AGENDA & REPORTS
JUNE 24, 2024
HADDON TWP
135 HADDON AVE
HADDON TWP, NJ 08108
4:15 PM

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: JUNE 24, 2024

CONFERENCE CALL

4:15 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

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ROLL CALL OF 2024 EXI				
Michael Mevoli, Chairman	า			
Joseph Wolk, Secretary				
Louis DiAngelo, Executive	e Committee Member			
Terry Shannon, Executive	Committee Member			
Edward Hill, Executive Co	ommittee Member			
Gary Passanante, Executiv	e Committee Member			
Brian Morrell, Executive C	Committee Member			
Kenneth Cheeseman, Exec	cutive Committee Alternate			
Elanor Kelly, Executive Co	ommittee Alternate			
Joseph Gallagher, Executiv				
APPROVAL OF MINUT	ES: May 20, 2024	Open	(Appendix I)	
	-	-		
CORRESPONDENCE - 1	Vone			
REPORTS:				
EVECUTIVE DIDECTOR	(DEDAKA)			
EXECUTIVE DIRECTOR	` '			D 4
Monthly Repor	t	••••••	••••••	Page 1
PROCRAM MANAGER	- (Conner Strong & Buckeley	TA7)		
	t			Рада 7
Worlding Repor	L	•••••	••••••	age 7
TREASURER - (Verrill &	v Verrill)			
	her List			Page 9
	ort			_
-	f Claims Paid/Certification o			
	Treasurers Report	2 2101101010		
	4: Approval of the June 2024	Bills List		Page 18
ATTORNEY - (J. Kennet	h Harris)			
Monthly Repor	•			

Monthly Report......Page 19

Monthly Report......Page 23

NETWORK & THIRD PARTY ADMINISTRATOR - (Aetna)

NETWORK & THIRD PARTY ADMINISTRATOR - (AmeriHealth)

PRESCRIPTION ADMINISTRATOR - (Express Scripts) Monthly Report	25
DENTAL ADMINISTRATOR - (Delta Dental) Monthly Report	<u>1</u> 9
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 June 24, 2024

FINANCE AND CONTRACTS

PRO FORMA REPORTS

Fast Track Financial Report – as of March 31, 2024 (page 2)

AUDITOR AND ACTUARY YEAR-END REPORTS (TBD)

A copy of the Annual Financial Audit for the period ending December 31, 2023 is included with the agenda. A representative from Bowman and Company is expected to present the report. Once approved, we will make a filing with the Departments of Insurance and Community Affairs to meet their deadline. The Affidavit of Certification and <u>Resolution 20-24</u> approving the 2023 Audit is included on page .

COOPERATIVE PRICING SYSTEM UPDATE

The Burlington County Insurance Commission, which is not an MRHIF member but administered by PERMA has taken action to be the 7th member of the pricing system. The Fund Attorney has submitted the documents to the State. A resolution accepting their friendship is included in the agenda.

The Medical TPA RFP is with the Comptroller's Office. A target release date is July 1 but once approval is received, we can provide a better timeline to provide.

	SOUTHER		EGIONAL EMPLOY		JND
+			FAST TRACK REPOR	T	
		AS OF	March 31, 2024		
		THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
HINI	DERWRITING INCOME	9,075,044	27,172,199	1,438,502,750	1,465,674,94
	M EXPENSES	3,073,044	27,172,133	1,430,302,730	1,403,074,34
CLAII	Paid Claims	6,827,477	18,780,798	1,172,473,212	1,191,254,01
	IBNR	564,625	3,421,365	5,179,785	8,601,15
	Less Specific Excess	(24,820)	(1,517,482)	(20,636,337)	(22,153,81
+	Less Aggregate Excess	-	(1,317,402)	(1,807,360)	(1,807,36
TOT	TAL CLAIMS	7,367,282	20,684,682	1,155,209,300	1,175,893,98
EXPE		7,307,202	20,004,002	1,133,203,300	1,173,033,30
LAIL	MA & HMO Premiums	857,095	2,556,565	45,181,658	47,738,22
	Excess Premiums	135,129	404,838	50,150,845	50,555,6
	Administrative	491,547	1,481,372	125,221,792	126,703,1
TOT	TAL EXPENSES	1,483,771	4,442,774	220,554,295	224,997,07
	DERWRITING PROFIT/(LOSS) (1-2-3		2,044,743	62,739,154	64,783,8
	ESTMENT INCOME	56,055	92,340	3,994,412	4,086,7
	DEND INCOME	-		11,847,139	11,847,1
STAT	TUTORY PROFIT/(LOSS) (4+5+6)	280,045	2,137,083	78,580,706	80,717,78
DIVI	DEND	-	-	72,732,231	72,732,2
STA	TUTORY SURPLUS (7-8+9)	280,045	2,137,083	5,848,474	7,985,55
		SUIDDI US (DEEL	CITS) BY FUND YEAR		
Class	ad Comples	· · · · · · · · · · · · · · · · · · ·	_	9 242 766	0.204.0
Close	ed Surplus Cash	45,601 73,518	40,234 74,039	8,243,766 13,078,657	8,284,0 13,152,6
2022		(19,148)	(63,753)	(415,117)	(478,8
2022	Cash	(19,220)	246,690	(780,797)	(534,1
2023		271,977	2,194,995	(1,980,174)	214,8
2023	Cash	28,130	175,575	(1,022,736)	(847,1
2024				(1,022,730)	(34,3
2024	Cash	(18,386)	(34,392)		
TAI		123,531	(5,314,493)	5.040.474	(5,314,4
	SURPLUS (DEFICITS)	280,045	2,137,083	5,848,474	7,985,55
TAL	CASH	205,959	(4,818,188)	11,275,125	6,456,93
		CLAIM ANALY	SIS BY FUND YEAR		
TOTA	AL CLOSED YEAR CLAIMS	CLAIM ANALY	SIS BY FUND YEAR 36,160	1,054,109,812	1,054,145,9
	AL CLOSED YEAR CLAIMS D YEAR 2022			1,054,109,812	1,054,145,9
				1,054,109,812 46,802,688	
	D YEAR 2022	867	36,160		
	D YEAR 2022 Paid Claims	867	36,160		46,929,3
	D YEAR 2022 Paid Claims IBNR	20,355	36,160 126,706	46,802,688	46,929,3
FUNI	Paid Claims IBNR Less Specific Excess	20,355	36,160 126,706	46,802,688	46,929,3 (819,6
TOTA	Paid Claims IBNR Less Specific Excess Less Aggregate Excess	20,355 - (72)	36,160 126,706 - (61,089)	46,802,688 (758,538)	46,929,3 (819,6
TOTA	Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2022 CLAIMS	20,355 - (72)	36,160 126,706 - (61,089)	46,802,688 (758,538)	46,929,3 (819,6 - - 46,109,7
TOTA	Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2022 CLAIMS D YEAR 2023	20,355 - (72) - 20,283	36,160 126,706 - (61,089) - 65,617 3,678,242	46,802,688 (758,538) - 46,044,150 50,362,240	46,929,3 (819,6 - - - - - - - - - - - - - - - - - - -
TOTA	Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2022 CLAIMS D YEAR 2023 Paid Claims	20,355 - (72) - 20,283 330,946 (569,776)	36,160 126,706 - (61,089) - 65,617 3,678,242 (4,402,817)	46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785	46,929,3 (819,6 46,109,7 54,040,4 776,9
TOTA	Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Excess	20,355 - (72) - 20,283	36,160 126,706 - (61,089) - 65,617 3,678,242	46,802,688 (758,538) - 46,044,150 50,362,240	46,929,3 (819,6 46,109,7 54,040,4 776,9
TOTA FUNI	Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR	20,355 - (72) - 20,283 330,946 (569,776) (24,748)	36,160 126,706 - (61,089) - 65,617 3,678,242 (4,402,817) (1,456,393) -	46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685)	46,929,3 (819,6 46,109,7 54,040,4 776,9 (1,943,0
TOTA FUNI	Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Excess Less Aggregate Excess	20,355 - (72) - 20,283 330,946 (569,776)	36,160 126,706 - (61,089) - 65,617 3,678,242 (4,402,817)	46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785	46,929,3 (819,6 46,109,7 54,040,4 776,9 (1,943,0
TOTA FUNI	Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2023 CLAIMS	20,355 - (72) - 20,283 330,946 (569,776) (24,748)	36,160 126,706 - (61,089) - 65,617 3,678,242 (4,402,817) (1,456,393) - (2,180,968)	46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685)	46,929,3 (819,6 46,109,7 54,040,4 776,9 (1,943,6
TOTA TOTA	Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2023 CLAIMS D YEAR 2023 CLAIMS D YEAR 2024	20,355 - (72) - 20,283 330,946 (569,776) (24,748) - (263,578)	36,160 126,706 - (61,089) - 65,617 3,678,242 (4,402,817) (1,456,393) - (2,180,968)	46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685)	46,929,3 (819,6 46,109,7 54,040,4 776,9 (1,943,0 52,874,3 14,939,6
TOTA TOTA	Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2023 CLAIMS D YEAR 2024 Paid Claims IBNR	20,355 - (72) - 20,283 330,946 (569,776) (24,748) - (263,578)	36,160 126,706 - (61,089) - 65,617 3,678,242 (4,402,817) (1,456,393) - (2,180,968)	46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685)	46,929,3 (819,6 46,109,7 54,040,4 776,9 (1,943,0 52,874,3
TOTA FUNI	Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2023 CLAIMS D YEAR 2024 Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2023 CLAIMS D YEAR 2024 Paid Claims IBNR Less Specific Excess	20,355 - (72) - 20,283 330,946 (569,776) (24,748) - (263,578)	36,160 126,706 - (61,089) - 65,617 3,678,242 (4,402,817) (1,456,393) - (2,180,968)	46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685)	46,929,3 (819,6 46,109,7 54,040,4 776,9 (1,943,0 52,874,3 14,939,6
TOTA FUNI	Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Excess Less Aggregate Excess AL FY 2023 CLAIMS D YEAR 2024 Paid Claims IBNR	20,355 - (72) - 20,283 330,946 (569,776) (24,748) - (263,578)	36,160 126,706 - (61,089) - 65,617 3,678,242 (4,402,817) (1,456,393) - (2,180,968)	46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685)	1,054,145,9 46,929,3 (819,6 46,109,7 54,040,4 776,9 (1,943,0 52,874,3 14,939,6 7,824,1

Southern New Jersey Regional Employee Benefits Fund CONSOLIDATED BALANCE SHEET

AS OF MARCH 31, 2024

BY FUND YEAR

	SNJREBF 2024	SNJREBF 2023	SNJREBF 2022	CLOSED YEAR	FUND BALANCE
ASSETS					
Cash & Cash Equivalents	(5,314,493)	(847,160)	(534,107)	13,152,697	6,456,937
Assesstments Receivable (Prepaid)	11,648,537	585	(28,320)	89,501	11,710,303
Interest Reœivable	-	-	-	23	23
Specific Excess Receivable	-	1,895,424	83,557	-	1,978,980
Aggregate Excess Receivable	-	-	-	-	-
Dividend Receivable	-	-	-	-	-
Prepaid Admin Fees	-	-	-	-	-
Other Assets	1,471,135	-	-	-	1,471,135
Total Assets	7,805,179	1,048,848	(478,870)	13,242,220	21,617,377
LIABILITIES					
Accounts Payable	-	-	_	-	_
IBNR Reserve	7,824,182	776,968	_	-	8,601,150
A4 Retiree Surcharge	-	-	-	-	-
Dividends Payable	-	-	-	-	-
Retained Dividends	-	-	-	4,958,220	4,958,220
Acrued/Other Liabilities	15,389	57,060	-	-	72,449
Total Liabilities	7,839,571	834,028	-	4,958,220	13,631,819
EQUITY					
Surplus / (Defiat)	(34,392)	214,820	(478,870)	8,284,000	7,985,558
Total Equity	(34,392)	214,820	(478,870)	8,284,000	7,985,558
Total Liabilities & Equity	7,805,179	1,048,848	(478,870)	13,242,220	21,617,377
	1,000,117	2,0 10,0 10	(170,070)	20,2 12,220	21,017,377
BALANCE		-	-	-	-

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

RATIOS					
			FY2024		
INDICES	2023	JAN	FEB		MAR
Cash Position	11,275,125	\$ 9,857,774	6,250,977		6,456,937
IBNR	5,179,785	\$ 6,504,230	\$ 8,036,525		8,601,150
Assets	16,035,272	\$ 20,344,763	\$ 20,738,572	-	21,617,377
Liabilities	10,186,798	\$ 11,531,910	\$ 13,033,059		13,631,819
Surplus	5,848,474	\$ 8,812,853	\$ 7,705,513	\$	7,985,558
Claims Paid Month	5,607,671	\$ 4,844,971	\$ 7,108,351	\$	6,827,477
Claims Budget Month	4,646,753	\$ 7,601,242	\$ 7,596,552	\$	7,581,077
Claims Paid YTD	55,374,932	\$ 4,844,971	\$ 11,953,322	\$	18,780,798
Claims Budget YTD	52,960,144	\$ 7,601,242	\$ 15,197,794	\$	22,778,871
RATIOS					
Cash Position to Claims Paid	2.01	2.03	0.88		0.95
Claims Paid to Claims Budget Month	1.21	0.64	0.94		0.9
Claims Paid to Claims Budget YTD	1.05	0.64	0.79		0.8
Cash Position to IBNR	2.18	1.52	0.78		0.75
Assets to Liabilities	1.57	1.76	1.59		1.59
Surplus as Months of Claims	1.26	1.16	1.01		1.05
IBNR to Claims Budget Month	1.11	0.86	1.06		1.13

Southern NJ Municipal Employee Benefits Fund 2024 Budget Status Report as of March 31, 2024

			YTD	\$ Variance	% Varaiance
		Latest Filed	Expensed		
			19,052,107	498,884	3%
	,	,			
			3,378,594	(511,487)	-18%
360,773	1,444,127	1,253,852	333,170	27,603	8%
22,778,871	91,051,804	56,940,099	22,763,872	14,999	0%
36,044	144,174	142,110			
831	2 940	5 164	944	(113)	-14%
			711	(115)	1470
			2 555 621	3	0%
2,330,433	10,282,900	6,633,373	2,333,021	3	0 / 0
403,663	1,619,094	1,021,150	404,838	(1,174)	0%
25,775,033	103,098,038	66,938,732	25,725,275	49,758	0%
-					
5,765	23,058	23,058	5,765	-	0%
			-	-	0%
			181,176	(348)	0%
479,006			771,896		-1%
281,691			Included above	in Program Man	ager
402,240	1,612,718	1,084,092	434,823	(1,252)	0%
31,330	126,307	67,308	Included above i	in TPA	
22,315	89,332		22,381	(67)	0%
4,375	17,500	17,500	4,375	(0)	0%
4,350	17,401	17,401	4,350	0	0%
0	0	0	33,036	(33,036)	#DIV/0!
1,415,959	3,696,993	3,859,354	1,461,860	(45,902)	-3%
 					
					94%
		-	•		
				(0)	
3,750	15,000	15,000	3,750	-	0%
1,440,567	3,795,488	3,949,756	1,481,372	(40,804)	-3%
27,215,600	106,893,526	70,888,488	27,206,646	8.954	0%
	36,044 831 2,065,057 490,567 2,556,455 403,663 25,775,033 5,765 4,059 180,828 479,006 281,691 402,240 31,330 22,315 4,375 4,350 0 1,415,959 5,414 5,445 10,000 3,750	15,819,943 63,321,560 990,405 3,995,762 2,740,643 10,831,755 19,550,991 78,149,077 3,371,451 13,505,208 (1,046,936) (4,193,769) 786,968 3,114,222 (244,376) (967,061) 2,867,107 11,458,600 318,945 1,276,148 41,828 167,979 360,773 1,444,127 22,778,871 91,051,804 36,044 144,174 831 2,940 2,065,057 8,309,237 490,567 1,970,789 2,556,455 10,282,966 403,663 1,619,094 25,775,033 103,098,038 5,765 23,058 4,059 16,235 180,828 725,727 479,006 1,923,017 281,691 (854,302) 402,240 1,612,718 31,330 126,307 22,315 89,332 4,375 17,500 4,350 17,401 0 0 1,415,959 3,696,993 5,414 21,657 5,445 21,838 10,000 40,000 3,750 15,000	15,819,943 63,321,560 35,774,782 990,405 3,995,762 1,622,435 2,740,643 10,831,755 11,205,477 19,550,991 78,149,077 48,602,694 3,371,451 13,505,208 6,927,734 (1,046,936) (4,193,769) (2,078,320) 786,968 3,114,222 3,240,371 (244,376) (967,061) (1,006,232) 2,867,107 11,458,600 7,083,553 318,945 1,276,148 1,087,681 41,828 167,979 166,171 360,773 1,444,127 1,253,852 22,778,871 91,051,804 56,940,099 36,044 144,174 142,110 831 2,940 5,164 2,065,057 8,309,237 6,830,061 490,567 1,970,789 2,000,148 2,556,455 10,282,966 8,835,373 403,663 1,619,094 1,021,150 25,775,033 103,098,038 66,938,732 479,006 1,923,017 <td> 15,819,943 63,321,560 35,774,782 990,405 3,995,762 1,622,435 2,740,643 10,831,755 11,205,477 19,550,991 78,149,077 48,602,694 19,052,107 3,371,451 13,505,208 6,927,734 (1,046,936) (4,193,769) (2,078,320) 786,968 3,114,222 3,240,371 (244,376) (967,061) (1,006,232) 2,867,107 11,458,600 7,083,553 3,378,594 318,945 1,276,148 1,087,681 41,828 167,979 166,171 360,773 1,444,127 1,253,852 333,170 22,778,871 91,051,804 56,940,099 22,763,872 36,044 144,174 142,110 831 2,940 5,164 944 2,065,057 8,309,237 6,830,061 490,567 1,970,789 2,000,148 2,556,455 10,282,966 8,835,373 2,555,621 403,663 1,619,094 1,021,150 404,838 25,775,033 103,098,038 66,938,732 25,725,275 5,765 23,058 23,058 5,765 4,059 16,235 16,235 4,059 180,828 725,727 537,492 181,176 479,006 1,923,017 1,368,150 771,896 281,691 (854,302) 650,403 Included above 402,240 1,612,718 1,084,092 434,823 31,330 126,307 67,308 Included above 22,315 89,332 77,715 22,381 4,375 17,500 17,500 4,375 4,350 17,401 17,401 4,350 0</td> <td> 15,819,943</td>	15,819,943 63,321,560 35,774,782 990,405 3,995,762 1,622,435 2,740,643 10,831,755 11,205,477 19,550,991 78,149,077 48,602,694 19,052,107 3,371,451 13,505,208 6,927,734 (1,046,936) (4,193,769) (2,078,320) 786,968 3,114,222 3,240,371 (244,376) (967,061) (1,006,232) 2,867,107 11,458,600 7,083,553 3,378,594 318,945 1,276,148 1,087,681 41,828 167,979 166,171 360,773 1,444,127 1,253,852 333,170 22,778,871 91,051,804 56,940,099 22,763,872 36,044 144,174 142,110 831 2,940 5,164 944 2,065,057 8,309,237 6,830,061 490,567 1,970,789 2,000,148 2,556,455 10,282,966 8,835,373 2,555,621 403,663 1,619,094 1,021,150 404,838 25,775,033 103,098,038 66,938,732 25,725,275 5,765 23,058 23,058 5,765 4,059 16,235 16,235 4,059 180,828 725,727 537,492 181,176 479,006 1,923,017 1,368,150 771,896 281,691 (854,302) 650,403 Included above 402,240 1,612,718 1,084,092 434,823 31,330 126,307 67,308 Included above 22,315 89,332 77,715 22,381 4,375 17,500 17,500 4,375 4,350 17,401 17,401 4,350 0	15,819,943

GROUP AFFIDAVIT FORM <u>CERTIFICATION OF FUND COMMISSIONERS</u>

Of the

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

We the Fund Commissioners of the Southern New Jersey Regional Employee Benefits Fund, of full age, being duly sworn according to law, upon our oath depose and say:

- 1.) We are duly elected members Fund Commissioners of the Southern New Jersey Regional Employee Benefits Fund.
- 2.) In the performance of our duties, and pursuant to the Local Finance Board Regulation, we have familiarized ourselves with the contents of the Annual Fund Audit filed with the Secretary of the Fund pursuant to N.J.S.A. 40A:5-6 and N.J.S.A. 40A:10-36 for the year 2023.
- 3.) We certify that we have personally reviewed and are familiar with, as a minimum, the sections of the Annual Report of Audit entitled:

GENERAL COMMENTS - RECOMMENDATIONS

	(L.S.)
	(L.S.)
Attest:	
Secretary to the Fund	

The Secretary of the Fund shall set forth the reason for the absence of signature of any members of the Executive Committee.

<u>Important</u>: This certificate must be sent to the Division of Local Government Services, CN 803, Trenton, NJ 08625.

RESOLUTION NO. 20-24

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND CERTIFICATION OF ANNUAL AUDIT REPORT FOR PERIOD ENDING DECEMBER 31, 2023

WHEREAS, N.J.S.A. 40A:5-4 requires the governing body of every local unit to have made an annual audit of its books, accounts and financial transactions, and

WHEREAS, the Annual Report of Audit for the year 2022 has been filed by the appointed Fund Auditor with the Secretary of the Fund as per the requirements of N.J.S.A. 40A:5-6 and N.J.S.A. 40A:10-36, and a copy has been received by each Fund Commissioner, and

WHEREAS, the Local Finance Board of the State of New Jersey is authorized to prescribe reports pertaining to the local fiscal affairs, as per by N.J.S.A 52:27B-34, and

WHEREAS, the Local Finance Board has promulgated a regulation requiring that the Fund Commissioners of the Fund shall, by resolution, certify to the Local Finance Board of the State of New Jersey that all Fund Commissioners have reviewed, as a minimum, the sections of the annual audit entitled:

General Comments
Recommendations
Auditor's Opinion
And
Single Audit Findings

as evidenced by the group affidavit form of the Fund Commissioners.

WHEREAS, such resolution of certification shall be adopted by the Fund Commissioners no later than forty-five days after the receipt of the annual audit, as per the regulations of the Local Finance Board, and

WHEREAS, all Fund Commissioners have received and have familiarized themselves with, at least, the minimum requirements of the Local Finance Board of the State of New Jersey, as stated aforesaid and have subscribed to the affidavit, as provided by the Local Finance Board, and

WHEREAS, failure to comply with the promulgations of the Local Finance Board of the State of New Jersey may subject the Fund Commissioners to the penalty provisions of R.S. 52:27BB-52 - to wit:

R.S. 52:27BB-52 - "A local officer or member of a local governing body who, after a date fixed for compliance, fails or refuses to obey an order of the director (Director of Local Government Services), under the provisions of this Article, shall be guilty of a misdemeanor and, upon conviction, may be

fined not more than one thousand dollars (\$1,000.00) or imprisoned for not more than one year, or both, in addition shall forfeit his office."

NOW, THEREFORE, BE IT RESOLVED, that the Executive Committee hereby states that they have complied with the promulgation of N.J.A.C 5:30-6.5, dated July 30, 1968, and does hereby submit a certified copy of this resolution and the required affidavit to said Board to show evidence of said compliance.

ADO	P1ED: JUNE 24, 2024	
BY:		
	CHAIRPERSON	
ATTI	EST:	
	SECRETARY	

RESOLUTION NO. 21-24

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND RESOLUTION TO OFFER MEMBERSHIP TO THE HEALHT INSURANCE COOPERATIVE PRICING SYSTEM

WHEREAS, Contracting Units of the State of New Jersey are authorized to enter into a cooperative pricing system agreement for the cooperative pricing of goods and services as permitted by the Local Public Contracts Law and the Public School Contracts Law and applicable regulations under N.J.C.A. 5:34-7 et seq.; and

WHEREAS, the statutes regulating the creation and establishment of a cooperative pricing system allow contracting units to join together for the purposes of obtaining third party claim administration services for medical, dental and vision health benefits, prescription drug pharmacy benefit manager services and Medicare Advantage Plan providers (hereinafter the "Services") in order to negotiate and contract for the Services in a cost-effective manner, furthering the public interest entrusted to such a cooperative pricing system; and

WHEREAS, on May 7, 2024, the Division of Local Government Services approved the formation of the Health Insurance Cooperative Pricing System - 297HICPS with the Southern New Jersey Regional Employee Benefits Fund ("SNJ Fund") as the Lead Agency;

WHEREAS, on June 3, 2024, the Executive Committee of the Burlington County Insurance Commission (the "BCIC") adopted a Resolution to Join the Health Insurance Cooperative Pricing System - 297HICPS;

NOW THEREFORE, BE IT RESOLVED, that the SNJ Fund as the Lead Agency of the Health Insurance Cooperative Pricing System – 297HICPS, approves the application for membership in the Health Insurance Cooperative Pricing System – 297HICPS by BCIC and admits them to membership subject to the required filing and approval by the Division of Local Government Services.

BE IT FURTHER RESOLVED that Executive Committee of the SNJ Fund directs that a Form CP-2001 be filed with the Division of Local Government Services to advise them of the addition of a new member to the Health Insurance Cooperative Pricing System – 297HICPS and obtain approval of the same.

BY:			
CHAIRPER	SON		
ATTEST:			
SECRETAR	 Y	 	

REGULATORY

Monthly Items Filing	Status
----------------------	--------

Budget Filed **Assessments** Filed **Actuarial Certification** Filed **Reinsurance Policies** Filed Filed **Fund Commissioners Fund Officers** Filed **Renewal Resolutions** Filed **Indemnity and Trust** Filed

New Members Filed (ongoing)

Withdrawals N/A
Risk Management Plan and By Laws
Cash Management Plan Filed

Unaudited Financials 9/30/2023 Filed Annual Audit 12/31/2022 filed

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

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND Program Manager

June 2024

Program Manager: Conner Strong & Buckelew Online Enrollment Training: kkidd@permainc.com

Enrollments/Eligibility/Billing: southernnj_enrollments@permainc.com

Brokers: brokerservice@permainc.com

ELIGIBILTY/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 or fax to 856-685-2249.

System training (new and refresher) is provided to all contacts with WEX access **every 3**rd **Wednesday at 10AM (except June's training will be held Tuesday June 18**th). Please contact <u>HIFtraining@permainc.com</u> 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: None

EXPRESS-SCRIPTS UPDATE:

Notice of Creditable Coverage (NOCC)

CMS Annual Open Enrollment period for the 2025 plan year is October 15 – December 7. ESI has begun gathering information needed for their annual mailing campaign for the 2025 Notice of Creditable Coverage (NOCC). To meet the CMS requirement, Express Scripts will mail the NOCC letters the week of September 16th to those age 65 and older enrolled in ESI coverage through the HIFs. The Program Manager team has provided ESI with an updated letter template for the new plan year in preparation of the mailing.

GLP-1 Weight Loss Program (Encircle) Recommendation Effective 9/1/24

The Program Manager has consulted with the MRHIF Pharmacy Benefit Manager (PBM) Express Scripts (ESI) in determining a program to assist with the increasing cost of GLP-1 medications being used for weight loss. The Encircle Program encompasses the criteria recommended for the drugs intended use; lifestyle modification, member engagement, overall adherence. As a result, the Program Manager is recommending the Encircle Program for Southern New Jersey HIF participants who are approved for weight loss medications using the following criteria:

- BMI > 32 **OR**
- BMI between $27 \le 32$ WITH 2 or more documented comorbidities

In addition to receiving an approved prior authorization (PA), below are the mandatory guidelines of the program:

- Members will receive a welcome kit from Omada free of charge. The kit includes a digital scale and information on downloading the mobile app and/or using the web browser. The scale is programmed to the member's ESI active account prior to delivery. The scale will record each weigh-in and will update the member's file automatically. Members must weighin a minimum of 4 times a month
- Members must engage with an assigned online Omada coach via a mobile application or web browser a minimum of 4 times a month

If members do not adhere to both of the mandatory requirements the following month in which they are non-compliant, they will not be able to refill their weight loss prescription. Members will be required to complete the missing weigh-ins and/or online coaching engagement in order to refill their prescription.

Members who have a current PA on file will be grandfathered until their PA on file has expired with ESI. Upon renewal of their PA they will be need to meet the above BMI requirements to be considered for approval. If approved, they will receive the Omada welcome kit and will need to adhere to the Encircle program requirements as outlined.

Communications will be sent to all impacted members with registration information. Once registered members will receive an access code to sign up for the Omada welcome kit.

OPERATIONAL UPDATES:

2024 PCORI Fees - Due July 31, 2024

Form 720 Reporting – Plan sponsors of applicable self-insured health plans are responsible for reporting and paying the PCORI annual fee by filing Form 720, Quarterly Federal Excise Tax Return. The Form 720 is due on July 31 of the year following the last day of the plan year.

The HIFs will handle the submission of the form and payment for all groups with medical coverage in the HIFs.

2024 LEGISLATIVE REVIEW: None

Medical and Rx Reporting: None

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 (SNJHIF). 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. **SNJHIF audit began May 6, 2024. See Appendix.**

Carrier Appeals:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
05/13/2024	Aetna/Medical	SNJ 2024- 06-01	MRI Denial	Upheld	05/24/2024

IRO Submissions:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
06/03/2024	Aetna/Medical	SNJ 2024- 06-01	MRI Denial	Under Review	N/A

Small Claims Committee: None

RESOLUTION NO. 22-24

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND RESOLUTION TO AUTHORIZE EXPRESS SCRIPTS TO IMPLEMENT GLP-1 PRESCRIPTION PROGRAM FOR ALL PRESCRIPTION MEMBERS EFFECTIVE SEPTEMBER 1, 2024

WHEREAS, the Southern New Jersey Regional Employee Benefits Fund (hereinafter the Fund) is duly constituted as a joint insurance fund;

WHEREAS, the Fund held a Public Meeting on May 20, 2024 for the purposes of conducting the official business of the Fund; and

WHEREAS, the Program Manager of the Fund made a recommendation to the Contracts Committee to to adopt a GLP-1 prescription drug management program through Express Scripts;

WHEREAS, effective September 1, 2024, members that are prescribed a GLP – 1 prescription but not diagnosed with diabetes will participate in the program established by the Fund;

WHEREAS, the members currently with a Prior Authorization for a GLP -1 will not be required to join the program until the Prior Authorization expiration;

BE IT RESOLVED, that the Executive Committee of the Southern New Jersey Regional Employee Benefits Fund hereby approves the implementation of the GLP – 1 management program through Express Scripts effective September 1, 2024 for all new Prior Authorizations for the above mentioned prescription drug classification.

ADOPTED: June 24, 2024

SOUTHERN NJ REGIONAL EMPLOYEE BENEFITS FUND BILLS LIST

Resolution No. JUNE 2024

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	YFAR	CI	OSED

TO THE CLOSIE	Vendor Name	Comment	Invoice Amount
	WELLNESS COACHES USA, LLC	WELL. COACH. CCBOSS -INV 37935 06/24	6,032.00 6,032.00
		Total Payments FY CLOSED	6,032.00
FUND YEAR 2024	1		
Check Number	<u>Vendor Name</u>	<u>Comment</u>	Invoice Amount
	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA FEES 06/24	10,544.54 10,544.54
	PERMA	POSTAGE 05/24	98.89
	PERMA	ADMIN FEES 6/24	60,630.00
	PERMA	DUP PAYMENT FOR FOOD IN FEB 24	-227.12
			60,501.77
	ACCESS	INV 10864931 DEPT 419 4/30/24	129.74
			129.74
	GANNETT PENNSYLVANIA LOCALIQ	A# 791189 INV 6422808- 10165923 5/12/24	30.92
			30.92
	GANNETT NEW YORK NJ LOCALIQ	A# 1123724 inv 6431337- 10165901 5/12/24	41.61
	· ·		41.61
	M UNICIPAL REINSURANCE HIF	SPECIFIC REINSURANCE 06/24	134,725.70
			134,725.70
		CHECK TOTALS- 23/24	212,006.28

AETNA HEALTH MANAGEMENT, LLC	MEDICARE ADVANTAGE 06/24	459, 459 ,
UHC-MEDICARE ADVANTAGE	MEDICARE ADVANTAGE 06/24	294. 294 .
DELTACARE USA	DENTAL- F1-7871800000-BE006088946 06/24	- 2 .,
FLAGSHIP HEALTH SYSTEMS	DENTAL PREM. LINDENWOLD 06/24-INV 150847	
AETNA	MEDICAL TPA 06/24	134, 134 .
DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 06/24	7, 7 ,
VERRILL & VERRILL LLC	TREASURER FEE 06/24	•
ELIZABETH PIGLIACELLI	DEPUTY TREASURER FEE 06/24	
CONNER STRONG & BUCKELEW	RX-PROGRAM MGR FEES 06/24	20,
CONNER STRONG & BUCKELEW CONNER STRONG & BUCKELEW	BROKER FEES 06/24 DENTAL-PROGRAM MGR FEES 06/24	95, 6.
CONNER STRONG & BUCKELEW	MEDICAL- PROGRAM MGR FEES 06/24	132,
CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 06/24	1,
		256
J. KENNETH HARRIS, ATTORNEY AT LAW	ATTORNEY SERVICES 06/24	1,
		1,
	ACH/WIRE TOTALS	1,154
	Total Payments FY 2024	1,360,9
	TOTAL PAYMENTS ALL FUND YEARS	1,366,96
		1
Chairperson		
Chairperson Attest:		
Chairperson Attest:		
Attest:	Dated:	me
Attest:	Dated:ed funds in the proper accounts to fully pay the above clair	ms.

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED Current Fund Year: 2024 Month Ending: March Med Vision Reinsurance Contigency Closed Year TO TAL Dental Rx Admin OPEN BALANCE (1,684,622.10)(305,493.98) (4,544,270.97)0.00 (258,918.40)161,993.49 (298,813.76) 8,239,867.17 6,250,977.43 RECEIPTS 920,290.03 Assessments 6,947,100.48 99,570.76 0.00123,004.15 11,459.27 436,448.83 0.008,537,873.52 Refunds 0.00 0.00 0.000.000.00 0.00 0.000.00 0.00Invest Pymnts 19,681.95 0.000.00 0.000.00762.17 1,511.62 38,767.98 83,971.88 Invest Adj 0.010.000.000.000.000.000.000.000.01 Subtotal Invest 19,681.96 0.000.000.000.00762.17 1,511.62 38,767.98 83,971.89 Other Receipts * 65,534.35 0.00 350,697.50 0.000.00 0.00 0.000.00 416,231.85 TOTAL 7,032,316.79 99,570.76 1,270,987.53 0.00 123,004.15 12,221.44 437,960.45 38,767.98 9,038,077.26 EXPENSES Claims Transfers 5,488,758.03 7,356,022.77 105,444.54 1,761,820.20 0.000.000.000.000.00Expenses 856,765.42 329.37 0.00 0.00 135,129.40 0.00 483,849.56 0.00 1,476,073.75 Other Expenses * 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 TOTAL 6,345,523.45 105,773.91 1,761,820.20 0.00 135,129.40 0.00 483,849.56 0.00 8,832,096.52 END BALANCE (311,697.13) (5,035,103.64) 0.006,456,958.17 (997,828.76) (271,043.65)174,214.93 (344,702.87) 8,278,635.15

SUMMARY OF CASH AND INVESTM	ENT INSTRUMENTS									
SOUTHERN NEW JERSEY REGIONAL	L EMPLO YEE BENEFITS	FUND								
ALL FUND YEARS COMBINED										
CURRENT MONTH	March									
CURRENT FUND YEAR	2024									
	Description:	SNJ Inv.	Citizens Bank	Parke Bank	Republic Bank	Republic Bank -General Account	Republic Bank - Admin Account	Ocean First Investment Account	New Jersey Cash Management	Republic Bank Certificate of Deposit #595063511
	ID Number:									
	Maturity (Yrs)									3/7/2024
	Purchase Yield:	4.90	4.40	5.25	5.43	5.43	5.43	2.50	5.28	5.75
	TO TAL for All									
Opening Cash & Investment Balance				\$ 30,554.92	\$ 1,119,944.62	\$ 846,636.60	\$ 68,304.44	\$ 81,525.52	\$ 96,085.92	\$ 4,000,000.00
Opening Interest Accrual Balance	\$ 21.25	\$ 21.25	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	0.1.00									
1 Interest Accrued and/or Interest Cost	\$1.53	-		\$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
3 (Amortization and/or Interest Cost)			****	\$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
5 Interest Paid - Cash Instr.s	\$83,971.89			\$135.87	\$5,029.17	\$6,615.68	\$938.72	\$162.09	\$14,927.15	\$56,132.76
6 Interest Paid - Term Instr.s	\$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
8 Net Investment Income	\$83,973.42			\$135.87	\$5,029.17		\$938.72	\$162.09	\$14,927.15	\$56,132.76
9 Deposits - Purchases	\$18,486,311.88	\$0.00	\$0.00	\$0.00	\$4,056,132.76	\$8,954,105.37	\$1,476,073.75	\$0.00	\$4,000,000.00	
10 (Withdrawals - Sales)	-\$18,364,303.03	\$0.00	\$0.00	\$0.00	-\$4,000,000.00	-\$8,832,096.52	-\$1,476,073.75	\$0.00	\$0.00	-\$4,056,132.76
		OK	OK	OK	OK	OK	OK	OK	OK	OK
Ending Cash & Investment Balance	\$6,456,958.17	\$5,478.41	\$2,477.45	\$30,690.79	\$1,181,106.55	\$975,261.13	\$69,243.16	\$81,687.61	\$4,111,013.07	\$0.00
Ending Interest Accrual Balance	\$22.78	\$22.78	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Plus Outstanding Checks	\$31,048.67	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$31,048.67	\$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	\$6,488,006.84	\$5,478.41	\$2,477.45	\$30,690.79	\$1,181,106.55	\$975,261.13	\$100,291.83	\$81,687.61	\$4,111,013.07	\$0.00

		CERT			IATION OF CLAIN					
			SOUTHER	N NEW JERSE	Y REGIONAL EMP	LO YEE BENE	EFITS F	UND		
Month		March								
Current	Fund Year	2024								
		1.	2.	3.	4.	5.		6.	7.	8.
		Calc. Net	Monthly	Monthly	Calc. Net	TPA Net		Variance	Delinquent	Change
Policy		Paid Thru	Net Paid	Recoveries	Paid Thru	Paid Thru		То Ве	Unreconciled	This
Year	Coverage	Last Month	March	March	March	March		Reconciled	Variance From	Month
2024	Med	9,705,805.78	5,488,758.03	0.00	15,194,563.81		0.00	15,194,563.81	9,705,805.78	5,488,758.03
	Dental	199,807.32	105,444.54	0.00	305,251.86		0.00	305,251.86	199,807.32	105,444.54
	Rx	2,925,297.34	1,761,820.20	0.00	4,687,117.54		0.00	4,687,117.54	2,925,297.34	1,761,820.20
	Vision	0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00
	Total	12,830,910.44	7,356,022.77	0.00	20,186,933.21		0.00	20,186,933.21	12,830,910.44	7,356,022.77

RESOLUTION NO. 23-24

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND APPROVAL OF THE JUNE 2024 BILLS LIST

WHEREAS, the Southern New Jersey Regional Employee Benefits Fund held a Public Meeting on **June 24**, **2024** 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 June 2024 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 June 2024 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.

ADOPT	ΓED: JUNE 24, 2024	
BY:	CHAIRPERSON	
ATTES	T:	
	SECRETARY	



SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

Monthly Claim Activity Report

June 24, 2024



SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

i l	MEDICAL CLAIMS + CAP				MEDICAL CLAIMS + CAP	•		
	PAID 2023	# OF EES	PER EE		PAID 2024	# OF EES	P	ER EE
JANUARY	\$3,307,745	2,023	\$	1,635	\$4,409,202	3,419	\$	1,290
FEBRUARY	\$3,122,202	2,036	\$	1,533	\$4,993,975	3,412	\$	1,464
MARCH	\$3,301,677	2,088	\$	1,581	\$5,339,092	3,405	\$	1,568
APRIL	\$3,277,691	2,184	\$	1,501	\$6,588,952	3,397	\$	1,940
MAY	\$4,268,600	2,184	\$	1,954				
JUNE	\$3,417,999	2,170	\$	1,575				
JULY	\$2,903,969	2,179	\$	1,333				
AUGUST	\$3,441,535	2,171	\$	1,585				
SEPTEMBER	\$3,541,366	2,161	\$	1,639				
OCTOBER	\$4,572,715	2,166	\$	2,111				
NOVEMBER	\$4,190,638	2,235	\$	1,875				
DECEMBER	\$4,377,096	2,271	\$	1,927				
TOTALS	\$43,723,233				\$21,331,221			
					2024 Average	3,408	\$	1,565
					2023 Average	2,156	\$	1,688

Large Claimant Report (Drilldown) - Claims Over \$100000

Plan Sponsor Unique ID: All

Customer:

SNJ Regional Employee Benefits Fund 00737391,00866357,SI030217,SI416902,SI431318 Group / Control:

Paid Dates: 04/01/2024 - 04/30/2024 01/01/2011 - 04/30/2024 Service Dates:

Line of Business:

Paid Amt

\$134,378.09

Total: \$134,378.09



SNJ Regional Employee Benefits Fund

5/1/23 thru 4/30/24 (unless otherwise noted)



Medical Claims Paid: January 2024 thru April 2024

Total Medical Paid per EE: \$1,565

Network Discounts

Inpatient: 68.3%
Ambulatory: 70.6%
Physician/Other: 61.2%
TOTAL: 66.7%

Provider Network

% Admissions In-Network: 97.4% % Physician Office: 98.3%

Aetna Book of Business:

Admissions 98.4%; Physician 92.2%

Top Facilities Utilized (by total Medical Spend)

- · Virtua-West Jersey
- · Cooper Hospital
- · Kennedy Memorial Health
- · CHOP
- · University of Pennsylvania

Catastrophic Claim Impact January 2024 – April 2024

Number of Claims Over \$50,000: 44
Claimants per 1000 members: 5.3
Avg. Paid per Claimant: \$112,203
Percent of Total Paid: 25.3%

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

Aetna One Flex Member Outreach: Through April 2024

Total Members Identified: 1,319 Members Targeted for 1:1 Nurse

Support: 309

Members Targeted for Digital Activity: 1,010

Member 1:1 outreach completed: 299 Member 1:1 Outreach in Progress: 10

Teladoc Activity January 2024 – April 2024

Total Registrations: 58
Total Online Visits: 114

Total Net Claims Savings: \$54,006

Total Visits w/ Rx: 79

Mental Health Visits: 5
Dermatology Visits: 6

Service Center Performance Goal Metrics YTD 2024

Customer Service Performance

1st Call Resolution: 94.03%

Abandonment Rate: 0.80%

Avg. Speed of Answer: 27.2 sec

Claims Performance

Financial Accuracy: 98.25%*

*Q4 2023

90% processed w/in: **6.9 days** 95% processed w/in: **12.5 days**

Claims Performance (Monthly)

(March 2024)

90% processed w/in: 5.8 days
95% processed w/in: 8.5 days
(Note: This is not a PG metric)

Performance Goals

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

Financial Accuracy: 99%

Turnaround Time

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





	2024	SNJ HIF	1				2023	SNJ HIF			
	MEDICAL CLAIMS PAID 2024	TOTAL	# OF EES	PER EE			MEDICAL CLAIMS PAID 2023	TOTAL	# OF EES	PER EE	
JANUARY	\$ 115,974.39	\$ 115,974.39	276	\$ 420.19		JANUARY	\$ 57,161.00	\$ 57,161.00	138	\$ 414.21	
FEBRUARY	\$ 229,433.52	\$ 229,433.52	279	\$ 822.34		FEBRUARY	\$ 230,443.69	\$ 230,443.69	134	\$ 1,719.72	
MARCH	\$ 383,241.29	\$ 383,241.29	278	\$ 1,378.56		MARCH	\$ 227,431.93	\$ 227,431.93	138	\$1,648.05	
APRIL	\$ 487,306.47	\$ 487,306.47	280	\$ 1,740.38		APRIL	\$ 165,876.75	\$ 165,876.75	137	\$ 1,210.77	
MAY	\$ 564,409.29	\$ 564,409.29	280	\$ 2,015.74		MAY	\$ 200,962.83	\$ 200,962.83	138	\$ 1,456.25	
JUNE						JUNE	\$ 193,132.39	\$ 193,132.39	136	\$ 1,420.09	
JULY						JULY	\$ 236,276.53	\$ 236,276.53	136	\$ 1,737.32	
AUGUST						AUGUST	\$ 308,802.85	\$ 308,802.85	136	\$ 2,270.60	
SEPTEMBER						SEPTEMBER	\$ 254,081.03	\$ 254,081.03	136	\$ 1,868.24	
OCTOBER						OCTOBER	\$ 390,722.00	\$ 390,722.00	136	\$2,873.32	
NOVEMBER						NOVEMBER	\$ 347,756.34	\$ 347,756.34	135	\$ 2,575.97	
DECEMBER						DECEMBER	\$ 265,952.43	\$ 265,952.43	135	\$ 1,970.01	
TOTALS	\$ 1,780,364.96	2024 Average	279	\$ 1,275.44		TOTALS	\$2,878,599.77	2023 Average	136	\$ 1,763.71	
					26						

meriHealth Administrators	8			
Group:	Southern New Jersey HIF		Service Dates:	_
Paid Dates:	5/1/24-5/31/24		Line of Busines	
Network Service	ALL		Product Line: A	.II
Claimant	Paid	Diagnosis		
spouse	\$80,267	Other Connective Tissue Disease		
dependent	\$65,047	Infancy Childhood Or Adolescence		
	\$145,314.41			



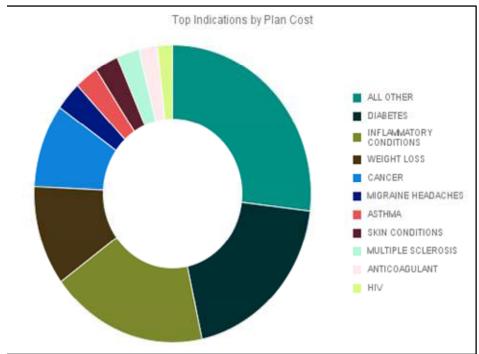
Southern New Jersey Regional Employee Benefits Fund

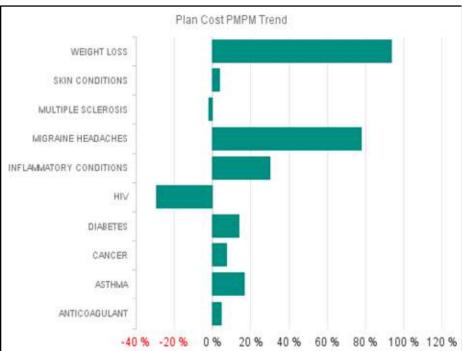
Total Component/ Date of Service (Month)	2023 01	2023 02	2023 03	2023 Q1	2023 04	2023 05	2023 06	2023 Q2	2023 07	2023 08	2023 09	2023 Q3	2023 10	2023 11	2023 12	2023 Q4	2023 YTD
Membership	4,885	4,960	5,121	4,989	5,405	5,402	5,395	5,401	5,404	5,384	5,394	5,394	5,397	5,549	5,638	5,528	5,328
Tot al Days	208,026	187,787	212,118	607,931	215,857	221,887	221,390	659,134	211,071	227,209	208,100	646,380	228,972	229,747	228,676	687,395	2,600,840
Total Patients	2,015	1,917	2,012	3,029	2,074	2,120	2,045	3,110	2,040	2,068	2,006	3,069	2,186	2,221	2,232	3,350	4,474
Tot al Plan Cost	\$731,056	\$779,560	\$939,382	\$2,449,998	\$860,807	\$990,925	\$976,697	\$2,828,429	\$943,486	\$1,105,047	\$986,640	\$3,035,173	\$1,087,016	\$1,078,961	\$1,089,031	\$3,255,008	\$11,568,608
Generic Fill Rate (GFR) - Total	86.1%	85.3%	86.2%	85.9%	87.1%	86.1%	87.6%	86.9%	87.7%	86.0%	86.2%	86.6%	83.1%	86.4%	88.0%	85.8%	86.3%
Plan Cost PMPM	\$149.65	\$157.17	\$183.44	\$163.70	\$159.26	\$183.44	\$181.04	\$174.57	\$174.59	\$205.25	\$182.91	\$187.56	\$201.41	\$194.44	\$193.16	\$196.27	\$180.95
Total Specialty Plan Cost	\$286,636	\$311,863	\$403,035	\$1,001,534	\$324,115	\$333,871	\$401,673	\$1,059,659	\$361,164	\$489,183	\$429,642	\$1,279,989	\$451,508	\$439,878	\$489,245	\$1,380,631	\$4,721,814
Specialty %of Total Specialty Plan Cost	39.2%	40.0%	42.9%	40.9%	37.7%	33.7%	41.1%	37.5%	38.3%	44.3%	43.5%	42.2%	41.5%	40.8%	44.9%	42.4%	40.8%
Total Component/ Date of Service (Month)	2024 01	2024 02	2024 03	2024 Q1	2024 04	2024 05	2024 06	2024 Q2	2024 07	2024 08	2024 09	2024 Q3	2024 10	2024 11	2024 12	2024 Q4	2024 YTD
Membership	8,692	8,620	8,602	8,638	8,611												
Total Days	372,585	337,331	339,407	1,049,323	362,975												
Total Patients	3,366	3,331	3,227	5,109	3,320												
Total Plan Cost	\$1,575,604	\$1,490,538	\$1,655,053	\$4,721,194	\$1,796,828												
Generic Fill Rate (GFR) - Total	87.6%	88.5%	88.1%	88.1%	87.9%												
Plan Cost PMPM	\$181.27	\$172.92	\$192.40	\$182.19	\$208.67												
%Change Plan Cost PMPM	21.1%	10.0%	4.9%	11.3%	31.0%												
Total Specialty Plan Cost	\$540,576	\$588,473	\$690,156	\$1,819,204	\$800,461												
Specialty % of Total Specialty Plan Cost	34.3%	39.5%	41.7%	38.5%	44.5%												

<u>PMPM</u>									
2023 Q1	\$163.70								
2024 Q1	\$182.19								
Trend Q1 23- 24	11.3%								

Top Indications

SOUTH. NJ REGIONAL EMP.BNFT (Current Period 01/2024 - 04/2024 vs. Previous Period 01/2023 - 04/2023) Peer = Government - National Preferred Formulary





				Current Period				Previous Period					Trend		
Rank	Peer Rank	Indication	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Plan Cost PMPM
1	1	DIABETES	26.9 %	4,309	\$1,317,535	\$38.16	32.0 %	26.2 %	29.1 %	2,335	\$682,815	\$33.52	31.9 %	29.4 %	13.9 %
2	2	INFLAMMATORY CONDITIONS	25.0 %	377	\$1,224,442	\$35.47	40.6 %	35.7 %	23.7 %	222	\$556,036	\$27.30	54.1 %	39.9 %	29.9 %
3	5	WEIGHT LOSS	14.8 %	716	\$724,180	\$20.98	4.5 %	5.7 %	9.4 %	206	\$220,507	\$10.82	8.7 %	11.3 %	93.8 %
4	3	CANCER	12.4 %	164	\$608,006	\$17.61	76.2 %	76.8 %	14.3 %	101	\$334,855	\$16.44	82.2 %	78.2 %	7.1 %
5	6	MIGRAINE HEADACHES	4.3 %	399	\$208,123	\$6.03	50.4 %	52.7 %	2.9 %	210	\$69,047	\$3.39	61.4 %	56.4 %	77.9 %
6	4	SKIN CONDITIONS	3.8 %	596	\$186,759	\$5.41	86.6 %	86.2 %	4.5 %	318	\$106,252	\$5.22	85.2 %	88.2 %	3.7 %
7	8	ASTHMA	3.8 %	2,163	\$184,019	\$5.33	85.3 %	88.0 %	4.0 %	1,339	\$92,979	\$4.56	79.1 %	79.1 %	16.8 %
8	10	MULTIPLE SCLEROSIS	3.6 %	37	\$175,020	\$5.07	35.1 %	47.1 %	4.5 %	27	\$105,154	\$5.16	81.5 %	43.0 %	-1.8 %
9	9	ANTICOAGULANT	3.0 %	326	\$144,932	\$4.20	18.7 %	19.4 %	3.5 %	212	\$81,921	\$4.02	19.3 %	22.2 %	4.4 %
10	7	HIV	2.4 %	52	\$118,998	\$3.45	36.5 %	21.3 %	4.2 %	38	\$99,155	\$4.87	23.7 %	21.1 %	-29.2 %
		Total Top 10		9,139	\$4,892,013	\$141.69	47.6 %	46.6 %		5,008	\$2,348,721	\$115.30	49.8 %	48.2 %	22.9 %

Top Drugs

SOUTH. NJ REGIONAL EMP.BNFT (Current Period 01/2024 - 04/2024 vs. Previous Period 01/2023 - 04/2023) Peer = Government - National Preferred Formulary

					Current Period			Previous Period				Trend	
Rank	Peer Rank	Brand Name	Indication	Specialty Drug	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Plan Cost PMPM
1	14	WEGOVY	WEIGHT LOSS	N	343	109	\$417,401	\$12.09	155	60	\$183,483	\$9.01	34.2 %
2	1	OZEMPIC	DIABETES	N	399	117	\$332,689	\$9.64	164	51	\$133,316	\$6.54	47.2 %
3	18	ZEPBOUND	WEIGHT LOSS	N	312	122	\$297,554	\$8.62	NA	NA	NA	NA	NA
4	4	HUMIRA(CF) PEN	INFLAMMATORY CONDITIONS	Y	45	12	\$279,031	\$8.08	22	5	\$130,663	\$6.41	26.0 %
5	3	MOUNJARO	DIABETES	N	255	72	\$245,034	\$7.10	64	19	\$58,624	\$2.88	146.6 %
6	6	STELARA	INFLAMMATORY CONDITIONS	Υ	22	6	\$166,386	\$4.82	6	3	\$91,603	\$4.50	7.2 %
7	510	VITRAKVI	CANCER	Υ	5	1	\$137,864	\$3.99	5	1	\$142,556	\$7.00	-42.9 %
8	10	JARDIANCE	DIABETES	N	234	59	\$124,021	\$3.59	131	33	\$65,591	\$3.22	11.6 %
9	69	LENALIDOMIDE	CANCER	Y	10	3	\$122,432	\$3.55	1	1	\$14,961	\$0.73	382.9 %
10	15	SKY RIZI PEN	INFLAMMATORY CONDITIONS	Υ	17	5	\$111,583	\$3.23	12	3	\$81,808	\$4.02	-19.5 %
11	12	DUPIXENT PEN	SKIN CONDITIONS	Υ	42	14	\$109,494	\$3.17	16	5	\$38,841	\$1.91	66.3 %
12	26	ENBREL SURECLICK	INFLAMMATORY CONDITIONS	Υ	21	6	\$108,325	\$3.14	11	3	\$52,272	\$2.57	22.3 %
13	22	ELIQUIS	ANTICOA GULANT	N	202	61	\$104,685	\$3.03	116	32	\$54,718	\$2.69	12.9 %
14	13	TRULICITY	DIABETES		120	35	\$101,437	\$2.94	113	34	\$87,684	\$4.30	-31.7 %
15	17	FARXIGA	DIABETES 1		178	47	\$90,474	\$2.62	121	31	\$56,673	\$2.78	-5.8 %
16		TRODELVY	CANCER	Υ	4	1	\$84,324	\$2.44	NA	NA	NA	NA	NA
17	112	LYNPARZA	CANCER	Υ	6	1	\$77,524	\$2.25	NA	NA	NA	NA	NA
18	84	SKYRIZI ON-BODY	INFLAMMATORY CONDITIONS	Υ	10	3	\$74,282	\$2.15	NA	NA	NA	NA	NA
19	28	TALTZ AUTOINJECTOR	INFLAMMATORY CONDITIONS	Υ	15	3	\$74,155	\$2.15	14	3	\$63,708	\$3.13	-31.3 %
20	16	TREMFYA	INFLAMMATORY CONDITIONS	Υ	14	4	\$69,931	\$2.03	NA	NA	NA	NA	NA
21	38	OTEZLA	INFLAMMATORY CONDITIONS	Υ	20	6	\$67,514	\$1.96	2	1	\$6,280	\$0.31	534.4 %
22	30	NURTEC ODT	MIGRAINE HEADACHES	N	43	21	\$64,120	\$1.86	8	5	\$9,900	\$0.49	282.1 %
23	47	JANUVIA	DIABETES	N	120	31	\$58,939	\$1.71	96	26	\$45,486	\$2.23	-23.5 %
24	73	SPRYCEL	CANCER	Υ	4	1	\$53,951	\$1.56	4	1	\$26,611	\$1.31	19.6 %
25	27	RINVOQ	INFLAMMATORY CONDITIONS	Υ	8	2	\$50,165	\$1.45	NA	NA	NA	NA	NA
Total Top 25			2,449		\$3,423,314	\$99.15	1,061		\$1,344,776	\$66.01	50.2 %		

APPENDIX I

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND OPEN MINUTES MAY 20, 2024

BELLMAWR BOROUGH HALL

4:15 PM

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

PLEDGE OF ALLEGIANCE AND MOMENT OF SILENCE

ROLL CALL OF 2024 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
Gary Passanante	Borough of Somerdale	Present
Brian Morrell	Gloucester City	Present
Kenneth Cheeseman	Laurel Springs	Present
Elanor Kelly	Borough of Runnemede	Present
Joseph Gallagher	Winslow Twp	Present

APPOINTED PROFESSIONALS PRESENT:

Executive Director/Adm. PERMA Risk Management Services

Brandon Lodics Emily Koval

Program Manager Conner Strong & Buckelew

Crystal Bailey Peter Mina

Attorney J. Kenneth Harris, Esq.

Medical TPA – AmeriHealth Kristina Strain

Jason Silverstein

Medical TPA - Aetna

Charles Yuk

Express Scripts

Treasurer Lorraine Verrill Elizabeth Pigliacelli

Delta Dental Absent

OTHERS PRESENT:

Susan Panto	Conner Strong & Buckelew				
Scott Davenport	Conner Strong & Buckelew				
Dave Weiss	HIG				
Suzanne Wood	CBIZ				
Robert Weil	Conner Strong & Buckelew				
Kim Porter	Corporate Synergies				
Patrick Yacovelli	Conner Strong & Buckelew				
Bonnie Taft	Oaklyn				
Lorraine Sacco	Winslow Twp				

APPROVAL OF MINUTES: April 22, 2024 Open

MOTION TO APPROVE OPEN MINUTES OF APRIL 22 2024 AS PRESENTED:

Moved: Commissioner Wolk Second: Commissioner D'Angelo

Vote: Unanimous

CORRESPONDENCE - None

EXECUTIVE DIRECTOR'S REPORT

FAST TRACK FINANCIAL REPORT – Mr. Lodics reviewed the financial fast track through February. There was a fairly large loss, but in January there was a large gain. There were many new members so we expected that catch up. Surplus strong and still running well. He said that March preliminary results were good, so the Fund should expect a positive first quarter.

COOPERATIVE PRICING SYSTEM UPDATE - The System has been approved by the State. We are finalizing Comptroller submissions and hope to have the RFP released by end of June. Executive Director said that there are two non-MRHIF groups interested in joining the Co-op, as well. Fund Attorney said that an additional resolution will need to be passed for new members. Fund Chair said it is better for our position to be larger.

FINANCIAL DISCLOSURES - All Fund Commissioners should have received their financial disclosure statements the first week of April. As a reminder, the role of Fund Commissioner is a separate filing from that of your municipality obligation. As of 5/6/2024, the following Commissioners need to complete the filing for the Fund. Reminder: All elected positions, JIF and HIF Commissioner positions must have a separate filing.

The following Commissioners are still outstanding:

2024 Local Government Officer - Roster

S	election Criteria Status: ALL		T		. [Ţ
4	4 Burton	Robert	ACTIVE	03/19/2019	No	
1	12 Gregory	Carrie	ACTIVE	03/26/2024	No	
1	13 Hales Jr.	William	ACTIVE	03/15/2022	No	
2	20 James	Walker	ACTIVE	03/26/2024	No	

PROGRAM MANAGERS REPORT

Peter Mina reviewed the informational report listed in the agenda.

ELIGIBILTY/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 or fax to 856-685-2249.

System training (new and refresher) is provided to all contacts with WEX access **every 3**rd **Wednesday at 10AM (except June's training will be held Tuesday June 18**th). Please contact <u>HIFtraining@permainc.com</u> 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: None

EXPRESS-SCRIPTS UPDATE: GLP-1 Weight Loss Program (Encircle) Recommendation Effective 9/1/24

Program Manager said they have consulted with the MRHIF Pharmacy Benefit Manager (PBM) Express Scripts (ESI) in determining a program to assist with the increasing cost of GLP-1 medications being used for weight loss. The Encircle Program encompasses the criteria recommended for the drugs intended use; lifestyle modification, member engagement, overall adherence. As a result, the Program Manager is recommending the Encircle Program for Southern New Jersey HIF participants who are approved for weight loss medications using the following criteria:

- BMI > 32 **OR**
- BMI between 27 < 32 WITH 2 or more documented comorbidities

In addition to receiving an approved prior authorization (PA), below are the mandatory guidelines of the program:

- Members will receive a welcome kit from Omada free of charge. The kit includes a digital
 scale and information on downloading the mobile app and/or using the web browser. The
 scale is programmed to the member's ESI active account prior to delivery. The scale will
 record each weigh-in and will update the member's file automatically. Members must weighin a minimum of 4 times a month
- Members must engage with an assigned online Omada coach via a mobile application or web

browser a minimum of 4 times a month

If members do not adhere to both of the mandatory requirements the following month in which they are non-compliant, they will not be able to refill their weight loss prescription. Members will be required to complete the missing weigh-ins and/or online coaching engagement in order to refill their prescription.

Members who have a current PA on file will be grandfathered until their PA on file has expired with ESI. Upon renewal of their PA they will be need to meet the above BMI requirements to be considered for approval. If approved, they will receive the Omada welcome kit and will need to adhere to the Encircle program requirements as outlined.

Communications will be sent to all impacted members with registration information. Once registered members will receive an access code to sign up for the Omada welcome kit.

The Committee agreed that this program is necessary to control the cost and availability of these drugs to only those who need it.

Program Manager said a resolution will be brought to the next meeting for ratification.

MOTION TO AUTHORIZE EXPRESS SCRIPTS TO IMPLEMENT THE GLP-1 ENCIRCLE PROGRAM EFFECTIVE JANUARY 1, 2024

Moved: Commissioner Wolk Second: Commissioner D'Angelo

Vote: Unanimous

OPERATIONAL UPDATES: None

2024 LEGISLATIVE REVIEW: None

Medical and Rx Reporting: The required RxDC reporting for the 2023 plan year has been submitted to all carriers on behalf of Southern New Jersey Health Insurance Fund. The reporting was submitted for all groups that have pharmacy in the Fund.

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 (SNJHIF). 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 indepth evaluation of the controls employed by the Aetna to ensure quality administration. **SNJHIF audit will began May 6, 2024. See Appendix.**

Carrier Appeals: None

IRO Submissions: None

Small Claims Committee: None

TREASURER: Fund Treasurer reviewed the bills list for May 2024 and the treasurers report. She noted that the investment income in one month was over \$183,000. Lastly, Fund Treasurer said that a revised Cash Management Plan is included in the agenda to remove Republic Bank and substitute with Fulton Bank. She said that she spoke with the President of the bank and was ensured that there is no change to the customer services, rates or process. The Fund is still secured under GUDPA.

MOTION TO APPROVE RESOLUTION 19-24 MARCH 2024 BILLS LIST:

Moved: Commissioner Shannon
Second: Commissioner Hill
Vote: 10 ayes, 0 nays

MOTION TO APPROVE THE TREASURERS REPORT:

Moved: Commissioner Shannon Second: Commissioner Kelly

Vote: All in favor

FUND ATTORNEY: Fund Attorney Harris stated that the Cooperative Pricing System filing is approved by the State.

AETNA: Mr. Silverstein reviewed the claims for the month of March 2024. He reviewed the high claimants.

AMERIHEALTH: Kristina Strain reviewed the paid claims and enrollment report through March 2024. She said that there was one individual that hit the high claimant threshold.

EXPRESS SCRIPTS: Mr. Yuk reviewed the utilization for March 2024. In response to Chair Mevoli, Mr. Yuk said that there was an increase in the weight loss drugs because of off label use, but also increase in membership. The Encircle program will address this issue and help get these drugs to those who are clinically approved.

DENTAL ADMINISTRATOR: Crista O'Donnell reviewed the post COVID reports for dental utilization.

OLD BUSINESS: None

NEW BUSINESS: Commissioner Shannon said that she is concerned with the total claims increasing. Executive Director said that there was a large jump in membership that would cause the total claims to increase. The PEPM is consistent with the prior year. Commissioner Kelly asked if the new members from the State are good risk. Executive Director said that the Fund probably reviewed over 300 applications and brought in less than 10% acress the State. The new members joined understanding the Fund concept and stability.

PUBLIC COMMENT: None.

MOTION TO ADJOURN:

Moved: Commissioner Kelly Second: Commissioner Shannon

Vote: All In Favor

MEETING ADJOURNED: 4:59 pm

NEXT MEETING: June 24, 2024 4:15PM

MUNICIPAL HALL

Emily Koval , Assisting Secretary for

JOSEPH WOLK, SECRETARY