

Southern Jersey ^{FUND}



SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

AGENDA & REPORTS
297 HICPS MEETING AS LEAD AGENT
JULY 1, 2025
CONFERENCE CALL
3:00 PM

Zoom Meeting

<https://permainc.zoom.us/j/92313009495>

Meeting ID: 923 1300 9495

One tap mobile

+13126266799,,92313009495# US (Chicago)

+16469313860,,92313009495# US

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
297 HICPS MEETING AS LEAD AGENT
AGENDA
MEETING: JULY 1, 2025
3:00 PM**

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

FLAG SALUTE - MOMENT OF SILENCE

ROLL CALL OF 2025 EXECUTIVE COMMITTEE

Michael Mevoli, Chairman

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

Elizabeth Peddicord, Executive Committee Alternate

REPORTS:

ATTORNEY - (J. Kenneth Harris)

Prequalification Regulations 2025-01 (Aetna)Page 1

Prequalification Regulations 2025-02 (AmeriHealth)Page 12

Resolution 27-25Page 23

OLD BUSINESS

NEW BUSINESS

PUBLIC COMMENT

MEETING ADJOURNED

Prequalification Regulations
for Third Party Administrators for Self-Insured Health Plans
297 HICPS (Health Insurance Cooperative Pricing System)

(Prequal. Reg. 2025-01)
July 1, 2025

SERVICE PROVIDER FACT SHEET

Complete Name of Project: Third Party Claims Administration Services for the Southern New Jersey Regional Employee Benefits Fund ("SNJ Fund") as the Lead Agency for the Health Insurance Cooperative Pricing System identified as 297HICPS, consisting of Bergen Municipal Employee Benefits Fund, Central Jersey Health Insurance Fund, Metropolitan Health Insurance Fund, North Jersey Regional Employee Benefits Fund, Schools Health Insurance Fund, Southern Coastal Regional Employee Benefits Fund and the SNJ Fund.

Contact Information: PERMA Risk Management Services 2 Cooper Street Camden, NJ 08102 Attn: Brandon Lodics

Phone: 856-552-4628

Email Address: blodics@permainc.com

Qualified Purchasing Agent: The Canning Group, LLC, 45 S. Park Place 183, Morristown, NJ 07960 Attn: Sean P. Canning

Phone: 862-228-3563

Email Address: scanning@thecanninggroup.org

Project Funding: Monthly assessments from the local units of the Lead Agency and Registered Members of the 297HICPS for health benefits coverage for their enrolled employees and their dependents.

Background Information: The Lead Agency, on behalf of itself and the Registered Members of the 297HICPS, is seeking third party claim administration services for the self-insured health benefit plans sponsored by the member local units and school boards throughout the State of New Jersey that are members of the 297HICPS. Current health plan designs include traditional/indemnity, EPOs, HDHPs, HMOs, POS, PPOs, Tiered Networks, Medicare Supplemental HMO and PPO Plans, using Aetna's provider network.

Scope of Work: The selected provider will be expected to provide third party claim administration services throughout the State of New Jersey to the local units, municipalities and school boards that are participants in the self-insured health benefit plans offered by the member entities of the 297HICPS. There will be a single contract between the Lead Agency and the successful bidder for the provision of the third party claim administration services and the Registered Members will also enter into direct contracts with the successful bidder for the provision of third party claim administration services under the same pricing, terms and conditions as the contract with the Lead Agency.

**PREQUALIFICATION REGULATIONS FOR
THIRD PARTY CLAIM ADMINISTRATION SERVICES**

**Southern New Jersey Regional Employee Benefits Fund ("SNJ Fund") as the Lead Agency for
297HICPS (Health Insurance Cooperative Pricing System)**

STATEMENT OF GENERAL NOTICE

The SNJ Fund as the Lead Agency for 297HICPS, consisting of the following joint self-insured health plans: Bergen Municipal Employee Benefits Fund, Central Jersey Health Insurance Fund, Metropolitan Health Insurance Fund, North Jersey Regional Employee Benefits Fund, Schools Health Insurance Fund, Southern Coastal Regional Employee Benefits Fund, Southern New Jersey Regional Employee Benefits Fund (collectively the Registered Members" and individually, "Registered Member") is seeking bids for the provision of third party claim administration services for all of the Registered Members of the 297HICPS. The successful bidder must be able to provide access to a network of healthcare providers serving the 21 counties in New Jersey as well as nationally to accommodate active members in New Jersey and retired participants that may reside outside of New Jersey or active members who may need to access care outside of New Jersey. The current network provider is Aetna.

The scope of work consists of a single contract for: Third party claim administration services inclusive of the provision of a comprehensive national provider network; provide a robust plan design selection that will match existing benefit designs so that they are "equal to or better than" current designs; strong claim administration processes inclusive of claims adjudication, medical care management and medical policy administration; accept electronic enrollment and eligibility in pre-formatted structure to allow individual entities to be separately tracked with individualized reporting; provide detailed monthly reporting of paid claims and other reports to measure performance and claim management effectiveness; accept electronic claim payments on a weekly basis and provide claims and data reports on an individual basis.

The owner's project contact is Brandon Lodics, Executive Director, 2 Cooper Street Camden, NJ 08102.

Phone: 856-552-4628

Email Address: blodics@permainc.com.

The Qualified Purchasing Agent for this contract is: The Canning Group, LLC, 45 S. Park Place 183, Morristown, NJ 07960 Attn: Sean P. Canning

Phone: 862-228-3563

Email Address: scanning@thecanninggroup.org

Fact Sheets providing plan design information, census data, reporting and data collection requirements and related administrative services information are attached.

Procurement regulations require that prospective bidders must submit a completed Qualifications Statement as set forth herein. A completed Bidder's Qualifications Statement must be submitted in four (4) hard copies and one (1) electronic copy to **PERMA Risk Management Services 2 Cooper Street Camden, NJ 08102 Attn: Brandon Lodics** by 3:00 P.M. prevailing time on July 29, 2025.

Failure to complete the Bidder's Qualifications Statement could result in disqualification of the prospective bidder.

The qualifications of prospective bidders will be evaluated by representatives of the SNJ Fund and the QPA in accordance with the Evaluation Criteria set forth herein. Prospective bidders whose Bidder's Qualifications Statements are determined to be acceptable will be identified as Qualified Bidders. Prospective bidders who are not identified as Qualified Bidders will be notified.

The SNJ Fund will notify in writing the Prospective Bidders who have been determined to be Qualified Bidders. The SNJ Fund's governing body will issue bid proposal forms and specifications only to Qualified Bidders. Only bids received from Qualified Bidders will be opened.

STATEMENT OF BIDDER'S QUALIFICATIONS/CRITERIA FOR EVALUATING PROSPECTIVE BIDDERS

The following six (6) criteria will be used for evaluating the qualifications of prospective bidders. The evaluation will be based on information in the Statement of Qualifications provided by prospective bidders as well as information supplied by the bidders' references.

- ***Comprehensive National Prover Network*** – Provide a network of contracted providers that meets reasonable access and disruption standards over the 21 counties in New Jersey and nationally to accommodate active members in New Jersey, retired participants that may reside outside of New Jersey or active members who may need to access care outside of New Jersey. A comprehensive network will be able to provide reasonable access to a broad range of network providers and offer a network that has limited disruption when compared to the current network of providers used by the Registered Members. For New Jersey, acceptable access (distance) and disruption (match) results need to minimally be 90% or more. See the attached Exhibit "A" which contains census data for the Lead Agency and Registered Members of the 297HICPS. Prospective bidders must be able to serve this population.
- ***Structural Plan Design*** – Be able to duplicate the plan of benefits for the local units of the Lead Agency and Registered Members so that the benefit designs are "equal to or better than" current plan designs. This includes and is not limited to matching structural items like copayments, coinsurance, deductibles, visit limits or maximums and out of network fee schedules. To satisfy this requirement, bidders must submit a letter of attestation that they shall comply with this criteria. See the attached Exhibit "B" which contains a listing of all of the plan designs currently in place for the Lead Agency and the Registered Members of the 297HICPS.
- ***Administrative Design and Management*** – Be able to administer the plan design as it related to claims administration and medical management in a way that largely replicates the current administration as outlined in the attached Exhibit "C" which contains a detailed listing of the services to be provided. This includes administration around claims adjudication (i.e., coordination of benefits handling, subrogation, etc.), medical care management and medical policy administration. This also includes a willingness and capacity to collaborate around the reasonable administration of policies that may be requested. To satisfy this requirement, bidders must submit a letter of attestation that they shall comply with this criteria. See the attached Exhibit "C" which outlines the administrative and reporting requirements that a prospective bidder must be able to provide to the Lead Agency and the Registered Members of the 297HICPS as well as performance criteria and network discounts .
- ***Eligibility*** – Be able to accept electronic enrollment and eligibility in a pre-formatted structure that allows for each entity to be separated for tracking and reporting purposes. This includes accepting weekly electronic eligibility files, process eligibility updates, issue discrepancy reporting and issue timely ID cards and enrollment data from said files. To satisfy this requirement, bidders must submit a letter of attestation that they shall comply with this criteria.
- ***Reporting*** – Be able to issue a monthly complete, detailed paid claims report in the specified record layout to the claims data warehouse used. Further, issue other performance and claims management reporting applicable to allow for performance management and oversight. To

satisfy this requirement, bidders must submit a letter of attestation that they shall comply with this criteria.

- *Banking and Treasury* – Be able to accept claim payments electronically, on a weekly basis, for the SNJ Fund and the Registered Members as whole and structurally, be able to properly allocate claims and data reports as such on a group by group basis. To satisfy this requirement, bidders must submit a letter of attestation that they shall comply with this criteria.

Bidder's Questionnaire

This form must be completed and submitted by prospective bidders who wish to be considered for the project. Failure to complete the Bidder's Questionnaire could result in disqualification of the prospected bidder. Attachments to this sheet are acceptable (please label properly).

1. Name and Address of Firm: _____

2. Under what other name(s) has your business operated? _____

3. Business form (corporation, partnership, LLC, etc.) _____
Date of formation: _____
Principal location: _____
Names and Titles of corporate officers, LLC members, or partners and their number of years with the business: _____

4. Has your firm or any predecessor firm defaulted on a contract or had work terminated for non-performance within the last five (5) years? If so, on a separate sheet describe the project, owner, date, and circumstances/reasons.
5. Has your firm or any predecessor firm been denied a consent of surety, a bid bond, or a performance bond within the past twelve (12) months? If so, on a separate sheet describe the circumstances/reasons.
6. Provide evidence of successful experience on at least two (2) projects involving similar activities and scope of work as the subject project.
7. Provide a list of the names, titles, and years of experience of all principal members of the prospective bidder's staff who will be available and assigned to this particular project.

CERTIFICATION

I (We) the undersigned certify the truth and correctness of all statements and answers contained herein.

DATE: _____

NAME OF POTENTIAL BIDDER: _____

ADDRESS OF BIDDER: _____

TELEPHONE AND FAX: _____

EMAIL ADDRESS: _____

BY (sign name and title): _____

(Print/type name and title): _____

WITNESSED: (If a Corporation, by the secretary of the corporation)

BY (sign name, no stamps): _____

(Print/type name and title): _____

Subscribed and sworn to before me this _____ day of _____, 20____

Notary Public of the State of _____ My commission expires

(Seal)

EXHIBIT "A"
Census Data for the Lead Agency and Registered Members

Central Jersey Health Insurance Fund

Schools Health Insurance Fund

Southern Coastal Regional Employee Benefits Fund

Southern New Jersey Regional Employee Benefits

EXHIBIT "B"
Plan Designs for the Lead Agency and Registered Members

Central Jersey Health Insurance Fund

Schools Health Insurance Fund

Southern Coastal Regional Employee Benefits Fund

Southern New Jersey Regional Employee Benefits Fund

EXHIBIT "C"

HIF Pricing Cooperative General Administrative Requirements, Services, Fees, Performance Guarantees
& Reporting Requirements

Chart for Self-Reporting Network Discounts

Prequalification Regulations
for Third Party Administrators for Self-Insured Health Plans
297 HICPS (Health Insurance Cooperative Pricing System)

(Prequal. Reg. 2025-02)
July 1, 2025

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Scope of Work: The selected provider will be expected to provide third party claim administration services throughout the State of New Jersey to the local units, municipalities and school boards that are participants in the self-insured health benefit plans offered by the member entities of the 297HICPS. There will be a single contract between the Lead Agency and the successful bidder for the provision of the third party claim administration services and the Registered Members will also enter into direct contracts with the successful bidder for the provision of third party claim administration services under the same pricing, terms and conditions as the contract with the Lead Agency.

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The scope of work consists of a single contract for: Third party claim administration services inclusive of the provision of a comprehensive national provider network; provide a robust plan design selection that will match existing benefit designs so that they are "equal to or better than" current designs; strong claim administration processes inclusive of claims adjudication, medical care management and medical policy administration; accept electronic enrollment and eligibility in pre-formatted structure to allow individual entities to be separately tracked with individualized reporting; provide detailed monthly reporting of paid claims and other reports to measure performance and claim management effectiveness; accept electronic claim payments on a weekly basis and provide claims and data reports on an individual basis.

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- ***Structural Plan Design*** – Be able to duplicate the plan of benefits for the local units of the Lead Agency and Registered Members so that the benefit designs are "equal to or better than" current plan designs. This includes and is not limited to matching structural items like copayments, coinsurance, deductibles, visit limits or maximums and out of network fee schedules. To satisfy this requirement, bidders must submit a letter of attestation that they shall comply with this criteria. See the attached Exhibit "B" which contains a listing of all of the plan designs currently in place for the Lead Agency and the Registered Members of the 297HICPS.
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1. Name and Address of Firm: _____

2. Under what other name(s) has your business operated? _____

3. Business form (corporation, partnership, LLC, etc.) _____
Date of formation: _____
Principal location: _____
Names and Titles of corporate officers, LLC members, or partners and their number of years with the business: _____

4. Has your firm or any predecessor firm defaulted on a contract or had work terminated for non-performance within the last five (5) years? If so, on a separate sheet describe the project, owner, date, and circumstances/reasons.
5. Has your firm or any predecessor firm been denied a consent of surety, a bid bond, or a performance bond within the past twelve (12) months? If so, on a separate sheet describe the circumstances/reasons.
6. Provide evidence of successful experience on at least two (2) projects involving similar activities and scope of work as the subject project.
7. Provide a list of the names, titles, and years of experience of all principal members of the prospective bidder's staff who will be available and assigned to this particular project.

CERTIFICATION

I (We) the undersigned certify the truth and correctness of all statements and answers contained herein.

DATE: _____

NAME OF POTENTIAL BIDDER: _____

ADDRESS OF BIDDER: _____

TELEPHONE AND FAX: _____

EMAIL ADDRESS: _____

BY (sign name and title): _____

(Print/type name and title): _____

WITNESSED: (If a Corporation, by the secretary of the corporation)

BY (sign name, no stamps): _____

(Print/type name and title):_____

Subscribed and sworn to before me
this _____day of _____, 20____

Notary Public of the State
of_____

My commission expires

(Seal)

EXHIBIT "A"
Census Data for the Lead Agency and Registered Members

Central Jersey Health Insurance Fund

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EXHIBIT "B"
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EXHIBIT "C"

HIF Pricing Cooperative General Administrative Requirements, Services, Fees, Performance Guarantees
& Reporting Requirements

Chart for Self-Reporting Network Discounts

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND
RESOLUTION ADOPTING PRE-QUALIFICATION REGULATIONS FOR PROCUREMENT OF
THIRD-PARTY CLAIM ADMINISTRATION SERVICES FOR THE SELF-INSURED BENEFIT
PLANS SPONSORED BY THE MEMBER LOCAL UNITS AND SCHOOL BOARDS THAT ARE
MEMBERS OF THE 297HICPS**

WHEREAS, The Southern New Jersey Regional Employee Benefits Fund ("SNJ Fund"), as the Lead Agency for the 297HICPS, is intending a procurement of third-party claim administration services for the self-insured health benefit plans sponsored by the member local units and school boards that are members of the 297HICPS.

WHEREAS, Current health plan designs include traditional/indemnity, EPOs, HDHPs, HMOs, POS, PPOs, Tiered Networks, Medicare Supplemental HMO and PPO Plans, using networks from Aetna and AmeriHealth Administrators.

WHEREAS, The Prequalification Regulations will establish the criteria for evaluating bids submitted by those service providers who seek to provide the third party claim administrative services and acceptable access (distance) and disruption (match) to the current provider networks.

WHEREAS, As part of the pre-qualification process the Southern New Jersey Regional Employee Benefits Fund ("SNJ Fund"), is the Lead Agency for the 297HICPS will adhere to the standards as set forth for pre-qualification found within the New Jersey Local Public Contracts Law N.J.S.A 40A:11-1 et seq., and N.J.S.A 40A:11-25

WHEREAS, Pre-qualification of contractors will ensure that the lowest responsible bidder has the requisite experience and capabilities to successfully complete the project according to specifications. Statutory requirements hold that a local unit desiring to pre-qualify prospective bidders must adopt Pre-Qualification Regulations, after first conducting a public hearing pertaining to the decision to pre-qualify prospective bidders

WHEREAS, as per statute the process will be administered by the Qualified Purchasing Agent (N.J.S.A. 40A:11-9 et. Seq.),

NOW, THEREFORE, BE IT RESOLVED In accordance with procedures set forth in N.J.S.A 40A:11-1 et seq., and N.J.S.A 40A:11-25, the Southern New Jersey Regional Employee Benefits Fund ("SNJ Fund"), as the Lead Agency for the 297HICPS, a cooperative pricing system whose members, in addition to the SNJ Fund, are Bergen Municipal Employee Benefits Fund, Central Jersey Health Insurance Fund, Metropolitan Health Insurance Fund, North Jersey Regional Employee Benefits Fund, Schools Health Insurance Fund, and Southern Coastal Regional Employee Benefits Fund hereby adopt the pre qualification regulations as submitted;

NOW, THEREFORE, BE IT FURTHER RESOLVED that the Executive Committee of the Southern New Jersey Regional Employee Benefits Fund adopts the Pre-Qualification Regulations for 2025-01 and 2025-02 and shall be submitted to the Department of Local Government Services for approval;

SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND

ADOPTED: July 1, 2025

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

