email [southernnj\\_enrollments@permainc.com](mailto:southernnj_enrollments@permainc.com) or fax to 856-685-2249.

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:**

Ms. Bailey stated that the two listed prescription drugs remain the same for those who have COVID-19.

**EXPRESS SCRIPTS UPDATE**

ESI's 2023 Exclusions List has been released. The Program Manager sent the Exclusions List to all brokers with SNJHIF's specific aggregate impact information on November 14<sup>th</sup>. Impacted members, physicians, and pharmacists were notified about the 2023 medication exclusions. The 2023 SaveOn Drug

lists were sent to brokers on September 8<sup>th</sup>, 2022. SNJHIF had 16 members impacted by the NPF Exclusions and no members impacted by the SaveOn Exclusions.

## **AETNA UPDATE**

**Aetna/Virtua Negotiations** – Negotiations are currently in process between Aetna and Virtua Health. They have agreed to a 90-day extension through March 31, 2023, to allow Virtua Health to remain in network. There will be no interruptions to members in network services or care during this time. The Program Manager Team will provide updates to brokers as they are received.

## **OPERATIONAL UPDATES:**

### **NEW – Effective 1/1/23!!**

- The HIFs will include Gene Therapy under group's medical plans through Aetna and AmeriHealth as they become available. Benefit will be covered on a preferred network basis only. Coverage will not be available through the pharmacy.
- CVS Minute Clinic or Health Hub visits will be covered at \$0 or no cost (HDHP) for all Aetna and AmeriHealth covered members.

## **End of Year/Wellness Incentive Program Reporting**

In addition to the End of Year report, a Wellness Incentive Program report has been provided reflecting employees who received a gym reimbursement in 2022, as this is taxable income. Wellness incentives provided directly to members that do not go towards their health insurance premiums are considered taxable income regardless of the amount. It is the employer's responsibility to report any wellness incentive as income on the employee's W-2 and withhold all appropriate income tax.

Please note the following:

- The report includes the participant's full name and total amount received in 2022
  - Aetna - up to \$240 per eligible participant
  - AHA – up to \$150 or \$240 depending on the group
- Initial report will be for reimbursements issued for the time period of **January 1, 2022 through October 31, 2022**
  - Reports were sent to group billing contacts the week of January 2<sup>nd</sup>
- An additional report will be provided in late January 2023 for reimbursements issued for the time period of **November 1, 2022 through December 31, 2022**
  - Employers are responsible for updating an employee's W-2 withholdings once received
- All eligible employees, spouses and dependents (those over age 18) who received a reimbursement will be included in the report separately
  - We recommend groups confirm with their tax advisor if reimbursements for spouses and dependents should be included in the employee's reporting

Please note there is not an option to receive the latter report sooner than late January as the data is not available.

## 2022 LEGISLATIVE REVIEW

Program Manager Bailey Reviewed the COVID 19 updates that are listed in detail in the agenda.

**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.

### **Mental Health Parity and Addiction Equity Act (MHPAE)**

In December of 2020 Congress passed into Law the Consolidated Appropriateness Act. The Law addresses how the DOL, HHS and IRS will assess how well plan sponsors and insured plans are keeping up with compliance requirements under MHPAE (passed in 2008).

Plans and plan sponsors will be required to complete a detailed analysis of the plan, confirming compliance.

On behalf of all self-insured groups, Conner Strong & Buckelew, is working with our TPA and PBM partners to request assistance for our clients in providing the analysis. We will continue to keep you updated on the progress and efforts on the Fund's next steps.



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

The Health Insurance Funds, including SNJHIF 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.

## **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 Southern New Jersey Health Insurance Fund (NJHIF). AIM will complete 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.**

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 SNJHIF 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

**TREASURER'S REPORT** – Fund Treasurer Lorraine Verrill reviewed the bills list for December 2022 and treasurers report. She stated that the interest rates have been rising every month and are currently at 4.4%.

### **MOTION TO APPROVE RESOLUTION 14-23 APPROVING THE DECEMBER 2022 BILLS LIST:**

<b>MOTION:</b>	Commissioner Shannon
<b>SECOND:</b>	Commissioner DiAngelo
<b>ROLL CALL:</b>	8 Ayes, 0 Nays

### **MOTION TO APPROVE THE TREASURERS REPORT:**

<b>MOTION:</b>	Commissioner Shannon
<b>SECOND:</b>	Commissioner Passanante
<b>ROLL CALL:</b>	All In Favor

**FUND ATTORNEY:** Fund Attorney Harris thanked the fund for the renewal of his 2023 contract. He stated that as of January 11<sup>th</sup> 2023, the Public Health Emergency has been extended. He stated that

this will extend this into April of 2023. He stated that in reference to the Gym Membership Reimbursements, this is not a new thing, and it is required by the IRS. In response to Mr. Mevoli, Commissioner Hill stated that the law for Open Public Meetings changed and it allows the fund to still hold meetings remotely as long as the public has access to it.

**AETNA:** Mr. Silverstein reviewed the claims for October and November 2022. The average pepm claims was \$1,518 for October and \$1,635 for November. He said for October there were 6 high cost claims over the threshold of \$50,000 and 4 for November. He reviewed the dashboard report and noted all metrics continue to perform well. He also reviewed the COVID reporting distributed with the Agenda stating that numbers are up from the previous month. Mr. Silverstein mentioned the extension between the Aetna and Virtua contract negotiations which brings the decision deadline to March. He stated that they do have an agreement in principle which is very good and hope to get the documents signed very shortly. He hopes for good news to follow.

**AMERIHEALTH:** Kristina Strain reviewed the paid claims and enrollment report through December 2022 stating that it was higher than previous months. She stated that there was one high claimant which totaled over \$309,000. Mrs. Strain reviewed the COVID-19 report and stated that AmeriHealth is looking to revamp their report in the next couple months to show more utilization.

**EXPRESS SCRIPTS:** Charles Yuk reviewed the report included in the agenda. He reviewed the claims in November stating that overall it is running well and costs are staying down. Mr. Yuk stated that there is a formulary update on Humira. He stated that the FDA has approved 10 new biosimilars for the drug Humira. At this time ESI has decided to keep Humira as a preferred drug so that there will be no disruption in their treatments. Mr. Yuk stated that they are letting biosimilars to be prescribed as they become available on the market.

**DENTAL ADMINISTRATOR:** Brian Remlinger stated there is no report this month.

## **CONSENT AGENDA**

### **MOTION TO APPROVE CONSENT AGENDA INCLUDING:**

- Resolution 1-23: Award of Professional Fees for 2023
- Resolution 2-23: Designation of Service of Process
- Resolution 3-23: Designation of Secretary as Custodian of Records
- Resolution 4-23: Designation of Official Newspaper
- Resolution 5-23: Designation of Regular Meeting Times and Place
- Resolution 6-23: Designation of Bank Depositories & CMP
- Resolution 7-23: Designation of Authorized Signatories
- Resolution 8-23: Approval of Risk Management Plan
- Resolution 9-23: Appointment of MRHIF Fund Commissioners
- Resolution 10-23: Authorizing Treasurer to Process Payments
- Resolution 11-23: Compensating Producers
- Resolution 12-23: Amending the Program Managers Contract
- Resolution 13-23: New Member Approval

<b>MOTION:</b>	Commissioner Shannon
<b>SECOND:</b>	Commissioner DiAngelo
<b>ROLL CALL:</b>	8 Ayes, 0 Nays

**OLD BUSINESS:** None

**NEW BUSINESS:** None

**PUBLIC COMMENT:** None

**MOTION TO ADJOURN:**

Moved:	Commissioner Shannon
Second:	Commissioner Wolk
Vote:	All In Favor

**MEETING ADJOURNED: 5:10 pm**

**NEXT MEETING: February 27, 2023 4:15PM**

**COLLINGSWOOD COMMUNITY CENTER**

---

Jordyn DeLorenzo Assisting Secretary  
for

---

**JOSEPH WOLK, SECRETARY**

# APPENDIX II



## AVAILABLE ONLINE AT NO COST ...

### 12th Annual MEL, MRHIF & NJCE Educational Seminar

FRIDAY APRIL 21 ▶ 9:00 A.M. – NOON

FRIDAY, APRIL 28 ▶ 9:00 A.M. – NOON

Designed specifically for elected officials, commissioners, municipal, county and authority personnel, risk managers and related professionals

The seminar is eligible for the following continuing education credits:

- CFO/CMFO Public Works and Clerks
- Insurance Producers and Purchasing Agents
- Accountants (CPA) and Lawyers (CLE)
- Water Supply and Wastewater Licensed Operators (Total Contact Hours)
- Registered Public Purchasing Official (RPPO)
- Qualified Purchasing Agent (QPA)

#### TO REGISTER

Connect to [njmel.org](http://njmel.org)...or email Jaine Testa at [jainet@permainc.com](mailto:jainet@permainc.com)

#### SPONSORED BY



**MEL**



**NEW JERSEY COUNTIES  
EXCESS JOINT INSURANCE FUND**

#### AGENDA

##### FRIDAY, APRIL 21

###### KEYNOTE

Legislative and  
Regulatory Impacts  
on Local Government  
Budgets

###### CYBER ISSUES

The New Jersey Cyber  
Risk Management Fund

###### BENEFITS ISSUES

Controlling Benefits Costs

##### FRIDAY, APRIL 28

###### ETHICS

Insurance Transactions  
Involving Local  
Government

###### INSURANCE ISSUES

Public Officials and  
Employment Practices  
Liability Trends

###### SAFETY

Risk Control in the  
Post Covid Era

#### THE POWER OF COLLABORATION

[njmel.org](http://njmel.org)

# APPENDIX III

## **Southern New Jersey Regional 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.