AGENDA & REPORTS JULY 22, 2024 CONFERENCE CALL 4:15 PM

Join Zoom Meeting https://permainc.zoom.us/j/96237389184

Meeting ID: 962 3738 9184

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STATEMENT OF COMPLIANCE WITH OPEN PUBLIC MEETINGS ACT FOR USE WITH ZOOM MEETING

The Open Public Meetings Act allows local public bodies to conduct public meetings by using electronic communications technology. During the recently ended Public Health Emergency local public bodies were encouraged to conduct public business via remote public meetings.

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

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

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND AGENDA

MEETING: JULY 22, 2024 CONFERENCE CALL 4:15 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

FLAG SALUTE - MOMENT OF SILENCE

ROLL CALL OF 2024 EXECUTIVE COMMITTEE			
Michael Mevoli, Chairman			
Joseph Wolk, Secretary			
Louis DiAngelo, Executive Committee Member			
Terry Shannon, Executive Committee Member			
Edward Hill, Executive Committee Member			
Gary Passanante, Executive Committee Member			
Brian Morrell, Executive Committee Member			
Kenneth Cheeseman, Executive Committee Alternate			
Elanor Kelly, Executive Committee Alternate			
Joseph Gallagher, Executive Committee Alternate			
APPROVAL OF MINUTES: June 24, 2024	Open	(Appendix I)	
CORRESPONDENCE - Out of Network Memo REPORTS:			
EXECUTIVE DIRECTOR (PERMA)			-
EXECUTIVE DIRECTOR (PERMA) Monthly Report			Page 1
Monthly Report			Page 1
PROGRAM MANAGER- (Conner Strong & Buckelew)			
Monthly Report			
PROGRAM MANAGER- (Conner Strong & Buckelew) Monthly Report			
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Monthly Report PROGRAM MANAGER- (Conner Strong & Buckelew) Monthly Report TREASURER - (Verrill & Verrill) July 2024 Voucher List Treasurers Report			Page 11
Monthly Report			Page 11

ATTORNEY - (J. Kenneth Harris)

Monthly Report

NETWORK & THIRD PARTY ADMINISTRATOR - (Aetna)

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Monthly Report	Page	הו	

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

Southern New Jersey Regional Employee Benefits Fund Executive Director's Report July 22, 2024

FINANCES & CONTRACTS

PRO FORMA REPORTS

- Fast Track Financial Reports as of May 31, 2024 (page 3)
- **▶** Historical Income Statement
- > Consolidated Balance Sheet
- Indices and Ratios Report
- Budget Status Report

OUT OF NETWORK MEMO

Attached on your agenda was a memo from our office regarding a concerning new trend of out of network providers approaching our membership directly. Included as an attachment is a reference tool that you and your employees may use to verify the network status of providers.

We will discuss further at the meeting.

HIF COOPERATIVE PRICING SYSTEM

The Health Insurance Cooperating Pricing System has been approved on May 6, 2024 – 297HCIPS.

The first RFPs that will be issued are for the Medical TPA services. The documents are with the OSC for pre-advertised approval. We have not received authorization for distribution but are in active communications to get approval.

MRHIF MEETING

The MRHIF met on June 12. Commissioner Wolk was in attendance and can report on the action items made:

- 1. 2023 Internal Audit review and approval
- 2. Data Warehouse results were provided the Committee and Professionals will be meeting to demo the products and a recommendation will be made at the next meeting.
- 3. And additional year extension was awarded to the Level Care Express Scripts Contract

PCORI SURCHARGE FEES

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

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

BUDGET UPDATE

PERMA will begin working on the 2025 Fund Budget in the next month once all data is collected and ready for Actuarial review. We anticipate a Finance Committee meeting to be scheduled before introduction in September.

INDEMNITY AND TRUST AGREEMENTS

PERMA sent Indemnity and Trust Agreements and Resolutions to be adopted by the governing bodies to renew membership with the Fund for an additional 3 years. Below is a list of members who have renewing agreements have expired. Please reach out to hifadmin@permainc.com for a blank form to be executed. The list was last updated on July 12, 2024.

<u>Member</u>	<u>I&T end date</u>
TOWNSHIP OF WILLINGBORO	in progress
BOROUGH OF LINDENWOLD	12/31/2021
NORTH HANOVER TWP	12/31/2021
CAMDEN COUNTY BOARD OF SOCIAL SERVICES	12/31/2021
BOROUGH OF PAULSBORO	12/31/2022
BOROUGH OF HADDON HEIGHTS	12/31/2022
CHESILHURST BOROUGH	12/31/2022
FRANKLIN TWP	12/31/2022
TOWNSHIP OF WATERFORD	12/31/2022
BOROUGH OF BELLMAWR	12/31/2023
BOROUGH OF MEDFORD LAKES	12/31/2023
GLOUCESTER TOWNSHIP	12/31/2023

				GIONAL EMPLOYI `AST TRACK REPOR'		· - · · -
			AS OF	May 31, 2024		
			THIS	YTD	PRIOR	FUND
			MONTH	CHANGE	YEAR END	BALANCE
UNI	DERWRITING INCO	MF	9,100,087	45,290,956	1,438,502,750	1,483,793,7
	M EXPENSES	1012	3,200,007	1.5,250,550	2,133,332,733	_,,
CLAII	Paid Claims		8,324,055	34,683,859	1,172,473,212	1,207,157,0
	IBNR		133,306	3,845,198	5,179,785	9,024,9
	Less Specific Excess		(23,098)	(1,540,580)	(20,636,337)	(22,176,9
	· · · · · · · · · · · · · · · · · · ·		(23,036)	(1,340,360)	(1,807,360)	
	Less Aggregate Exc	ess	0.404.000	26 222 477	, , , , , , , , , , , , , , , , , , ,	(1,807,
-	AL CLAIMS		8,434,263	36,988,477	1,155,209,300	1,192,197,7
EXPE						
	MA & HMO Premiur	ns	857,200	4,260,690	45,181,658	49,442,
	Excess Premiums		134,799	674,032	50,150,845	50,824,
	Administrative		528,068	2,503,350	125,221,792	127,725,
TOT	AL EXPENSES		1,520,067	7,438,072	220,554,295	227,992,3
UND	ERWRITING PROFIT/	(1.055) (1-2-3)	(854,244)	864,408	62,739,154	63,603,
	STMENT INCOME	(42,324	155,506	3,994,412	4,149,
	DEND INCOME		74,54	133,300	11,847,139	11,847,
		6) (4 - 6)	(044.020)	4 040 044		
STAT	TUTORY PROFIT/(LOS	S) (4+5+6)	(811,920)	1,019,914	78,580,706	79,600,6
DIVIE	DEND		-	-	72,732,231	72,732
					,,	,
Tran	sferred Surplus IN		-	-		
Tran	sferred Surplus OUT		-	-	-	
STA	TUTORY SURPLUS	(7-8+9)	(811,920)	1,019,914	5,848,474	6,868,3
			1.1	ITCL DV FUND VEAD		
			<u> </u>	ITS) BY FUND YEAR		
Close	ed	Surplus	33,218	94,156	8,243,766	8,337
		Cash	49,488	149,911	13,078,657	13,228
2022		Surplus	21,754	(59,161)	(415,117)	(474
		Cash	74,996	304,524	(780,797)	(476
2023		Surplus	69,812	2,321,663	(1,980,174)	341
		Cash	978,974	952,416	(1,022,736)	(70
2024		Surplus	(936,704)	(1,336,744)		(1,336
		Cash	9,134,120	5,352,888		5,352
				4 040 044	F 040 474	6,868,3
TAL	SURPLUS (DEFICIT	'S)	(811.920)	1.019.914	5.848.474	
	SURPLUS (DEFICIT	S)	(811,920) 10 237 577	1,019,914	5,848,474 11 275 125	
	SURPLUS (DEFICIT CASH	S)	10,237,577	6,759,739	11,275,125	
	•	S)	10,237,577			
TAL	•		10,237,577	6,759,739		18,034,8
TAL TOTA	CASH AL CLOSED YEAR CLAI		10,237,577 CLAIM ANALYS	6,759,739 IS BY FUND YEAR	11,275,125	18,034,8
TAL TOTA	CASH AL CLOSED YEAR CLAID YEAR 2022		10,237,577 CLAIM ANALYS 3,691	6,759,739 IS BY FUND YEAR 36,969	11,275,125	18,034,8 1,054,146
TAL TOTA	CASH AL CLOSED YEAR CLAID YEAR 2022 Paid Claims		10,237,577 CLAIM ANALYS	6,759,739 IS BY FUND YEAR	11,275,125	18,034,8 1,054,146
TAL TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 Paid Claims IBNR	MS	10,237,577 CLAIM ANALYS 3,691 (18,851)	6,759,739 IS BY FUND YEAR 36,969 125,455	11,275,125 1,054,109,812 46,802,688	18,034,8 1,054,146, 46,928,
TAL TOTA	CASH AL CLOSED YEAR CLAID YEAR 2022 Paid Claims IBNR Less Specific Excess	IMS	10,237,577 CLAIM ANALYS 3,691	6,759,739 IS BY FUND YEAR 36,969	11,275,125	18,034,8 1,054,146 46,928
TAL TOTA FUNI	CASH AL CLOSED YEAR CLAID D YEAR 2022 Paid Claims IBNR Less Specific Excess Less Aggregate Exc	IMS	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995)	6,759,739 IS BY FUND YEAR 36,969 125,455 - (63,083)	11,275,125 1,054,109,812 46,802,688 (758,538)	18,034,8 1,054,146 46,928 (821
TAL TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 Paid Claims IBNR Less Specific Excess Less Aggregate Excu	IMS	10,237,577 CLAIM ANALYS 3,691 (18,851)	6,759,739 IS BY FUND YEAR 36,969 125,455	11,275,125 1,054,109,812 46,802,688	18,034,8 1,054,146 46,928 (821
TAL TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 Paid Claims IBNR Less Specific Excess Less Aggregate Exc	IMS	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995)	6,759,739 IS BY FUND YEAR 36,969 125,455 - (63,083) - 62,372	11,275,125 1,054,109,812 46,802,688 (758,538)	18,034,8 1,054,146, 46,928, (821,
TAL TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 Paid Claims IBNR Less Specific Excess Less Aggregate Excu	IMS	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995)	6,759,739 IS BY FUND YEAR 36,969 125,455 - (63,083) - 62,372 3,963,996	11,275,125 1,054,109,812 46,802,688 (758,538)	18,034,8 1,054,146 46,928 (821 46,106
TAL TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 Paid Claims IBNR Less Specific Excess Less Aggregate Exce AL FY 2022 CLAIMS D YEAR 2023	IMS	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995) - (20,846)	6,759,739 IS BY FUND YEAR 36,969 125,455 - (63,083) - 62,372	11,275,125 1,054,109,812 46,802,688 (758,538) - 46,044,150	18,034,8 1,054,146 46,928 (821 46,106 54,326
TAL TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 Paid Claims IBNR Less Specific Excess Less Aggregate Exce AL FY 2022 CLAIMS D YEAR 2023 Paid Claims	IMS Bess Bess	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995) - (20,846)	6,759,739 IS BY FUND YEAR 36,969 125,455 - (63,083) - 62,372 3,963,996	11,275,125 1,054,109,812 46,802,688 (758,538) - 46,044,150 50,362,240	18,034,8 1,054,146 46,928 (821 46,106 54,326 388
TAL TOTA FUNI	CASH AL CLOSED YEAR CLAID D YEAR 2022 Paid Claims IBNR Less Specific Excess Less Aggregate Exce AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR	MMS Seess	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995) - (20,846) 81,083 (129,495)	6,759,739 IS BY FUND YEAR 36,969 125,455 - (63,083) - 62,372 3,963,996 (4,791,301)	11,275,125 1,054,109,812 46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785	18,034,8 1,054,146 46,928 (821 46,106 54,326 388
TOTA FUNI TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 Paid Claims IBNR Less Specific Excess Less Aggregate Exce AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Excess	MMS Seess	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995) - (20,846) 81,083 (129,495)	6,759,739 IS BY FUND YEAR 36,969 125,455 - (63,083) - 62,372 3,963,996 (4,791,301)	11,275,125 1,054,109,812 46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785	18,034,8 1,054,146 46,928 (821 46,106 54,326 388 (1,964
TOTA TOTA TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 Paid Claims IBNR Less Specific Excess Less Aggregate Exc. AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Excess LESS Aggregate Exc.	MMS Seess	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995) - (20,846) 81,083 (129,495) (21,104) -	6,759,739 IS BY FUND YEAR 36,969 125,455 (63,083) - (62,372 3,963,996 (4,791,301) (1,477,497) -	11,275,125 1,054,109,812 46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685) -	18,034,8 1,054,146, 46,928, (821, 46,106, 54,326, 388, (1,964,
TOTA TOTA TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 Paid Claims IBNR Less Specific Excess Less Aggregate Exc. AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Excess Less Aggregate Exc. AL FY 2023 CLAIMS D YEAR 2023 CLAIMS	MMS Seess	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995) - (20,846) 81,083 (129,495) (21,104) - (69,516)	6,759,739 IS BY FUND YEAR 36,969 125,455 - (63,083) - 62,372 3,963,996 (4,791,301) (1,477,497) - (2,304,802)	11,275,125 1,054,109,812 46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685) -	18,034,8 1,054,146 46,928 (821 46,106 54,326 388 (1,964
TOTA TOTA TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 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	MMS Seess	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995) - (20,846) 81,083 (129,495) (21,104) - (69,516) 8,258,132	6,759,739 IS BY FUND YEAR 36,969 125,455 (63,083) - (62,372 3,963,996 (4,791,301) (1,477,497) - (2,304,802) 30,557,439	11,275,125 1,054,109,812 46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685) -	18,034,8 1,054,146 46,928 (821 46,106 54,326 388 (1,964 52,750 30,557
TOTA TOTA TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 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	ess ess	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995) - (20,846) 81,083 (129,495) (21,104) - (69,516)	6,759,739 IS BY FUND YEAR 36,969 125,455 - (63,083) - 62,372 3,963,996 (4,791,301) (1,477,497) - (2,304,802)	11,275,125 1,054,109,812 46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685) -	18,034,8 1,054,146 46,928 (821 46,106 54,326 388 (1,964 52,750 30,557
TOTA TOTA TOTA TOTA	CASH AL CLOSED YEAR CLAID D YEAR 2022 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 Less Aggregate Excess Less Aggregate Excess Less Aggregate Excess Less Specific Excess D YEAR 2024 Paid Claims IBNR Less Specific Excess	ess ess	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995) - (20,846) 81,083 (129,495) (21,104) - (69,516) 8,258,132	6,759,739 IS BY FUND YEAR 36,969 125,455 (63,083) - (62,372 3,963,996 (4,791,301) (1,477,497) - (2,304,802) 30,557,439	11,275,125 1,054,109,812 46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685) -	18,034,8 1,054,146 46,928 (821 46,106 54,326 388 (1,964 52,750 30,557
TOTAL TOTA FUNI	CASH AL CLOSED YEAR CLAID D YEAR 2022 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	ess ess	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995) - (20,846) 81,083 (129,495) (21,104) - (69,516) 8,258,132 262,801	6,759,739 IS BY FUND YEAR 36,969 125,455 - (63,083) - 62,372 3,963,996 (4,791,301) (1,477,497) - (2,304,802) 30,557,439 8,636,499	11,275,125 1,054,109,812 46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685) -	18,034,8 1,054,146, 46,928, (821, 46,106, 54,326, 388, (1,964, 52,750, 30,557, 8,636,
TOTAL TOTAL TOTAL TOTAL FUNI	CASH AL CLOSED YEAR CLAID D YEAR 2022 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 Less Aggregate Excess Less Aggregate Excess Less Aggregate Excess Less Specific Excess D YEAR 2024 Paid Claims IBNR Less Specific Excess	ess ess	10,237,577 CLAIM ANALYS 3,691 (18,851) - (1,995) - (20,846) 81,083 (129,495) (21,104) - (69,516) 8,258,132	6,759,739 IS BY FUND YEAR 36,969 125,455 (63,083) - (62,372 3,963,996 (4,791,301) (1,477,497) - (2,304,802) 30,557,439	11,275,125 1,054,109,812 46,802,688 (758,538) - 46,044,150 50,362,240 5,179,785 (486,685) -	18,034,8 1,054,146, 46,928, (821, 46,106, 54,326, 388, (1,964, 52,750, 30,557, 8,636, 39,193, 1,192,197,7

Southern New Jersey Regional Employee Benefits Fund CONSOLIDATED BALANCE SHEET

AS OF APRIL 30, 2024

BY FUND YEAR

•	SNJREBF 2024	SNJREBF 2023	SNJREBF 2022	CLOSED YEAR	FUND BALANCE
ASSETS					
Cash & Cash Equivalents Assesstments Receivable (Prepaid) Interest Receivable	(3,781,232) 10,114,662 -	(1,049,294) 585 -	(551,269) (28,320)	13,179,080 89,501 23	7,797,286 10,176,428 23
Specific Excess Receivable Aggregate Excess Receivable Dividend Receivable Prepaid Admin Fees	- - - 2,917	1,895,424 - - -	83,557 - - -	-	1,978,980 - - 2,917
Other Assets	1,671,263	-	-	-	1,671,263
Total Assets	8,007,610	846,715	(496,032)	13,268,604	21,626,897
LIABILITIES					
Accounts Payable IBNR Reserve A4 Retiree Surcharge Dividends Payable Retained Dividends	- 8,373,698 - -	- 517,979 - -	- - - -	- - - - 4,963,900	8,891,677 - - 4,963,900
Accrued/Other Liabilities	33,951	57,060	-	-	91,011
Total Liabilities	8,407,649	575,039	-	4,963,900	13,946,588
EQUITY					
Surplus / (Defiat)	(400,040)	271,676	(496,032)	8,304,704	7,680,308
Total Equity	(400,040)	271,676	(496,032)	8,304,704	7,680,308
Total Liabilities & Equity	8,007,610	846,715	(496,032)	13,268,604	21,626,897
BALANCE	-	-	-	-	-

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

Fund Year allocation of claims have been estimated.

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND									
RATIOS									
		FY2024							
INDICES	2023		JAN		FEB		MAR		APR
Cash Position	11,275,125	\$	9,857,774	\$	6,250,977		6,456,937		7,797,286
IBNR	5,179,785	\$	6,504,230	-	8,036,525	-	8,601,150	-	8,891,677
Assets	16,035,272	-	20,344,763	\$	20,738,572	-	21,617,377		21,626,897
Liabilities	10,186,798	\$	11,531,910	\$	13,033,059		13,631,819		13,946,588
Surplus	5,848,474	\$	8,812,853	\$	7,705,513	\$	7,985,558	\$	7,680,308
Claims Paid Month	5,607,671	\$	4,844,971	\$	7,108,351	\$	6,827,477	\$	7,579,005
Claims Budget Month	4,646,753	\$	7,618,579	\$	7,611,045	\$	7,595,540	\$	7,613,217
Claims Paid YTD	55,348,291	\$	4,844,971	\$	11,953,322	\$	18,780,798	\$	26,359,804
Claims Budget YTD	52,960,144	\$	7,618,579	\$	15,229,624	\$	22,825,163	\$	30,438,380
RATIOS									
Cash Position to Claims Paid	2.01		2.03		0.88		0.95		1.03
Claims Paid to Claims Budget Month	1.21		0.64		0.93		0.9		1
Claims Paid to Claims Budget YTD	1.05		0.64		0.78		0.8		0.9
Cash Position to IBNR	2.18		1.52		0.78		0.75		0.88
Assets to Liabilities	1.57		1.76		1.59		1.59		1.55
Surplus as Months of Claims	1.26		1.16		1.01		1.05		1.01
IBNR to Claims Budget Month	1.11		0.85		1.06		1.13		1.17

Southern NJ Municipal Employee Benefits Fund 2024 Budget Status Report

as of April 30, 2024

				YTD	\$ Variance	% Varaiance
Expected Losses	YTD Budgeted	Annual	Latest Filed	Expensed		
Medical Claims - All Other	21,165,907	63,486,848	35,774,782			
Medical Claims AmeriHealth - All Other	1,322,395	4,005,496	1,622,435			
Medical Claims - CCBOSS	3,647,274	10,816,575	11,205,477			
Subtotal Medical	26,135,576	78,308,919	48,602,694	25,840,043	295,533	1%
Prescription Claims - All Other	4,495,520	13,489,069	6,927,734			
Rx Rebates - All Other	(1,395,993)	(4,188,757)	(2,078,320)			
Prescription Claims - CCBOSS	1,047,812	3,109,757	3,240,371			
Rx Rebates - CCBOSS	(325,376)	(965,672)	(1,006,232)			
Subtotal Prescription	3,821,963	11,444,398	7,083,553	4,369,465	(547,502)	-14%
Dental Claims - All Other	425,260	1,277,851	1,087,681			
Dental Claims - CCBOSS	55,581	167,028	166,171			
Subtotal Dental	480,840	1,444,878	1,253,852	463,497	17,344	4%
Subtotal Claims	30,438,380	91,198,194	56,940,099	30,673,005	(234,625)	-1%
Loss Fund Contingency	48,058	144,174	142,110			
DMO Premiums	1,108	2,940	5,164	1,222	(114)	-10%
Medicare Advantage - All Other	2,681,144	8,076,481	6,830,061	1,222	(114)	-10%
Medicare Advantage - CCBOSS	654,089	1,973,001	2,000,148			
		1,973,001	8,835,373	2 402 269	(67.025)	-2%
Subtotal Insured Programs	3,336,341	10,052,422	8,835,373	3,402,268	(67,035)	-2%
Reinsurance						
Specific	538,426	1,618,543	1,021,150	539,233	(807)	0%
Total Loss Fund	34,361,205	103,013,334	66,938,732	34,615,728	(254,523)	-1%
Expenses						
Legal	7,686	23,058	23,058	7,686	-	0%
Treasurer	5,412	16,235	16,235	5,412	-	0%
Administrator	241,242	725,577	537,492	241,345	(103)	0%
Program Manager	639,116	1,922,603	1,368,150	1,024,520	(10,261)	-1%
Brokerage	375,143	1,132,663	650,403	Included above	in Program Man	ager
TPA - Med Aetna	536,439	1,611,848	1,084,092	579,177	(863)	0%
TPA - Med AmeriHealth Admin	41,875	126,572	67,308	Included above	in TPA	
TPA - Dental	29,739	89,368	77,715	29,816	(77)	0%
Actuary	5,833	17,500	17,500	5,833	(0)	0%
Auditor	5,800	17,401	17,401	5,800	0	0%
Medicare Advantage Implementation	0	0	0	43,752	(43,752)	#DIV/0!
Subtotal Expenses	1,888,285	5,682,826	3,859,354	1,943,341	(55,056)	-3%
Misc/Cont	7,219	21,657	21,657	6,345	874	12%
Affordable Care Act Taxes	7,262	21,831	13,745	7,262	0	0%
Claims Audit	13,333	40,000	40,000	13,333	(0)	0%
Plan Documents	5,000	15,000	15,000	5,000	-	0%
Total Expenses	1,921,099	5,781,313	3,949,756	1,975,281	(54,182)	-3%
Total Budget	36,282,304	108,794,647	70,888,488	36,591,009	(308,705)	-1%

REGULATORY

Monthly Items Fi	iling Status
------------------	--------------

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

New Members Filed (ongoing)

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

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

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



To: Commissioners, Hi Funds

CC: Broker Risk Managers, Hi Funds

From: PERMA Risk Management Services, Executive Director

Date: July 11, 2024

Subject: Wellness and Screening Vendors - NETWORK STATUS

We have been informed of multiple occurrences where public entities, such as yours, are being approached by various third-party medical and wellness vendors offering free services and/or screenings to you and your employees. Often, these vendors offer their services onsite at the entity and bill the plan or offer free no charge screenings then strongly recommend follow up treatment. If these providers are out of network, the Fund is exposed to higher than negotiated fees and your membership is exposed to balance billing.

We understand the importance of employee wellness and the positive impact these programs have on employee health and morale. However, we ask that you and your staff work with your Risk Managers and/or the Fund Program Manager to validate the network status of these vendors.

In multiple Funds, a non-network provider offered preventive onsite screenings at our member municipalities and school boards at no upfront charge to the staff or entity. The provider then aggressively followed up the screenings by directly contacting the employees and recommending a non-invasive surgery. The Funds paid this physician an average of \$250,000 per patient for the follow up treatments, whereas the average cost of this procedure in network is approximately \$15,000. This out of network physician, as well as others, are targeting public entities, with the foreknowledge of the richness of the plans they sponsor.

We are asking your help to control claim costs and maintain the stable, predictable budget increases our Funds have enjoyed for many decades. If you and/or your staff are approached by any vendors who are not existing contractors of the Fund you participate in, please reach out to your Risk Manager, so the vendor may be properly vetted.

Please see attached a reference guide to assist you and your employees in locating in network physicians and facilities. The online tool provides the ability to search by provider type, location and specialty.

HOW TO FIND IN-NETWORK **PROVIDERS**



TO FIND PARTICIPATING AETNA PROVIDERS:

- STEP 1: Visit Aetna's website at www.aetna.com
- STEP 2: At the middle of the of the webpage on the right, click on "Find A Doctor"
- STEP 3: On right side of page under Guest, select "Plan from an employer" (1st choice on the list)
- STEP 4: Under Continue as a Guest, enter your zip code, city, state or county
- STEP 5: You will be asked to "Select a Plan". Use the Key below to help you make the correct selection:

IF YOU'RE ENROLLING IN	DOCFIND PLAN SELECTION IS
Aetna Choice POS II Plans (POS II, NJEHP)	Category Heading = <u>Aetna Open Access Plans</u> Plan Name = Aetna Choice POS II (Open Access)
Aetna HMO	Category Heading = <u>Aetna Standard Plan</u> Plan Name = HMO
Aetna Garden State Plan	Category Heading = <u>Aetna Whole Health Plan</u> Plan Name = (NJ) Aetna Whole Health New Jersey Choice POS II

TO FIND PARTICIPATING AMERIHEALTH ADMINISTRATORS PROVIDERS:

- . STEP 1: Visit the AHA website at www.myahabenefits.com
- STEP 2: At the bottom of the webpage on the right, click on "Find A Doctor"
- STEP 3: Search providers by category, specialty and much more!
- Credentials
- Gender
- Hospital affiliations
- Specialty
- Reviews from other Language spoken members
- Office hours
- National Provider Number (NPI)

Easily compare up to five doctors and hospitals at once. You can compare specialties, education, board certifications, quality reviews, and more.



Please note: If searching for a Garden State Plan Provider, for accurate results, fill in your location and search for the Local Value Network at the top of the page.

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND Program Manager

July 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 3rd** Wednesday at **10AM**. Please contact HIFtraining@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: None

EXPRESS-SCRIPTS UPDATE:

National Preferred Formulary (NPF) – Effective 7/1/24

ESI's updated National Preferred Formulary (NPF) and Exclusion Lists effective 7/1/24 has been released. SNJRHIF had 7 members impacted by the change. Impacted members, physicians, and pharmacists received prior notification of medication exclusions, including suggested covered alternatives. The NPF and Exclusion Lists were sent to all brokers and included as an attachment on the agenda communication.

SaveOn – Effective 7/1/24

ESI's updated SaveOn list effective 7/1/24 has been released. Drugs highlighted in green are new drugs effective 7/1/24. The drugs highlighted in red are excluded effective 7/1/24. SNJRHIF had no members impacted by the removal of SaveOn drugs. The updated listing has been sent to brokers and included as an attachment on the agenda communication.

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 < 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 weigh-in 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
04/04/2024	Aetna/Medical	SNJ 06-02- 2024	Lab Testing	Upheld	04/24/2024

IRO Submissions:

Submission	Appeal Type	Appeal	Reason	Determination		
Date		Number			Date	
06/21/2024	Aetna/Medical	SNJ 06-02-	Lab Testing	Overturned	07/08/2024	
		2024				

Small Claims Committee: None

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED Current Fund Year: 2024 Month Ending: May TOTAL Med Dental Rx Vision Reinsurance Contigency Admin **Closed Year** OPEN BALANCE 312,571.00 (320,420.28) (5,101,761.06) 0.00 (254,749.86)188,520.64 (293,335.53)8,293,226.81 7,797,286.10 RECEIPTS 271,991.49 961,125.02 18,820,234.07 Assessments 15,316,034.29 219,603.13 2,026,220.00 0.0025,260.14 0.00Refunds 0.00 0.00 0.00 0.00 0.00 0.00 0.000.000.00 1,165.38 15,125.04 0.00 677.23 29,792.11 64,625.32 Invest Pymnts 0.00 0.00 0.00 Invest Adj 0.01 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.01 15,125.05 0.00 0.00 64,625.33 Subtotal Invest 0.00 0.00 677.23 1,165.38 29,792.11 Other Receipts * 0.00 0.00 0.00 1,291,302.74 0.00 545,366.11 0.00 0.00 1,836,668.85 TOTAL 271,991.49 16,622,462.08 219,603.13 2,571,586.11 0.00 25,937.37 962,290.40 29,792.11 20,721,528.25 EXPENSES 6,881,201.77 Claims Transfers 104,399.01 1,963,563.48 0.00 0.00 0.00 0.00 0.00 8,949,164.26 856,921.73 134,799.10 Expenses 278.49 0.00 0.000.00 542,787.47 0.00 1,534,786.79 Other Expenses * 0.00 0.00 0.00 0.00 0.00 0.000.00 0.00 0.00 TOTAL 7,738,123.50 104,677.50 1,963,563.48 0.00 134,799.10 0.00 542,787.47 10,483,951.05 0.00

0.00

(117,557.47)

214,458.01

126,167.40

8,323,018.92

18,034,863.30

END BALANCE

9,196,909.58

(205,494.65) (4,493,738.43)

SUMMARY OF CASH AND INVESTMI	ENT INSTRUMENTS	S							
SOUTHERN NEW JERSEY REGIONAL	EMPLO YEE BENI	EFITS FUND							
ALL FUND YEARS COMBINED									
CURRENT MONTH	May								
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
	ID Number:								
	Maturity (Yrs)								
	Purchase Yield:	4.90	4.40	5.25	5.44	5.44	5.44	2.50	5.29
	TO TAL for All		A 405 20	4 20 20 20 20	* 422 - 42 00			4. 01.077.63	
Opening Cash & Investment Balance	\$7,797,286.11		\$ 2,486.39	\$ 30,822.86	\$ 433,715.90	\$ 3,044,012.49	\$ 70,017.19	\$ 81,855.63	\$ 4,128,875.55
Opening Interest Accrual Balance	\$22.13	\$ 22.13	-	-	\$ -	-	\$ -	\$ -	\$ -
1 Interest Accrued and/or Interest Cost	\$0.83	\$0.83	\$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
3 (Amortization and/or Interest Cost)	\$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
5 Interest Paid - Cash Instr.s	\$64,625.32	\$22.13	\$9.27	\$137.06	\$26,398.01	\$18,462.10	\$876.74	\$157.13	\$18,562.88
6 Interest Paid - Term Instr.s	\$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
8 Net Investment Income	\$64,626.15	\$22.96	\$9.27	\$137.06	\$26,398.01	\$18,462.10	\$876.74	\$157.13	\$18,562.88
9 Deposits - Purchases	\$30,191,689.71	\$0.00	\$0.00	\$0.00	\$8,000,000.00	\$20,656,902.92	\$1,534,786.79	\$0.00	\$0.00
10 (Withdrawals - Sales)	-\$20,018,737.84	\$0.00	\$0.00	\$0.00	\$0.00	-\$18,483,951.05	-\$1,534,786.79	\$0.00	\$0.00
		OK	OK	OK	OK	OK	OK	OK	OK
Ending Cash & Investment Balance	\$18,034,863.30	\$5,522.23	\$2,495.66	\$30,959.92	\$8,460,113.91	\$5,235,426.46	\$70,893.93	\$82,012.76	\$4,147,438.43
Ending Interest Accrual Balance	\$22.96	\$22.96	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Plus Outstanding Checks	\$30,934.88	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$30,934.88	\$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
Balance per Bank	\$18,065,798.18	\$5,522.23	\$2,495.66	\$30,959.92	\$8,460,113.91	\$5,235,426.46	\$101,828.81	\$82,012.76	\$4,147,438.43

	CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES									
			SOUTHER	RN NEW JERSE	Y REGIONAL EMP	LO YEE BENEFITS	FUND			
Month		May								
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	May	May	May	May	Reconciled	Variance From	Month	
2024	Med	21,653,786.00	6,881,201.77	0.00	28,534,987.77	0.00	28,534,987.77	21,653,786.00	6,881,201.77	
	Dental	435,395.94	104,399.01	0.00	539,794.95	0.00	539,794.95	435,395.94	104,399.01	
	Rx	6,465,096.52	1,963,563.48	0.00	8,428,660.00	0.00	8,428,660.00	6,465,096.52	1,963,563.48	
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total	28,554,278,46	8.949.164.26	0.00	37,503,442.72	0.00	37,503,442.72	28,554,278.46	8,949,164,26	

RESOLUTION NO. 24-24

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

WHEREAS, the Southern New Jersey Regional Employee Benefits Fund held a Public Meeting on July 22, 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 month of July 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 July 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.

ADO:	OPTED: JULY 22, 2024	
BY:	CHAIRPERSON	
ATTE	EST:	
	SECRETARY	



SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

Monthly Claim Activity Report

July 22, 2024



SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

	MEDICAL CLAIMS + CAP				MEDICAL CLAIMS + CAP			
	PAID 2023	# OF EES	PI	ER 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	\$5,407,814	3,400	\$	1,591
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				\$26,739,035			
					2024 Average	3,407	\$	1,570
					2023 Average	2,156	\$	1,688

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

 Plan Sponsor Unique ID:
 All
 Paid Dates:
 05/01/2024 - 05/31/2024

 Customer:
 SNJ Regional Employee Benefits Fund
 Service Dates:
 01/01/2011 - 05/31/2024

Group / Control: 00737391,00866357,SI030217,SI416902,SI431318 **Line of Business:** All

Paid Amt

\$135,476.02

\$129,600.36

Total: \$265,076.38



SNJ Regional Employee Benefits Fund

6/1/23 thru 5/31/24 (unless otherwise noted)

Darhboard

Medical Claims Paid: January 2024 thru May 2024

Total Medical Paid per EE: \$1,570

Network Discounts

Inpatient: 67.7%
Ambulatory: 69.9%
Physician/Other: 60.9%
TOTAL: 66.1%

Provider Network

% Admissions In-Network: 97.3% % Physician Office: 98.4%

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 – May 2024

Number of Claims Over \$50,000: 56
Claimants per 1000 members: 6.8
Avg. Paid per Claimant: \$114,781
Percent of Total Paid: 26.0%

Aetna BOB- HCC account for an average of 42.1% of total Medical Cost

Aetna One Flex Member Outreach: Through May 2024

Total Members Identified: 1,392 Members Targeted for 1:1 Nurse

Support: 323

Members Targeted for Digital Activity:

1.069

Member 1:1 outreach completed: 300 Member 1:1 Outreach in Progress: 23

Teladoc Activity January 2024 – May 2024

Total Registrations: **79**Total Online Visits: **134**

Total Net Claims Savings: \$63,494

Total Visits w/ Rx: 90

Mental Health Visits: 5
Dermatology Visits: 8

Service Center Performance Goal Metrics YTD 2024

Customer Service Performance

1st Call Resolution: 94.03%
Abandonment Rate: 0.79%
Avg. Speed of Answer: 27.2 sec

Claims Performance

Financial Accuracy: 98.25%*

*Q4 2023

90% processed w/in: 6.8 days 95% processed w/in: 11.7 days

Claims Performance (Monthly)

(April 2024)

90% processed w/in: 6.6 days
95% processed w/in: 10.3 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	SN	IJ HIF	1				_	2023 S	SNJ	HIF	1			
		_								_					
	PAID 2024		TOTAL	# OF EES	PER	<u>E</u>			PAID 2023		TOTAL	# OF EES		PER EE	
JANUARY	\$ 115,974.39	ç	\$ 115,974.39	276	\$ 42	0.19	JANUARY	\$	57,161.00	\$	57,161.00	138	8	\$ 414.21	
FEBRUARY	\$ 229,433.52	ç	\$ 229,433.52	279	\$ 82	2.34	FEBRUARY	\$	230,443.69	\$	230,443.69	134	4	\$ 1,719.72	
MARCH	\$ 383,241.29	Ş	\$ 383,241.29	278	\$ 1,37	3.56	MARCH	\$	227,431.93	\$	227,431.93	13	8	\$1,648.05	
APRIL	\$ 487,306.47	ç	\$ 487,306.47	280	\$ 1,74).38	APRIL	\$	165,876.75	\$	165,876.75	13	7	\$ 1,210.77	
MAY	\$ 564,409.29	ç	\$ 564,409.29	280	\$ 2,01	5.74	MAY	\$	200,962.83	\$	200,962.83	138	8	\$ 1,456.25	
JUNE	\$ 377,090.01	ç	\$ 377,090.01	280	\$ 1,34	5.75	JUNE	\$	193,132.39	\$	193,132.39	130	6	\$ 1,420.09	
JULY							JULY	\$	236,276.53	\$	236,276.53	130	6	\$ 1,737.32	
AUGUST							AUGUST	\$	308,802.85	\$	308,802.85	130	6	\$ 2,270.60	
SEPTEMBER							SEPTEMBER	\$	254,081.03	\$	254,081.03	130	6	\$ 1,868.24	
OCTOBER							OCTOBER	\$	390,722.00	\$	390,722.00	130	6	\$2,873.32	
NOVEMBER							NOVEMBER	\$	347,756.34	\$	347,756.34	13	5	\$ 2,575.97	
DECEMBER							DECEMBER	\$	265,952.43	\$	265,952.43	13	5	\$ 1,970.01	
TOTALS	\$ 2,157,454.97	20	024 Average	279	\$ 1,28	7.33	TOTALS		\$2,878,599.77	20	023 Average	130	6	\$ 1,763.71	

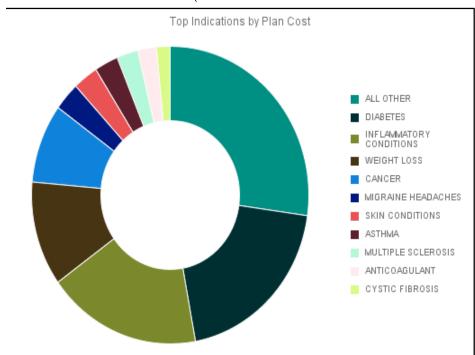


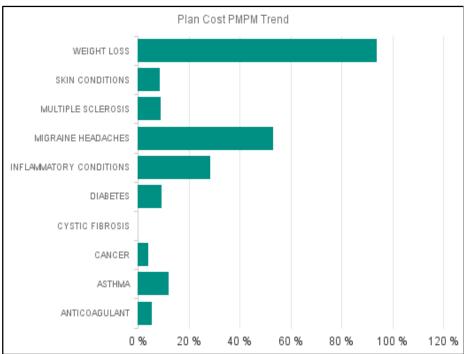
Southern New Jersey Regional Employee Benefits Fund

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
Total Days	208,026	187,787	212,118	607,931	215,864	221,887	221,390	659,141	211,071	227,209	208,100	646,380	228,972	229,747	228,676	687,395	2,600,847
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
Total Plan Cost	\$731,056	\$779,560	\$939,382	\$2,449,998	\$860,808	\$990,925	\$976,697	\$2,828,430	\$943,486	\$1,105,047	\$986,640	\$3,035,173	\$1,087,016	\$1,078,987	\$1,089,088	\$3,255,090	\$11,568,691
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	\$194.45	\$193.17	\$196.28	\$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	8,633											
Total Days	372,595	337,435	339,738	1,049,768	359,580	360,333											
Total Patients	3,367	3,332	3,230	5,110	3,353	3,350											
Total Plan Cost	\$1,575,604	\$1,532,700	\$1,655,371	\$4,763,675	\$1,919,447	\$1,844,279											
Generic Fill Rate (GFR) - Total	87.6%	88.5%	88.1%	88.1%	87.2%	87.0%											
Plan Cost PMPM	\$181.27	\$177.81	\$192.44	\$183.83	\$222.91	\$213.63											
% Change Plan Cost PMPM	21.1%	13.1%	4.9%	12.3%	40.0%	16.5%											
Total Specialty Plan Cost	\$540,576	\$630,635	\$690,156	\$1,861,367	\$881,071	\$723,612											
Specialty % of Total Specialty Plan Cost	34.3%	41.1%	41.7%	39.1%	45.9%	39.2%											

Top Indications

SOUTH. NJ REGIONAL EMP.BNFT (Current Period 01/2024 - 05/2024 vs. Previous Period 01/2023 - 05/2023) Peer = Government - National Preferred Formulary





				Current Period						Previous Period					
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	27.3 %	5,393	\$1,693,500	\$39.24	31.4 %	26.1 %	31.5 %	3,075	\$927,904	\$36.00	31.8 %	29.1 %	9.0 %
2	2	INFLAMMATORY CONDITIONS	24.7 %	458	\$1,530,551	\$35.46	40.6 %	34.9 %	24.2 %	275	\$712,318	\$27.64	52.7 %	39.6 %	28.3 %
3	4	WEIGHT LOSS	15.6 %	942	\$969,510	\$22.46	3.8 %	5.6 %	10.1 %	274	\$299,175	\$11.61	6.6 %	10.6 %	93.5 %
4	3	CANCER	11.8 %	206	\$733,055	\$16.99	77.2 %	76.6 %	14.3 %	123	\$422,061	\$16.38	82.9 %	77.9 %	3.7 %
5	6	MIGRAINE HEADACHES	4.2 %	490	\$261,346	\$6.06	50.4 %	52.5 %	3.5 %	276	\$102,114	\$3.96	57.2 %	56.2 %	52.8 %
6	5	SKIN CONDITIONS	4.0 %	776	\$249,184	\$5.77	86.7 %	86.0 %	4.7 %	419	\$137,397	\$5.33	85.7 %	88.0 %	8.3 %
7	7	ASTHMA	3.8 %	2,691	\$235,665	\$5.46	85.3 %	87.9 %	4.3 %	1,698	\$125,713	\$4.88	78.7 %	79.1 %	11.9 %
8	9	MULTIPLE SCLEROSIS	3.4 %	44	\$211,375	\$4.90	38.6 %	47.4 %	3.9 %	31	\$116,050	\$4.50	83.9 %	44.1 %	8.8 %
9	8	ANTICOAGULANT	3.0 %	409	\$185,053	\$4.29	18.1 %	19.4 %	3.6 %	262	\$104,894	\$4.07	17.2 %	22.1 %	5.4 %
10	10	CYSTIC FIBROSIS	2.2 %	10	\$136,998	\$3.17	0.0 %	6.9 %	NA		NA	NA	NA	7.3 %	NA
		Total Top 10		11,419	\$6,206,236	\$143.80	47.1 %	46.5 %		6,433	\$2,947,626	\$114.37	49.2 %	48.1 %	25.7 %

Top Drugs

SOUTH. NJ REGIONAL EMP.BNFT (Current Period 01/2024 - 05/2024 vs. Previous Period 01/2023 - 05/2023) Peer = Government - National Preferred Formulary

					Current Period				Previ	ous 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	12	WEGOVY	WEIGHT LOSS	N	458	134	\$559,874	\$12.97	210	72	\$250,669	\$9.73	33.4 %
2	1	OZEMPIC	DIABETES	N	514	126	\$432,142	\$10.01	227	56	\$188,413	\$7.31	37.0 %
3	17	ZEPBOUND	WEIGHT LOSS	N	409	136	\$390,622	\$9.05	NA	NA	NA	NA	NA
4	4	HUMIRA(CF) PEN	INFLAMMATORY CONDITIONS	Υ	57	12	\$373,041	\$8.64	29	5	\$171,329	\$6.65	30.0 %
5	3	MOUNJARO	DIABETES	N	346	77	\$335,100	\$7.76	93	25	\$85,956	\$3.34	132.8 %
6	6	STELARA	INFLAMMATORY CONDITIONS	Υ	25	6	\$193,867	\$4.49	8	3	\$128,244	\$4.98	-9.7 %
7	485	VITRAKVI	CANCER	Υ	6	1	\$165,437	\$3.83	6	1	\$180,071	\$6.99	-45.1 %
8	10	JARDIANCE	DIABETES	N	299	65	\$159,378	\$3.69	176	36	\$89,408	\$3.47	6.5 %
9	13	DUPIXENT PEN	SKIN CONDITIONS	Υ	56	16	\$148,546	\$3.44	22	5	\$53,496	\$2.08	65.8 %
10	69	LENA LIDOMIDE	CANCER	Υ	11	3	\$132,401	\$3.07	2	1	\$29,921	\$1.16	164.3 %
11	24	ELIQUIS	ANTICOAGULANT	N	254	65	\$132,105	\$3.06	149	34	\$71,386	\$2.77	10.5 %
12	76	SKY RIZI ON-BODY	INFLAMMATORY CONDITIONS	Υ	16	3	\$124,906	\$2.89	NA	NA	NA	NA	NA
13	19	FARXIGA	DIABETES	N	230	51	\$117,347	\$2.72	163	33	\$77,233	\$3.00	-9.3 %
14	26	ENBREL SURECLICK	INFLAMMATORY CONDITIONS	Υ	22	6	\$113,610	\$2.63	12	3	\$57,024	\$2.21	19.0 %
15	29	TALTZ AUTOINJECTOR	INFLAMMATORY CONDITIONS	Υ	21	4	\$111,960	\$2.59	15	3	\$68,258	\$2.65	-2.0 %
16	16	TRULICITY	DIABETES	N	132	36	\$111,766	\$2.59	155	37	\$122,329	\$4.75	-45.4 %
17	14	SKY RIZI PEN	INFLAMMATORY CONDITIONS	Υ	17	5	\$111,583	\$2.59	18	3	\$114,921	\$4.46	-42.0 %
18	111	LYNPARZA	CANCER	Υ	7	1	\$93,675	\$2.17	NA	NA	NA	NA	NA
19	72	SPRYCEL	CANCER	Υ	6	1	\$92,487	\$2.14	4	1	\$26,611	\$1.03	107.5 %
20	15	TREMFYA	INFLAMMATORY CONDITIONS	Υ	16	4	\$84,415	\$1.96	NA	NA	NA	NA	NA
21		TRODELVY	CANCER	Υ	4	1	\$84,324	\$1.95	NA	NA	NA	NA	NA
22	30	NURTEC ODT	MIGRAINE HEADACHES	N	56	22	\$83,251	\$1.93	13	8	\$17,000	\$0.66	192.4 %
23	36	OTEZLA	INFLAMMATORY CONDITIONS	Υ	23	6	\$77,790	\$1.80	3	1	\$9,419	\$0.37	393.2 %
24	48	JANUVIA	DIABETES	N	148	32	\$73,557	\$1.70	127	26	\$60,683	\$2.35	-27.6 %
25	271	KALYDECO	CYSTIC FIBROSIS	Υ	4	1	\$71,490	\$1.66	NA	NA	NA	NA	NA
			Tot	al Top 25	3,137		\$4,374,673	\$101.36	1,432		\$1,802,371	\$69.93	44.9 %



△ DELTA DENTAL

Claims Summary

Cost Containment

Claims	Dollars	Definition
Submitted Claims	\$3,622,075	Claims submitted by participating and non-participating dentists
(-) Savings		
(-)Network Discount	\$1,247,855	Savings from network participating dentist discounts
(-)Administrative	\$498,747	Contract limits, non-covered, non-billable services, optional services
(-)Dental Consultant	\$17,076	Clinical claim review by dental consultants
(-)Eligibility Verification	\$20,659	Claims for in-eligible members
(-)COB	\$103,133	Coordination of benefits
(-)Other	\$606,357	Deductibles, patient coinsurance
(=)Total Savings	\$2,493,826	
Delta Dental Paid	\$1,128,249	Amount paid by Delta Dental

Network Discount

- I I I I I I I I I I I I I I I I I I I				Network Discount /
Network	Submitted Claims	Paid Claims	Network Discount	Submitted Claims
Total Network Discount	\$3,473,598	\$1,091,564	\$1,247,855	35.92%
Out of Network	\$148,477	\$36,685		
Total	\$3,622,075	\$1,128,249	\$1,247,855	

APPENDIX I

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND OPEN MINUTES

JUNE 24, 2024

HADDONFIELD TOWNSHIP MUNICIPAL BUILDING

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	Absent
Edward Hill	CCBOSS	Present
Gary Passanante	Borough of Somerdale	Present
Brian Morrell	Gloucester City	Absent
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 Caitlin Perkins

Program Manager Conner Strong & Buckelew

Peter Mina

Attorney J. Kenneth Harris, Esq.

Medical TPA – AmeriHealth Kristina Strain

Medical TPA – Aetna Jason Silverstein

Express Scripts Hiteksha Patel

Treasurer Lorraine Verrill

Elizabeth Pigliacelli

Delta Dental Absent

OTHERS PRESENT:

Elizabeth Peddicord - Pennsauken Twp	Michelle Miller - Somerdale
Kim Porter - CSG	Scott Davenport - CSB
Patrick Yacovelli - CSB	Susan Panto - CSB
Sandra DePasquale - HIG	Dennis Skalkowski – Bowman
Kaleigh Sawers - Bowman	Jason DeMarco - ISI
Bonnie Taft - Oaklyn	Celerina Murray - HIG
Tom Meschel - CSB	

APPROVAL OF MINUTES: May 20, 2024 Open

MOTION TO APPROVE OPEN MINUTES OF MAY 24 2024 AS PRESENTED:

Moved: Commissioner Wolk

Second: Commissioner Cheeseman

Vote: Unanimous

CORRESPONDENCE - None

EXECUTIVE DIRECTOR'S REPORT

FAST TRACK FINANCIAL REPORT – Executive Director Lodics reviewed the financial fast track through March 31, 2024. He stated that the March shows a slight surplus increase. The new growth in January of 2024 may continue to impact claims. The Fund is seeing that the year 2024 claims are still lower than 2023. Overall, it has been a great start to the year.

AUDITOR AND ACTUARY YEAR-END REPORTS – Before Executive Director Lodics introduced The Fund Auditor from Bowman and Company, Commissioner Di Angelo congratulated everyone involved in the audit. During the audit review at the finance committee meeting, there were no hiccups whatsoever and a great job was done. Fund Auditor did a quick review of the Audit material which was distributed at the meeting. He stated there were no findings or recommendations on the 2023 audit and overall, a positive first quarter and looking very well for the year of 2024. Chair Mevoli thanked Bowman and Company and all the professionals for having everything in order for the 2023 audit to be completed.

The Affidavit of Certification and Resolution 20-24 approving the 2023 Audit was included on page 7.

MOTION TO APPROVE RESOLUTION 20-24 APPROVING THE 2023 AUDIT:

Moved: Commissioner Di Angelo Second: Commissioner Kelly

Vote: Unanimous

COOPERATIVE PRICING SYSTEM UPDATE - Executive Director Lodics confirmed the Cooperative was filed, and gave praise to the Fund Attorney. He announced that the Burlington County Insurance Commission (BCIC), an entity similar to the HIFs but strictly dedicated to Burlington County, requested to join the Cooperative. As Southern is the lead agent, we are requesting the adoption of <u>Resolution 21-24</u> to accept their membership into the cooperative.

MOTION TO APPROVE <u>RESOLUTION 21-24</u> ACCEPTING BCIC IN THE HEALTH PRICING SYSTEM COOPERATIVE:

Moved: Commissioner Cheeseman

Second: Commissioner Wolk

Vote: Unanimous

Chair Mevoli commented that this is a formality every time new member is requested to join the cooperative pricing system since they are the lead agent. Mr. Lodics mentioned that on behalf of the MRHIF, Fund Attorney will be filling the submission and BCIC is covering the expenses for Mr. Harris.

Executive Director Lodics Mr. Lodics shared the latest update on Medical TPA RFP. He stated the initial round of State Comptroller's comments has been received. The comments were nothing outlandish and Fund Attorney prepared some responses which we will add in consulting input on the responses. We are hoping this next round of review goes quicker and accept the suggestions and comments and it be released end of July.

PROGRAM MANAGERS REPORT

Mr. 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 3rd Wednesday at 10AM (except June's training will be held Tuesday June 18th). Please contact HIFtraining@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: 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 \geq 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 weigh-in 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

MOTION TO APPROVE <u>RESOLUTION 22-24</u> AUTHORITZING EXPRESS SCRIPTS TO IMPLEMENT GLP-1 ENCIRCLE PROGRAM EFFECTIVE JANUARY 1, 2024:

Moved: Commissioner Passanante Second: Commissioner Di Angelo

Vote: Unanimous

TREASURER: Fund Treasurer reviewed the bills list for June 2024 and the treasurers report.

MOTION TO APPROVE RESOLUTION 23-24 JUNE 2024 BILLS LIST:

Moved: Commissioner Passanante

Second: Commissioner Kelly

MOTION TO APPROVE THE TREASURERS REPORT:

Moved: Commissioner Wolk

Second: Commissioner Cheeseman

Vote: All in favor

FUND ATTORNEY: Fund Attorney Harris explained the final step is to file a document confirming the Fund's acceptance of BCIC into the Cooperative Pricing System. He noted the comments from the Office of the Comptroller are more stylistic than substantive, which should lead to a quicker review. This is a positive development, as the previous reviewed focused on the eligibility to issue another RFP.

Additionally, Fund Attorney discussed the natural disaster compliance assistance toolkit released by Department of Labor. This toolkit is designed for entities with first responders dealing with natural distracters, providing a format for tracking overtime hours and various working conditions. He mentioned that it is available on the Department of Labor website should we ever need it. Chair Mevoli added that this toolkit is related to FEMA and reimbursements, ensuring all resources and overtime used are properly documented.

AETNA: Mr. Silverstein reviewed the claims for the month of April 2024. He stated there were one high-cost claimants over the threshold of \$100,000. He stated the dashboard metrics continue to perform well.

AMERIHEALTH: Ms. Strain reviewed the paid claims and enrollment report through May 2024. She stated there were two high-cost claimants for the month of May.

EXPRESS SCRIPTS: Ms. Patel reviewed the report included in the agenda for the month of April. She highlighted the weight loss and migraine drugs are among the 10 top medications for year-to-date. She

explained that a new class of migraine prescription drugs is contributing to the increased usage of the migraine medications. She stated that specifically, the number of members using migraine medications has risen from 5 in the previous period to 21 in the current period.

DENTAL ADMINISTRATOR: None

OLD BUSINESS: None

NEW BUSINESS: Commissioner Passanante brought up a question from the financial committee meeting regarding the addition of new members to the Fund. He asked whether there is a maximum limit of adding new groups and if this needs to be monitored. Executive Director Lodics confirmed the Fund nearly doubled in size this year. Commissioner Passanante noted how the current vetting process has positively impacted the numbers so far but emphasized the importance of not growing too quickly to avoid potential harm to the Fund. Chair Mevoli responded that when this Fund was created, the question was if it would ever include 1,500 lives and how this question has not been raised before and agreed it should be discussed. He provided some insight on the history of the Southern New Jersey Fund, mentioning how it was the largest Fund at one point in the country until a Texas BOE took over approximately ten years ago.

Fund Attorney provided comment that it is more of an underwriting issue. Executive Director Lodics agreed that the challenge is how to be all inclusive, especially with the State benefits cash position, while also protecting the current surplus and membership. He suggested asking the actuary, John Vataha, for more information and advice on best practices moving forward. He stated he will provide this information at the next meeting. Executive Director Lodics also explained how from a policy standpoint, the School Health Insurance Fund (SHIF) is the only Fund with a threshold. This policy is written in the SHIF Risk Management Plan and is based on growth percentage based on lives.

Commissioner Di Angelo note that more towns are likely to want to join the Fund due to the State issues, and so far, we have been restrictive based on the actuary's guidance. He emphasized the importance of continuing in a positive direction and requested clarify, if a limit is created, so potential prospects can be informed. Executive Director Lodics suggested that if a policy is created, the language could be crafted to allow for expectations in accepting a new group if it exceeds the threshold.

Commissioner Passanante suggested that a hard cap may not be optimal, but suggested increasing the required qualifications if growth becomes problematic. Executive Director Lodics emphasized the importance of maintaining a conservative approach while ensuring that new groups are a good fit. He also suggested transparency by presenting numbers as growth occurs. Commissioner Kelly agreed this approach would be beneficial. Executive Director Lodics commented with the State expecting double rate increases, we will probably see an increase of applications including resurface of previous applications, and we have been seeing larger groups wanting to join.

Chair Mevoli mentioned that previously, towns had to be asked to leave, so it's a mutual responsibility. He expressed satisfaction with the current process because groups are being denied based on current underwriting criteria. Since it is a group Fund, collective cooperation is crucial to avoid situations where towns need to be asked to leave again, as stipulated in their contract. Chair Mevoli agreed that the application qualifications could be tightened, but emphasized the need for fairness to foster growth,

especially after a decade of stagnation. He emphasized that applying past learning mechanisms to support future growth.

Commissioner Di Angelo raised concerns about the experience rating designations and whether limits should be set or left to the actuary's discretion. Executive Director Lodics responded that in a competitive market, we are seeing a lot of groups with a 5% savings. He also highlighted the evaluation of Per Employee Per Month (PEPM) costs relative to the Fund. He summarized the approach as twofold: comparing prospective groups to their current arrangements and where they are compared to the entire Fund. He pointed out the best practice moving forward is to improve transparency where we are in comparison, percent wise, to the Fund so we can help guide decisions on adjusting growth rates or increasing underwriting qualifications. Commissioner Kelly expressed support for this idea.

PUBLIC COMMENT: None.

MOTION TO ADJOURN:

Moved: Commissioner Wolk Second: Commissioner Hill

Vote: All In Favor

MEETING ADJOURNED: 5:03 pm

NEXT MEETING: July 22, 2024 4:15PM

MUNICIPAL HALL

Caitlin Perkins , Assisting Secretary

JOSEPH WOLK, SECRETARY